

Department of Social Services

DSS60000

Position Summary

Account	Actual FY 14	Governor Estimated FY 15	Governor Recommended		Legislative	
			FY 16	FY 17	FY 16	FY 17
Permanent Full-Time - GF	1,982	1,982	1,947	1,947	1,975	1,976

Budget Summary

Account	Actual FY 14	Governor Estimated FY 15	Governor Recommended		Legislative	
			FY 16	FY 17	FY 16	FY 17
Personal Services	117,465,832	133,576,093	133,204,508	131,516,031	134,527,508	133,178,052
Other Expenses	122,377,752	128,408,621	148,127,650	155,200,842	148,435,174	155,619,366
Equipment	0	1	0	0	0	0
Other Current Expenses						
HUSKY Performance Monitoring	208,050	208,050	0	0	182,043	187,245
HUSKY Information and Referral	159,393	0	0	0	0	0
Genetic Tests in Paternity Actions	87,060	181,585	122,506	122,506	120,236	122,506
State-Funded Supplemental Nutrition Assistance Program	659,153	725,059	483,100	460,800	483,100	460,800
HUSKY B Program	29,050,736	28,036,000	33,690,000	36,250,000	6,550,000	4,350,000
Charter Oak Health Plan	6,279,878	0	0	0	0	0
Other Than Payments to Local Governments						
Medicaid	2,451,456,880	2,399,268,579	2,446,290,000	2,505,490,000	2,468,415,500	2,542,788,000
Old Age Assistance	36,631,129	38,849,252	37,636,440	37,779,320	37,944,440	38,347,320
Aid To The Blind	712,183	755,251	743,550	741,289	750,550	755,289
Aid To The Disabled	60,395,812	63,838,417	60,387,585	60,134,440	61,115,585	61,475,440
Temporary Assistance to Families - TANF	107,076,327	107,458,614	102,625,380	102,058,030	99,425,380	98,858,030
Emergency Assistance	0	1	1	1	1	1
Food Stamp Training Expenses	4,898	12,000	11,400	11,400	11,250	11,400
CT Pharmaceutical Assistance Contract to the Elderly	(461,075)	0	0	0	0	0
Healthy Start	1,430,311	1,430,311	0	0	1,251,522	1,287,280
DMHAS-Disproportionate Share	108,935,000	108,935,000	108,935,000	108,935,000	108,935,000	108,935,000
Connecticut Home Care Program	44,499,385	48,024,196	41,230,000	38,040,000	43,430,000	40,590,000
Human Resource Development-Hispanic Programs	965,739	945,739	0	0	886,630	898,452
Protective Services to the Elderly	367,621	324,737	476,599	478,300	476,599	478,300
Safety Net Services	2,681,422	2,814,792	885,358	705,452	2,462,943	2,533,313
Transportation for Employment Independence Program	3,028,670	2,528,671	0	0	0	0
Refunds Of Collections	109,132	150,000	112,500	112,500	110,625	112,500
Services for Persons With Disabilities	572,907	602,013	353,865	353,865	526,762	541,812
Child Care Services-TANF/CCDBG	96,451,647	0	0	0	0	0
Nutrition Assistance	473,875	479,666	329,637	302,811	449,687	455,683
Housing/Homeless Services	5,210,676	5,210,676	4,826,384	4,698,287	0	0
State Administered General Assistance	19,025,610	18,966,800	22,342,040	24,005,550	23,154,540	24,818,050
Child Care Quality Enhancements	563,286	0	0	0	0	0
Connecticut Children's Medical Center	15,579,200	15,579,200	15,579,200	15,579,200	14,605,500	14,800,240
Community Services	1,075,010	1,125,199	803,226	803,226	1,100,730	1,128,860
Human Service Infrastructure Community Action Program	3,002,887	3,453,326	0	0	3,021,660	3,107,994
Teen Pregnancy Prevention	1,837,378	1,837,378	0	0	1,607,707	1,653,641
Fatherhood Initiative	371,652	566,656	0	0	0	0

Account	Actual FY 14	Governor Estimated FY 15	Governor Recommended		Legislative	
			FY 16	FY 17	FY 16	FY 17
Family Programs - TANF	0	0	0	0	541,600	415,166
Domestic Violence Shelters	0	0	0	0	5,210,676	5,210,676
Other Than Payments to Local Governments						
Human Resource Development- Hispanic Programs - Municipality	5,364	5,364	0	0	5,029	5,096
Teen Pregnancy Prevention - Municipality	137,826	137,826	0	0	120,598	124,044
Community Services - Municipality	83,761	83,761	71,616	71,616	78,526	79,573
Nonfunctional - Change to Accruals	(52,833,260)	0	0	0	0	0
Agency Total - General Fund	3,185,679,108	3,114,518,834	3,159,267,545	3,223,850,466	3,165,937,101	3,243,329,129
Family Programs - TANF	0	0	0	0	2,244,195	2,370,629
Agency Total - Special Transportation Fund	0	0	0	0	2,244,195	2,370,629
Total - Appropriated Funds	3,185,679,108	3,114,518,834	3,159,267,545	3,223,850,466	3,168,181,296	3,245,699,758
Additional Funds Available						
Carry Forward Funding	0	0	0	0	0	517,500
Federal Funds	3,435,958,187	3,904,373,924	3,941,778,633	3,956,500,189	3,941,778,633	3,956,500,189
Private Contributions & Other Restricted	20,545,121	9,443,067	5,298,418	5,387,361	5,298,418	5,387,361
Agency Grand Total	6,642,182,415	7,028,335,825	7,106,344,596	7,185,738,016	7,115,258,347	7,208,104,808

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Current Services

Adjust Funding to Reflect Wage & Compensation Related Costs

Personal Services	(7)	2,951,415	(7)	1,457,938	0	0	0	0
Total - General Fund	(7)	2,951,415	(7)	1,457,938	0	0	0	0

Governor

Provide funding of \$2,951,415 in FY 16 and \$1,457,938 in FY 17, and reduce seven positions, to reflect current services wage-related adjustments such as annual increments, general wage increases, overtime, annualization, turnover, and other compensation-related adjustments. This also reflects the transfer of positions to the Department of Mental Health and Addiction Services for the central contracting unit.

Legislative

Same as Governor

Adjust Operating Expenses to Reflect Current Requirements

Other Expenses	0	22,900,448	0	35,095,211	0	0	0	0
Total - General Fund	0	22,900,448	0	35,095,211	0	0	0	0

Governor

Provide funding of \$22,900,448 in FY 16 and \$35,095,211 in FY 17 in Other Expenses to reflect FY 16 and FY 17 anticipated expenditure requirements. These costs include various reductions in contracts, increased costs for new leases and software licenses, and an adjustment to reflect anticipated FY 15 expenses, which is largely due to increases in DSS's share of expenses related to the Exchange.

Legislative

Same as Governor

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Reconcile Expenses between DSS and the Exchange

Other Expenses	0	97,368	0	(2,445,166)	0	0	0	0
Total - General Fund	0	97,368	0	(2,445,166)	0	0	0	0

Governor

Adjust funding by \$97,368 in FY 16 and \$2,445,166 in FY 17 to reflect the reconciliation of costs between DSS and the Exchange. Adjustments include the reduction of one-time expenses, as well as an increase in funding related to the revised attribution of expenses.

Legislative

Same as Governor

Apply Inflationary Increases

Other Expenses	0	503,296	0	1,156,328	0	0	0	0
Total - General Fund	0	503,296	0	1,156,328	0	0	0	0

Background

Applying inflationary factors to current year expenditures provides an estimate of the cost of continuing services into the next year.

Governor

Increase funding for Other Expenses by \$503,296 in FY 16 and an additional \$653,032 in FY 17 (for a cumulative total of \$1,156,328 in the second year) to reflect inflationary increases.

