

# Department of Social Services

## DSS60000

### Permanent Full-Time Positions

Fund	Actual FY 15	Actual FY 16	Appropriation FY 17	Governor Recommended		Legislative	
				FY 18	FY 19	FY 18	FY 19
General Fund	1,982	1,975	1,986	1,991	1,991	2,009	2,009

### Budget Summary

Account	Actual FY 15	Actual FY 16	Appropriation FY 17	Governor Recommended		Legislative	
				FY 18	FY 19	FY 18	FY 19
Personal Services	131,055,940	130,009,841	115,246,776	121,143,478	121,143,478	122,536,340	122,536,340
Other Expenses	134,950,660	149,965,328	144,502,439	151,773,905	151,918,341	143,029,224	146,570,860
<b>Other Current Expenses</b>							
HUSKY Performance Monitoring	156,040	134,979	158,143	-	-	-	-
Birth to Three	-	-	-	14,186,804	14,186,804	-	-
Genetic Tests in Paternity Actions	87,420	76,388	84,439	81,906	81,906	81,906	81,906
State-Funded Supplemental Nutrition Assistance Program	645,063	512,338	430,926	186,816	72,021	31,205	-
HUSKY B Program	29,122,731	5,928,386	4,350,000	5,060,000	5,320,000	5,060,000	5,320,000
Charter Oak Health Plan	100,000	-	-	-	-	-	-
<b>Other Than Payments to Local Governments</b>							
Medicaid	2,347,719,375	2,391,092,663	2,447,241,261	2,723,072,000	2,811,932,000	2,570,840,000	2,616,365,000
Old Age Assistance	37,320,760	37,815,756	38,833,056	38,492,929	38,011,302	38,506,679	38,026,302
Aid To The Blind	724,861	618,526	627,276	577,715	584,005	577,715	584,005
Aid To The Disabled	59,932,638	60,543,460	61,941,968	61,598,214	60,344,980	60,874,851	59,707,546
Temporary Family Assistance - TANF	102,478,267	90,077,812	89,936,233	79,609,273	79,607,523	70,131,712	70,131,712
Emergency Assistance	-	-	1	1	1	1	1
Food Stamp Training Expenses	7,038	5,583	10,136	9,832	9,832	9,832	9,832
Healthy Start	1,352,463	1,186,026	-	-	-	-	-
DMHAS-Disproportionate Share	108,935,000	108,935,000	108,935,000	108,935,000	108,935,000	108,935,000	108,935,000
Connecticut Home Care Program	43,113,894	43,537,058	40,190,000	39,180,000	37,930,000	42,090,000	46,530,000
Human Resource Development- Hispanic Programs	945,739	839,539	798,748	-	-	697,307	697,307
Community Residential Services	-	-	536,616,053	563,313,242	579,816,803	553,929,013	571,064,720
Protective Services to the Elderly	324,737	448,521	478,300	772,320	785,204	-	785,204
Safety Net Services	2,564,191	2,405,354	2,108,684	-	-	1,840,882	1,840,882
Transportation for Employment Independence Program	2,402,237	-	-	-	-	-	-
Refunds Of Collections	98,987	87,301	97,628	94,699	94,699	94,699	94,699
Services for Persons With Disabilities	535,807	486,105	477,130	370,253	370,253	370,253	370,253
Care4Kids TANF/CCDF	5,000,000	-	-	-	-	-	-
Nutrition Assistance	455,683	356,101	400,911	647,223	759,262	725,000	837,039
Housing/Homeless Services	5,210,676	-	-	-	-	-	-
State Administered General Assistance	22,702,018	22,449,707	22,816,579	20,411,807	20,267,722	19,431,557	19,334,722
Connecticut Children's Medical Center	25,579,200	13,963,390	13,048,630	12,657,171	12,657,171	11,391,454	10,125,737
Community Services	825,272	952,322	1,004,208	-	-	688,676	688,676
Human Service Infrastructure Community Action Program	3,270,516	3,190,614	2,736,957	7,141,735	7,356,756	2,994,488	3,209,509

Account	Actual FY 15	Actual FY 16	Appropriation FY 17	Governor Recommended		Legislative	
				FY 18	FY 19	FY 18	FY 19
Teen Pregnancy Prevention	1,745,510	1,511,245	1,456,227	-	-	1,271,286	1,271,286
Fatherhood Initiative	538,320	-	-	-	-	-	-
Programs for Senior Citizens	-	-	-	-	-	7,895,383	7,895,383
Family Programs - TANF	-	513,086	362,927	-	-	316,835	316,835
Domestic Violence Shelters	-	5,158,570	5,158,570	5,149,758	5,198,406	5,304,514	5,353,162
Hospital Supplemental Payments	-	-	40,042,700	-	-	598,440,138	496,340,138
<b>Grant Payments to Local Governments</b>							
Human Resource Development-Hispanic Programs - Municipality	5,364	4,964	4,719	-	-	4,120	4,120
Teen Pregnancy Prevention - Municipality	130,935	118,778	114,876	-	-	100,287	100,287
Community Services - Municipality	79,573	74,309	70,742	-	-	-	-
<b>Nonfunctional - Change to Accruals</b>	<b>(4,378,578)</b>	-	-	-	-	-	-
<b>Agency Total - General Fund</b>	<b>3,065,738,337</b>	<b>3,072,999,049</b>	<b>3,680,282,243</b>	<b>3,954,466,081</b>	<b>4,057,383,469</b>	<b>4,368,200,357</b>	<b>4,335,128,463</b>
Family Programs - TANF	-	2,177,383	2,370,629	-	-	-	-
<b>Agency Total - Special Transportation Fund</b>	<b>-</b>	<b>2,177,383</b>	<b>2,370,629</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
Fall Prevention	-	-	-	-	-	376,023	376,023
<b>Agency Total - Insurance Fund</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>376,023</b>	<b>376,023</b>
<b>Total - Appropriated Funds</b>	<b>3,065,738,337</b>	<b>3,075,176,432</b>	<b>3,682,652,872</b>	<b>3,954,466,081</b>	<b>4,057,383,469</b>	<b>4,368,576,380</b>	<b>4,335,504,486</b>
<b>Additional Funds Available</b>							
Carry Forward Funding	-	-	-	-	-	6,922,606	-
Federal Funds	-	4,105,078,023	4,205,192,552	4,358,770,717	4,501,474,099	4,377,619,560	4,520,322,942
Private Contributions & Other Restricted	-	330,227	364,608	364,608	364,608	364,608	364,608
Private Contributions	-	2,361,650	2,677,753	1,516,065	1,543,586	1,519,065	1,546,586
<b>Agency Grand Total</b>	<b>3,065,738,337</b>	<b>7,182,946,332</b>	<b>7,890,887,785</b>	<b>8,315,117,471</b>	<b>8,560,765,762</b>	<b>8,755,002,219</b>	<b>8,857,738,622</b>

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

## Policy Revisions

### Reduce Eligibility for Medicare Savings Program

Other Expenses	150,000	-	150,000	-	-	-
Medicaid	(29,600,000)	(39,500,000)	(20,500,000)	(61,500,000)	9,100,000	(22,000,000)
<b>Total - General Fund</b>	<b>(29,450,000)</b>	<b>(39,500,000)</b>	<b>(20,350,000)</b>	<b>(61,500,000)</b>	<b>9,100,000</b>	<b>(22,000,000)</b>

#### Background

The federal Medicare Savings Program (MSP) consists of three separate components: the Qualified Medicare Beneficiary (QMB), the Specified Low-Income Beneficiary (SLMB), and the Qualified Individual (QI) (also known as the Additional Low-Income Medicare Beneficiary (ALMB)). The QI program is fully federally funded. To qualify, individuals must be enrolled in Medicare Part A. Program participants get help from the state's Medicaid program with their Medicare cost sharing. Under federal rules, impacted individuals on MSP can retain the "Extra Help" they are receiving to assist with Medicare Part D drug costs for the balance of 2017, allowing them to participate in the open enrollment period (October 15 - December 7, 2017) and to choose the Part D plan that best meets their needs effective January 1, 2018.

The CHOICES program is managed by the State Department on Aging through a partnership with the Center for Medicare Advocacy and Connecticut's Area Agencies on Aging. Certified counselors across the state provide objective, free person-centered assistance so Medicare recipients can make informed choices about their benefits.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Governor**

Reduce funding by \$29.6 million in FY 18 and \$39.5 million in FY 19 in the Medicaid account to reflect reducing the income disregard used to determine eligibility to a range of \$352 to \$437 (the current disregard is between \$1,116 and \$1,502). The reduction will effectively reduce MSP eligibility from 211% to 246% FPL to between 135% and 170% FPL. The reduction is anticipated to impact 39,000 individuals; effective August 1, 2017. Impacted individuals will be responsible for Medicare Part B premiums, which are currently \$134 a month, and, for those enrolled in a QMB program, cost sharing requirements, which are estimated at \$111 a month. Total state savings (state and federal share) including revenue and adjustments is \$66.4 million in FY 18 and \$81.6 million in FY 19.

Funding of \$150,000 is provided in the Other Expenses account in FY 18 for the CHOICES program to assist individuals with transitioning.

**Legislative**

Reduce funding by \$20.5 million in FY 18 and \$61.5 million in FY 19 (with a corresponding revenue gain of \$33.4 million in FY 18 and \$68.5 million in FY 19) to reflect reducing income eligibility for the Medicare Savings Program (MSP) to the federal minimum. The reduction will effectively reduce MSP eligibility from 211% to 246%, to 100% to 135% FPL. The change could impact over 100,000 individuals; effective January 1, 2018. Sec. 50 of PA 17-2 JSS, the biennial budget act, is related to this change.

