Good morning, Representative Serra and the rest of the members of the Aging Committee. My name is Pat Lang. I'm a volunteer with AARP Connecticut. AARP has submitted written testimony in support of many of the bills on your agenda today. But, I want to use my time before you to share our support for H.B. 5208, AN ACT DETERRING ABUSE IN NURSING HOMES.

In Connecticut abuse, exploitation, or neglect account for five percent of complaints made to ombudsmen at long-term care facilities. And, research shows that this abuse is significantly under reported. While some of this abuse happens at the hands of nursing home staff, studies have found
that 20 percent of nursing home residents are abused by other residents. Everyone deserves to feel safe in their home, and allowing cameras in nursing homes acts as both a deterrent and a way for residents to substantiate abuse when it occurs.

In addition to improving nursing home safety, H.B. 5208 will provide more opportunities for virtual visitation and allow family members to stay connected to their loved ones through video technology. More than 22,000 Connecticut residents currently receive care in a nursing facility and they have friends and families who love them and want to stay in touch. These relationships are important.

The most recent national poll on healthy aging found that more a third of respondents, aged 50 to 80, reported feeling a lack of companionship, and 27 percent reported feeling isolated from others during the past year. An increasing body of research shows that social isolation and loneliness are linked to negative physical and mental health outcomes including increased risk of depression, Alzheimer's disease and other dementias, heart disease, and high blood pressure.

Giving nursing home residents access to technology, doesn't just help them, it helps their friends and families in the community who may be experiencing loneliness and isolation.

Video technology also makes it easier for remote caregivers to remain involved in their loved one's care. There are nearly 460,000 family caregivers in Connecticut, and according to a recent AARP survey, 15 percent of caregivers live more than an hour from their loved one. These caregivers may not be able
to visit their loved ones on a regular basis, but they are still concerned about their wellbeing and the quality of their care, and they want to stay in regular contact.

At this time of year, there's also a concern about nursing homes being quarantined, another reason to have a camera, so that their loved ones can keep in touch with them.

Connecticut would not be the first state to allow cameras in nursing home rooms. The earliest of such laws was passed in 2001 in Texas, and as of 2019, at least 13 states permit recording devices in nursing home rooms. Additional states are considering the issue in 2020.

While we support H.B. 5208 as drafted, our written testimony includes a few recommendations that we think would further strengthen the bill. I have one more sentence, can I finish it? [laughter]

Millions of Americans have cameras in their homes to provide a sense of safety and to help them stay connect to their loved ones. H.B. 5208 would give nursing home residents the ability to use the same technology in the place that they call home. AARP Connecticut supports this bill and asks for your support. Thank you for the opportunity to speak today.

REP. SERRA (33RD): Thank you. Are there questions from the committee? Senator.

SENATOR DAUGHTERTY ABRAMS (13TH): Thank you for testimony. I've heard similar ideas in other committees. And, one of the things that always comes up is the notion of privacy and invading
someone's privacy. So, I just wondered if you had any comments about that?

PAT LANG: Yes. One of the -- one of the suggestions that we've asked for, does -- does provide for a -- a third-party consent and -- and other information. I -- I don't know what -- if you'd like I can read you the whole thing, but I don't think you want to hear it. But, that was one of the recommendations that we added to, you know, to the -- that consent. And, also, I mean if you've ever been to a nursing home and had a roommate, you know how much privacy there actually is. So -- [laughter]

SENATOR DAUGHTERTY ABRAMS (13TH): Thank you, Mr. Chairman.

REP. SERRA (33RD): Any other questions, Committee? Representative.

REP. HAMPTON (16TH): Thank you, Mr. Chairman. Not a question, but a -- a comment. Thank you for articulating. As AARP volunteers do so well, your advocacy is -- is appreciated beyond words. And -- and I'm with you on this bill, so.

PAT LANG: Thank you very much, Representative.

REP. HAMPTON (16TH): Thank you. Thank you, Mr. Chair.

REP. SERRA (33RD): Any other questions? Thank you.

PAT LANG: Thank you, Representative Serra.

REP. SERRA (33RD): Next up is Judge Beverly and I can't read the last name, but if she's here.

BEVERLY STREIT-KEFALAS: Good morning. I'm Judge Beverly Streit-Kefalas. I am the Probate Court
Administrator. Representative Serra, members of the Aging Committee, thank you for the opportunity to appear before you today so that I may express the Office of the Probate Court Administrator's opposition to H.B. 5209, AN ACT CONCERNING THE ADOPTION OF THE UNIFORM REAL PROPERTY ON TRANSFER OF DEATH ACT.

I have submitted written testimony, and for the benefit of this Committee and the time today, I will just highlight some key concerns with this proposed legislation. It has been presented and raised in past years through the Judiciary Committee. There is significant historic testimony on the concerns with this bill, and even with the modifications that have arisen over the years, the bill is still concerning.

In essence it is inconsistent with key principles of Connecticut probate law. It may cause disruption to estate plans as well as confusion about title to real property. And, there are serious concerns for the risk of financial exploitation.

The bill would permit the owner of a real estate -- of real estate in Connecticut to execute what is called a TOD, Transfer on Death Deed, in which they would name a -- a beneficiary and a contingent beneficiary. The Deed is recorded on the land records. And, then, the transfer would be effectuated at the death of that property owner.

We understand and we recognize the desire of many individuals to avoid probate. But, Connecticut law already presents sound and tested legal vehicles to do just that, such as through inter vivos trusts, jointly owned real estate with rights of survivorship, and other vehicles. We don't object
to those legal structures or legal structure to avoid probate, but what we would ask, is that the Committee consider that the method of this proposed transfer at least adhere to the legal standards and protections that are already in place with respect to those kinds of transfers.

Specifically, the bill proposes that it would be executed without witnesses, taken only with an acknowledgement, and there would be the capacity of the transfer or to be the same as executing a will, but without all of the Connecticut formalities required now to execute a will.

There are also a number of concerns that an individual trying to transfer to a named beneficiary would then have an inconsistent result with their estate planning documents designating beneficiaries through a will, and the revocation would also have to be recorded on the land records. It's a potential for great confusion for individuals in their estate planning tools as well as evidence on the land records as to who the owners of the property would be.

And, significantly, and I -- I thank this Committee, especially, for the work you do to protect all of us as we age. There is, as you may very well know, a rise in elder financial exploitation. And, this bill, as drafted, gives an elevated risk of such exploitation given the lower legal standards by which these documents might be pressured on some individuals to sign without witnesses, without knowledge of beneficiaries and other owners of the property. And, I would urge you to recommend again adoption of H.B. 5209. Thank you.
REP. SERRA (33RD): Thank you. Questions from the Committee? Representative Bolinsky.

REP. BOLINSKY (106TH): Thank you for your testimony. It's my bill, actually, and it's -- it comes from constituents. And, you know, there's a feeling that a -- that -- that exists out there in some ways that -- that the probate court system, you know, can purpulate financial abuse as well. So, what I'd like to do is thank you for -- for being here.

And -- and I'd like to listen to all of your concerns. And, I think that we, as a Committee, should, because it's what we do, determine whether or not there are elements of this bill, in addition to current policy, that would accomplish protections which is, you know, what we're after all the time, anyway.

So, you articulated a lot of concerns. So, I'm going to review your testimony. I want to talk with my Committee and colleagues, and also with my constituents that -- that asked me to -- to forward this. But, I would welcome the opportunity to work closely with you to find whether it needs a compromise or if it's totally unnecessary. So, I'm --

BEVERLY STREIT-KEFALAS: Thank you for --

REP. BOLINSKY (106TH): -- perfectly willing to --

BEVERLY STREIT-KEFALAS: -- that opportunity.

REP. BOLINSKY (106TH): -- walk away from it if you can demonstrate that what's looking to be accomplished, can be accomplished.
BEVERLY STREIT-KEFALAS: Thank you, Representative Bolinsky. I would note that, even if this bill were to pass in transfer on death deeds were a vehicle, that it would not avoid probate. I think that's a misleading aspect of what's being presented and in the notice that's proposed. All assets owned by a decedent or interest that they have in property are reportable right now in a Connecticut state tax return. And, they would still be subject to a probate fee. So, as a probate avoidance tool, it serves it in one respect in that the individual does not necessarily have the estate go through the entire probate process, but there would still be a probate fee assessed against the value of those assets. And, given that there aren't protections as, I indicated earlier, even as to how the formality of a will is executed, those raise very serious concerns. So, thank you for the opportunity to speak --

REP. BOLINSKY (106TH): Thank you --

BEVERLY STREIT-KEFALAS: -- further with you.