Legislative

Same as Governor

Medicaid Net Funding Re-Estimate

Medicaid	0	(67,600,000)	0	(54,200,000)	0	(67,600,000)	0	(54,200,000)
Total - General Fund	0	(67,600,000)	0	(54,200,000)	0	(67,600,000)	0	(54,200,000)

Background

In FY 14, the Medicaid account became established as a net rather than a gross appropriation.

Legislative

Reduce funding by \$67.6 million in FY 16 and \$54.2 million in FY 17 to accurately reflect the state's share of Medicaid expenditures.

Update Expenditure Estimates for Medicaid

Medicaid	0	50,311,421	0	66,686,421	0	3,180,000	0	4,510,000
Total - General Fund	0	50,311,421	0	66,686,421	0	3,180,000	0	4,510,000

Background

DSS' Medicaid program provides remedial, preventive, and long-term medical care for income eligible aged, blind or disabled individuals, low income adults and families with children. Payment is made directly to health care providers, by the department, for services delivered to eligible individuals. The program complies with federal Medicaid law (Title XIX of the Social Security Act) and regulations. Prior to FY 13, Medicaid expenditures reflected both the state and federal share. Due to the net appropriation of the Medicaid account adopted in FY 14, Medicaid adjustments reflected below only represent the state's share.

Governor

Provide funding of \$50,311,421 in FY 16 and \$66,686,421 in FY 17 to reflect expenditure trends in the Medicaid program. This represents an increase of 2% in FY 16 and an additional 0.6% in FY 17.

Legislative

Same as Governor

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Update Medicaid Caseload and Utilization Estimates

Medicaid	0	77,060,000	0	154,530,000	0	0	0	0
Total - General Fund	0	77,060,000	0	154,530,000	0	0	0	0

Governor

Provide funding of \$77,060,000 in FY 16 and \$154,530,000 in FY 17 to reflect Medicaid caseload and utilization trends. Total Medicaid enrollment in January 2015 was 723,769, which represents an 11% increase over the previous year.

Legislative

Same as Governor

Reflect Annualization of Autism Coverage

Medicaid	0	10,450,000	0	23,400,000	0	(2,000,000)	0	(1,000,000)
Total - General Fund	0	10,450,000	0	23,400,000	0	(2,000,000)	0	(1,000,000)

Background

In July 2014, the federal Centers for Medicare and Medicaid Services (CMS) issued a bulletin indicating that state Medicaid programs must cover treatment for Autism Spectrum Disorder (ASD) for individuals under the age of 21. As a result, the department will be covering autism services that are medically necessary based on individualized comprehensive diagnostic evaluation behavior assessments and individualized plans of care.

Governor

Provide Medicaid funding of \$12,450,000 in FY 16 and \$24.4 million in FY 17 to reflect the annualization of costs for the new ASD coverage.

Legislative

Provide funding of \$10,450,000 in FY 16 and \$23.4 million in FY 17 to reflect the annualization of costs for the new ASD coverage.

Reflect Annualization of Savings - Pharmacy

Medicaid	0	(4,740,000)	0	(4,740,000)	0	0	0	0
Total - General Fund	0	(4,740,000)	0	(4,740,000)	0	0	0	0

Background

In response to the projected FY 15 Medicaid deficiency, DSS undertook several initiatives to lower Medicaid expenditures.

Governor

Reduce funding by \$4,740,000 in FY 16 and FY 17 to reflect the annualization of savings from implementing prior authorization and/or revising rebate agreements for certain high cost drugs, such as the Hepatitis C treatment, Sovaldi.

Legislative

Same as Governor

Reflect Annualization of Savings - Reimbursement Codes

Medicaid	0	(4,390,000)	0	(4,600,000)	0	0	0	0
Total - General Fund	0	(4,390,000)	0	(4,600,000)	0	0	0	0

Background

In response to the projected FY 15 Medicaid deficiency, DSS undertook several initiatives to lower Medicaid expenditures.

Governor

Reduce funding by \$4,390,000 in FY 16 and \$4.6 million in FY 17 to reflect the annualization of savings from reimbursement changes for certain laboratory, x-ray and mammography screening codes.

Legislative

Same as Governor

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Reflect Annualization of Savings - Radiology

Medicaid	0	(3,730,000)	0	(3,870,000)	0	0	0	0
Total - General Fund	0	(3,730,000)	0	(3,870,000)	0	0	0	0

Background

In response to the projected FY 15 Medicaid deficiency, DSS undertook several initiatives to lower Medicaid expenditures.

Governor

Reduce funding by \$3,730,000 in FY 16 and \$3,870,000 in FY 17 to reflect the annualization of savings from changing physician radiology rates. This represents a reduction in rates to 57.5% of the 2007 Medicare professional rate levels.

Legislative

Same as Governor

Reflect Annualization of Savings - Other

Medicaid	0	(2,415,000)	0	(2,685,000)	0	0	0	0
Total - General Fund	0	(2,415,000)	0	(2,685,000)	0	0	0	0

Background

In response to the projected FY 15 Medicaid deficiency, DSS undertook several initiatives to lower Medicaid expenditures.

Governor

Reduce funding by \$2,415,000 in FY 16 and \$2,685,000 in FY 17 to reflect the annualization of savings from other initiatives.

Legislative

Same as Governor

Reflect Annualization of Community First Choice

Medicaid	0	(750,000)	0	(750,000)	0	0	0	0
Total - General Fund	0	(750,000)	0	(750,000)	0	0	0	0

Background

The federal Affordable Care Act authorizes the Community First Choice Option, which offers states a 6% increase in federal reimbursement on personal care assistance (PCA) services if the program meets certain criteria. The state will provide coverage of self-directed PCAs as a Medicaid state plan service for individuals at institutional level of care.

Governor

Reduce funding by \$750,000 in FY 16 and FY 17 to reflect the increased federal share from implementing the Community First Choice Option.

Legislative

Same as Governor

Restructure Hospital Related Revenue Diversion

Medicaid	0	(13,320,000)	0	(13,320,000)	0	0	0	0
Total - General Fund	0	(13,320,000)	0	(13,320,000)	0	0	0	0

Background

The FY 14-15 biennial budget assumed that approximately \$80 million in supplemental hospital payments would be made (related to the partial distribution of the hospital tax receipts). While the majority of these payments would be reimbursed by the federal government at the normal 50% Medicaid cost share, a portion could be attributable to the Affordable Care Act Expansion population, and therefore eligible for 100% federal reimbursement. The FY 14-15 biennial budget assumed that the additional federal revenue from the portion that receives the 100% federal match would be redistributed to the hospitals.

These additional funds have yet to be distributed to the hospitals. The Governor's proposed FY 15 deficit mitigation plan assumes that these payments will not be made and the enhanced revenue will be available to offset other Medicaid expenses.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Governor

Reduce Medicaid funding by \$13,320,000 in FY 16 and FY 17. The additional federal revenue from the enhanced match on the Medicaid supplemental hospital payments related to the expansion population will be retained by the state and used to offset other Medicaid expenses.

Legislative

Same as Governor

Reflect Adjustments for School Based Child Health

Medicaid	0	2,130,000	0	2,080,000	0	0	0	0
Total - General Fund	0	2,130,000	0	2,080,000	0	0	0	0

Background

The Medicaid School Based Child Health (SBCH) Program enables participating school districts to seek federal Medicaid reimbursement for covered services provided to an eligible student pursuant to the student's Individualized Education Plan (IEP). Services include assessment, audiology, clinical diagnostic laboratory, medical, mental health, nursing, occupational therapy, physical therapy, respiratory care, speech/language, and optometric services. Administrative activities supporting such Medicaid health services are also eligible for reimbursement.

Governor

Provide funding of \$2,130,000 in FY 16 and \$2,080,000 in FY 17 to reflect expenditure requirements in the School Based Child Health Program.

Legislative

Same as Governor

Provide Funding for the Duals Demonstration

Medicaid	0	10,500,000	0	15,000,000	0	0	0	0
Total - General Fund	0	10,500,000	0	15,000,000	0	0	0	0

Background

The Duals Demonstration is a proposal the Department of Social Services submitted to the federal Centers for Medicare and Medicaid Services (CMS) in 2012 to provide integrated care for individuals who are enrolled in both Medicaid and Medicare in an effort to improve quality of care, care management, and cost of care.