Funding of \$150,000 is provided in the Other Expenses account in FY 18 for the CHOICES program to assist individuals with transitioning.

**Reduce Medicaid to Achieve Savings**

Medicaid	-	-	(26,830,000)	(42,200,000)	(26,830,000)	(42,200,000)
<b>Total - General Fund</b>	-	-	<b>(26,830,000)</b>	<b>(42,200,000)</b>	<b>(26,830,000)</b>	<b>(42,200,000)</b>

**Legislative**

Reduce funding by \$26,830,000 in FY 18 and \$42,200,000 million in FY 19 in the Medicaid account to achieve savings.

**Reduce Income Eligibility for HUSKY A Adults**

Medicaid	(500,000)	(11,300,000)	(500,000)	(11,300,000)	-	-
<b>Total - General Fund</b>	<b>(500,000)</b>	<b>(11,300,000)</b>	<b>(500,000)</b>	<b>(11,300,000)</b>	<b>-</b>	<b>-</b>

**Governor**

Reduce funding by \$500,000 in FY 18 and \$11.3 million in FY 19 to reflect reducing income eligibility for HUSKY A adults from 155% FPL to 138% FPL. This is anticipated to impact approximately 400 individuals in FY 18 (effective August 2017) and an additional 8,800 individuals in FY 19 (effective August 2018). Total savings (both state and federal share) is estimated at \$1 million in FY 18 and \$22.6 million in FY 19. This does not impact pregnant women or children currently enrolled in HUSKY A.

**Legislative**

Same as Governor

**Adjust Funding for New Hospital Supplemental Payment Pools**

Medicaid	87,603,400	87,603,400	-	-	(87,603,400)	(87,603,400)
<b>Total - General Fund</b>	<b>87,603,400</b>	<b>87,603,400</b>	<b>-</b>	<b>-</b>	<b>(87,603,400)</b>	<b>(87,603,400)</b>

**Background**

The state currently provides general acute care hospitals with Medicaid supplemental payments based on the hospital's pro-rated share of total Medicaid inpatient net revenue, which is capped at \$50 million per hospital, for the purposes of determining the distribution of payments across eligible hospitals.

The proposal will provide Medicaid supplemental payments to all general acute care hospitals currently receiving supplemental payments, as well as specialty hospitals not eligible for the existing pool. These additional facilities include: Connecticut Children's Medical Center, Natchaug, Gaylord, Mount Sinai, Hospital for Special Care, Hebrew Home, and Connecticut Hospice. Total Medicaid revenue for these institutions is capped at \$15 million per facility, for the purposes of determining the distribution of payments across eligible hospitals

**Governor**

Provide funding of \$87,603,400 in both FY 18 and FY 19 to establish new hospital supplemental payment pools with payments distributed via the same distribution methodology as the existing inpatient supplemental payment pool. Total funding (state and federal share) is approximately \$250.3 million each year of the biennium; approximately \$239 million for general acute care hospitals and \$11.3 million for certain specialty hospitals. A separate proposal eliminates hospitals' existing exemption from municipal tax on real property.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

### Legislative

Maintain current supplemental pool and implement new hospital supplemental pools reflected in separate policy write-up pursuant to sections 11, 13-14 and 28 of PA 17-4 JSS.

### Eliminate Funding for Small Hospital Supplemental Pool

Hospital Supplemental Payments	(3,863,673)	(3,863,673)	-	-	3,863,673	3,863,673
<b>Total - General Fund</b>	<b>(3,863,673)</b>	<b>(3,863,673)</b>	<b>-</b>	<b>-</b>	<b>3,863,673</b>	<b>3,863,673</b>

### Background

The FY 16 - FY 17 Budget included funding of approximately \$14.8 million (\$4.9 million state, \$9.9 million federal) for small independent hospitals under the following criteria: (1) have 180 or fewer beds, (2) are not part of a hospital group, and (3) are not located in contiguous towns with another hospital. Six hospitals initially met the criteria: Bristol, Charlotte Hungerford, Day Kimball, Griffin, Johnson Memorial and Milford. Under the Medicaid state plan amendment submitted to the Centers for Medicare and Medicaid Services (CMS), hospitals become ineligible for funding from the small hospital pool following the completion of a merger or affiliation with another hospital group or an increase in the number of licensed beds to greater than 180. In the event a hospital becomes ineligible, the funding the hospital would have received is not redistributed to the remaining eligible hospitals. Johnson Memorial's distribution of the small hospital pool was subsequently eliminated due to the hospital being acquired by Trinity Health - New England. The Revised FY 17 Budget reflected the roll-out of a 5% reduction from PA 15-1 DSS and an elimination of Johnson Memorial's allocation. The resulting pool is approximately \$11.8 million (approximately \$3.9 million state, \$7.9 million federal) (which includes a 1% holdback).

### Governor

Reduce funding by \$3,863,673 in both FY 18 and FY 19 to reflect elimination of the small hospital supplemental pool.

### Legislative

Maintain funding for current supplemental pool.

### Transfer Hospital Supplemental Funding to Medicaid Account

Medicaid	35,778,600	35,778,600	-	-	(35,778,600)	(35,778,600)
Hospital Supplemental Payments	(35,778,600)	(35,778,600)	-	-	35,778,600	35,778,600
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

### Background

The Revised FY 17 Budget appropriated hospital inpatient supplemental payments, previously funded out of the Medicaid account into a separate account, the Hospital Supplemental Payments account.

### Governor

Transfer funding of \$35,778,600 in both FY 18 and FY 19 from the Hospital Supplemental Payments account to the Medicaid account. Funding in the Medicaid account is maintained at the FY 17 level.

### Legislative

Maintain hospital supplemental funding in the Hospital Supplemental Payments account.

### Provide Funding for Increased Hospital Payments

Medicaid	-	-	24,400,000	58,400,000	24,400,000	58,400,000
Hospital Supplemental Payments	-	-	561,800,000	459,700,000	561,800,000	459,700,000
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>586,200,000</b>	<b>518,100,000</b>	<b>586,200,000</b>	<b>518,100,000</b>

### Legislative

Provide funding of \$24.4 million in FY 18 and \$58.4 million in FY 19 for Medicaid provider rate increases effective January 1, 2018, which results in an increase of \$73 million in FY 18 and \$175.1 million in FY 19 after accounting for the federal match. Section 12 of PA 17-4 JSS implements the rate increase.

Provide funding of \$561.8 million in FY 18 and \$459.7 million in FY 19 for Hospital Supplemental Payments which reflects the state and federal share of hospital supplemental payments. Sections 11, 13-14 and 28 of PA 17-4 JSS implement the supplemental payment pools.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

### Provide Additional Small Hospital Funding

Hospital Supplemental Payments	-	-	1,000,000	1,000,000	1,000,000	1,000,000
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>1,000,000</b>	<b>1,000,000</b>	<b>1,000,000</b>	<b>1,000,000</b>

#### Legislative

Provide \$1 million in both FY 18 and FY 19 for the Small Hospital Supplemental Payment Pool, after accounting for federal reimbursement, the total supplemental pool for small hospitals in both FY 18 and FY 19 is \$12.8 million. Sections 11, 13-14 and 28 of PA 17-4 JSS are related to the hospital supplemental payments, including the small hospital pool.

### Supplemental Physician Rate to Dempsey

Medicaid	-	-	3,200,000	3,200,000	3,200,000	3,200,000
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>3,200,000</b>	<b>3,200,000</b>	<b>3,200,000</b>	<b>3,200,000</b>

#### Background

Effective for dates of service on or after July 1, 2017, DSS will make supplemental payments to the state-owned and operated University of Connecticut (UConn) Health Center's Physician Group for services provided by physicians employed or under contract to UConn. Supplemental payments will be made to UConn's physician group for eligible services for the difference, if any, between Medicaid payments already made to these providers and payments at applicable Medicare rates.

#### Legislative

Provide funding of \$3.2 million in both FY 18 and FY 19 to support a supplemental physician rate.

### Reduce Enhanced Reimbursement for Primary Care Providers

Medicaid	-	-	(2,750,000)	(3,800,000)	(2,750,000)	(3,800,000)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(2,750,000)</b>	<b>(3,800,000)</b>	<b>(2,750,000)</b>	<b>(3,800,000)</b>

#### Legislative

Reduce funding by \$2,750,000 in FY 18 and \$3,800,000 in FY 19 to reflect a reduction in the reimbursement rate for primary care providers.

### Cap Annual Benefit Amount for Medicaid Adult Dental Services

Medicaid	(2,000,000)	(2,500,000)	(2,000,000)	(2,500,000)	-	-
<b>Total - General Fund</b>	<b>(2,000,000)</b>	<b>(2,500,000)</b>	<b>(2,000,000)</b>	<b>(2,500,000)</b>	<b>-</b>	<b>-</b>

#### Governor

Reduce funding by \$2 million in FY 18 and \$2.5 million in FY 19 to reflect establishing an annual dental benefit of \$1,000 for Medicaid adults. This change will reduce total Medicaid expenditures (both the state and federal share) by \$6.4 million in FY 18 and \$7.9 million in FY 19 and is anticipated to impact approximately 16,200 Medicaid enrollees or 2.2% of the total average membership in FY 16. The cap does not apply to denture related costs and other services determined to be medically necessary.