REP. BOLINSKY (106TH): -- and -- and you know, with -- with the permission of my Chairman, I -- you know, I'd like us to, you know, continue the conversation and decide what's next with this because I -- it's -- it's -- it's been raised, this is probably the third or fourth year. And, if it's not necessary, then we should stop spending item on it as well. So, totally open mind and I really appreciate you educating us.

BEVERLY STREIT-KEFALAS: Thank you for the opportunity.
REP. SERRA (33RD): Representative Wilson --

REP. BOLinsky (106TH): Thank you, Mr. Chair.

REP. SERRA (33RD): -- you have the floor.

REP. WILSON (66TH): Thank you, Mr. Chair. And, thank you, Your Honor, for coming here today and sharing your expertise. It was especially helpful for me. I just wanted to clarify in my own mind that this, in fact, would not preclude or avoid the reporting of the asset in the CT 706NT or the CT706 so still would be subject to the probate fee.

The big pushback, of course, that we get from our constituency is those fees to do the filing and reporting. And, that's the big pushback. I'm not sure that it's necessarily the transfer of the asset or how fast that asset can transfer, but it's really the pushback on -- on the expenses. I know I was at a recent coffee hour in my District, and I had a young couple there who wanted to take my head off over this particular subject.

So, it is a hot subject. I think there is a lot of misunderstanding. But, in fact, there are very few ways, shy of an irrevocable trust created within a certain period of time prior to death and so forth if I -- if I'm speaking correctly.

BEVERLY STREIT-KEFALAS: That is correct. Thank you, Representative Wilson. It would still be reportable in the Connecticut estate tax return and be subject to that fee, as I indicated. And, there are other methods under Connecticut law that, if the concern is an expedited process, to transfer death through jointly held assets with rights of survivorship, inter vivos trust, many of you may be aware that last year the General Assembly did pass a
unified -- the Uniform Connecticut Trust Code and that also expands protections in vehicles for avoiding probate, which, in my view, I -- we are always endeavor to make that process as efficient and effective, and frankly, as compassionate as possible. But, I certainly appreciate that individuals would prefer not to go through it. Thank you.

REP. WILSON (66TH): Thank you very much for your testimony. Thank you, Mr. Chair.

REP. SERRA (33RD): Thank you. Any other questions from any other member? Thank you.

BEVERLY STREIT-KEFALAS: Thank you for the opportunity to be here.

REP. SERRA (33RD): Next up is Representative Kathleen McCarty followed by Senator Cathy Osten.

REP. MCCARTY (38TH): Chairman Serra and Ranking Member Wilson, and distinguished members of the Aging Committee, my name is Kathleen McCarty. I'm the State Rep from Waterford and a portion of Montville. And, it's always a pleasure to be here in front [laughter] of the Aging Committee.

So, today I am here to give testimony on two bills on your agenda. Bill Number 5204, AN ACT CONCERNING TRANSPORTATION FOR NONAMBULATORY NURSING HOME RESIDENTS. And, Bill -- H.B. 5208, AN ACT DETERRING ABUSE IN NURSING HOMES.

So, I will try to be succinct and give a small summary of each of these bills going forward. But, it's my true feeling that these bills will help protect our individuals with disability in nursing
homes and will enhance their quality of life, and I'll tell you why.

So, in the nursing homes currently, we have about 20,000 residents still in nursing homes and I know the health care industry is moving more and more toward home care services. But, my concern is with the individuals that are nonambulatory that are left in nursing homes. The practice currently is that the vans are there and can be used to go to medical appointments and as -- as we have seen, Medicaid reimburses other areas with transportation for medical issues. But, if you're in a nursing home and you want to get out to go visit your family that may live in the town, my -- the practice has been that the nursing homes don't use those vans for social visits.

Now, I've heard, that perhaps they could, but I know the practice isn't there. So, this is while it's -- it's narrow in scope in that it would be a request made by the -- the representative or the nursing home resident, they'd have to have a consent form by the physician and it would be at their own expense, reimbursing the nursing home for the cost that it costs the nursing home to provide the transportation.

I know that we're all concerned about the social, emotional wellbeing of our residents in nursing homes. And, I really, truly, believe that this would help and it would improve the overall quality of our residents. So, I think it's -- it makes sense and [laughter] I hope that we can move it forward this time.

It was actually -- it did come in front of the House on the floor last year but we didn't get that all
the way through. So, that -- and -- and I'll come back to that in a minute.

And, the next one is the ACT DETERRING ABUSE IN NURSING HOMES. Again, my interest in this came from a personal situation that I had in a nursing home where abuse was discovered and there was no notification. We have worked on the notification laws, which I'm very happy about. And, I think that's been a -- a big improvement.

But, this would be to allow a family member or the guardian or the Court important -- appointed guardian to request electronic monitoring of the individual, if the -- if that was agreeable. And, if the person had a roommate, I know Senator Abrams, you asked that question, there would also have to be a consent from the roommate.

And, I think the bill goes even further into protecting the privacy rights by saying that during dressing or other personal times, that -- that you could turn it -- turn off, if it was a video monitoring. So, there's room within the bill to -- to look at protecting privacy. But, as we heard from the previous person testifying that there is abuse going on, and sometimes, if the person isn't able to tell you what happened, it becomes very difficult to try to discover. And, it may be -- and it may not be at all the fault of the staff. It -- it would help -- I think it's a protection for all parties. And, in my opinion it would improve the -- the quality of the health of the individuals there.

So, I'm a very strong proponent of both of these bills. I hope that we can move them forward. And, I know the Aging Committee has always been very receptive, and I thank you for that. And, I'm
pleased to answer any questions you may have. And, I did submit written testimony. So, excuse this.

REP. SERRA (33RD): Any questions by the --

REP. HAMPTON (16TH): I just want to thank you for your hard work on that one bill, in particular, and your advocacy over the years on aging issues. And, thanks for being here today.

REP. MCCARTY (38TH): Yes. I -- I appreciate your work as well, Representative Hampton. Thank you.

REP. SERRA (33RD): Representative Fusco.

REP. FUSCO (81ST): Thank you, Mr. Chair. Good morning still, Representative.

REP. MCCARTY (38TH): Good --

REP. FUSCO (81ST): Good to see you today.

REP. KATHLEEN MCCARTY (38TH): -- good morning. Good to see you.

REP. FUSCO (81ST): So, just a quick question for you, do we -- do you know are there vans available at all nursing homes every hours, or is it, you know, based on the individual --

REP. MCCARTY (38TH): Right. It --

REP. FUSCO (81ST): -- place?

REP. MCCARTY (38TH): That's a very good question, because I'm -- in my own research, and we need to do more work, not every nursing home has vans. So, this would be applicable to those that do have them. And, there is even narrower in -- in scope in that the van would also only go to homes within that municipality.
My dream is [laughter] that we could expand this one day. Even as we try to go through this, I've been thinking, we don't have Medicaid reimbursement for social visits of -- of any sort. I know there was a grant once in the State years ago that took months, you could apply for it, but it was very lengthy. And, so, this a way to try to begin that process. And, as we move more towards balancing homecare and nursing homes, I think this makes sense that we look at -- and it -- it will help the nursing home industry as well, because when -- for various reasons you choose to go into a nursing home, you don't want to believe that you'll never -- if you're able, to get out again.

So, I don't -- it's -- you're right, it's not everyone. But, this would at least be a step moving to those that do have, to encourage them to and -- require them, actually, to provide the van with -- working with the -- with the nursing home for time and administrative costs.

REP. FUSCO (81ST): Thank you for that answer. And, so, we would -- you're looking for reimbursement, perhaps, from people who are still paying for their -- for their nursing home bills, in other words, reimbursement for the usage of the van, you said, for transportation, reimbursement --

REP. MCCARTY (38TH): So --

REP. FUSCO (81ST): -- to the nursing home?