Governor

Provide funding of \$10.5 million in FY 16 and \$15 million in FY 17 for the Duals Demonstration. Please note, this funding is eliminated in a subsequent policy revision.

Legislative

Same as Governor

Provide Funding for Rate Increases for Long Term Care

Medicaid	0	7,940,000	0	19,970,000	0	0	0	0
Total - General Fund	0	7,940,000	0	19,970,000	0	0	0	0

Governor

Provide funding of \$7,940,000 in FY 16 and \$19,970,000 in FY 17 for statutory rate increases for long term care facilities. Please note, \$6,940,000 in FY 16 and \$17,940,000 in FY 17 is eliminated in a subsequent policy revision. The remaining funding of \$1 million in FY 16 and \$2 million in FY 17, provides fair rent increase for long term care facilities.

Legislative

Same as Governor

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Provide Funding for the New ABI Waiver II

Medicaid	0	1,790,000	0	2,210,000	0	(3,180,000)	0	(4,510,000)
Total - General Fund	0	1,790,000	0	2,210,000	0	(3,180,000)	0	(4,510,000)

Governor

Provide funding of \$1,790,000 in FY 16 and \$2,210,000 in FY 17 to reflect the transfer of funding from the Department of Mental Health and Addiction Services (DMHAS) to support the new Acquired Brain Injury Waiver (ABI Waiver II).

Legislative

Same as Governor

Update Expenditure Estimates for Money Follows the Person

Other Expenses	0	(2,257,987)	0	(2,126,024)	0	0	0	0
Medicaid	0	(3,610,000)	0	(9,130,000)	0	0	0	0
Total - General Fund	0	(5,867,987)	0	(11,256,024)	0	0	0	0

Governor

Reduce funding by \$5,867,987 in FY 16 and \$11,256,024 in FY 17 to reflect current services requirements for the Money Follows the Person (MFP) program.

Legislative

Same as Governor

Update Expenditure Estimates for HUSKY B

HUSKY B Program	0	5,654,000	0	8,214,000	0	0	0	0
Total - General Fund	0	5,654,000	0	8,214,000	0	0	0	0

Background

The HUSKY B Program provides health coverage for children of families with incomes in excess of 201% of the Federal Poverty Level (FPL). Children of families with incomes up to 323% FPL receive premium subsidies from the state. HUSKY program expenditures typically receive 65% federal reimbursement. As of October 1, 2015, the reimbursement rate will increase to 88%.

Governor

Provide funding of \$5,654,000 in FY 16 and \$8,214,000 in FY 17 to reflect anticipated requirements for HUSKY B. This supports average caseload growth of 4.4% in FY 16 and 4.1% in FY 17.

Legislative

Same as Governor

Update Expenditure Estimates for Temporary Family Assistance

Temporary Assistance to Families - TANF	0	(8,033,231)	0	(8,600,583)	0	(3,200,000)	0	(3,200,000)
Total - General Fund	0	(8,033,231)	0	(8,600,583)	0	(3,200,000)	0	(3,200,000)

Background

The Temporary Family Assistance (TFA) program provides cash assistance to eligible low-income families. The TFA program limits assistance to 21 months for non-exempt cases, with possible six month extensions for good cause. Individuals in the TFA program are usually eligible for health care services provided under the state's Medicaid program. The average monthly caseload under this (and its predecessor) program has declined from over 60,000 families in FY 95 to approximately 15,948 families at the end of the calendar year 2014.

Governor

Reduce funding by \$4,833,231 in FY 16 and \$5,400,583 in FY 17 to reflect anticipated expenditure requirements in the TFA program.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Legislative

Reduce funding by \$8,033,231 in FY 16 and \$8,600,583 in FY 17 to reflect anticipated expenditure requirements in the TFA program. A portion of the savings generated under the TFA account through this reduced caseload will be reinvested in Temporary Assistance to Needy Families (TANF) related programming under the new Family Programs - TANF account in DSS as well as in the Department of Labor.

Update Expenditure Estimates Home & Community Based Services

Connecticut Home Care Program	0	(2,474,196)	0	(1,664,196)	0	0	0	0
Total - General Fund	0	(2,474,196)	0	(1,664,196)	0	0	0	0

Background

The Connecticut Home Care Program for the Elders (CHCPE) assists the frail elderly in avoiding unnecessary or premature nursing home care by making available a variety of community-based services. The services covered include home-health aides, visiting nurses, homemaker aides, adult day care, personal assistance, and meals on wheels. The home care program is funded from two separate accounts: the Medicaid account, which is matched by federal funds; and the Connecticut Home Care account, which is funded solely by the state. The funds used to cover services depend upon client eligibility. Medicaid also provides additional home health services outside of CHCPE.

Governor

Reduce funding by \$2,474,196 in FY 16 and \$1,664,196 in FY 17 to reflect anticipated expenditure requirements. This represents 2% growth in each year.

Legislative

Same as Governor

Update Expenditure Estimates for SAGA

State Administered General Assistance	0	5,075,245	0	6,738,746	0	0	0	0
Total - General Fund	0	5,075,245	0	6,738,746	0	0	0	0

Background

The State Administered General Assistance (SAGA) program provides limited cash assistance to individuals who are unable to work for medical or other prescribed reasons. Enrollees can receive up to \$219 monthly.

Governor

Provide funding of \$5,075,245 in FY 16 and \$6,738,746 in FY 17 to reflect anticipated expenditure requirements. As of December 2014, caseload totaled 6,409 cases.

Legislative

Same as Governor

Update Expenditure Estimates for Supplemental Assistance

Old Age Assistance	0	(904,811)	0	(501,928)	0	0	0	0
Aid To The Blind	0	(4,700)	0	46	0	0	0	0
Aid To The Disabled	0	(2,722,828)	0	(2,362,981)	0	0	0	0
Total - General Fund	0	(3,632,339)	0	(2,864,863)	0	0	0	0

Background

Supplemental Assistance consists of Old Age Assistance, Aid to the Blind and Aid to the Disabled. These programs provide monthly financial assistance to low-income individuals. The supplemental assistance programs are entirely state funded, but operate under both state and federal guidelines. In order to receive benefits, an individual must have another source of income to supplement, such as the federal Social Security, Supplemental Security Income, or Veteran's Benefits. All recipients are automatically eligible for health care benefits under the state Medicaid program.

Governor

Reduce funding by \$3,632,339 in FY 16 and \$2,864,863 in FY 17 to reflect updated caseload estimates. As of December 2014, caseload totaled 15,421 individuals.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Legislative

Same as Governor

Reflect Required Rate Increases

Old Age Assistance	0	823,803	0	1,750,505	0	0	0	0
Aid To The Blind	0	20,859	0	44,056	0	0	0	0
Aid To The Disabled	0	1,580,395	0	3,348,092	0	0	0	0
Total - General Fund	0	2,425,057	0	5,142,653	0	0	0	0

Governor

Provide funding of \$2,425,057 in FY 16 and \$5,142,653 in FY 17 to reflect statutory rate increases for the Aged, Blind, and Disabled. Please note, these increases are removed in a subsequent policy adjustment.

Legislative

Same as Governor

Provide Funding for Cost of Living Adjustments

Old Age Assistance	0	111,756	0	218,171	0	0	0	0
Aid To The Blind	0	830	0	1,646	0	0	0	0
Aid To The Disabled	0	247,651	0	476,842	0	0	0	0
Temporary Assistance to Families - TANF	0	1,744,617	0	3,291,969	0	0	0	0
Connecticut Home Care Program	0	280,000	0	280,000	0	0	0	0
State Administered General Assistance	0	341,955	0	702,454	0	0	0	0
Total - General Fund	0	2,726,809	0	4,971,082	0	0	0	0

Governor

Provide funding of \$2,726,809 in FY 16 and \$4,971,082 in FY 17 to reflect Cost of Living Adjustments (COLA) for various programs.