#### Legislative

Same as Governor. Section 49 of PA 17-2 JSS, the biennial budget act, implements this change.

### Reduce Home Health Add-On Services

Medicaid	-	-	(2,100,000)	(1,700,000)	(2,100,000)	(1,700,000)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(2,100,000)</b>	<b>(1,700,000)</b>	<b>(2,100,000)</b>	<b>(1,700,000)</b>

#### Legislative

Reduce funding by \$2.1 million in FY 18 and \$1.7 million in FY 19 to reflect the elimination of enhanced reimbursement rates for certain home health services. Sections 558-572 of PA 17-2 JSS, the biennial budget act, are related to this change.

### Adjust Funding for Personal Needs Allowance

Medicaid	(1,000,000)	(1,100,000)	-	-	1,000,000	1,100,000
<b>Total - General Fund</b>	<b>(1,000,000)</b>	<b>(1,100,000)</b>	<b>-</b>	<b>-</b>	<b>1,000,000</b>	<b>1,100,000</b>

#### 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, a 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. The federal minimum is \$30 per month.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Governor**

Reduce funding by \$1 million in FY 18 and \$1.1 million in FY 19 to reflect reducing the PNA from \$60 to \$50 per month. The total state impact, including the federal share, is \$2 million in FY 18 and \$2.2 million in FY 19.

**Legislative**

Maintain funding to reflect the current PNA of \$60 per month.

**Adjust Funding for Medicare Part D Copay**

Medicaid	(80,000)	(90,000)	-	-	80,000	90,000
<b>Total - General Fund</b>	<b>(80,000)</b>	<b>(90,000)</b>	<b>-</b>	<b>-</b>	<b>80,000</b>	<b>90,000</b>

**Background**

Section 43 of PA 16-3 MSS, established a maximum copay of \$17 per month for Medicare Part D prescription drugs for certain dually-eligible beneficiaries (those clients eligible for both Medicare and Medicaid), and made the Department of Social Services responsible for any copayments exceeding the cap.

**Governor**

Eliminate funding of \$80,000 in FY 18 and \$90,000 in FY 19 to reflect elimination of the copay cap for dually-eligible individuals.

**Legislative**

Maintain funding to reflect the current copay cap of \$17 per month.

**Reduce Excess Capacity in Nursing Homes**

Medicaid	-	-	-	(800,000)	-	(800,000)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>(800,000)</b>	<b>-</b>	<b>(800,000)</b>

**Legislative**

Reduce funding by \$800,000 in FY 19 associated with reducing excess capacity in nursing homes.

**Support Nursing Homes in Receivership**

Medicaid	-	-	2,400,000	2,400,000	2,400,000	2,400,000
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>2,400,000</b>	<b>2,400,000</b>	<b>2,400,000</b>	<b>2,400,000</b>

**Legislative**

Provide funding of \$2.4 million in both FY 18 and FY 19 to support certain nursing homes in receivership.

**Claim Medicaid Reimbursement for DDS Specialized Services**

Medicaid	1,100,000	1,600,000	1,100,000	1,600,000	-	-
<b>Total - General Fund</b>	<b>1,100,000</b>	<b>1,600,000</b>	<b>1,100,000</b>	<b>1,600,000</b>	<b>-</b>	<b>-</b>

**Governor**

Transfer funding of \$1.1 million in FY 18 and \$1.6 million in FY 19 from the Department of Development Services (DDS) to claim federal reimbursement for specialized nursing home services currently provided with state funds (\$2.7 million).

**Legislative**

Same as Governor

**Eliminate Rate Increases**

Medicaid	(28,360,000)	(44,760,000)	(28,360,000)	(44,760,000)	-	-
Old Age Assistance	(593,565)	(1,196,545)	(593,565)	(1,196,545)	-	-
Aid To The Blind	(9,763)	(20,257)	(9,763)	(20,257)	-	-
Aid To The Disabled	(875,650)	(1,774,093)	(875,650)	(1,774,093)	-	-
<b>Total - General Fund</b>	<b>(29,838,978)</b>	<b>(47,750,895)</b>	<b>(29,838,978)</b>	<b>(47,750,895)</b>	<b>-</b>	<b>-</b>

**Governor**

Reduce funding by \$29,838,978 in FY 18 and \$47,750,895 in FY 19 to reflect the elimination of rate increases for nursing homes, intermediate care facilities and boarding homes.

**Legislative**

Same as Governor. Sections 41-47 of PA 17-2 JSS, the biennial budget act, implement the policy.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Suspend Funding for Cost of Living Adjustments**

Old Age Assistance	(84,159)	(248,576)	(84,159)	(248,576)	-	-
Aid To The Blind	(660)	(1,808)	(660)	(1,808)	-	-
Aid To The Disabled	(176,408)	(500,558)	(176,408)	(500,558)	-	-
Temporary Family Assistance - TANF	(1,035,171)	(3,051,763)	(1,035,171)	(3,051,763)	-	-
State Administered General Assistance	(232,268)	(681,036)	(232,268)	(681,036)	-	-
<b>Total - General Fund</b>	<b>(1,528,666)</b>	<b>(4,483,741)</b>	<b>(1,528,666)</b>	<b>(4,483,741)</b>	<b>-</b>	<b>-</b>

**Governor**

Reduce funding by \$1,528,666 in FY 18 and \$4,483,741 in FY 19 to reflect suspending cost of living adjustments (COLA) for the following programs: Old Age Assistance, Aid to the Blind, Aid to the Disabled, Temporary Family Assistance, and State Administered General Assistance.

**Legislative**

Same as Governor. Sections 40 and 569 of PA 17-2 JSS, the biennial budget act, are related to this change.

**Eliminate COLA Pass Through for State Supplemental Accounts**

Old Age Assistance	(385,000)	(838,000)	(385,000)	(838,000)	-	-
Aid To The Blind	(5,000)	(10,000)	(5,000)	(10,000)	-	-
Aid To The Disabled	(826,000)	(1,749,000)	(826,000)	(1,749,000)	-	-
<b>Total - General Fund</b>	<b>(1,216,000)</b>	<b>(2,597,000)</b>	<b>(1,216,000)</b>	<b>(2,597,000)</b>	<b>-</b>	<b>-</b>

**Background**

Currently, any cost of living adjustments (COLA) received as part of a client's Social Security benefit are retained by a client without a concurrent reduction in their state benefit. In the past, any COLA received was considered an increase in income and applied to the client's cost of care. This includes clients with support from the following state supplemental accounts: Old Age Assistance, Aid to the Blind, and Aid to the Disabled.

**Governor**

Reduce funding by \$1,216,000 in FY 18 and \$2,597,000 in FY 19 to reflect reinstating the state's prior policy of applying any federal COLA to offset the cost of care.

**Legislative**

Same as Governor. Section 569 of PA 17-2 JSS, the biennial budget act, is related to this change.

**Reflect Savings due to Licensure of Urgent Care Centers**

Medicaid	-	-	(200,000)	(800,000)	(200,000)	(800,000)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(200,000)</b>	<b>(800,000)</b>	<b>(200,000)</b>	<b>(800,000)</b>

**Legislative**

Reduce funding by \$200,000 in FY 18 and \$800,000 in FY 19 to reflect savings associated with the licensure of urgent care centers. Sections 674-675 of PA 17-2 JSS, the biennial budget act, are related to this initiative.

**Reduce Funding for CCMC**

Connecticut Children's Medical Center	-	-	(1,265,717)	(2,531,434)	(1,265,717)	(2,531,434)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(1,265,717)</b>	<b>(2,531,434)</b>	<b>(1,265,717)</b>	<b>(2,531,434)</b>

**Legislative**

Reduce funding by \$1,265,717 in FY 18 and \$2,531,434 in FY 19 for the Connecticut Children's Medical Center to achieve savings.

**Adjust Funding for CHCPE Category 1**

Connecticut Home Care Program	(2,180,000)	(6,290,000)	-	-	2,180,000	6,290,000
<b>Total - General Fund</b>	<b>(2,180,000)</b>	<b>(6,290,000)</b>	<b>-</b>	<b>-</b>	<b>2,180,000</b>	<b>6,290,000</b>

**Background**

PA 15-5 closed Category 1 of the Connecticut Home Care Program for Elders (CHCPE) to new applicants in FY 16 and FY 17.



Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Governor**

Reduce funding by \$2,180,000 in FY 18 and \$6,290,000 in FY 19 to reflect continuing to freeze intake to Category 1 under the state-funded home care program. This change assumes the denial of 25 individuals per month in FY 18 and 15 per month in FY 19 at an average monthly cost of \$825 per person.

**Legislative**

Maintain funding to support Category 1 participants.

**Adjust Funding for CHCPE Category 2**

Connecticut Home Care Program	(730,000)	(2,310,000)	-	-	730,000	2,310,000
<b>Total - General Fund</b>	<b>(730,000)</b>	<b>(2,310,000)</b>	<b>-</b>	<b>-</b>	<b>730,000</b>	<b>2,310,000</b>

**Governor**

Reduce funding by \$730,000 in FY 18 and \$2,310,000 in FY 19 to reflect limiting intake to Category 2 under the state-funded home care program to June 2017 levels. This change assumes denying 10 individuals per month at an average monthly cost of \$1,100 per person.

**Legislative**

Maintain funding to support Category 2 participants.

