After the last section, add the following and renumber sections and internal references accordingly:

"Sec. 501. Section 17b-343 of the general statutes is repealed and the following is substituted in lieu thereof (Effective July 1, 2019):

The Commissioner of Social Services shall establish annually the maximum allowable rate to be paid by agencies for homemaker services, chore person services, companion services, respite care, meals on wheels, adult day care services, case management and assessment services, transportation, mental health counseling and elderly foster care, [except that the maximum allowable rates in effect July 1, 1990, shall remain in effect during the fiscal years ending June 30, 1992, and June 30, 1993.] The Commissioner of Social Services shall prescribe uniform forms on which agencies providing such services shall report their costs for such services. Such rates shall be determined on the
basis of a reasonable payment for necessary services rendered. The maximum allowable rates established by the Commissioner of Social Services for the Connecticut home-care program for the elderly established under section 17b-342 shall constitute the rates required under this section until revised in accordance with this section. The Commissioner of Social Services shall establish a fee schedule, to be effective on and after July 1, 1994, for homemaker services, chore person services, companion services, respite care, meals on wheels, adult day care services, case management and assessment services, transportation, mental health counseling and elderly foster care. The commissioner may annually increase [any fee in] the fee schedule based on an increase in the cost of services. The commissioner shall increase the fee schedule effective July 1, 2000, by not less than five percent, for adult day care services. The commissioner shall increase the fee schedule effective July 1, 2011, by four dollars per person, per day for adult day care services. Effective July 1, 2019, and annually thereafter, the commissioner may increase the fee schedule for meals on wheels providers serving participants in the Connecticut home-care program for the elderly by, at a minimum, the cost-of-living adjustment as measured by the consumer price index. The commissioner may increase any fee payable to a meals on wheels provider upon the application of such provider evidencing extraordinary costs related to delivery of meals on wheels in sparsely populated rural regions of the state. Nothing contained in this section shall authorize a payment by the state to any agency for such services in excess of the amount charged by such agency for such services to the general public.

Sec. 502. Subsection (c) of section 17a-305 of the general statutes is repealed and the following is substituted in lieu thereof (Effective July 1, 2019):

(c) The Department of Rehabilitation Services, in consultation with the five area agencies on aging, shall review the method of allocation set forth in subsection (a) of this section and shall report any findings or recommendations, as well as data on service levels and costs, to the
joint standing committees of the General Assembly having cognizance of matters relating to appropriations and the budgets of state agencies and human services. Providers of meals under the department's elderly nutrition program shall annually provide the department with data on service levels and costs.

Sec. 503. Subsection (b) of section 19a-127l of the general statutes is repealed and the following is substituted in lieu thereof (Effective July 1, 2019):

(b) In carrying out its responsibilities under subsection (a) of this section, the department shall develop the following for the quality of care program:

(1) Comparable performance measures to be reported;

(2) Selection of patient satisfaction survey measures and instruments;

(3) Methods and format of standardized data collection;

(4) Format for a public quality performance measurement report;

(5) Human resources and quality measurements;

(6) Medical error reduction methods;

(7) Systems for sharing and implementing universally accepted best practices;

(8) Systems for reporting outcome data;

(9) Systems for continuum of care;

(10) Recommendations concerning the use of an ISO 9000 quality auditing program;

(11) Recommendations concerning the types of statutory protection needed prior to collecting any data or information under this section.
and sections 19a-127m and 19a-127n; [and]

(12) Recommendations concerning the collection and analysis of data on patient malnutrition for the purposes of improving quality of care; and

[(12)] (13) Any other issues that the department deems appropriate."

This act shall take effect as follows and shall amend the following sections:

<table>
<thead>
<tr>
<th>Section</th>
<th>Date</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sec. 501</td>
<td>July 1, 2019</td>
<td>17b-343</td>
</tr>
<tr>
<td>Sec. 502</td>
<td>July 1, 2019</td>
<td>17a-305(c)</td>
</tr>
<tr>
<td>Sec. 503</td>
<td>July 1, 2019</td>
<td>19a-127l(b)</td>
</tr>
</tbody>
</table>