Legislative

Same as Governor

Update Expenditure Estimates for Various Programs

Genetic Tests in Paternity Actions	0	(50,000)	0	(50,000)	0	0	0	0
State-Funded Supplemental Nutrition Assistance Program	0	(241,959)	0	(264,259)	0	0	0	0
Protective Services to the Elderly	0	151,862	0	153,563	0	0	0	0
Refunds Of Collections	0	(30,000)	0	(30,000)	0	0	0	0
Total - General Fund	0	(170,097)	0	(190,696)	0	0	0	0

Governor

Reduce funding by \$170,097 in FY 16 and \$190,696 in FY 17 to meet the anticipated needs under various programs.

Legislative

Same as Governor

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Transfer Private Provider COLA Funding to OEC and SDA

Community Services	0	(8,820)	0	(8,820)	0	0	0	0
Total - General Fund	0	(8,820)	0	(8,820)	0	0	0	0

Governor

Transfer total funding of \$8,820 in FY 16 and FY 17 to the Office of Early Childhood (\$2,000) and the State Department on Aging (\$6,820) to support cost of living adjustments (COLA) for private providers.

Legislative

Same as Governor

Provide Funding for the State Innovation Model

Medicaid	0	517,500	0	1,035,000	0	(517,500)	0	(1,035,000)
Total - General Fund	0	517,500	0	1,035,000	0	(517,500)	0	(1,035,000)

Background

The State Innovation Model (SIM) was initiated by the federal Affordable Care Act, through the Center for Medicare and Medicaid Innovation (CMMI). The state received a planning grant in March of 2013 to develop a SIM. The SIM's purpose is to align all healthcare payers in the state (e.g. Medicaid, the state employee and retiree health plan, Medicare, commercial and self-funded plans) around a value-based payment methodology, which focuses reimbursement on quality metrics, as opposed to simply volume and cost reduction measures, through various means.

Governor

Provide funding of \$1,035,000 in FY 16 and \$2,070,000 in FY 17 to support efforts of the Department of Social Services in development of the SIM.

Legislative

Provide funding of \$517,500 in FY 16 and \$1,035,000 in FY 17 to support efforts of the Department of Social Services in development of the SIM.

Adjust Funding for Physician Rates

Medicaid	0	(2,170,000)	0	(2,170,000)	0	0	0	0
Total - General Fund	0	(2,170,000)	0	(2,170,000)	0	0	0	0

Background

In response to the projected FY 15 Medicaid deficiency, DSS undertook several initiatives to lower Medicaid expenditures.

Governor

Reduce funding by \$2,170,000 in FY 16 and FY 17 to reflect the annualization of savings from changing physician reimbursement based on facility type code.

Legislative

Same as Governor.

Adjust Current Obstetrical Rates

Medicaid	0	(2,085,000)	0	(2,175,000)	0	3,085,000	0	3,175,000
Total - General Fund	0	(2,085,000)	0	(2,175,000)	0	3,085,000	0	3,175,000

Background

In response to the projected FY 15 Medicaid deficiency, DSS undertook several initiatives to lower Medicaid expenditures.

Governor

Reduce funding by \$5,170,000 in FY 16 and \$5,350,000 in FY 17 to reflect the annualization of savings from changing obstetrical rates.

Legislative

Reduce funding by \$2,085,000 in FY 16 and \$2,175,000 in FY 17. This funding reflects a restoration of half of the FY 15 obstetrical rate reduction, as well as funding to support obstetricians' involvement in high risk pregnancy imaging.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Policy Revisions

Transition Certain HUSKY A Adults to the Exchange

Medicaid	0	(2,400,000)	0	(43,500,000)	0	42,200,000	0	38,600,000
Total - General Fund	0	(2,400,000)	0	(43,500,000)	0	42,200,000	0	38,600,000

Background

The Connecticut Health Insurance Exchange (Access Health CT) was established as a quasi-public agency to satisfy requirements of the federal Affordable Care Act. Federally subsidized health insurance is available for low income individuals.

Governor

Reduce Medicaid funding by \$44.6 million in FY 16 and \$82.1 million in FY 17 to reflect the elimination of Medicaid coverage for HUSKY A adults with incomes in excess of 138% of the federal poverty level. This assumes the eventual transition of 34,200 individuals to the Exchange.

Legislative

Reduce Medicaid funding by \$2.4 million in FY 16 and \$43.5 million in FY 17 to reflect the elimination of Medicaid coverage for non-pregnant adults in the HUSKY "A" program with incomes in excess of 150% of the federal poverty level (FPL). This is anticipated to eliminate coverage for approximately 23,700 individuals when annualized. Sections 370-374 PA 15-5 JSS, a budget implementer, are related to this change.

Reduce Medicaid Provider Rates

Medicaid	0	0	0	0	0	43,000,000	0	47,000,000
Total - General Fund	0	0	0	0	0	43,000,000	0	47,000,000

Governor

Reduce funding by \$43 million in FY 16 and \$47 million in FY 17 to reflect reductions in Medicaid rates for most providers. The department will have discretion as to the distribution of this reduction. This proposal does not impact federally qualified health centers which are reimbursed under a federally prescribed payment system. To help with access to primary care services, rates for primary care services are not expected to be reduced.

Legislative

Maintain funding of \$43 million FY 16 and \$47 million in FY 17 for Medicaid provider rates.

Reduce Medicaid Expenditures

Medicaid	0	(17,500,000)	0	(17,500,000)	0	(17,500,000)	0	(17,500,000)
Total - General Fund	0	(17,500,000)	0	(17,500,000)	0	(17,500,000)	0	(17,500,000)

Legislative

Reduce funding by \$17.5 million in both FY 16 and FY 17 for the Medicaid account.

Update Hospital Provider Tax

Medicaid	0	50,800,000	0	51,200,000	0	(4,470,000)	0	(4,450,000)
Total - General Fund	0	50,800,000	0	51,200,000	0	(4,470,000)	0	(4,450,000)

Background

Currently, hospitals pay taxes of 5.5% on inpatient revenue and 3.83% on outpatient revenue. A portion of these proceeds are returned to the hospitals as supplemental Medicaid payments.

Governor

Provide funding of \$55,270,000 in FY 16 and \$55,650,000 in FY 17 to reflect revisions to the hospital provider tax. This proposal: (1) updates the base year for the tax from 2009 to 2013 total net patient revenues; and (2) equalizes the tax rate on inpatient and outpatient services. The total user fee will increase an additional \$165,250,000, from \$349.1 million to \$514.4 million.

The \$165,250,000 in tax receipts are fully returned to hospitals via Medicaid supplemental payments, but due to the net budgeting of the Medicaid account, only the state's share of \$55,270,000 is reflected in the budget. The state budget therefore has a net gain of \$110,030,000 from this proposal.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Legislative

Provide funding of \$50.8 million in FY 16 and \$51.2 million in FY 17 to reflect revisions to the hospital provider tax. This amount reflects an updated estimate of the amount that will be generated by the provider tax changes. The net impact to the state and to the hospitals as a whole does not change with this update.

Establish New Small Hospital Pool

Medicaid	0	5,000,000	0	5,000,000	0	5,000,000	0	5,000,000
Total - General Fund	0	5,000,000	0	5,000,000	0	5,000,000	0	5,000,000

Legislative

Provide funding of \$5 million in both FY 16 and FY 17 to support a new small hospital pool. Eligible hospitals must: 1) have 160 or fewer beds, 2) not be part of a hospital group, and 3) not be located in contiguous towns with another hospital. Section 382 of PA 15-5 JSS, a budget implementer, is related to this change.

Eliminate Supplemental Payments for Low Cost Hospitals

Medicaid	0	(5,130,000)	0	(5,130,000)	0	0	0	0
Total - General Fund	0	(5,130,000)	0	(5,130,000)	0	0	0	0

Background

The 2014-15 Biennial Budget included additional Medicaid funding for hospitals with a higher than average combined Medicare and Medicaid payer mix and less than average Medicaid expense per case.