REP. MCCARTY (38TH): Right.

REP. FUSCO (81ST): It could come from --

REP. MCCARTY (38TH): The -- the -- the --
REP. FUSCO (81ST): -- people who still paying their way but --

REP. MCCARTY (38TH): Right.

REP. FUSCO (81ST): -- for those [Crosstalk].

REP. MCCARTY (38TH): I was thinking of going for the -- maybe at some point we can find a way and I think it's going to be not an overwhelming number of individuals. So, if there's some way going forward that we could even look at that to see, how do we help those individuals that would like to visit their family members in the -- in their town. I think that would be an excellent way to go.

REP. FUSCO (81ST): Thank you very much. Thank you, Mr. Chair.

REP. SERRA (33RD): Any other questions from --

REP. MCCARTY (38TH): If --

REP. SERRA (33RD): -- members?

REP. MCCARTY (38TH): If I may just say --

REP. SERRA (33RD): Sure.

REP. MCCARTY (38TH): -- one thing. It's not related --

REP. SERRA (33RD): It's fine.

REP. MCCARTY (38TH): -- to my two bills, but I see Mairead Painter here today, and the Volunteer Resident Advocates Program that she has been working on. I'm very pleased to say that she has increased those resident advocates. I think that's another area that we really need to work together to increase those. We -- we used to have a very significant cadre of volunteers in the nursing
homes. And, as you know, this is not unique to this area but we need to find new creative ways to build up our volunteer forces throughout the state. But I just wanted to compliment her, because I have met with her and I know she's working hard on that. So, thank you again very much. Have a great day. [laughter].

REP. SERRA (33RD): Thank you. Next up is Senator Cathy Osten, followed by Senator Paul Formica.

SENATOR OSTEN (19TH): So, good morning everybody. Thank you for all the work that you do for our communities, very important. I am testifying in support of S.B. No. 162, AN ACT CONCERNING SENIOR CENTERS.

This bill came about as a result of a taskforce a couple years ago that did not quite make it through the General Assembly last year for lack of time. And, again, I am pursuing getting this out in having a policy that would work with municipal agents and senior centers to provide information to seniors in many of the communities, in particular, in small rural communities. This would provide necessary resources which are not available.

In the larger communities, which have larger senior centers and full-time municipal agents, they -- they have sort of a leg up. But the first place most seniors go to is the local senior center. And, if they had the ability to get information out, as this bill purports to do, that would be an excellent way for us as our -- as our state is -- continues to age.

So, I'm asking for your support in helping to get this through the -- both the Senate and the House
this upcoming session. And, if you get it out early, maybe we can get it done early, so it doesn't get caught up in the last days.

REP. SERRA (33RD): Any questions of the Committee? Representative Bolinsky, followed by Representative Wilson.

REP. WILSON (66TH): Thank you, Senator Osten for being here. I appreciate it. I -- I do recall this from last session. And, what I'm not recalling is why it didn't get legs? And, could you help us refresh that memory?

SENATOR OSTEN (19TH): So, my understanding is that in the last couple of days, that there were a plethora of amendments that were put on a variety of bills that had nothing to do with the underlaying bill and -- itself. And, when you get to the last few days, you don't have a lot of time to have a debate. And, so it got caught up in not having time to debate the amendment, which would not -- which did not pertain to the bill itself. So, it never got a chance to be talked about.

REP. WILSON (66TH): Thank you, I guess that does help clarify my memory a bit. I just have -- I have an observation I would say from a professional standpoint. In my financial advisory practice, I have a significant number of seniors, part of that is due to the age of my practice because [laughter] I'm a senior. What I know about a lot of my senior friends and clients, is they enjoy going around to several different senior centers.

SENATOR OSTEN (19TH): Correct.

REP. WILSON (66TH): They may go to one on Monday and another one on Wednesday and another one on
Friday, for various reasons, programs going on, the menu is better on a certain day. [Laughter].

SENATOR OSTEN (19TH): Yes.

REP. WILSON (66TH): And -- and so I -- I completely understand the concept behind the bill. But I'm wondering when we're talking about dissemination of information, if that's the primary mission of this legislation? Are we -- are we overlooking the fact that, if one senior center doesn't happen to have the information or share the information, the likelihood that one of the others or multiple of the others may be doing it, so is -- is there some redundancy here -- in other words, if we're concerned about those smaller communities that, either may not have a full-time active senior center, then those seniors usually go to senior centers in other communities? And, just -- again, help me think through the process, if you could.

SENATOR OSTEN (19TH): So -- and I don't remember your towns, I apologize, but in some of the more -- the smaller rural communities, there's a dearth, there is no information, it doesn't have anything to do with going from one to other. I do know seniors that go to different senior centers, generally they are the bigger facilities, they're just not these small facilities. And, often times, the municipal agents, themselves, which are not as funded, we require the State -- we, the State, require municipal agents to be in every community. And, even in the town that I live in, that only gives a municipal agent two hours a week. That's what -- that's what we -- to meet the requirements. And, without having a place for them to get the traditional resources, to -- to oversee that, they
just don't have the wherewithal to get the information. Although it's -- it's even a little bit more than just dissemination of information. It's to look at -- and I -- I -- I wish the title said an Act Concerning Senior Centers and Municipal Agents, because the municipal agents are an important piece of the discussion, because their mission is a little bit different.

And, sometimes, in some communities, municipal agents are necessary to provide protective services for seniors. So, there is just a -- a lot to the information that's necessary for them to have. And, we expect people to -- that run both senior centers and act as municipal agents, to go out and get the information themselves.

So, my goal is to have some centralized way of getting people information, and in particular, to help out in the smaller rural communities. Although this -- this is for everybody, but I think that, if we could look at a -- a huge proponent of regionalization, but I know people sometimes will not drive from one community to another, because the senior center is 20 miles out of the way or, you know, 30 miles out of the way.

So, I -- I think that this is -- provides us with a way to do things that we're currently not doing. And, as our population ages in Connecticut, we need to have a methodology for doing this. And, this is what this does.

REP. WILSON (66TH): Okay. Senator, thank you very much. Thank you, Mr. Chair.

REP. SERRA (33RD): Representative Bolinsky.
REP. BOLINSKY (106TH): Thank you Senator for continued advocacy. Just a quick question, does this bill, in any way, create a municipal mandate that's going to receive pushback from -- from small towns that may or may not have a municipal agent in place or is, in fact, this is -- or is, in fact is this a -- you know, just an -- an added responsibility to an existing position?

SENATOR OSTEN (19TH): I don't -- I don't perceive it as an added responsibility. And, I did -- did not get a sense doing the taskforce, we started with a bill and then when that bill was morphed into a taskforce to answer just those questions. And, that has not been seen as a block to having this -- this happen. So, and I'm a sort of a very -- I was a very frugal first selectman, and would be the first one to say that, you know, we don't want to require places to do more with less. So, I don't perceive this bill as -- as putting additional burdens. I actually see it as a bill to provide people with information that are desperately trying to get enough information to put out to their residents.

REP. BOLINSKY (106TH): Yeah. So, it's my understanding that, you know, that all we're after here is a sharing of best practices and raising the performance of all senior centers in the state. And, there is no mandate that is going to create a financial hardship for any municipality?

SENATOR OSTEN (19TH): Correct.

REP. BOLINSKY (106TH): Thank you for your testimony. Thank you for this bill. Thank you for persistence and it's a good bill, it ought to pass.

SENATOR OSTEN (19TH): Thank you. [Laughter].
REP. BOLINSKY (106TH): Thank you, Mr. Chair.

REP. SERRA (33RD): Any other questions? Thank you, Senator.

SENATOR OSTEN (19TH): Thank you very much. You guys have a nice day today.

REP. SERRA (33RD): All right. Senator Formica followed by Mairead Painter. Welcome, Senator.

SENATOR FORMICA (20TH): Thank you, Representative. Mr. Chairman, good morning. Representative Serra, Senators Kelly and Slap in absentee, and Representative Wilson. I'm here this morning to testify in support of S.B. 160, AN ACT CONCERNING SMOKING IN NURSING HOMES, ASSISTED LIVING FACILITIES, AND OTHER HOUSING FOR THE ELDERLY.