**Transfer Funds from DDS to Reflect Unit Closure**

Community Residential Services	900,000	900,000	-	-	(900,000)	(900,000)
<b>Total - General Fund</b>	<b>900,000</b>	<b>900,000</b>	<b>-</b>	<b>-</b>	<b>(900,000)</b>	<b>(900,000)</b>

**Background**

The Transitional Unit on the Meriden Regional Center Campus currently serves two individuals under court-ordered placements. The DDS budget no longer includes closing the Transitional Unit and to provide for existing consumers through private providers, which are funded through the Community Residential Services account in DSS.

**Governor**

Provide funding of \$900,000 in both FY 18 and FY 19 in the Community Residential Services account to support individuals from the Transitional Unit through private providers.

**Legislative**

Maintain the Transitional Unit and do not convert services for existing consumers to private providers.

**Reduce Burial Benefit**

Old Age Assistance	(13,750)	(15,000)	-	-	13,750	15,000
Aid To The Disabled	(27,500)	(30,000)	-	-	27,500	30,000
Temporary Family Assistance - TANF	(19,250)	(21,000)	-	-	19,250	21,000
State Administered General Assistance	(519,750)	(567,000)	-	-	519,750	567,000
<b>Total - General Fund</b>	<b>(580,250)</b>	<b>(633,000)</b>	<b>-</b>	<b>-</b>	<b>580,250</b>	<b>633,000</b>

**Background**

The Department of Social Services provides up to \$1,200 for funeral and burial expenses of indigent persons who pass away without the ability to pay for the cost of a funeral and burial. Sections 44 and 45 of PA 16-3 MSS reduced the burial benefit under the State Administered General Assistance, State Supplemental and Temporary Family Assistance programs from \$1,400 to \$1,200.

**Governor**

Reduce funding by \$580,250 in FY 18 and \$633,000 in FY 19 to reflect reducing the burial benefit from \$1,200 to \$900 for funeral, burial and cremation expenses.

**Legislative**

Maintain funding to reflect the current burial benefit of \$1,200.



Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Reallocate & Reduce Funding for New HSI Account**

Human Resource Development-Hispanic Programs	(774,786)	(774,786)	(77,479)	(77,479)	697,307	697,307
Safety Net Services	(2,045,424)	(2,045,424)	(204,542)	(204,542)	1,840,882	1,840,882
Community Services	(765,196)	(765,196)	(76,520)	(76,520)	688,676	688,676
Human Service Infrastructure Community Action Program	3,841,825	3,841,825	(265,485)	(265,485)	(4,107,310)	(4,107,310)
Teen Pregnancy Prevention	(1,412,540)	(1,412,540)	(141,254)	(141,254)	1,271,286	1,271,286
Family Programs - TANF	(352,039)	(352,039)	(35,204)	(35,204)	316,835	316,835
Human Resource Development-Hispanic Programs - Municipality	(4,578)	(4,578)	(458)	(458)	4,120	4,120
Teen Pregnancy Prevention - Municipality	(111,430)	(111,430)	(11,143)	(11,143)	100,287	100,287
<b>Total - General Fund</b>	<b>(1,624,168)</b>	<b>(1,624,168)</b>	<b>(812,085)</b>	<b>(812,085)</b>	<b>812,083</b>	<b>812,083</b>

**Governor**

Reallocate funding for various programs to the Human Service Infrastructure Community Action Program account, and reduce funding by \$1,624,168 in both FY 18 and FY 19.

**Legislative**

Maintain current funding structure and reduce funding by \$812,085 in both FY 18 and FY 19 to reflect a 10% reduction to community programs.

**Eliminate Funding for State-Funded SNAP**

State-Funded Supplemental Nutrition Assistance Program	-	-	(155,611)	(72,021)	(155,611)	(72,021)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(155,611)</b>	<b>(72,021)</b>	<b>(155,611)</b>	<b>(72,021)</b>

**Background**

The State Funded Supplemental Nutrition Assistance Program (SNAP), provides state-funded benefits for documented non-citizen adults who are not eligible for the federal SNAP, formerly known as the Food Stamp program, solely because of their citizenship status. Benefit levels under the state-funded program are equal to 75% of what the individual would have received under the federal program. After an eligible non-citizen is in the country for five years, they are eligible for benefits under the federal SNAP.

**Legislative**

Eliminate funding of \$155,611 in FY 18 and \$72,021 in FY 19 to reflect the elimination of state-funded SNAP.

**Eliminate Funding for HUSKY Performance Monitoring Account**

HUSKY Performance Monitoring	(109,119)	(109,119)	(109,119)	(109,119)	-	-
<b>Total - General Fund</b>	<b>(109,119)</b>	<b>(109,119)</b>	<b>(109,119)</b>	<b>(109,119)</b>	<b>-</b>	<b>-</b>

**Background**

The HUSKY Performance monitoring account funded a contract to provide analysis of trends in HUSKY enrollment, access to care and utilization of services. This level of program analysis is currently provided by the state Medicaid program's administrative services organization (ASO). The contractor funded through this account terminated their services in FY 17.

**Governor**

Eliminate funding of \$109,119 in both FY 18 and FY 19 for the HUSKY Performance Monitoring account.

**Legislative**

Same as Governor

**Achieve Efficiencies in Other Expenses**

Other Expenses	-	-	(302,800)	(605,600)	(302,800)	(605,600)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(302,800)</b>	<b>(605,600)</b>	<b>(302,800)</b>	<b>(605,600)</b>

**Legislative**

Reduce funding by \$302,800 in FY 18 and \$605,600 in FY 19 in the Other Expenses account to achieve efficiencies.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

### Reduce Funding for Various Programs

Services for Persons With Disabilities	(92,563)	(92,563)	(92,563)	(92,563)	-	-
Nutrition Assistance	(77,777)	(77,777)	-	-	77,777	77,777
<b>Total - General Fund</b>	<b>(170,340)</b>	<b>(170,340)</b>	<b>(92,563)</b>	<b>(92,563)</b>	<b>77,777</b>	<b>77,777</b>

#### Background

The Nutrition Assistance account provides funding for nutritional assistance to needy families and individuals through food pantries, outreach activities, and the Connecticut Food Bank, which provides high protein foods to food banks, food pantries and soup kitchens statewide.

The Services for the Disabled account includes funding for the following programs: Gaylord Farms Rehab Center, Brain Injury Alliance of CT, and Ability Beyond Disability.

#### Governor

Reduce funding by \$92,563 in both FY 18 and FY 19 for Services for Persons with Disabilities program. Reduce funding by \$77,777 in both FY 18 and FY 19 for the Nutrition Assistance program.

#### Legislative

Reduce funding by \$92,563 in both FY 18 and FY19 for Services for Persons with Disabilities. Maintain funding for Nutrition Assistance.

### Annualize FY 17 Rescissions

Other Expenses	-	-	(4,855,238)	(4,855,238)	(4,855,238)	(4,855,238)
Temporary Family Assistance - TANF	-	-	(4,496,811)	(4,496,811)	(4,496,811)	(4,496,811)
Human Service Infrastructure Community Action Program	-	-	(39,937)	(39,937)	(39,937)	(39,937)
Hospital Supplemental Payments	-	-	(2,002,135)	(2,002,135)	(2,002,135)	(2,002,135)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(11,394,121)</b>	<b>(11,394,121)</b>	<b>(11,394,121)</b>	<b>(11,394,121)</b>

#### Background

The Governor implemented General Fund rescissions totaling \$70.5 million across state agencies.

#### Legislative

Reduce funding by \$11,394,121 in both FY 18 and FY 19 to reflect the rollout of the Governor's FY 17 rescissions.

### Reduce Funding Based on FY 17 Expenditure Trends

Medicaid	-	-	(32,200,000)	(51,125,000)	(32,200,000)	(51,125,000)
Temporary Family Assistance - TANF	-	-	(5,000,000)	(5,000,000)	(5,000,000)	(5,000,000)
State Administered General Assistance	-	-	(1,000,000)	(1,000,000)	(1,000,000)	(1,000,000)
Hospital Supplemental Payments	-	-	(2,000,000)	(2,000,000)	(2,000,000)	(2,000,000)
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(40,200,000)</b>	<b>(59,125,000)</b>	<b>(40,200,000)</b>	<b>(59,125,000)</b>

#### Legislative

Reduce funding by \$40,200,000 in FY 18 and \$59,125,000 in FY 19 in various accounts to reflect expenditure trends.