Governor

Reduce Medicaid funding by \$5,130,000 in FY 16 and FY 17 to reflect the elimination of the low cost hospital payments.

Legislative

Same as Governor

Achieve Medication Administration Savings

Medicaid	0	(10,000,000)	0	(10,000,000)	0	0	0	0
Total - General Fund	0	(10,000,000)	0	(10,000,000)	0	0	0	0

Background

The 2014-15 Biennial Budget assumed gross savings of \$20 million in savings as a result of nurse delegation and greater use of assistive technology for medication administration.

Governor

Reduce funding by \$10 million in FY 16 and FY 17 to reflect reducing nursing rates to achieve the savings included in the enacted budget. No savings are anticipated in FY 14 or FY 15.

Legislative

Reduce funding by \$10 million in both FY 16 and FY 17 to reflect anticipated medication administration programmatic savings. Should the current efforts be shown to not achieve the anticipated savings, DSS may reduce rates after January 1, 2016 to meet the budgeted savings. Section 387 of PA 15-5 JSS, a budget implementer, is related to this change.

Adjust Current Orthodontia Coverage

Medicaid	0	(2,052,000)	0	(2,052,000)	0	3,078,000	0	3,258,000
Total - General Fund	0	(2,052,000)	0	(2,052,000)	0	3,078,000	0	3,258,000

Background

In response to the projected FY 15 Medicaid deficiency, DSS undertook several initiatives to lower Medicaid expenditures.

Governor

Reduce funding by \$5,130,000 in FY 16 and \$5,310,000 in FY 17 to reflect the annualization of savings from limiting orthodontia coverage. This reflects moving the minimum qualifying score on the Salzmann index from 24 to 29.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Legislative

Reduce funding by \$2,052,000 in both FY 16 and FY 17 to reflect moving the minimum qualifying score on the Salzmann index from 24 to 26. Section 390 of PA 15-5 JSS, a budget implementer, is related to this change.

Reduce Reimbursement Rates for Pharmacies

Medicaid	0	(2,150,000)	0	(2,250,000)	0	4,050,000	0	4,550,000
Total - General Fund	0	(2,150,000)	0	(2,250,000)	0	4,050,000	0	4,550,000

Background

Currently, the Department of Social Services provides two reimbursements to pharmacies for prescription drugs. First, pharmacies receive a payment equal to the Average Wholesale Price (AWP) less a discount factor dependent on whether the drug is a brand name drug or a generic. AWP is the standardized pharmacy pricing report. The current discount rate for brand name drugs is AWP minus 16%. Second, pharmacies receive a dispensing fee per prescription. The current dispensing fee is \$1.70 per prescription.

Governor

Reduce funding by \$6.2 million in FY 16 and \$6.8 million in FY 17 to reflect increasing the discount rate for brand name drugs from AWP minus 16% to AWP minus 18% and reducing the dispensing fee from \$1.70 to \$1.40 per prescription.

Legislative

Reduce funding by \$2,150,000 in FY 16 and \$2,250,000 in FY 17 to reflect increasing the discount rate from AWP minus 16% to AWP minus 16.5% and reducing the dispensing fee from \$1.70 to \$1.40 per prescription. Section 381 of PA 15-5 JSS, a budget implementer, is related to this change.

Reduce Crossover Ambulance Payments

Medicaid	0	(4,300,000)	0	(5,100,000)	0	0	0	0
Total - General Fund	0	(4,300,000)	0	(5,100,000)	0	0	0	0

Background

Current statute requires DSS to limit reimbursement to Medicaid providers for coinsurance and deductible payments under Medicare such that the combined Medicare and Medicaid payment to providers does not exceed the maximum allowable under the Medicaid program fee schedules. The statute, however, exempts ambulance providers whose rates are established by the Department of Public Health.

Governor

Reduce Medicaid funding by \$4.3 million in FY 16 and \$5.1 million in FY 17 to reflect lower payments for ambulance services. This proposal caps payments to ambulance providers to ensure that the combined Medicare and Medicaid payment to the provider does not exceed the allowable Medicaid rate. By doing so, these providers will be subject to the same standard that applies to all other Medicaid services.

Legislative

Reduce Medicaid funding by \$4.3 million in FY 16 and \$5.1 million in FY 17 to reflect lower payments for ambulance services. Sections 388 and 389 of PA 15-5 JSS, a budget implementer, revise the rate methodology for such services under Medicaid.

Reduce ASO and Home Care Medicaid Performance Payments

Medicaid	0	(850,000)	0	(850,000)	0	0	0	0
Total - General Fund	0	(850,000)	0	(850,000)	0	0	0	0

Background

The Department of Social Services contracts with Administrative Services Organizations (ASO) to manage the state's Medicaid program; the state is self-insured for all Medicaid claim expenditures. The state pays the ASOs an administrative fee per client. The current contract with the ASOs includes a provision which allows the department to withhold a percentage of each administrative payment contingent upon the ASOs meeting established performance measures. Currently, the ASOs for medical, behavioral health, dental and non-emergency medical transportation services are eligible to receive performance payments of approximately 7.5% of the contract amount.

In addition, the DSS has a performance payment pool under the Connecticut Home Care Program for Elders (CHCPE), created in FY 15, with payments made to contractors who have demonstrated quality outcomes for participants. The FY 15 pool is \$300,000.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Governor

Reduce funding by \$850,000 in FY 16 and FY 17 to reflect reducing the ASOs performance payments to 6% of the contract amount (a 1.5% reduction), and maintaining the CHCPE performance pool at \$300,000 (a \$200,000 reduction). The CHCPE pool was scheduled to increase to \$500,000.

Legislative

Same as Governor

Adjust Funding for Personal Needs Allowance

Medicaid	0	0	0	0	0	1,000,000	0	1,100,000
Total - General Fund	0	0	0	0	0	1,000,000	0	1,100,000

Background

Social Security and other income received by residents of long term care facilities are applied towards the cost of care except for a monthly personal needs allowance (PNA). The PNA is used for such things as clothing, personal phone, entertainment outside of the facility, etc. Prior to FY 11, the PNA was increased annually each July 1 by an amount equal to the inflation adjustment in Social Security Income. PA 11-44 eliminated the annual increases. The current PNA is \$60 per month.

Governor

Reduce funding of \$1 million in FY 16 and \$1.1 million in FY 17 to reflect reducing the PNA from \$60 to \$50 per month.

Legislative

Maintain funding for the current personal needs allowance of \$60 per month.

Eliminate Funding for Adult Chiropractic Services

Medicaid	0	(250,000)	0	(250,000)	0	0	0	0
Total - General Fund	0	(250,000)	0	(250,000)	0	0	0	0

Background

During the 2012 session, the legislature added funding to pay for services provided by independent chiropractors for adults under Medicaid. Because of concerns with the utilization and expenditures that could be incurred as a result of this expansion, expenditures are capped. As a result, the program is entirely state funded

Governor

Reduce funding by \$250,000 in FY 16 and FY 17 to reflect the elimination of Medicaid coverage for adult chiropractic services.

Legislative

Same as Governor

Require Dual Eligible Clients to Cover Medicare Part D Copay

Medicaid	0	(80,000)	0	(90,000)	0	0	0	0
Total - General Fund	0	(80,000)	0	(90,000)	0	0	0	0

Background

The state currently requires dually eligible clients (those clients both Medicare and Medicaid eligible), who are currently not receiving home and community based services under Medicaid, to pay up to \$15 per month in Medicare co-pays for Part D-covered drugs. The state currently covers any costs which exceed the \$15 cap. Medicare co-pays range from \$1.20 to \$6.60.

Governor

Reduce funding by \$80,000 in FY 16 and \$90,000 in FY 17 to reflect requiring dually eligible clients to cover 100% of all Medicare co-pays for Part D-covered drugs.