My understanding is the practice of smoking is currently allowed in these facilities, is causing concern from nonsmokers. Often close quarters, secondhand smoke is difficult to control and impacts residents adjacent to some of these smoking areas. The negative effects of smoking is well known and smoking is banned already by statute in any public buildings.

So, I feel that adding this ban in nursing homes and elderly facilities might be timely and appropriate. I appreciate the Committee's time and consider of this issue.

REP. SERRA (33RD): Any questions? Representative Bolinsky.

REP. BOLINSKY (106TH): Thank -- thank you for raising and supporting this bill. For the past eight years, I've been walking through the smoking field on the way to visit my father, and now my
mother, at assisted living. And, it's a good idea. Thank you very much, Senator. Thank you, Mr. Chair.

SENATOR FORMICA (20TH): Thank you, Representative.

REP. SERRA (33RD): Any other --

SENATOR FORMICA (20TH): And, my --

REP. SERRA (33RD): -- questions?

SENATOR FORMICA (20TH): -- my best to your folks.

REP. SERRA (33RD): Representative Wilson.

REP. WILSON (66TH): Senator, good to see here today. I appreciate it. I'm -- I'm just trying to understand more the federally subsided housing designated for elderly persons. So, when I think of, in my community, those housing units, some have congregate areas in them. And, I'm wonder -- wondering how, and have we looked into federal regulation on this. Believe me, I'm a nonsmoker. I'm totally in favor of nonsmoking everywhere.

But I also have a concern that people have rented these units would this be grandfathered or -- or if I'm there now, am I kicked out, because I'm a smoker? And -- and how does it affect the letting of these units? I'm -- I'm just curious how that -- this can work. So, much on the nursing -- skilled nursing facility and on the assisted living, I'm -- I'm completely okay with that. I'm just questioning how we could actually do this in housing?

SENATOR FORMICA (20TH): I think as -- as you well point out, the devil is in the details when it comes to legislation. And, I don't know that we could probably mandate something inside of someone's home, be it an apartment in a federally subsided unit.
However, I think it -- the intent would refer to common areas in -- in that building, and either to access the building to or to participate in other common -- commonly held events so.

REP. WILSON (66TH): So, are you saying then, that we may have to amend the wording? Again, I'm -- I'm not familiar what the federal regulations are, in other words can the rental application in a federally subsided housing unit mandate that -- that the resident be a nonsmoker? Are you aware of that?

SENATOR FORMICA (20TH): I am not aware of that, but I don't believe that my intent would be to say inside your apartment you cannot live your life. Outside the apartment and common areas, I think would be more appropriate to apply to those types of facilities. And -- and so, the wording, I would expect, in any of these situations, and -- and the process we where we are now, where you're having public hearings on concepts, as we move forward, perhaps we could -- we could flush out more specific language.

REP. WILSON (66TH): Thank you, Senator. Thank you, Mr. Chair.

REP. SERRA (33RD): Any other questions from members of the committee? Thank you, Senator, always a pleasure.

SENATOR FORMICA (20TH): My pleasure too, Senator -- I mean Representative. I'm sorry about the demotion, I didn't --

REP. SERRA (33RD): Yes.

SENATOR FORMICA (20TH): -- mean to say that.
REP. SERRA (33RD): That's correct. [Laughter] I'm glad you corrected yourself. Thank you, enjoy today. Mairead Painter, please.

MAIREAD PAINTER: Good morning. You can hear me?

REP. SERRA (33RD): Morning.

MAIREAD PAINTER: Good morning, Senator Slap, Representative Serra, Senator Kelly, Representative Wilson and distinguished members of the Aging Committee. My name is Mairead Painter. I'm the State Long-Term Care Ombudsman. I appreciate the opportunity to testify before you today on Bills 160, 5240 (sic) and 5280 -- oh, 08, sorry 08.

The first bill that I want to testify on is regarding the concern of smoking in nursing homes, assisted living facilities, and other housing for elderly. The Office of the Long-Term Care Ombudsman is in support of not allowing smoking inside of a nursing home. However, we also support that staff should not be able to smoke on the premises of a nursing home where smoking is not allowed. It's challenging for me to understand how we can say that residents can't smoke if we're allowing staff to smoke on the property of.

Per a long-term care study that allows smoking, the Office wants to ensure that there's a designated area provided by the owner or operator on the premises that is safe and accessible for residents who choose to smoke. Currently there are long-term care settings that residents have chosen to make their home and receive care, and due to the ability to have smoking options available to them.
The Long-Term Care Ombudsman Program could not support a bill that changes the access to these settings if already allowed to smoke, as it would negatively impact these residents. Long-term care settings that knowingly accept a resident to their community who has smoked recently or currently smokes, is obligated by federal law to meet their individualized need. So, that's really important to continue to honor that here in our state.

The Long-Term Care Ombudsman Program feels strongly that we need to maintain smoking options for residents of long-term care communities because, without these options, I feel we put others at great risk. Individuals would choose to smoke, they will hide it, we will have individuals that smoke in their room, and we will have fires again. This is a huge concern in these settings.

H.B. No. 5204, AN ACT CONCERNING TRANSPORTATION FOR NONAMBULATORY RESIDENTS. We support nonemergency transportation and believe that this will assist further development. Before we could support this fully, we would want it for all residents. We think it's really important that all residents have access to their community, their family members, community events, as well as town meetings, which we've heard they have expressed they'd like to be able to attend. If the vehicle is available, we agree that it should not cost more for the residents or family members to be able to pay to have someone attend something. I know it comes up about individuals who are Medicaid. However, families often look at -- at ways they can do gifts or things that they can do to help the quality of life for individuals, and that would be something I think they would be willing to pay towards.
H.B. 5208, AN ACT CONCERNING ABUSE IN NURSING HOMES.
We are in support of residents and responsible parties having the ability to install electronic monitoring devices in their rooms. The Long-Term Care Ombudsman Program hosts an Annual Voices Forum every year, and this is where residents get to come and talk to us directly about issues and concerns that impact them and what they want us to do as far as the Ombudsman Program in order to honor their legislative agenda. This is a topic that has come up the past few years, and what residents have really told us is, they feel that they've been told for years that the nursing home is supposed to be home, that we honor it as being their home. However, we get to choose in our home, whether or not we use electronic monitoring devices and how comfortable we are with that, but we don't allow them that same independence.

Often, we hear well, we need to protect them, we need to keep them safe. I would challenge that not everyone in a nursing home needs to be protected and kept safe. They are very able to let us know what they want and how they want it. And, if they're not able to, they have family members and responsible parties that are just as able to do that.

Residents also say that they feel sometimes their claims are not taken as seriously or that, because of a diagnosis they may have or a situation that came up, that sometimes it's used to discredit what they're saying. It's the nursing home's responsibility to do a full investigation of any complaints related to abuse, neglect, exploitation, theft. And, then, they come up with a determination as to whether or not it's valid. The residents are
concerned that they don't often have a major role in that.

I think the nursing homes do a good job with trying to come to the best solution they can or the best answer they can. But they don't have eyes everywhere. And, so, often the residents feel that the staff's word is weighed heavier than theirs.

I am in agreement that it should be at the cost of the resident, but the nursing home should have to assist them in setting up the device and maintaining the device. The only thing that we would encourage, and ask to have added to the language, is that the staff would not be able to tamper with in any way the device. If they did need to turn it off, that would have to be outlined in the perimeters of when and how. And, that, if for some reason, it needed to be removed, that whoever was removing it, would make sure that any of the recordings on it were maintained.

I thank you for your time. And, if you have any questions, I'd be happy to answer them.

REP. SERRA (33RD): Any questions, Committee? Representative Hughes.

REP. HUGHES (135TH): Thank you, Mr. Chairman and thank you for your testimony. I know we have worked on this for -- for years, both at the Voices Forum and in other elder justice settings. About -- I have a couple of questions. One is, again, protecting the rights of informed consent, both -- both actually for the nursing -- smoking in nursing homes and also for the -- the installation of electronic device, do you feel like there is adequate protections for informed consent and
residents' rights protected under -- in -- in both of these legislative concepts, basically?