### Annualize FY 17 Holdbacks

Personal Services	(1,152,467)	(1,152,467)	(1,152,467)	(1,152,467)	-	-
Other Expenses	(1,445,024)	(1,445,024)	(1,445,024)	(1,445,024)	-	-
HUSKY Performance Monitoring	(49,024)	(49,024)	(49,024)	(49,024)	-	-
Genetic Tests in Paternity Actions	(2,533)	(2,533)	(2,533)	(2,533)	-	-
State-Funded Supplemental Nutrition Assistance Program	(150,824)	(150,824)	(150,824)	(150,824)	-	-
Food Stamp Training Expenses	(304)	(304)	(304)	(304)	-	-
Human Resource Development-Hispanic Programs	(23,962)	(23,962)	(23,962)	(23,962)	-	-
Safety Net Services	(63,260)	(63,260)	(63,260)	(63,260)	-	-
Refunds Of Collections	(2,929)	(2,929)	(2,929)	(2,929)	-	-

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19
Services for Persons With Disabilities	(14,314)	(14,314)	(14,314)	(14,314)	-	-
Nutrition Assistance	(12,027)	(12,027)	(12,027)	(12,027)	-	-
Connecticut Children's Medical Center	(391,459)	(391,459)	(391,459)	(391,459)	-	-
Community Services	(239,012)	(239,012)	(239,012)	(239,012)	-	-
Human Service Infrastructure Community Action Program	(82,108)	(82,108)	(82,108)	(82,108)	-	-
Teen Pregnancy Prevention	(43,687)	(43,687)	(43,687)	(43,687)	-	-
Family Programs - TANF	(10,888)	(10,888)	(10,888)	(10,888)	-	-
Domestic Violence Shelters	(154,756)	(154,756)	-	-	154,756	154,756
Hospital Supplemental Payments	(400,427)	(400,427)	(400,427)	(400,427)	-	-
Human Resource Development-Hispanic Programs - Municipality	(141)	(141)	(141)	(141)	-	-
Teen Pregnancy Prevention - Municipality	(3,446)	(3,446)	(3,446)	(3,446)	-	-
Community Services - Municipality	(70,742)	(70,742)	(70,742)	(70,742)	-	-
<b>Total - General Fund</b>	<b>(4,313,334)</b>	<b>(4,313,334)</b>	<b>(4,158,578)</b>	<b>(4,158,578)</b>	<b>154,756</b>	<b>154,756</b>

**Background**

The Governor implemented FY 17 holdbacks totaling \$149.5 million. The Governor's FY 18 and FY 19 Budget annualizes \$81.7 million of the FY 17 holdbacks in FY 18 and \$81.8 million in FY 19 across various agencies.

**Governor**

Reduce funding by \$4,313,334 in both FY 18 and FY 19 to annualize FY 17 holdbacks.

**Legislative**

Reduce funding by \$4,158,578 in both FY 18 and FY 19 to annualize FY 17 holdbacks. Funding for Domestic Violence Shelters is maintained.

**Transfer State Dept. of Aging to DSS**

Personal Services	-	-	1,922,031	1,922,031	1,922,031	1,922,031
Other Expenses	-	-	113,357	113,357	113,357	113,357
Programs for Senior Citizens	-	-	7,895,383	7,895,383	7,895,383	7,895,383
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>9,930,771</b>	<b>9,930,771</b>	<b>9,930,771</b>	<b>9,930,771</b>
<b>Positions - General Fund</b>	<b>-</b>	<b>-</b>	<b>23</b>	<b>23</b>	<b>23</b>	<b>23</b>
Fall Prevention	-	-	376,023	376,023	376,023	376,023
<b>Total - Insurance Fund</b>	<b>-</b>	<b>-</b>	<b>376,023</b>	<b>376,023</b>	<b>376,023</b>	<b>376,023</b>

**Legislative**

Transfer funding of \$9,930,771 and 23 positions in the General Fund and \$376,023 in the Insurance Fund in both FY 18 and FY 19 to reflect the transfer of the State Department of Aging to the Department of Social Services. Sections 278-319 and 732 of PA 17-2 JSS, the biennial budget act, are related to the transfer.

**Transfer Medicaid Birth to Three Funding from OEC**

Personal Services	529,169	529,169	-	-	(529,169)	(529,169)
Birth to Three	14,186,804	14,186,804	-	-	(14,186,804)	(14,186,804)
Medicaid	5,250,000	5,250,000	5,250,000	5,250,000	-	-
<b>Total - General Fund</b>	<b>19,965,973</b>	<b>19,965,973</b>	<b>5,250,000</b>	<b>5,250,000</b>	<b>(14,715,973)</b>	<b>(14,715,973)</b>
<b>Positions - General Fund</b>	<b>5</b>	<b>5</b>	<b>-</b>	<b>-</b>	<b>(5)</b>	<b>(5)</b>

**Governor**

Transfer funding of \$19,965,973 in both FY 18 and FY 19 to reflect the transfer of the Birth to Three program from the Office of Early Childhood (OEC) to the Department of Social Services (DSS). Funding reflects program staff, provider contracts, as well as Medicaid-related service funding. Total funding of \$25,215,973 is transferred out of Birth to Three, while \$20 million is transferred into DSS due to the net appropriation of the Medicaid account (the transfer shows Medicaid funding of \$5.25 million transferred into the DSS General Fund account, while full Medicaid funding of \$10.5 million will be distributed to providers).

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Legislative**

Transfer funding of \$5,250,000 in both FY 18 and FY 19 from the Office of Early Childhood (OEC) to reflect Medicaid related Birth to Three funding in the DSS Medicaid account. Due to net budgeting, the OEC budget reflects a transfer of \$10.5 million (the full cost) in both years.

**Transfer Transportation to Work Funding to DOT**

Family Programs - TANF	(2,370,629)	(2,370,629)	(2,370,629)	(2,370,629)	-	-
<b>Total - Special Transportation Fund</b>	<b>(2,370,629)</b>	<b>(2,370,629)</b>	<b>(2,370,629)</b>	<b>(2,370,629)</b>	<b>-</b>	<b>-</b>

**Governor**

Transfer funding of \$2,370,629 in both FY 18 and FY 19 to reflect transferring the Transportation to Work program to the Department of Transportation, who currently administers the program.

**Legislative**

Same as Governor

**Provide TANF/SSBG Funding to CCDF**

Nutrition Assistance	336,116	448,155	336,116	448,155	-	-
Human Service Infrastructure	1,350,717	1,800,956	1,350,717	1,800,956	-	-
Community Action Program						
Domestic Violence Shelters	145,944	194,592	145,944	194,592	-	-
<b>Total - General Fund</b>	<b>1,832,777</b>	<b>2,443,703</b>	<b>1,832,777</b>	<b>2,443,703</b>	<b>-</b>	<b>-</b>

**Background**

Connecticut receives \$266.8 million per year under the Temporary Assistance for Needy Families (TANF) block grant and transfers 10% of this amount to the Social Services Block Grant (SSBG). Currently, SSBG/TANF funding is allocated to the Departments of Social Services (DSS), Housing (DOH), and Children and Families (DCF), as well as the Office of Early Childhood (OEC). The accounting period for the federal government begins on October 1 and ends on September 30.

**Governor**

Shift SSBG/TANF funding of \$7,735,567 in FY 18 and \$10,314,089 in FY 19 from the current SSBG/TANF recipient agencies (DSS, DOH and DCF) to the Child Care and Development Fund (CCDF) under OEC. This shift will have no net impact on revenue, or General Fund appropriations, and will not result in any reduction in services. Provide General Fund support to the former SSBG/TANF recipient agencies of \$7,735,567 in FY 18 and \$10,314,089 in FY 19 and decrease OEC General Fund support by equal amounts. This includes funding of \$1,832,777 (partial year due to federal accounting period) and \$2,443,703 (full-year) to DSS. (See the General Fund accounts in the table below for further detail.) The purpose of this shift is to simplify administrative activities related to provision of block grant-funded services for all agencies involved.

**General Fund Appropriations Related to SSBG/TANF Shift**

Agency	FY 18	FY 19
Department of Housing	3,495,579	4,660,772
Department of Social Services	1,832,777	2,443,703
Department of Children and Families	2,407,211	3,209,614
Office of Early Childhood	(7,735,567)	(10,314,089)
<b>TOTAL</b>	<b>-</b>	<b>-</b>

**Legislative**

Same as Governor

**Utilize SSBG to Fund Protective Services for the Elderly**

Protective Services to the Elderly	-	-	(772,320)	-	(772,320)	-
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>(772,320)</b>	<b>-</b>	<b>(772,320)</b>	<b>-</b>

**Legislative**

Reduce funding by \$772,320 in FY 18 to reflect supporting the Protective Services for the Elderly program with Social Services Block Grant (SSBG) funding.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Shift Funding to Social Services Block Grant (SSBG)**

Human Service Infrastructure	(422,673)	(563,564)	(422,673)	(563,564)	-	-
Community Action Program						
<b>Total - General Fund</b>	<b>(422,673)</b>	<b>(563,564)</b>	<b>(422,673)</b>	<b>(563,564)</b>	<b>-</b>	<b>-</b>

**Governor**

Reduce funding by \$422,673 in FY 18 and \$563,564 in FY 19 to reflect Social Services Block Grant (SSBG) support for the HSI program. This reflects a 5% reduction to existing SSBG funding.

**Legislative**

Same as Governor

**Reallocate Funding for the 211 Infoline Contract**

Other Expenses	282,983	377,310	282,983	377,310	-	-
Human Service Infrastructure	(282,983)	(377,310)	(282,983)	(377,310)	-	-
Community Action Program						
<b>Total - General Fund</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>

**Governor**

Reallocate funding of \$282,983 in FY 18 and \$377,310 in FY 19 to consolidate funding for the 211 Infoline Contract in the Other Expenses account.

**Legislative**

Same as Governor

**Current Services**

**Update Current Services- Medicaid**

Medicaid	98,645,939	159,135,939	98,645,939	159,135,939	-	-
<b>Total - General Fund</b>	<b>98,645,939</b>	<b>159,135,939</b>	<b>98,645,939</b>	<b>159,135,939</b>	<b>-</b>	<b>-</b>

**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.

**Governor**

Provide funding of \$98,645,939 in FY 18 and \$159,135,939 in FY 19 to reflect current services requirements for the Medicaid program. This update reflects caseload, utilization and associated costs, as well as processing and contractual-related savings.