Legislative

Same as Governor. Section 386 of PA 15-5 JSS, a budget implementer, is related to this change.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Reduce Funding for the Duals Demonstration

Medicaid	0	(10,500,000)	0	(15,000,000)	0	0	0	0
Total - General Fund	0	(10,500,000)	0	(15,000,000)	0	0	0	0

Background

The Duals Demonstration is a proposal the Department of Social Services submitted to the federal Centers for Medicare and Medicaid Services (CMS) in 2012 to provide integrated care for individuals ages 18 to 64 and 65 or older who are enrolled in both Medicaid and Medicare in an effort to improve quality of care, care management, and cost of care.

Governor

Reduce funding by \$10.5 million in FY 16 and \$15 million in FY 17 to reflect elimination of the Duals Demonstration project.

Legislative

Same as Governor

Provide Rate Increase for Direct Care Workers

Medicaid	0	13,000,000	0	13,000,000	0	13,000,000	0	13,000,000
Total - General Fund	0	13,000,000	0	13,000,000	0	13,000,000	0	13,000,000

Legislative

Provide funding of \$13 million in both FY 16 and FY 17 to reflect increased personnel costs for direct and indirect care workers at long term care facilities. Section 377 of PA 15-5 JSS, a budget implementer, is related to this change.

Eliminate Statutory or Regulatory Rate Increases

Medicaid	0	(6,900,000)	0	(17,800,000)	0	0	0	0
Total - General Fund	0	(6,900,000)	0	(17,800,000)	0	0	0	0

Governor

Reduce funding by \$6.9 million in FY16 and \$17.8 million in FY 17 to reflect the elimination of scheduled increases for long-term care facilities.

Legislative

Same as Governor. Sections 377 and 378 of PA 15-5 JSS, a budget implementer, are related to this change.

Eliminate Rate Increases for Various Programs

Old Age Assistance	0	(935,560)	0	(1,968,680)	0	0	0	0
Aid To The Blind	0	(21,690)	0	(45,710)	0	0	0	0
Aid To The Disabled	0	(1,828,050)	0	(3,824,930)	0	0	0	0
Temporary Assistance to Families - TANF	0	(1,744,620)	0	(3,291,970)	0	0	0	0
State Administered General Assistance	0	(341,960)	0	(702,450)	0	0	0	0
Total - General Fund	0	(4,871,880)	0	(9,833,740)	0	0	0	0

Governor

Reduce funding by \$4,871,880 in FY 16 and \$9,833,740 in FY 17 to reflect the elimination of scheduled increases.

Legislative

Same as Governor. Sections 375 and 376 of PA 15-5 JSS, a budget implementer, eliminate cost of living increases (COLAs) under the Temporary Assistance to Families (TFA), State Administered General Assistance (SAGA) and supplemental assistance programs, totaling \$2,726,809 in FY 16 and \$4,971,082 in FY 17. Sections 379 and 380 of the implementer freeze statutory rate adjustments for boarding homes and residential care homes, totaling \$2.4 million in FY 16 and \$5.1 million in FY 17.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Adjust Unearned Income Disregard for Supplemental Assistance

Old Age Assistance	0	0	0	0	0	308,000	0	568,000
Aid To The Blind	0	0	0	0	0	7,000	0	14,000
Aid To The Disabled	0	0	0	0	0	728,000	0	1,341,000
Total - General Fund	0	0	0	0	0	1,043,000	0	1,923,000

Background

In past years, any cost of living adjustments (COLA) received as part of an AABD client's Social Security benefit were considered an increase in income and applied to the client's cost of care. As a result of a legislative change, effective FY 06, AABD clients now retain their Social Security COLA (by increasing the unearned income disregard) without a concurrent reduction in their state benefit.

Governor

Reduce funding by \$1,043,000 in FY 16 and \$1,923,000 in FY 17 to reflect reinstating the previous policy of applying any federal COLA to offset the cost of care.

Legislative

Maintain funding to allow clients to retain the federal COLA.

Net Appropriate HUSKY B Program

HUSKY B Program	0	(27,140,000)	0	(31,900,000)	0	(27,140,000)	0	(31,900,000)
Total - General Fund	0	(27,140,000)	0	(31,900,000)	0	(27,140,000)	0	(31,900,000)

Legislative

Reduce funding by \$27,140,000 in FY 16 and \$31.9 million in FY 17 to reflect the net appropriation of the HUSKY B Program.. Currently, HUSKY B is gross appropriated, meaning both the state and federal shares of the program are included in the state budget appropriation. State expenditures are matched with a federal reimbursement rate of 65% until October 1, 2015, at which point the rate increases to 88% through September 30, 2019. This reduction reflects removing funding associated with the federal share of the program and appropriating only the state's share of the program, estimated at \$6,550,000 in FY 16 and \$4,350,000 in FY 17.

Increase Cost Sharing under the CT Home Care Program

Connecticut Home Care Program	0	(700,000)	0	(750,000)	0	2,100,000	0	2,250,000
Total - General Fund	0	(700,000)	0	(750,000)	0	2,100,000	0	2,250,000

Background

PA 09-5 of the September special session introduced a client cost sharing requirement of 15% of the costs of his or her care under the state-funded Connecticut Home Care Program for Elders (CHCPE). This requirement was reduced to 6% pursuant to PA 10-179, and increased to 7% pursuant to PA 11-6.

Governor

Reduce funding by \$2.8 million in FY 16 and \$3 million in FY 17 to reflect an increase in the cost sharing requirement from 7% to 15% of the cost of care.

Legislative

Reduce funding by \$700,000 in FY 16 and \$750,000 in FY 17 to reflect an increase in the cost sharing requirement from 7% to 9% of the cost of care. Section 383 of PA 15-5 JSS, a budget implementer, is related to this change.

Freeze Intake to Category One of the CT Home Care Program

Connecticut Home Care Program	0	(1,700,000)	0	(5,300,000)	0	100,000	0	300,000
Total - General Fund	0	(1,700,000)	0	(5,300,000)	0	100,000	0	300,000

Background

The state-funded Connecticut Home Care Program for Elders (CHCPE) provides home and community-based services to elderly who are at risk of nursing home placement and meet the program's financial eligibility criteria. Category 1 is targeted to individuals who are at risk of hospitalization or short-term nursing facility placement if preventive home care services are not provided. Category 2 is targeted to individuals who are frail enough to require nursing facility care, but have resources that would prevent them from qualifying for Medicaid upon admission to a nursing facility.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Governor

Reduce funding for the CHCPE by \$1.8 million in FY 16 and \$5.6 million in FY 17 to reflect freezing intake to Category 1 under the state-funded program. This change applies only to new clients and does not impact existing clients.

Legislative

Reduce funding for the CHCPE by \$1.7 million in FY 16 and \$5.3 million in FY 17 to reflect placing a moratorium on intake to Category 1 under the state-funded program. This moratorium does not apply to individuals participating in the assisted living demonstration project, and will be lifted in FY 18. Section 383 of PA 15-5 JSS, a budget implementer, is related to this change.

Adjust State Administered General Assistance Burial Benefit

State Administered General Assistance	0	(887,500)	0	(887,500)	0	812,500	0	812,500
Total - General Fund	0	(887,500)	0	(887,500)	0	812,500	0	812,500

Background

The Department of Social Services provides up to \$1,800 for funeral and burial expenses of indigent persons who pass away without the ability to pay for the cost of a funeral and burial.

Governor

Reduce funding by \$1.7 million in both FY 16 and FY 17 to reflect reducing the burial benefit for the State Administered General Assistance Program from \$1,800 to \$1,000.

Legislative

Reduce funding by \$887,500 in both FY 16 and FY17 to reflect reducing the burial benefit under the state administered general assistance, state supplemental and temporary family assistance programs from \$1,800 to \$1,400. Sections 384 and 385 of PA 15-5 JSS, a budget implementer, are related to this change.

