



# Senate

General Assembly

**File No. 695**

January Session, 2023

Substitute Senate Bill No. 412

*Senate, May 4, 2023*

The Committee on Appropriations reported through SEN. OSTEN of the 19th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

## **AN ACT INCREASING MEDICAID RATES FOR COMPLEX CARE NURSING SERVICES.**

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

1 Section 1. Subsection (a) of section 17b-242 of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective January*  
3 *1, 2024*):

4 (a) The Department of Social Services shall determine the rates to be  
5 paid to home health care agencies and home health aide agencies by the  
6 state or any town in the state for persons aided or cared for by the state  
7 or any such town. The Commissioner of Social Services shall establish a  
8 fee schedule for home health services to be effective on and after July 1,  
9 1994. The commissioner may annually modify such fee schedule if such  
10 modification is needed to ensure that the conversion to an  
11 administrative services organization is cost neutral to home health care  
12 agencies and home health aide agencies in the aggregate and ensures  
13 patient access. Utilization may be a factor in determining cost neutrality.  
14 The commissioner shall increase the fee schedule for home health

15 services provided under the Connecticut home-care program for the  
16 elderly established under section 17b-342, effective July 1, 2000, by two  
17 per cent over the fee schedule for home health services for the previous  
18 year. On and after January 1, 2024, the commissioner shall increase the  
19 fee schedule for complex care nursing services provided to patients over  
20 the age of eighteen such that the rate of reimbursement is equal to the  
21 rate for such services provided to patients age eighteen and under.  
22 There shall be no differential in fees paid for such services based on the  
23 age of the patient. The commissioner may increase any fee payable to a  
24 home health care agency or home health aide agency upon the  
25 application of such an agency evidencing extraordinary costs related to  
26 (1) serving persons with AIDS; (2) high-risk maternal and child health  
27 care; (3) escort services; or (4) extended hour services. In no case shall  
28 any rate or fee exceed the charge to the general public for similar  
29 services. A home health care agency or home health aide agency which,  
30 due to any material change in circumstances, is aggrieved by a rate  
31 determined pursuant to this subsection may, within ten days of receipt  
32 of written notice of such rate from the Commissioner of Social Services,  
33 request in writing a hearing on all items of aggrievement. The  
34 commissioner shall, upon the receipt of all documentation necessary to  
35 evaluate the request, determine whether there has been such a change  
36 in circumstances and shall conduct a hearing if appropriate. The  
37 Commissioner of Social Services shall adopt regulations, in accordance  
38 with chapter 54, to implement the provisions of this subsection. The  
39 commissioner may implement policies and procedures to carry out the  
40 provisions of this subsection while in the process of adopting  
41 regulations, provided notice of intent to adopt the regulations is  
42 [published in the Connecticut Law Journal] posted on the eRegulations  
43 System not later than twenty days after the date of implementing the  
44 policies and procedures. Such policies and procedures shall be valid for  
45 not longer than nine months. For purposes of this subsection, "complex  
46 care nursing services" means intensive, specialized nursing services  
47 provided to a patient with complex care needs who requires skilled  
48 nursing care at home.

This act shall take effect as follows and shall amend the following sections:		
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Section 1	January 1, 2024	17b-242(a)
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**Statement of Legislative Commissioners:**

In Subsec. (a), "individuals" was changed to "patients", for consistency, and "published in the Connecticut Law Journal" was changed to "[published in the Connecticut Law Journal] posted on the eRegulations System".

**HS**      *Joint Favorable Subst. C/R*

APP

**APP**      *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

**OFA Fiscal Note**

**State Impact:**

Agency Affected	Fund-Effect	FY 24 \$	FY 25 \$
Social Services, Dept.	GF - Cost	600,000	1,350,000

Note: GF=General Fund

**Municipal Impact:** None

**Explanation**

The bill results in a Medicaid cost to the Department of Social Services (DSS) of approximately \$600,000 in FY 24 and \$1,350,000 in FY 25 associated with aligning complex care nursing services rates for adults with those established for pediatric patients. The bill is effective January 1, 2024.

**The Out Years**

The annualized ongoing fiscal impact identified above would continue into the future subject to service utilization and associated rates.

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**OLR Bill Analysis****sSB 412*****AN ACT INCREASING MEDICAID RATES FOR COMPLEX CARE NURSING SERVICES.*****SUMMARY**

Beginning by January 1, 2024, this bill requires the Department of Social Services (DSS) commissioner to increase the rates for certain “complex care nursing services” provided by home health care agencies or home health aide agencies. In practice, pediatric complex care nursing services currently receive a higher rate than adult complex care nursing services. The bill (1) requires DSS to raise the adult rate to equal the pediatric rate and (2) prohibits age-based differentials for these services.

Under the bill, complex care nursing services are intensive, specialized nursing services given to a patient with complex care needs who requires skilled nursing care at home.

The bill also makes a technical change, requiring that certain notices of intent to adopt regulations be posted on the eRegulations system, rather than in the Connecticut Law Journal.

EFFECTIVE DATE: January 1, 2024

**BACKGROUND*****Related Bill***

sSB 496, favorably reported by the Appropriations and Human Services committees, (1) requires DSS to compensate family caregivers who provide personal care services under the Connecticut Home Care Program for Elders, (2) reduces cost sharing for the state-funded portion of the program, and (3) makes a technical change to reference “adult

family living” rather than “elderly foster care.”

**COMMITTEE ACTION**

Human Services Committee

Joint Favorable Substitute Change of Reference - APP  
Yea 22 Nay 0 (03/07/2023)

Appropriations Committee

Joint Favorable Substitute  
Yea 52 Nay 0 (04/20/2023)