



General Assembly

January Session, 2021

Raised Bill No. 6469

LCO No. 3477



Referred to Committee on HUMAN SERVICES

Introduced by:
(HS)

AN ACT CONCERNING THE CONNECTICUT HOME-CARE PROGRAM FOR THE ELDERLY.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsections (i) and (j) of section 17b-342 of the general
2 statutes are repealed and the following is substituted in lieu thereof
3 (*Effective July 1, 2021*):

4 (i) (1) On and after July 1, 2015, the Commissioner of Social Services
5 shall, within available appropriations, administer a state-funded
6 portion of the program for persons (A) who are sixty-five years of age
7 and older; (B) who are inappropriately institutionalized or at risk of
8 inappropriate institutionalization; (C) whose income is less than or
9 equal to the amount allowed under subdivision (3) of subsection (a) of
10 this section; and (D) whose assets, if single, do not exceed one hundred
11 fifty per cent of the federal minimum community spouse protected
12 amount pursuant to 42 USC 1396r-5(f)(2) or, if married, the couple's
13 assets do not exceed two hundred per cent of said community spouse
14 protected amount. For program applications received by the
15 Department of Social Services for the fiscal years ending June 30, 2016,

16 and June 30, 2017, only persons who require the level of care provided
17 in a nursing home shall be eligible for the state-funded portion of the
18 program, except for persons residing in affordable housing under the
19 assisted living demonstration project established pursuant to section
20 17b-347e who are otherwise eligible in accordance with this section.

21 [(2) Except for persons residing in affordable housing under the
22 assisted living demonstration project established pursuant to section
23 17b-347e, as provided in subdivision (3) of this subsection, any person
24 whose income is at or below two hundred per cent of the federal poverty
25 level and who is ineligible for Medicaid shall contribute nine per cent of
26 the cost of his or her care. Any person whose income exceeds two
27 hundred per cent of the federal poverty level shall contribute nine per
28 cent of the cost of his or her care in addition to the amount of applied
29 income determined in accordance with the methodology established by
30 the Department of Social Services for recipients of medical assistance.
31 Any person who does not contribute to the cost of care in accordance
32 with this subdivision shall be ineligible to receive services under this
33 subsection. Notwithstanding any provision of sections 17b-60 and 17b-
34 61, the department shall not be required to provide an administrative
35 hearing to a person found ineligible for services under this subsection
36 because of a failure to contribute to the cost of care.

37 (3) Any person who resides in affordable housing under the assisted
38 living demonstration project established pursuant to section 17b-347e
39 and whose income is at or below two hundred per cent of the federal
40 poverty level, shall not be required to contribute to the cost of care. Any
41 person who resides in affordable housing under the assisted living
42 demonstration project established pursuant to section 17b-347e and
43 whose income exceeds two hundred per cent of the federal poverty
44 level, shall contribute to the applied income amount determined in
45 accordance with the methodology established by the Department of
46 Social Services for recipients of medical assistance. Any person whose
47 income exceeds two hundred per cent of the federal poverty level and
48 who does not contribute to the cost of care in accordance with this
49 subdivision shall be ineligible to receive services under this subsection.

50 Notwithstanding any provision of sections 17b-60 and 17b-61, the
51 department shall not be required to provide an administrative hearing
52 to a person found ineligible for services under this subsection because
53 of a failure to contribute to the cost of care.]

54 [(4)] (2) The annualized cost of services provided to an individual
55 under the state-funded portion of the program shall not exceed fifty per
56 cent of the weighted average cost of care in nursing homes in the state,
57 except an individual who received services costing in excess of such
58 amount under the Department of Social Services in the fiscal year
59 ending June 30, 1992, may continue to receive such services, provided
60 the annualized cost of such services does not exceed eighty per cent of
61 the weighted average cost of such nursing home care. The commissioner
62 may allow the cost of services provided to an individual to exceed the
63 maximum cost established pursuant to this subdivision in a case of
64 extreme hardship, as determined by the commissioner, provided in no
65 case shall such cost exceed that of the weighted cost of such nursing
66 home care.

67 (j) The Commissioner of Social Services may implement revised
68 criteria for the operation of the program while in the process of adopting
69 such criteria in regulation form, provided the commissioner prints
70 notice of intention to adopt the regulations [in the Connecticut Law
71 Journal within twenty days of implementing the policy] in accordance
72 with section 17b-10. Such criteria shall be valid until the time final
73 regulations are effective.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2021	17b-342(i) and (j)

Statement of Purpose:

To eliminate the copayment under the state-funded portion of the Connecticut home-care program for the elderly.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