MAIREAD PAINTER: Under the cameras, I think that there is, I -- I like the idea that just a conversation with the roommate, that it goes through the residents first. It talks about when they want it on, when they would want it turned off, how that is applied. So, I'm comfortable with that.

As far as smoking, I do feel that for the buildings that allow smoking, when a resident chooses to go there, they are understanding at the time that there's usually smoking times, different buildings have different policies, depending on how liberal they are, and that's a decision individuals make when they go there.

REP. HUGHES (135TH): Right -- right. So -- so, in -- in, essence we need to honor those initial choices that they've made and continuing to provide choices for those who are, you know, smoking addicted as much as we, you know --

MAIREAD PAINTER: Correct.

REP. HUGHES (135TH): -- would like to reduce that -- that, you know, addiction but -- but it is -- it is something that a lot of our residents want to continue to have choice, and whether they sign a waiver or something that they are giving informed consent and also allowed least restrictive options in their living facility.

MAIREAD PAINTER: Correct.

REP. HUGHES (135TH): So -- so both of those things and -- and I -- I think we worked on this security
initiative to deter abuse, also with protecting privacy a little bit from last year's proposal --

MAIREAD PAINTER: Yeah.

REP. HUGHES (135TH): -- because that's another concern, obviously.

MAIREAD PAINTER: We looked at -- this has been passed in, I believe seven other states. So, we looked at the language from the other states, the protections that are in place. And, then, beyond those seven states, there are other areas that have given formal guidance to long-term care settings regarding the camera, the camera use.

Consumer Voice is our national organization that's done a lot of research on this and has worked with residents and family members, responsible parties, regarding this issue and concern. So, there's a great deal of information on their website, as well. I did provide it to, I believe the Committee Chairs, but I'd be happy to provide it to anyone who wanted it.

REP. HUGHES (135TH): Great. Thank you. I -- I don't have any other questions. Thanks.

MAIREAD PAINTER: Okay.

REP. WILSON (66TH): Representative Bolinsky.

REP. BOLINSKY (106TH): Thank you, Mr. Ranking Member. Just a -- a -- a quick question particularly on 5208. I understand the concept and I understand the reason for it and I understand that things disappear and abuse does occur. So, I'm generally supportive. What I don't know is are nursing home operators permitted to have electronic monitoring devices in a resident's living quarters?
MAIREAD PAINTER: I don't believe in the actual living quarters. I'd have to differ to -- I -- yeah, I think just -- I'm only familiar with them being in common areas. I don't believe that they -- I have anybody that has them in resident areas.

REP. BOLINSKY (106TH): That's like --

MAIREAD PAINTER: Common areas where --

REP. BOLINSKY (106TH): If -- if you could --

MAIREAD PAINTER: -- it's supportive.

REP. BOLINSKY (106TH): If you could get back to me. I'd like to -- I'd like to know that --

MAIREAD PAINTER: Okay.

REP. BOLINSKY (106TH): -- you know, definitively.

MAIREAD PAINTER: Okay.

REP. BOLINSKY (106TH): Because it's a -- it's a good -- I think it's a good question that you look at from both sides. Thank you very much for everything that you do.

MAIREAD PAINTER: Thank you.

REP. BOLINSKY (106TH): Thank you for articulating YOU support and concerns about these bills.

MAIREAD PAINTER: Thank you.

REP. BOLINSKY (106TH): Thank you.

REP. SERRA (33RD): Any other questions? Thank you. Next up is Matt Barrett.

MATT BARRETT: Good morning, Chairman Serra and to the distinguished members of the Aging Committee. My name is Matt Barrett and I'm the President and
Chief Executive Officer of the Connecticut Association of Health Care Facilities. It's a trade association and advocacy organization for skilled nursing facilities and assisted living communities. And, I appreciate the opportunity to testify on H.B. No. 5208, AN ACT DETERRING ABUSE IN NURSING HOMES.

The -- as has been discussed, the proposed legislation will authorize a nursing home resident to install an electronic monitoring device in the resident's room. Connecticut law is presently silent on this issue. There are no federal laws either allowing or requiring the use of electronic or video monitoring in nursing facilities or in resident rooms. And, neither has the Center for Medicare or Medicaid Services opined on or provided guidance to state public health agencies concerning the -- the use of video and electronic monitoring.

The few states that have implemented or considered state legislation concerning video surveillance in nursing home resident rooms have made various attempts at addressing the very difficult issue that can arise when capturing very private material on video. Some of the protections such as the written consent of the resident, the consent of roommates, advance notice to the nursing facility, the resident's responsibility for the installation and maintenance costs, and immunity from liability, are partially addressed in the bill, in the proposed bill.

However, we urge the Aging Committee, as it further deliberates on H.B. 5208 to consider a full range of additional protections before advancing the bill. And, I have enumerated a rather long list of -- of suggested consideration for the bill.
But, if I could just mention a few that: All staff must be aware of the device and acknowledge their awareness by signing a form which is maintained by the nursing facility. There must be a sign at the door of the room alerting all who enter that a video device is in use. And, there must be clarification regarding the ability of the resident, roommate, or other residents to give consent allowing the use of the device, including who may consent on their behalf. And, these requirements should also specify when, or if, the family's request to install a device must be honored if they do, or do not, have an advanced directive authority.

Staff shouldn't have responsibility related to the video device or its use. If a family or resident does not want the device to be used during certain types of care, for example, perineal care, it is the -- it should be the resident's responsibility to disable the video camera during caregiving or when that care is complete, and the resident should be responsible to turn the video camera device back on. The device must be placed in -- and I'll just summarize very quickly, Mr. Chairman. The device must be placed in a conspicuously visible location in the room and that the hidden undisclosed use should only be permitted by Court Order related to a law enforcement investigation.

I have written some very, probably too long testimony to the Committee. And, also, testimony in -- in support with a small qualification to Representative McCarty's or the Committee's bill regarding nonambulatory transportation.
I'd be happy to answer any questions that the Committee may have. And, I again, thank you for the opportunity to testify.

REP. SERRA (33RD): Any questions from members of the Committee? Thank you, Matt. Next up is Dianne Stone.

DIANNE STONE: Is it on? Good Morning, Representative Serra and esteemed members of the Aging Committee. My name is Dianne Stone. I was honored to be appointed to the Senior Center Task Force established by this Committee, and served as its Chair. I am also a member of the Commission on Women, Children, Seniors, Equity and Opportunity, and I'm here in that capacity. Professionally, I'm the Director of the Newington Senior and Disabled Center, a position I've held for almost 23 years.

We're very pleased that the Aging Committee has introduced this bill, yet again. Always use your mouse -- and we look forward to your favorable review of the bill, yet again. I do believe that the third time is the charm.

This bill implements some of the important recommendations of the Task Force and is a strong statement of support for senior centers and municipal aging services. I strongly urge your favorable review.

Senior centers are doing incredible work in our communities across the state. They are largely self-defined and there is vast diversity in our structure, capacity, purpose, and programs. We're a locally driven response to supporting the needs and interests of communities that support them, and we provide a rich tapestry of programs and services in
a socially supporting environment that improves the wellbeing, quality of life and independence of people as they age.

I did submit written testimony. I'm not going to reiterate all of it. But, I do want to tell you that we must ensure senior centers and municipal aging services are prepared to meet the needs and interests of our aging communities, that were integrated into the systems change that's taking place, that we develop competencies and foster partnerships, and that we bring innovative programs to scale for our residents.

We must ensure and promote our position as partners of choice and key agencies in all of the initiatives that support aging in place in our communities. So, the recommendations that were presented are really presented as the next step, not the final step for senior centers. And, it does largely three things.

The first is to define senior centers in addition to municipal agents and suggest areas of programs and services. Currently, senior centers simply do not exist in statute. We want to provide a framework for senior center development that's based on common definition, and is accessible to individual senior centers across the state.