Adjust Funding for Various Programs

HUSKY Performance Monitoring	0	(13,004)	0	(10,403)	0	184,644	0	187,245
Healthy Start	0	(89,395)	0	(71,516)	0	1,269,401	0	1,287,280
Human Resource Development-Hispanic Programs	0	(59,109)	0	(47,287)	0	886,630	0	898,452
Safety Net Services	0	(175,925)	0	(140,740)	0	1,345,365	0	1,560,456
Transportation for Employment Independence Program	0	(158,043)	0	(126,434)	0	2,244,195	0	2,275,804
Services for Persons With Disabilities	0	(37,626)	0	(30,101)	0	123,231	0	130,756
Connecticut Children's Medical Center	0	(973,700)	0	(778,960)	0	(973,700)	0	(778,960)
Community Services	0	(70,325)	0	(56,260)	0	79,675	0	93,740
Human Service Infrastructure Community Action Program	0	(215,833)	0	(172,666)	0	3,064,827	0	3,107,994
Teen Pregnancy Prevention	0	(114,836)	0	(91,869)	0	1,630,674	0	1,653,641
Fatherhood Initiative	0	(35,416)	0	(28,333)	0	502,908	0	509,991
Human Resource Development-Hispanic Programs - Municipality	0	(335)	0	(268)	0	5,029	0	5,096
Teen Pregnancy Prevention - Municipality	0	(8,614)	0	(6,891)	0	122,321	0	124,044
Total - General Fund	0	(1,952,161)	0	(1,561,728)	0	10,485,200	0	11,055,539

Governor

Reduce funding by \$12,437,361 in FY 16 and \$12,617,267 in FY 17 to reflect the elimination of various grant programs. Such programs include: Children's Health Council (HUSKY Performance Monitoring), Fatherhood Initiative, Healthy Start, Transportation for Employment Independence, Human Resource Development for Hispanic Programs, Teen Pregnancy Prevention, Human Services Infrastructure Community Action Program (HSICAP), certain programs under Safety Net Services, Community Services, and support for advocacy services and the Family Support Grant under Services for Persons with Disabilities.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Legislative

Reduce funding by \$1,952,161 in FY 16 and \$1,561,728 in FY 17 for various programs.

Reduce Funding for Various Grant Program

Safety Net Services	0	0	0	0	0	267,405	0	267,405
Services for Persons With Disabilities	0	0	0	0	0	57,191	0	57,191
Nutrition Assistance	0	0	0	0	0	45,568	0	45,568
Community Services	0	0	0	0	0	106,894	0	106,894
Community Services - Municipality	0	0	0	0	0	7,957	0	7,957
Total - General Fund	0	0	0	0	0	485,015	0	485,015

Governor

Reduce funding by \$485,015 in FY 16 and FY 17 to achieve savings in various grant accounts. Programs include Safety Net Services, Services for Persons with Disabilities, Nutrition Assistance, and Community Services.

Legislative

Maintain funding for grant programs.

Adjust Funding for Torrington Regional Office

Personal Services	0	0	0	0	28	1,323,000	28	1,518,000
Other Expenses	0	0	0	0	0	120,800	0	131,800
Total - General Fund	0	0	0	0	28	1,443,800	28	1,649,800

Governor

Reduce funding by \$1,443,800 in FY 16 and \$1,649,800 in FY 17, and eliminate 28 positions in both FY 16 and FY 17 to reflect closing the Torrington Regional Office. Current staff will be absorbed into other DSS vacancies.

Legislative

Maintain Torrington Regional Office operations.

Reflect Federal Reimbursement for SA Residential Detox

Medicaid	0	(2,230,000)	0	(2,230,000)	0	0	0	0
Total - General Fund	0	(2,230,000)	0	(2,230,000)	0	0	0	0

Governor

Reduce funding by \$2,230,000 in FY 16 and FY 17 to reflect anticipated federal reimbursement for certain substance abuse (SA) detox services. This requires a state plan change to include other drugs of dependence, which requires CMS approval. The state currently receives federal reimbursement on residential detoxification services related to alcohol.

Legislative

Same as Governor

Reduce Other Expenses by Establishing an Automated Interface

Other Expenses	0	(900,000)	0	(3,600,000)	0	0	0	0
Total - General Fund	0	(900,000)	0	(3,600,000)	0	0	0	0

Background

The Department of Social Services currently contracts with HP, who manually processes Medicaid eligibility applications that come from Access Health CT (the state's health insurance exchange).

Governor

Reduce funding of \$900,000 in FY 16 and \$3.6 million in FY 17 in the Other Expenses account to reflect contractual savings resulting from implementing an automated interface between Access Health CT and ImpaCT (DSS' eligibility management system), which is currently under development.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Legislative

Same as Governor

Reduce Other Expenses

Other Expenses	0	(500,000)	0	(500,000)	0	(500,000)	0	(500,000)
Total - General Fund	0	(500,000)	0	(500,000)	0	(500,000)	0	(500,000)

Legislative

Reduce funding by \$500,000 in both FY 16 and FY 17 for Other Expenses.

Provide Funding for Person to Person in Darien

Community Services	0	125,000	0	125,000	0	125,000	0	125,000
Total - General Fund	0	125,000	0	125,000	0	125,000	0	125,000

Background

The Person-to-Person program provides support to low-income families via emergency assistance, scholarships, and a campership program.

Legislative

Provide funding of \$125,000 in both FY 16 and FY 17 to support the Person-to-Person program in Darien, Connecticut.

Provide Funding for Fair Hearings

Personal Services	0	0	1	144,021	0	0	1	144,021
Total - General Fund	0	0	1	144,021	0	0	1	144,021

Legislative

Provide funding of \$114,021 and one position to support fair hearings in FY 17.

Adjust SSBG/TANF Support for Certain Programs

Nutrition Assistance	0	0	0	0	0	80,478	0	107,304
Housing/Homeless Services	0	0	0	0	0	384,292	0	512,389
Total - General Fund	0	0	0	0	0	464,770	0	619,693

Background

Currently, 10% of the state's Temporary Assistance for Needy Families (TANF) block grant is transferred to the Social Services Block Grant (SSBG). Allocations under SSBG/TANF include Human Resource Development (\$251,779), Human Resource Development - Hispanic Programs (\$260,610), and Anti-Hunger Programs (\$107,304).

Governor

Reduce General Fund appropriations by \$464,770 in FY 16 and \$619,693 in FY 17 to reflect the transfer of a portion of funding for Domestic Violence Shelters and Nutrition Assistance to SSBG/TANF funding. To make resources available for this transfer, SSBG/TANF support for Human Resource Development, Human Resource Development - Hispanic and Anti-Hunger programs is eliminated.

Legislative

Maintain funding for programs under SSBG/TANF.

Transfer Funding to Domestic Violence Shelters Account

Housing/Homeless Services	0	(5,210,676)	0	(5,210,676)	0	(5,210,676)	0	(5,210,676)
Domestic Violence Shelters	0	5,210,676	0	5,210,676	0	5,210,676	0	5,210,676
Total - General Fund	0	0	0	0	0	0	0	0

Legislative

Transfer funding of \$5,210,676 in both FY 16 and FY 17 to the new Domestic Violence Shelters account.

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Establish Family Services - TANF Account

Transportation for Employment Independence Program	0	(2,275,804)	0	(2,275,804)	0	(2,275,804)	0	(2,275,804)
Fatherhood Initiative	0	(509,991)	0	(509,991)	0	(509,991)	0	(509,991)
Family Programs - TANF	0	2,785,795	0	2,785,795	0	2,785,795	0	2,785,795
Total - General Fund	0	0	0	0	0	0	0	0

Legislative

Transfer funding of \$2,785,795 in both FY 16 and FY 17 from the Transportation for Employment Independence and Fatherhood Initiative Programs to the new Family Programs - TANF account. DSS shall utilize these funds as part of the claiming process for the federal TANF block grant.