**Legislative**

Same as Governor

**Provide Funding for HUSKY D Reimbursement Changes**

Medicaid	59,120,000	87,240,000	59,120,000	87,240,000	-	-
<b>Total - General Fund</b>	<b>59,120,000</b>	<b>87,240,000</b>	<b>59,120,000</b>	<b>87,240,000</b>	<b>-</b>	<b>-</b>

**Background**

Under the Affordable Care Act, reimbursement for the Medicaid expansion population (HUSKY D ) was reduced from 100% in calendar year 2016, to 95% in 2017. This reimbursement rate is scheduled to be further reduced to 94% in 2018 and 93% in 2019.

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Governor**

Provide funding of \$59,120,000 in FY 18 and \$87,240,000 in FY 19 to reflect additional funding requirements due to changes in federal reimbursement for the HUSKY D population. This reflects the phasing down of the federal reimbursement from 95% in calendar year 2017 to 93% in 2019. Funding is also increased to reflect the percentage of HUSKY D enrollees who are estimated not to be considered newly eligible for the enhanced match, per federal law.

**Legislative**

Same as Governor

**Provide Funding for Medicare Part D Clawback Payment**

Medicaid	18,690,000	33,990,000	14,090,000	19,790,000	(4,600,000)	(14,200,000)
<b>Total - General Fund</b>	<b>18,690,000</b>	<b>33,990,000</b>	<b>14,090,000</b>	<b>19,790,000</b>	<b>(4,600,000)</b>	<b>(14,200,000)</b>

**Background**

The Medicare Part D clawback payment is the monthly cost-sharing payment to the federal government for the Medicare Part D prescription drug program for dually-eligible beneficiaries. A state's monthly clawback amount is calculated by multiplying its monthly Part D dual-eligible enrollment by CMS's estimate of the state's share of its per capita expenditure (PCE) for Medicaid-covered drugs for dual-eligible persons. Part D expenditures have increased in recent years with the availability of new specialty drugs (such as those for Hepatitis C), growth in prescription drug utilization, and rising drug prices overall.

**Governor**

Provide funding of \$18,690,000 in FY 18 and \$33,990,000 in FY 19 for increases in the Medicare Part D clawback payment.

**Legislative**

Provide funding of \$14,090,000 in FY 18 and \$19,790,000 in FY 19 for increases in the Medicare Part D clawback payment.

**Update Current Services- Autism Services**

Medicaid	6,312,800	12,102,800	6,312,800	12,102,800	-	-
<b>Total - General Fund</b>	<b>6,312,800</b>	<b>12,102,800</b>	<b>6,312,800</b>	<b>12,102,800</b>	<b>-</b>	<b>-</b>

**Governor**

Provide funding of \$6,312,800 in FY 18 and \$12,102,800 in FY 19 to reflect the annualization of costs for coverage of autism services under the Medicaid state plan.

**Legislative**

Same as Governor

**Annualize FY 17 Savings Related to Children Dental Rates**

Medicaid	(620,000)	(620,000)	(620,000)	(620,000)	-	-
<b>Total - General Fund</b>	<b>(620,000)</b>	<b>(620,000)</b>	<b>(620,000)</b>	<b>(620,000)</b>	<b>-</b>	<b>-</b>

**Governor**

Reduce funding by \$620,000 in both FY 18 and FY 19 to reflect the annualization of the savings related to changes in children's dental health rates, including a 2% reduction to the pediatric dental fee schedule and reductions to rates for sealants, crowns, and periodic orthodontia care.

**Legislative**

Same as Governor

**Reflect Savings from Electronic Visit Verification (EVV)**

Medicaid	(3,630,000)	(4,930,000)	(3,630,000)	(4,930,000)	-	-
<b>Total - General Fund</b>	<b>(3,630,000)</b>	<b>(4,930,000)</b>	<b>(3,630,000)</b>	<b>(4,930,000)</b>	<b>-</b>	<b>-</b>

**Background**

DSS has contracted with Hewlett Packard Enterprise and Sandata Technologies, LLC. to implement Electronic Visit Verification (EVV). EVV is a telephonic and computer-based system designed to allow in-home scheduling, tracking and billing for home-based care. Implementation for non-medical home-care providers was effective January 1, 2017, while implementation for medical home-health providers will be effective April 1, 2017.



Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Governor**

Reduce funding by \$3,630,000 in FY 18 and \$4,930,000 in FY 19 to reflect the full implementation of EVV.

**Legislative**

Same as Governor

**Provide Funding for PCMH+ Quality Payments**

Medicaid	1,700,000	2,100,000	1,350,000	1,350,000	(350,000)	(750,000)
<b>Total - General Fund</b>	<b>1,700,000</b>	<b>2,100,000</b>	<b>1,350,000</b>	<b>1,350,000</b>	<b>(350,000)</b>	<b>(750,000)</b>

**Background**

In January 2017, DSS began implementing a new program called Person-Centered Medical Home Plus or PCMH+. PCMH+ provides person-centered, comprehensive and coordinated care for Medicaid beneficiaries. Federally Qualified Health Centers (FQHCs) and advanced network lead entities (on behalf of advanced networks) were asked to participate via an RFP issued in June of 2016. Selected FQHCs and Advanced Networks are required to provide care coordination activities to improve the quality, efficiency, and effectiveness of care delivered to Medicaid beneficiaries. Shared savings payments as well as add-on quality payments are provided to participating entities who achieve the quality outcome measures required of the program as well as primary care case management services. The PCMH+ Program came out of the initiatives of the State Innovation Model Program (SIM).

The SIM was initiated under 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 SIM. SIM's purpose is to align all health care 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 \$1.7 million in FY 18 and \$2.1 million in FY 19 for PCMH+ quality payments.

**Legislative**

Provide funding of \$1,350,000 in both FY 18 and FY 19 for PCMH+ quality payments.

**Adjust Funding for Nursing Home Fair Rent**

Medicaid	(940,000)	(70,000)	(940,000)	(70,000)	-	-
<b>Total - General Fund</b>	<b>(940,000)</b>	<b>(70,000)</b>	<b>(940,000)</b>	<b>(70,000)</b>	<b>-</b>	<b>-</b>

**Governor**

Reduce funding by \$940,000 in FY 18 and \$70,000 in FY 19 to reflect both fair rent additions and the annualization of adjustments.

**Legislative**

Same as Governor

**Update Current Services- CT Home Care Program for Elders**

Connecticut Home Care Program	1,900,000	6,340,000	1,900,000	6,340,000	-	-
<b>Total - General Fund</b>	<b>1,900,000</b>	<b>6,340,000</b>	<b>1,900,000</b>	<b>6,340,000</b>	<b>-</b>	<b>-</b>

**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.

**Governor**

Provide funding by \$1.9 million in FY 18 and \$6,340,000 in FY 19 to reflect anticipated expenditure requirements under the CHCPE. This assumes average monthly caseload of 3,435 in FY 18 and 3,790 in FY 19, up from an estimated 3,250 in FY 17.

**Legislative**

Same as Governor



Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

### Update Current Services-Protective Services for the Elderly

Protective Services to the Elderly	294,020	306,904	294,020	306,904	-	-
<b>Total - General Fund</b>	<b>294,020</b>	<b>306,904</b>	<b>294,020</b>	<b>306,904</b>	<b>-</b>	<b>-</b>

#### Background

The Protective Services for the Elderly Program is designed to safeguard people 60 years and older from physical, mental and emotional abuse, neglect and abandonment and/or financial abuse and exploitation. The Department of Social Services social workers devise a plan of care aimed at assuring an elder's safety while preserving the person's right of self-determination. Staff may help the person remain in the living situation he or she prefers, safeguard legal rights, prevent bodily injury or harm, determine service needs and then mobilize resources to provide necessary services.

#### Governor

Provide funding of \$294,020 in FY 18 and \$306,904 in FY 19 for the Protective Services for the Elderly current requirements.

#### Legislative

Same as Governor

### Update Current Services-State Supplemental Programs

Old Age Assistance	58,623	31,246	58,623	31,246	-	-
Aid To The Blind	(44,561)	(33,271)	(44,561)	(33,271)	-	-
Aid To The Disabled	(491,405)	(819,139)	(491,405)	(819,139)	-	-
<b>Total - General Fund</b>	<b>(477,343)</b>	<b>(821,164)</b>	<b>(477,343)</b>	<b>(821,164)</b>	<b>-</b>	<b>-</b>

#### Background

State Supplemental programs consist of Old Age Assistance, Aid to the Blind, Aid to the Disabled. These programs provide monthly financial assistance to low-income individuals. These 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 federal Social Security, Supplemental Security Income, or Veteran's Benefits. All recipients are automatically eligible for health care benefits under the state's Medicaid program.

#### Governor

Reduce funding by \$477,343 in FY 18 and \$821,164 in FY 19 based on current requirements.

#### Legislative

Same as Governor

### Provide Funding for Statutory Rate Increases

Medicaid	28,360,000	44,760,000	28,360,000	44,760,000	-	-
Old Age Assistance	593,565	1,196,545	593,565	1,196,545	-	-
Aid To The Blind	9,763	20,257	9,763	20,257	-	-
Aid To The Disabled	875,650	1,774,093	875,650	1,774,093	-	-
<b>Total - General Fund</b>	<b>29,838,978</b>	<b>47,750,895</b>	<b>29,838,978</b>	<b>47,750,895</b>	<b>-</b>	<b>-</b>

#### Governor

Provide funding of \$29,838,978 in FY 18 and \$47,750,895 in FY 19 to reflect rate increases. This funding is eliminated in a separate policy action.