Secondly, it gives a state agency responsibility for assisting senior centers and establishes what that support should include. The Task Force did recommend that the State Unit on Aging, which is which is currently the Department of Aging and Disability Services have this responsibility. During the course of the process last year, that was swapped out with the Commission on Women, Children, Seniors, Equity, and Opportunity.
The Aging and -- the Aging And, Disability Services Department has provided a lesion to senior centers for several years. And, we've heard from so many people how vital and helpful that role has been. It's not a core role for that department nor a funded role for that department. And, it has existed only by the goodwill of the Commissioner. This bill still provides meaningful engagement with the state department and we do look forward to their continued support but are comfortable with it being the Commission on Women, Children, Seniors, Equity, and Opportunity with staffing -- with their staffing for that.

The third thing is that creates a statewide senior center workgroup that's supported by the CWCSEO, that's going to continue the work stated by the Task Force and provide a framework for the workgroup -- it provides a framework for the workgroup to follow. This workgroup is meant to be inclusive and broadly consultative and to enhance the work of our associations and other agencies.

There are some real pockets of excellence and innovations in this state. There are opportunities for collaboration and for regionalization. We need to provide the framework and the forum for that to happen. And, if we've learned nothing else, we know that senior center professionals must be at the core of that work, thus the workgroup.

We -- thank you for your ongoing support of our senior centers and, more importantly, of the older adults that we serve. And, if you have any questions -- and if Representative Wilson or Bolinsky want to ask me the questions they asked Senator Austin, I'd be happy to answer them.
REP. SERRA (33RD): Any questions from members of the Committee? Representative Hughes.

REP. HUGHES (135TH): Thank you, Dianne and thank you for your good work on this Task Force and -- and the deep dive into some of the systemic gaps and -- and, you know, the creative solutions. You didn't testify on this, but I -- I -- I -- I would just like to ask you your thoughts on the act concerning where is it, transportation of nonmedical residents -- nonambulatory nursing home residents, H.B. 5204, and to expand on your role as Chair of the Special Transportation Task Force.

DIANNE STONE: Right. So, thank you for the question. I didn't prepare written testimony on this. And, for reference, I did Chair the Transportation Task Force related to transportation for seniors, people with disabilities, and veterans. That Task Force has not completed a finalized report. So, there's no bill before it.

But, I -- I use the words of a former Assistant Secretary for Aging, who said, transportation is her favorite hard problem. We have a hard problem with transportation for older adults, for people with disabilities. For anybody who cannot drive we have a -- a large transportation problem. Across the general public, we have that issue. With people that are dependent on public transportation or paratransit or alternate transportation, we have that problem. And, we have pockets of people who are specific -- or -- or uniquely at risk of isolation and -- and of disengagement from the community. That includes people that are living in long-term care facilities. Because public transportation is not accessible to most of them.
That includes municipal dial-a-ride programs typically do not serve residents of long-term care facilities.

And -- and the allocation of scarce resources, that's not what those services are meant to do.

So, we have people that are living in nursing homes that have no way of getting out of the nursing home for a lot of things, but in looking for those important things like staying engaged with their community. We -- we hear more and more about the risks of isolation. We have to address those risks.

So, the -- the Transportation Task Force, one of the biggest recommendations that will come out of that, is and it kind of parallels this work, is Connecticut needs to study -- not study this but work on it more. So, there's a recommendation for a workgroup, a forum. I don't think there's a specific name that looks at how we start addressing some of these important transportation problems, how we invest transportation dollars in a more cohesive connected fashion, so that we don't have hundreds of micro-transportation systems operating independently, uniquely with independent funding, but that we can put them under a -- a single set of philosophies or a framework or a platform.

[crosstalk]. Yeah.

So, I -- I think we have to start looking at that. There's a concept out there that it's mobility as a service. It looks at transportation is not something you use to get to a service, it is the service, and how do we provide people who need that service with it? This is a big question. So, I know I didn't speak directly to this bill, but I
think this bill is one -- another arrow to try to fix a problem that really does exist.

REP. HUGHES (135TH): And, is way broader than -- than this one.

DIANNE STONE: It is broader. [crosstalk]. But, there's -- there's unique audiences; right?

REP. HUGHES (135TH): Yeah.

DIANNE STONE: There's -- there's -- we heard from people who have disabilities, developmental disabilities who want to work. And, they cannot engage in meaningful employment because they can't get there. They have to make a choice between moving out of their family home where they have support or working; right? We have people with dementia who have unique transportation needs. And, certainly, people that live in long-term care facilities have unique needs.

REP. HUGHES (135TH): And, I would just comment that we heard in that Task Force from many people that one of the reason -- one of the big barriers in reluctance to move into a -- maybe more appropriate medical setting or care setting is that they're completely homebound or stuck and they can't get to see family, friends, resume -- so -- so, it delays people's willingness to consider that because of that very, very important right until there's a crisis. And, then, what we see a lot is -- is crisis oriented transitions into those long-term care settings. That could have been more cost effective and more at least restrictive if -- if there was transportation as a service, mobility as a service somewhere in the mix. So, yeah, thank you.

DIANE STONE: Thank you.
REP. SERRA (33RD): Any other -- any other questions for [Crosstalk].

DIANE STONE: You didn't ask me the question about the municipal mandates? CCM in the past has supported this bill and -- and intends to support it again. There's no -- I work for municipality, there's no municipal mandate. I'll pretend you asked.

REP. SERRA (33RD): Representative Meskers.

REP. MESKERS (150TH): Thank you. Sorry, I was -- I was being testifying or speaking in another Committee meeting. So, I was listening to your commentary and listening to Anne's responses here, Representative Hughes. And, I -- I guess one of the things that I have found in various regional meetings I've attended, and I've wondered within your Task Force, it may not be within the purview, but I -- I've heard that, at least as it relates to transportation, that there are federal funds that get distributed at the county wide level. So, within some of the resources from Health and Human Services, etcetera, from the federal government, I would recommend from the Task Force to see are we maximizing the federal dollar allocations? Is there anything allocated at -- at the "county level?"

Because then, the next question for us, as a legislature, is not to create accounting or reinvent the wheel, but how we can create an earth sits organizational structure where we might be -- be able to avail ourselves of federal dollars to solve some of those problems.

So, within the research you do, if you find that are various federal agencies that allocate things at the county level, we probably should be looking at how
we can organize ourselves to be the recipient of those funds. That might help address the issue.

DIANNE STONE: Absolutely. And, for clarity, that Task Force is completed. It was a timebound Task Force. The recommendations are that there needs to be more work, and it needs to be done by people that have the transit expertise, including DOT participated in --

REP. MESKERS (150TH): Right.

DIANNE STONE: -- very -- very thoroughly participated in this Task Force. But, we need to continue to do that. And, we need to continue to look at how we can maximize transportation options.


DIANNE STONE: Yeah. Absolutely.

REP. MESKERS (150TH): Thank you.

REP. SERRA (33RD): Thank you. Any other questions?

REP. MESKERS (150TH): Thank you, Dianne.

DIANNE STONE: Thank you.

REP. SERRA (33RD): Before I call the next, we have this room, unfortunately until one o'clock. So, and we have a few more speakers. So, I just want the Committee to be aware of that. And, we're going to -- well at the end. Senator Logan, please, followed by Kathy Flaherty.

SENATOR LOGAN (17TH): Good morning, everyone.
Co-Chair Serra, Vice-Chair John Hampton, and Ranking Member Wilson, and other distinguished members of the Aging Committee, I'm State Senator George Logan and I'm testifying in support of S.B. No. 164, AN
ACT LOWERING THE AGE OF ELIGIBILITY FOR PROPERTY TAX RELIEF FOR SENIOR CITIZENS, and H.B. No. 5207, AN ACT EXEMPTING SENIOR CITIZENS FROM THE PASSPORT TO THE PARKS FEE.

Approval of S.B. No. 164 will allow municipalities to provide tax relief to more seniors within their community by lowering the age of eligibility from 75 years of age or older to 65 years of age or older. And, the surviving spouse age of eligibility will remain at 62 years of age or older -- or older.

Approval of H.B. 5207 will exempt any person 65 years of age or older from paying the $5 dollars per year for each car annual registration period.

Our seniors, many of whom are on fixed incomes, are finding it especially difficult to maintain their current quality of life here in Connecticut. S.B. 164 and H.B. 5207 will provide some of the needed tax relief.