Transfer Funding for Employment Transportation

Family Programs - TANF	0	(2,244,195)	0	(2,370,629)	0	(2,244,195)	0	(2,370,629)
Total - General Fund	0	(2,244,195)	0	(2,370,629)	0	(2,244,195)	0	(2,370,629)
Family Programs - TANF	0	2,244,195	0	2,370,629	0	2,244,195	0	2,370,629
Total - Special Transportation Fund	0	2,244,195	0	2,370,629	0	2,244,195	0	2,370,629

Legislative

Transfer funding of \$2,244,195 in FY 16 and \$2,370,629 in FY 17 to reflect supporting the Transportation for Employment Independence Program (TEIP) via the Transportation Fund, rather than the General Fund.

Transfer Medicaid Birth to Three Funding from DDS

Medicaid	0	7,250,000	0	7,250,000	0	0	0	0
Total - General Fund	0	7,250,000	0	7,250,000	0	0	0	0

Governor

Transfer funding of \$7,250,000 in FY16 and FY17 from the Department of Developmental Services (DDS) to reflect the Medicaid portion of funding in DSS. The remainder of the Birth to Three program is transferred to the Office of Early Childhood (OEC). It should be noted that the Medicaid account portion of the Birth to Three program funding is budgeted on a net basis in anticipation of a 50% Medicaid reimbursement. Total Birth to Three program funding of \$39.2 million will be available to provide services across both agencies.

Legislative

Same as Governor

Adjust Funding for Transfer of DPH Community Health Centers

Medicaid	0	1,550,000	0	1,550,000	0	(200,000)	0	(200,000)
Total - General Fund	0	1,550,000	0	1,550,000	0	(200,000)	0	(200,000)

Governor

Transfer funding of approximately \$4.4 million in both FY 16 and FY 17 from the Department of Public Health to the DSS Medicaid account for Community Health Centers (FQHC's). Due to net budgeting, \$1,750,000 is appropriated to the Medicaid account in FY 16 and FY 17 to reflect this transfer, and assumes a federal reimbursement rate of approximately 60%.

Legislative

Transfer funding of \$1,550,000 in both FY 16 and FY 17 from the Department of Public Health to the DSS Medicaid account for Community Health Centers (FQHC's).

Provide Funding for Bipartisan Health Care Plan

Other Expenses	0	800,000	0	900,000	0	800,000	0	900,000
Total - General Fund	0	800,000	0	900,000	0	800,000	0	900,000

Legislative

Provide funding of \$800,000 in FY 16 and \$900,000 in FY 17 to support the bipartisan hospital and healthcare plans related to PA 15-146, "AAC Hospitals, Insurers and Health Care Consumers."

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Transfer Child Care to OEC

Other Expenses	0	(113,276)	0	(113,276)	0	(113,276)	0	(113,276)
Total - General Fund	0	(113,276)	0	(113,276)	0	(113,276)	0	(113,276)

Legislative

Transfer funding of \$113,276 in both FY 16 and FY 17 to the Office of Early Childhood (OEC) to accurately reflect child care funding in OEC.

Rollout of FY 15 Rescissions and Reduce Various Accounts

Personal Services	0	(2,000,000)	0	(2,000,000)	0	0	0	0
HUSKY Performance Monitoring	0	(13,003)	0	(10,402)	0	(2,601)	0	0
Genetic Tests in Paternity Actions	0	(11,349)	0	(9,079)	0	(2,270)	0	0
Food Stamp Training Expenses	0	(750)	0	(600)	0	(150)	0	0
Healthy Start	0	(89,394)	0	(71,515)	0	(17,879)	0	0
Safety Net Services	0	(175,924)	0	(140,739)	0	(35,185)	0	0
Transportation for Employment Independence Program	0	(94,824)	0	(126,433)	0	31,609	0	0
Refunds Of Collections	0	(9,375)	0	(7,500)	0	(1,875)	0	0
Services for Persons With Disabilities	0	(37,625)	0	(30,100)	0	(7,525)	0	0
Nutrition Assistance	0	(29,979)	0	(23,983)	0	(5,996)	0	0
Community Services	0	(70,324)	0	(56,259)	0	(14,065)	0	0
Human Service Infrastructure Community Action Program	0	(215,833)	0	(172,666)	0	(43,167)	0	0
Teen Pregnancy Prevention	0	(114,835)	0	(91,868)	0	(22,967)	0	0
Fatherhood Initiative	0	(21,249)	0	(28,332)	0	7,083	0	0
Teen Pregnancy Prevention - Municipality	0	(8,614)	0	(6,891)	0	(1,723)	0	0
Community Services - Municipality	0	(5,235)	0	(4,188)	0	(1,047)	0	0
Total - General Fund	0	(2,898,313)	0	(2,780,555)	0	(117,758)	0	0

Background

The Governor Implemented General Fund rescissions totaling \$86.3 million across state agencies. The Governor's FY 16 and FY 17 budget includes the rollout of \$31.7 million of FY 15 rescissions across various state agencies.

Governor

Reduce funding by \$2,780,555 in FY 16 and FY17 to reflect the rollout of the Governor's FY 15 rescissions.

Legislative

Reduce funding by \$2,780,555 in FY 16 and FY17 to reflect the rollout of the Governor's FY 15 rescissions and additionally reduce various accounts by \$117,758 in FY 16.

Eliminate Inflationary Increases

Other Expenses	0	(503,296)	0	(1,156,328)	0	0	0	0
Total - General Fund	0	(503,296)	0	(1,156,328)	0	0	0	0

Governor

Reduce the Other Expenses account by \$503,296 in FY 16 and \$1,156,328 in FY 17 to reflect the elimination of inflationary increases.

Legislative

Same as Governor

Account	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount

Obtain Equipment through the CEPF

Equipment	0	(1)	0	(1)	0	0	0	0
Total - General Fund	0	(1)	0	(1)	0	0	0	0

Background

The Capital Equipment Purchase Fund (CEPF) is used by most executive branch agencies to purchase or lease equipment with a life span of at least five years. The state funds these purchases by issuing GO bonds with maturities of up to five years. The CEPF is authorized by CGS Sec. 4a-9 and administered by the Office of Policy and Management.

Governor

Remove funding for the purchase of various equipment items for the agency from the General Fund and provide funding for these items through the CEPF (Bond Funds).

Legislative

Same as Governor

Carry Forward

Carryforward Funding for Community Health Centers

Medicaid	0	0	0	517,500	0	0	0	517,500
Total - Carry Forward Funding	0	0	0	517,500	0	0	0	517,500

Background

The Connecticut Medicaid Quality Improvement and Shared Savings Program (MQISSP) aims to improve health outcomes and care experience of single-eligible Medicaid beneficiaries through arrangements with competitively selected, participating providers (FQHCs and "advanced networks") that will receive care coordination payments (FQHCs only) and a portion of any savings that are achieved (FQHCs and advanced networks), on the condition that they meet benchmarks on identified quality measures.

Legislative

Carry forward funding of \$517,500 from FY 16 to FY 17 for the Medicaid shared savings program for community health centers. Section 402 of PA 15-5 JSS, a budget implementer, authorized this carryforward.

Totals

Budget Components	Legislative				Difference from Governor Recommended			
	FY 16		FY 17		FY 16		FY 17	
	Pos.	Amount	Pos.	Amount	Pos.	Amount	Pos.	Amount
Governor Estimated - GF	1,982	3,114,518,834	1,982	3,114,518,834	0	0	0	0
Current Services	(7)	81,645,889	(7)	232,147,031	0	(70,232,500)	0	(56,260,000)
Policy Revisions	0	(30,227,622)	1	(103,336,736)	28	76,902,056	29	75,738,663
Total Recommended - GF	1,975	3,165,937,101	1,976	3,243,329,129	28	6,669,556	29	19,478,663
Governor Estimated - TF	0	0	0	0	0	0	0	0
Policy Revisions	0	2,244,195	0	2,370,629	0	2,244,195	0	2,370,629
Total Recommended - TF	0	2,244,195	0	2,370,629	0	2,244,195	0	2,370,629