#### Legislative

Same as Governor

### Provide Funding for Cost of Living Adjustments

Old Age Assistance	84,159	248,576	84,159	248,576	-	-
Aid To The Blind	660	1,808	660	1,808	-	-
Aid To The Disabled	176,408	500,558	176,408	500,558	-	-
Temporary Family Assistance - TANF	1,035,171	3,051,763	1,035,171	3,051,763	-	-
State Administered General Assistance	232,268	681,036	232,268	681,036	-	-
<b>Total - General Fund</b>	<b>1,528,666</b>	<b>4,483,741</b>	<b>1,528,666</b>	<b>4,483,741</b>	<b>-</b>	<b>-</b>

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Governor**

Provide funding of \$1,528,666 in FY 18 and \$4,483,741 in FY 19 for cost of living adjustments (COLA) effective 7/1/17 and 7/1/18 for the following programs: Old Age Assistance, Aid to the Blind, Aid to the Disabled, Temporary Family Assistance, State Administered General Assistance. This funding is eliminated in a separate policy action.

**Legislative**

Same as Governor

**Annualize FY 17 Funding For Community Residential Services**

Community Residential Services	7,178,743	7,178,743	6,178,743	6,178,743	(1,000,000)	(1,000,000)
<b>Total - General Fund</b>	<b>7,178,743</b>	<b>7,178,743</b>	<b>6,178,743</b>	<b>6,178,743</b>	<b>(1,000,000)</b>	<b>(1,000,000)</b>

**Background**

Annualization refers to providing the amount of resources necessary for a 12 month period of operation.

Community Residential Services are provided for certain Department of Developmental Services (DDS) consumers including: (1) those aging out of services provided by Department of Children and Families, Local Education Agencies and the DDS Behavioral Services Program, (2) long-term care community placements under Money Follows the Person, (3) Southbury Training School community placements and (4) court-ordered placements.

**Governor**

Provide funding of \$7,178,743 in both FY 18 and FY 19 to reflect full year funding for residential services initiated in FY 17 and supported through the Community Residential Services account.

**Legislative**

Provide funding of \$6,178,743 in both FY 18 and FY 19 to reflect updated full year funding for residential services initiated in FY 17 and supported through the Community Residential Services account.

**Provide Funds for New Community Residential Services**

Community Residential Services	9,237,783	25,741,344	9,237,783	25,741,344	-	-
<b>Total - General Fund</b>	<b>9,237,783</b>	<b>25,741,344</b>	<b>9,237,783</b>	<b>25,741,344</b>	<b>-</b>	<b>-</b>

**Background**

Community Residential Services are provided for certain DDS consumers including : (1) those aging out of services provided by Department of Children and Families, Local Education Agencies and the DDS Behavioral Services Program, (2) long-term care community placements under Money Follows the Person, (3) Southbury Training School community placements and (4) court-ordered placements.

**Governor**

Provide funding of \$9,237,783 in FY 18 and \$25,741,344 in FY 19 to support 166 new individuals in FY 18 and 153 additional individuals in FY 19 in Community Residential Placements.

**Legislative**

Same as Governor

**Annualize FY 17 Funding for DDS Closures and Conversions**

Aid To The Disabled	1,001,151	1,001,151	250,288	333,717	(750,863)	(667,434)
Community Residential Services	9,380,663	9,380,663	1,896,434	2,528,580	(7,484,229)	(6,852,083)
<b>Total - General Fund</b>	<b>10,381,814</b>	<b>10,381,814</b>	<b>2,146,722</b>	<b>2,862,297</b>	<b>(8,235,092)</b>	<b>(7,519,517)</b>

**Background**

Annualization refers to providing the amount of resources necessary for a 12 month period of operation.

The FY 17 Agency Spending Plan included the closure of Ella Grasso Regional Center in Stratford and the Meriden Regional Center and the conversion of 40 DDS run group homes to private provider group homes. The Ella Grasso Regional Center and the Meriden Regional Center residential units have been closed and residents transferred to other settings. Additionally, in FY 17 ten DDS group homes were converted to private providers and two DDS homes were closed, while the remaining 28 were placed on hold. The agency plans to proceed with the conversion of 10 homes in FY 18. The state receives a 50% federal reimbursement for Medicaid waived programs and ICF/IID beds

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Governor**

Provide funding of \$9,380,663 in both FY 18 and FY 19 in the Community Residential Services account and \$1,001,151 in both FY 18 and FY 19 in the Aid to the Disabled account to support room and board costs. This funding supports DDS consumers moving from public to private provider settings as a result of closures and conversions initiated in FY 17.

**Legislative**

Provide funding of \$1,896,434 in FY 18 and \$2,528,580 FY 19 in the Community Residential Services account and \$250,288 in FY 18 and \$333,717 in FY 19 in the Aid to the Disabled account to support room and board costs. This funding supports DDS consumers moving from public to private provider settings as a result of closures and conversions initiated in FY 17.

**Update Current Services-SAGA**

State Administered General Assistance	(1,885,022)	(1,981,857)	(2,385,022)	(2,481,857)	(500,000)	(500,000)
<b>Total - General Fund</b>	<b>(1,885,022)</b>	<b>(1,981,857)</b>	<b>(2,385,022)</b>	<b>(2,481,857)</b>	<b>(500,000)</b>	<b>(500,000)</b>

**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 receive an average of \$219 a month.

**Governor**

Reduce funding by \$1,885,022 in FY 18 and \$1,981,857 in FY 19 for the SAGA program based on updated caseload requirements.

**Legislative**

Reduce funding by \$2,385,022 in FY 18 and \$2,481,857 in FY 19 for the SAGA program based on updated caseload requirements.

**Update Current Services- Temporary Family Assistance**

Temporary Family Assistance - TANF	(10,307,710)	(10,307,710)	(10,307,710)	(10,307,710)	-	-
<b>Total - General Fund</b>	<b>(10,307,710)</b>	<b>(10,307,710)</b>	<b>(10,307,710)</b>	<b>(10,307,710)</b>	<b>-</b>	<b>-</b>

**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 15,600 in FY 16 with an average cost per case of \$481. For December 2017, caseload totaled 13,781 with an average cost per case of \$477.

**Governor**

Reduce funding by \$10,307,710 in both FY 18 and FY 19 to reflect anticipated expenditure requirements in the TFA program.

**Legislative**

Same as Governor

**Update Current Services- HUSKY B**

HUSKY B Program	710,000	970,000	710,000	970,000	-	-
<b>Total - General Fund</b>	<b>710,000</b>	<b>970,000</b>	<b>710,000</b>	<b>970,000</b>	<b>-</b>	<b>-</b>

**Background**

The HUSKY B Program provides health coverage for children of families with incomes in excess of 201% of the Federal Poverty Level (FPL) up to 323% FPL. HUSKY program expenditures typically receive 65% federal reimbursement. From October 1, 2015 through September 30, 2019, the reimbursement rate is increased to 88%.

**Governor**

Provide funding of \$710,000 in FY 18 and \$970,000 in FY 19 to reflect updated cost and caseload requirements.

**Legislative**

Same as Governor

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

### Update Current Services- State Funded SNAP

State-Funded Supplemental Nutrition Assistance Program	(93,286)	(208,081)	(93,286)	(208,081)	-	-
<b>Total - General Fund</b>	<b>(93,286)</b>	<b>(208,081)</b>	<b>(93,286)</b>	<b>(208,081)</b>	<b>-</b>	<b>-</b>

#### Background

The State Funded Supplemental Nutrition Assistance Program (SNAP), provides state-funded benefits for documented non-citizen adults who are not eligible for the federal SNAP, formerly known as the Food Stamp program, solely because of their citizenship status. Benefit levels under the state-funded program are equal to 75% of what the individual would have received under the federal program. After an eligible non-citizen is in the country for five years, they are eligible for benefits under the federal SNAP.

#### Governor

Reduce funding by \$93,286 in FY 18 and \$208,081 in FY 19 for the state-funded SNAP program based on current requirements.

#### Legislative

Same as Governor

### Update Current Services-Other Expenses and Personal Services

Personal Services	6,520,000	6,520,000	6,520,000	6,520,000	-	-
Other Expenses	(3,092,239)	(2,443,284)	(3,092,239)	(2,443,284)	-	-
<b>Total - General Fund</b>	<b>3,427,761</b>	<b>4,076,716</b>	<b>3,427,761</b>	<b>4,076,716</b>	<b>-</b>	<b>-</b>

#### Governor

Provide funding of \$6,520,000 in both FY 18 and FY 19 in the Personal Services account predominately due to staff costs related to the timely processing of Medicaid application requirements. Reduce funding by \$3,092,239 in FY 18 and \$2,443,284 in FY 19 in the Other Expenses account predominately due to reductions in contractual expenses.

#### Legislative

Same as Governor

### Provide Funding for Continued Operation of ImpaCT

Other Expenses	11,375,746	10,926,900	7,675,746	10,926,900	(3,700,000)	-
<b>Total - General Fund</b>	<b>11,375,746</b>	<b>10,926,900</b>	<b>7,675,746</b>	<b>10,926,900</b>	<b>(3,700,000)</b>	<b>-</b>

#### Background

ImpaCT is the new web-based eligibility system for the Department of Social Services (DSS), piloted in October 2016.