Thank you for the opportunity to testify in support of S.B. 164 and H.B. 5207. And, I urge the Aging Committee to support these bills. These bills will make our state a bit more affordable for more people and make it more attractive for our seniors to want to live out their retirement years here in Connecticut.

It will just show that, you know, we understand and feel their pain, and that, you know, we are at least making a gesture, going in the right direction in terms of welcoming our -- our seniors to stay here and, you know, enjoy their retirement here in Connecticut. Thank you.
REP. SERRA (33RD): Thank you. Any questions from the Committee? Thank you, Senator. Kathy Flaherty, please, followed by Meg Morelli.

KATHY FLAHERTY: Good afternoon, Representative Serra and members of the Aging Committee. I'm here to submit testimony in favor of two bills, H.B. 5206 and H.B. 5208. You already have my written testimony, so I'll be very quick. If a renter hasn't moved and has already submitted notarized verification from their landlord, when they apply for the Renters' Rebate Program the following year, they should not have to resubmit the same paperwork. So, that's what H.B. 5206 is about, and we support that.

H.B. 5208, which would enable people who are residents in nursing homes to put in cameras with the written permission of their roommate, I'm very glad that the proponents of the bill included information about what to do if there's a change in roommates and requiring that the new roommate be notified and what you do if that new roommate objects.

And, I just want to remind everybody here is that one of the rights that people have is to be safe in their place of residence. There is a Nursing Home Patients' Bill of Rights, which is kind of why you have to protect the privacy of the person who is not installing the camera.

But, I just want to remind everybody here is that the only reason that Whiting abuse scandal at Whiting Forensic surfaced, is because there was video. If you look at the reports that were submitted by staff and the -- the peoples' notes, the notes were not accurate. If we did not have
video, the -- all of what happened would not have been found out.

So, I really do encourage you to move that bill forward. I -- I suggest following the recommendations of AARP about changes to the bill, but that's it.

REP. SERRA (33RD): Any questions? Representative Bolinsky.

REP. BOLINSKY (106TH): Thank you for your advocacy. I appreciate it very much. And -- and I -- and I share your concerns. So, we'll act -- act accordingly. Thank you.

KATHY FLAHERTY: And, I may not have put it on the record, I'm Kathy Flaherty, Executive Director of Connecticut Legal Rights Project, Co-Chair of Keep the Promise, and a member of the Steering Committee of the Cross Disability Lifespan Alliance.

REP. SERRA (33RD): Thank you.

KATHY FLAHERTY: Thanks.

REP. SERRA (33RD): Meg Morelli, please, followed by Tracy -- Tracy Wodatch, if I'm pronouncing it correctly.

MEG MORELLI: Good afternoon, Representative Serra and members of the Committee. My name is Meg Morelli and I am President of LeadingAge Connecticut, a membership association representing not-for-profit provider organizations serving older adults across the entire field of aging services and senior housing. I am pleased to have submitted testimony on several bills today. And, I will just speak to a -- a couple of them.
First, on H.B. 5204, AN ACT CONCERNING TRANSPORTATION FOR NONAMBULATORY NURSING HOME RESIDENTS. We appreciate the intent of this proposal, which is to find additional means to help nonambulatory residents visit their families. As always, we're pleased to discuss ways to enhance the lives of nursing home residents, including enhancing their ability to engage with their families. We cannot, however, support this mandate proposed in this bill as we are extremely concerned that the additional burden of staffing for this function would place an untenable demand on our staff during a time when we are facing a workforce crisis.

On raised bill 5208, AN ACT DETERRING ABUSE IN NURSING HOMES, I've submitted extensive written testimony, and I will just summarize. Prevention of elderly abuse is a priority for LeadingAge Connecticut members, and we take any related legislative proposal very seriously. The bill before you today states that it is designed to deter abuse of nursing home residents by permitting residents or their authorized representatives to install video cameras in the resident's nursing home rooms. While the language does attempt to -- to address privacy, consent, and other concerns surrounding the use of video cameras, we believe that it doesn't address all of the concerns. We, therefore, have provided additional information. And, I will just summarize.

First, the concept of implementing video monitoring of individual nursing home residents is a very complicated issue and a balanced consideration must be given to the rights of interest of all those involved. Privacy rights are paramount in the discussion and should include consideration of the
privacy of the resident, the resident's roommate, other residents in the building, and visitors to the nursing home.

We strongly oppose to subsection (e) of the bill, which would permit residents of the -- or their representatives to conduct electronic monitoring without submitting the consent form to the facility.

All persons whose voice or video must -- may be captured by the recording device must be made aware of their recording activity. This not only includes roommates and the nursing home staff, but visitors entering the room, treating healthcare professionals, and other residents. Therefore, covert or hidden cameras should be prohibited, and a sign should be posted indicating that recorded monitoring may be occurring. Workplace laws recording -- regarding video and/or audio surveillance must also be taken into consideration.

Privacy and confidentiality issues also weigh heavily considering the use, viewing, and storage of the video. The images on the video would be protected by HIPAA, and the viewing and storage and usage would need to be strictly regulated. And, liability issues related to all aspects of the filming, use, viewing and storage need to be resolved. The bill does try to address this, but it must also include an affirmative provision that not only the nursing home, but also its officers, directors, employees, and contractors will be immune from any liability for alleged breach of privacy or for inadvertent or intentional disclosure from recordings made by the resident.

And, finally, the bill does not require the residents or -- or the -- or their representatives
to pay for installation -- oh, it does require it. But, there might be additional costs and -- and there might be an additional disruption to the internet services. Most of these recording devices now are by internet feed and it may interrupt the broadband or the ability of the internet services at the nursing home currently has to actually conduct the business of the nursing home. And, so, there may be -- this needs to be addressed in the bill, whether or not would be required other internet services to be installed.

We've also submitted testimony on several other bills. And, we'd be happy to discuss any of them with you. And, I'd be happy to entertain any questions. Thank you.

REP. SERRA (33RD): Any questions from the Committee? Thank you, Meg.

MEG MORELLI: Thank you.

REP. SERRA (33RD): Next up is Tracy Wodatch, if I'm pronouncing it correctly.

TRACY WODATCH: Not too bad.

REP. SERRA (33RD): Followed by --

TRACY WODATCH: Good afternoon --

REP. SERRA (33RD): -- Lisa Heavner.

TRACY WODATCH: Good afternoon, Representative Serra, Representative Hampton, and members of the Aging Committee. My name is Tracy Wodatch. I'm President and the -- and CEO of the Connecticut Association for Healthcare at Home.

Our Association is the united voice for Connecticut's Home Health and Hospice agency.
providers who are licensed by the Connecticut Department of Public Health and certified by CMS. We deliver physician-ordered in-home and community-based medical services to Connecticut Medicaid and Medicare beneficiaries, as well as individuals with commercial insurances throughout all of Connecticut's towns and cities.

We provide the high-quality, high-tech, skilled medical Home Health and Hospice, the nursing, the therapy, the social work, and the home health aides.

Our license and certification requirements make us different from the other in-home and community-based providers who provide supportive nonmedical personal care.

There are only about 90 licensed by Department of Public Health medical home healthcare agencies in Connecticut. Yet, we have over 600 Department of Consumer Protection registered nonmedical homecare -- homemaker companion agencies. Which I know can be a very confusing thing for many legislators. We're the medical side that have to have physicians orders. The homemaker companion agencies are providing the supportive nonmedical care in the community.

I'm going to share some cost savings numbers with you that are assumed by both the medical and nonmedical home and community based services. And, it shouldn't be a surprise to hear that we are a significant cost savings vehicle for the state of Connecticut. In fiscal year 2018, home-based providers saved the state nearly $399 million dollars under the Connecticut Homecare Program for Elders. This continues a decade-long savings trend
that DSS reports to have saved $2.1 billion dollars since 2006. I submitted a flyer that summarizes and that's all data that comes straight from DSS. Yet, none of this substantial savings has been reinvested in licensed, skilled home health to keep people maintained in the least costly setting, the community.

We have not had a rate increase beyond one percent in 13 years. And, at the same time, have experienced Medicaid rate cuts amounting to 22 percent with significant mandated, unfunded burdens. I have also submitted a sheet outlining those.

This financial formula has caused skilled home health agencies to close their doors, consolidate with other agencies, and make very difficult decisions to greatly reduce or stop taking Medicaid clients altogether. Access to Home Health Agency Medicaid services is a problem now.

While we support a Study of Medicaid -- I'll summarize -- while we support a Study of Medicaid-Funded Programs, H.B. 5205, our agencies cannot wait. They need a Medicaid increase yesterday. We urge you to support increased rates today, then consider a study to sustain the future of healthcare at home.

And, based on all that I've outlined above, it naturally follows that we support both S.B. 161, AN ACT INCREASING FUNDING FOR AGING IN PLACE INITIATIVES and S.B. 163, AN ACT CONCERNING LONG-TERM CARE SERVICES.

Preserving the financial viability of Connecticut's home health agencies is critical to statewide access to community-based services and ensuring the
continuation of the favorable State Budget savings trend. Thank you. And, I'm available for any questions.

REP. HAMPTON (16TH): Thank you so much for your testimony. Any questions from the Committee members? Thank you and have a great day.

TRACY WODATCH: Thank you.

REP. HAMPTON (16TH): Next up is Lisa Heavner.

LISA HEAVNER: Good afternoon, Chairman Serra and distinguished members of the Committee. I'm here as a former First Selectwoman and current member of the Board of Finance in the town of Simsbury. And, I wanted to recognize Representative Hampton for introducing the bill and working with me on H.B. 5203.

I just want to say, this is a bill that will make a difference in people's lives immediately. It allows seniors to defer taxes for one year, the full amount of their taxes. That means a senior can fix a roof, replace a boiler, cover short-term care -- care needs. This will make a difference in people's lives. And, they can do it without getting a reverse mortgage or putting it on a credit card with exorbitant fees.

I do have some suggestions that would make it -- this program make it a little bit better for towns across the state. And, therefore, more likely to be adopted and available to seniors immediately.

Certification: I would ask that you add that a requirement that homeowner's certify that the current property is their primary residence. Because you want seniors who are living there to be
eligible for the tax referral, not renters. Not -- if they're not living there, it shouldn't be available to them. That all prior year's taxes have been paid. That they have lived in the home for at least five to 10 years in order to discourage people from buying a more expensive home in a different town, due to the ability to defer the taxes. You don't want someone to move to a town and be able to defer taxes. This is for people who have lived there and have a need. And, that they have homeowner's insurance.

Income Eligibility: I would ask you to allow municipalities the option of setting income eligibility guidelines, as inadequate retirement income is not limited to low income residents. We see that all the time. I'm sure you've seen that door knocking.

Allow Interest and Administrative Fees: Permit municipalities to charge interest plus a buffer to cover administrative costs and defaults. And, require the deferral to be constant over time, so that a rise in interest rates would not affect the cost of the taxes already deferred. And, you could set that limit as you seem appropriate or could be tied to CTI, a COLA, or any other measurement you wanted. It would be less than a reverse mortgage or a credit card.

Qualifying Age for Eligibility: Permit municipalities to determine the qualifying age for eligibility to reflect the reality that many seniors are retiring older, and also to manage the loss of revenue to towns.

And, I would ask that you permit municipalities to limit the number of times a deferral might be
granted so that they can control revenue loss, unless you're planning on reimbursing towns.

Finally, I would ask you to consider -- actually a bold step, and make this a state program. A deferral that's fully reimbursable to towns. And, the reason why I ask you to do that is it's a way to give limited property tax relief to a targeted group that needs it.

I understand that you can't give full property tax relief to everyone in a town, but you could give it to seniors, and a reverse -- and -- reimbursable ways because you're not reducing revenues for towns. Because you don't want to ironically raise the property tax of others in granting this tax deferral because you'd defeat the purpose that we're trying to solve, which is to reduce the property tax burden.

And, I do have some information on suggesting some ways we could do that. And, I'm -- be happy to work with you. But, even if you don't, this bill is a wonderful bill that will make a difference in peoples' lives. You will help people. I'm happy to answer any questions.

REP. SERRA (33RD): Thank you. Representative Hampton followed by Representative Meskers.

REP. HAMPTON (16TH): Good afternoon and welcome. Thank you so much for being here, for your testimony. Thank you for your leadership in the town of Simsbury. Thank you for your work on this bill. And, have you seen other states implement this with success?

LISA HEAVNER: So, Oregon does it. They do -- it's a statewide program. Some other states do it as a
statewide program. I'm not sure about the reimburse -- and they reimburse towns. It's a deferral at the statewide level.

I have not seen other towns do it at the town level, but this will have a benefit. It's not that big an expense. Most towns can afford one person not paying their taxes for one year to cover a new roof. We want to help people. We got into this because our job is to help people, and this will help people. So, I think it can work. And, you can -- if you're -- if you are uncertain, do it as a pilot program.

REP. HAMPTON (16TH): Thank you.

REP. SERRA (33RD): Representative Meskers.

REP. MESKERS (150TH): Thank you, Mr. Chair. Just one or two observations. Under current statutes, I believe we, on property taxes in arrear, are fixed at a rate of 19 percent.

LISA HEAVNER: Too high for this program.

REP. MESKERS (150TH): Right. No. No. I -- I agree. I've already made that comment and made a suggestion that we -- that we put a limit up to. It seems to me that we're not really talking ultimately about a big financial burden to municipalities. If we set an interest rate up to three, four, five percent or -- or -- or established some basis for the discretion of the municipality, because those taxes will be collected.

The second piece is that all -- most of the towns operate a -- a reserve fund; right? And, I think you'll find that, if the properties are unencumbered or they have property insurance, etcetera, and --
and the -- and the taxes are deferred, it's as close and equivalent to having cash available if it's a one-year deferral. So, that the towns probably can look at how they actively manage their property -- their reserve funds versus differed revenue on -- on -- on the tax stream. So, the operating budget shouldn't be really adversely impacted. I've sat on my RTM for about 15 years. That's why I looked at in terms of that.

LISA HEAVNER: So, I think --

REP. MESKERS (150TH): [crosstalk].

LISA HEAVNER: -- you're exactly right. That's why I think this is a brilliant program, because it can be affordable. And, especially, if you permit municipalities to limit the number of deferrals. If someone is 65 and they defer for 20 years, that could be a financial burden. But, if you say, hey, municipalities, we're going to let you differ -- you can take advantage of this deferral program three to five times in your lifetime. That's imminently affordable, I -- I believe.

REP. MESKERS (150TH): And, I don't think a deferral in, and of itself, is not -- if it's not debt forgiveness, etcetera, I don't think it's going to have much of an impact on the municipal budgets, as -- as -- depending on the size of the community.

LISA HEAVNER: Right. And, that's why towns need the flexibility to devise their own program. But, you're exactly right. And, then, as money is paid back, if your permit interest and fees, then that money can then be used to cover the next deferral. It becomes a self-fulfilling proposal. So, you're -- you're absolutely correct.
And, that's why this is something that I think towns will get behind, especially if you put in my suggestion for limitations or control over the aspects that might be worrisome to them in terms of loss of revenue. I mean, my parents had this problem. They -- short-term medical need. They couldn't pay their taxes. We all chipped in and helped them pay their taxes. But, wouldn't it have been nice if, for one year, they could have said, I can't pay my taxes, and you all said, that's okay. We're going to charge you a small interest, a fee and pay it back when you sell. We can wait. We have the capacity to wait. And, we can help you and make your life a little better.

I mean, this really is an opportunity to improve lives. So, thank you so much for considering it. And, I hope you will support it. If there's anything I can do to help you do that, let me know. Because I'm all in.

REP. SERRA (33RD): Thank you. Any other questions from any members? Thank you.

LISA HEAVNER: Thank you.

REP. SERRA (33RD): The following, I'm not sure they're here, but I'll read their names if they are. Representative Al Paolillo or Representative Bob Gibson. If not -- the public hearing for the Aging Committee, for the members who want to attend, there'll be a Screening Committee meeting in the GA conference room immediately following the adjournment of this Committee. Or -- all right, we're going -- we're -- we're -- we're going to leave the attendance open until four o'clock.