#### Governor

Provide funding of \$11,375,746 in FY 18 and \$10,926,900 in FY 19 to continue support for the operation and maintenance of ImpaCT.

#### Legislative

Provide funding of \$7,675,746 in FY 18 and \$10,926,900 in FY 19 to continue support for the operation and maintenance of ImpaCT.

## Carry Forward

### Carry Forward for Community Residential Services

Community Residential Services	-	-	3,400,000	-	3,400,000	-
<b>Total - Carry Forward Funding</b>	<b>-</b>	<b>-</b>	<b>3,400,000</b>	<b>-</b>	<b>3,400,000</b>	<b>-</b>

#### Legislative

Pursuant to CGS 4-89(c), funding of \$3.4 million is carried forward in the Community Residential Services account to support one-time start-up costs related to CLA conversions that were slated for FY 17 but will now occur in FY 18.

### Carry Forward for Other Expenses

Other Expenses	-	-	3,522,606	-	3,522,606	-
<b>Total - Carry Forward Funding</b>	<b>-</b>	<b>-</b>	<b>3,522,606</b>	<b>-</b>	<b>3,522,606</b>	<b>-</b>

Account	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19

**Legislative**

Pursuant to CGS 4-89(c), funding of \$3,522,606 is carried forward in the Other Expenses account to fund: (1) \$2,704,122 in potential costs related to AHCT's call center (DSS' share of the FY 17 costs are still under negotiation); and (2) \$818,484 to cover project delays (\$524,432 for completion of the universal assessment tool under the Balancing Incentive Program and \$294,052 for SNAP reinvestment, which is federally required).

**Totals**

Budget Components	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19
FY 17 Appropriation - GF	3,680,282,243	3,680,282,243	3,680,282,243	3,680,282,243	-	-
Policy Revisions	31,794,949	(16,685,758)	463,914,317	285,028,753	432,119,368	301,714,511
Current Services	242,388,889	393,786,984	224,003,797	369,817,467	(18,385,092)	(23,969,517)
<b>Total Recommended - GF</b>	<b>3,954,466,081</b>	<b>4,057,383,469</b>	<b>4,368,200,357</b>	<b>4,335,128,463</b>	<b>413,734,276</b>	<b>277,744,994</b>
FY 17 Appropriation - TF	2,370,629	2,370,629	2,370,629	2,370,629	-	-
Policy Revisions	(2,370,629)	(2,370,629)	(2,370,629)	(2,370,629)	-	-
<b>Total Recommended - TF</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
FY 17 Appropriation - IF	-	-	-	-	-	-
Policy Revisions	-	-	376,023	376,023	376,023	376,023
<b>Total Recommended - IF</b>	<b>-</b>	<b>-</b>	<b>376,023</b>	<b>376,023</b>	<b>376,023</b>	<b>376,023</b>

Positions	Governor Recommended		Legislative		Difference from Governor	
	FY 18	FY 19	FY 18	FY 19	FY 18	FY 19
FY 17 Appropriation - GF	1,986	1,986	1,986	1,986	-	-
Policy Revisions	5	5	23	23	18	18
<b>Total Recommended - GF</b>	<b>1,991</b>	<b>1,991</b>	<b>2,009</b>	<b>2,009</b>	<b>18</b>	<b>18</b>

## Other Significant Legislation

### PA 17-2 JSS, An Act Concerning the State Budget for the Biennium Ending June 30, 2019

Sections 12 - 16 contain provisions that allow the Secretary of the Office of Policy and Management (OPM) to allocate specific lapses to state agencies in the three branches of government (these are typically called holdbacks). The agency's FY 18 appropriation levels will be reduced by the amounts shown in the table below to achieve the lapses included in PA 17-2 JSS and amended in PA 17-4 JSS. This includes a Hiring Reduction Savings of \$269,710, a Labor Concessions Savings of \$4,629,260, a Targeted Savings of \$22,907,745, and a Delayed Start Savings of \$2,000,000. See the FY 18 Holdbacks schedule in Section V of this document for a further description of these statewide savings targets.

Account	Appropriation \$	Reduction Amount \$	Net Remaining \$	% Reduction
Personal Services	122,536,340	(4,898,970)	117,637,370	4.0%
Other Expenses	143,029,224	(7,151,461)	135,877,763	5.0%
Connecticut Home Care Program	42,090,000	(2,180,000)	39,910,000	5.2%
Human Resource Development-Hispanic Programs	697,307	(663,756)	33,551	95.2%
Community Residential Services	553,929,013	(11,078,580)	542,850,433	2.0%
Safety Net Services	1,840,882	(514,561)	1,326,321	28.0%
Services for Persons With Disabilities	370,253	(96,356)	273,897	26.0%
Nutrition Assistance	725,000	(93,944)	631,056	13.0%
Connecticut Children's Medical Center	11,391,454	(227,829)	11,163,625	2.0%
Community Services	688,676	(298,320)	390,356	43.3%
Human Service Infrastructure Community Action Program	2,994,488	(59,890)	2,934,598	2.0%
Teen Pregnancy Prevention	1,271,286	(25,426)	1,245,860	2.0%
Programs for Senior Citizens	7,895,383	(2,117,908)	5,777,475	26.8%
Family Programs - TANF	316,835	(287,498)	29,337	90.7%
Domestic Violence Shelters	5,304,514	(106,090)	5,198,424	2.0%
Human Resource Development-Hispanic Programs - Municipality	4,120	(4,120)	-	100.0%
Teen Pregnancy Prevention - Municipality	100,287	(2,006)	98,281	2.0%

**Estimated FY 18 - FY 19 Gross Medicaid Account Expenditures \$**  
By Category of Service

Category of Service	FY 18 \$	FY 19 \$
<b>Hospital Services<sup>1</sup></b>		
Inpatient & Outpatient Hospital Services	1,899,828,872	2,001,328,872
<b>Total Expenditures</b>	<b>1,888,118,872</b>	<b>1,989,018,872</b>
<b>Professional Medical Care</b>		
Physician	457,129,900	455,029,900
Clinic	454,159,924	454,159,924
Dental	223,010,004	222,010,004
Vision	43,604,068	43,604,068
Other Practitioner	125,295,124	125,295,124
<b>Total Expenditures</b>	<b>1,303,199,020</b>	<b>1,300,099,020</b>
<b>Other Medical Services</b>		
Pharmacy	1,182,911,643	1,182,911,643
Pharmacy Rebates	(661,244,819)	(661,244,819)
Medicare Part D Clawback	185,359,655	196,759,655
Transportation	32,948,828	32,948,828
Non-Emergency Transportation (NEMT)	50,454,149	50,454,149
Lab & X-Ray	53,062,827	53,062,827
Durable Medical Equipment	98,160,312	98,160,312
Alcohol & Drug Services	19,700,301	19,700,301
<b>Total Expenditures</b>	<b>961,352,896</b>	<b>972,752,896</b>
<b>Home and Community Based/Waiver Services</b>		
Home Health	251,924,532	250,124,532
Mental Health Waiver	1,680,000	1,680,000
CHC / PCA Assessments	1,752,928	1,752,928
CT Home Care (CHC) Waiver Services	304,082,817	304,082,817
Acquired Brain Injury (ABI) Waiver	74,016,273	74,016,273
Personal Care Assistance (PCA) Waiver Services	40,831,079	40,831,079
Katie Beckett Waiver	61,319	61,319
Other Waiver Related Services	6,733,890	6,733,890
Hospice Services	3,300,684	3,300,684
Autism Services	15,543,811	27,123,811
<b>Total Expenditures</b>	<b>699,927,333</b>	<b>709,707,333</b>



Category of Service	FY 18 \$	FY 19 \$
<b>Long-Term Care Facilities</b>		
Nursing Home - Chronic Care	1,242,205,613	1,243,345,613
Nursing Home - Rest Home	8,174,689	8,174,689
ICF/IID	62,701,787	62,701,787
Chronic Disease Hospital	70,931,682	70,931,682
Hospice Services	32,789,693	32,789,693
<b>Total Expenditures</b>	<b>1,416,803,465</b>	<b>1,417,943,465</b>
<b>Administrative Services</b>		
Waiver Administration	3,203,376	3,203,376
Behavioral Health Partnership ASO	15,588,077	15,588,077
Medical ASO	88,064,845	88,064,845
Dental ASO	8,695,680	8,695,680
NEMT Broker	7,022,267	7,022,267
TPL Admin Fees	1,320,000	1,320,000
Other CoreCT Medicaid Expenditures	(26,842,598)	(26,842,598)
<b>Total Expenditures</b>	<b>97,051,647</b>	<b>97,051,647</b>
<b>Medicare Premiums and Offsets</b>		
Medicare Part B Premiums	223,797,402	223,797,402
Medicare Premiums Offsets	(212,016,389)	(217,916,389)
School Based Child Health (SBCH)	(15,819,252)	(15,819,252)
<b>Total Expenditures</b>	<b>(4,038,239)</b>	<b>(9,938,239)</b>
<b>Other Policy Adjustments</b>	<b>(41,855,961)</b>	<b>45,174,039</b>
<b>Medicaid Total (Gross)</b>	<b>6,320,559,033</b>	<b>6,521,809,033</b>
<b>Federal Share</b>	<b>3,749,719,033</b>	<b>3,905,444,033</b>
<b>General Fund Total (Net)</b>	<b>2,570,840,000</b>	<b>2,616,365,000</b>