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To: Connecticut General Assembly Aging Committee

Testimony in support of Raised Bill No. 813

From: Steven L. Rubin, CELA, President Elect of the Connecticut Chapter of the National Academy of Elder Law Attorneys

I testify as a Certified Elder Law Attorney by the National Elder Law Foundation, who assists Clients in applying for public benefits, including Medicaid in Connecticut. I am also speaking to you as the President Elect of the Connecticut Chapter of the National Academy of Elder Law Attorneys.

Under Federal and State law, an individual who is institutionalized in a Nursing Home and who has a pending Medicaid Application, may receive benefits relating back to the original date of the application, and three months prior to the date of the application if the person was otherwise eligible for benefits. This system, designed with the idea that applications all take different lengths of time, and obtaining information can cause a delay that we do not want to penalize the care facility or the individual for delays outside of their control. A measure that helps to ensure proper care without delay.

However, almost all clients wish to receive care at home, in the least restrictive environment possible. They want the freedom to live with their spouses and see family members without restriction. Follow their own schedules, and today more than anything, they want protection from COVID-19. Facilities are known to be far higher risk than the alternative, and the restrictions that are required to lower infection risk, have also led to the inability to see spouses, and loved ones.

Unfortunately, most people are unable to pay for care privately for significant periods. The costs are prohibitive, so they apply for the Connecticut Home Care Program for the elders, a Medicaid Waiver program. Under this program, an individual must meet the financial requirements, as well as medical needs in order to obtain benefits.

Unlike the nursing home example above, where the care is provided and retroactive payment is available, Connecticut does not do that for the home care program. Even though 42 CFR 435.915 mandates that all Medicaid Plans, including Waiver


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Medicaid Plans, provides for services to individuals who are eligible up to three months prior to the date of the application.

A significant risk exists to our seniors, who are not able to afford care, because they spent their assets already, while they are waiting for the care. Often they stop care and run the risk of serious harm. The lucky few who have children with the assets to pay for the care temporarily, are not able to be paid back. During COVID-19 we have seen fewer family members willingly to make payments for care, because they themselves can no longer afford it.

Proposed Bill 813 is designed to stop that gap in care for an individual who is otherwise qualified for Medicaid to get payment, preventing them from an unnecessary admission to a facility, the risk of COVID-19, or the risk of no care at all.

 What Bill 813 does not do, is almost as important to recognize as what it does. 813, which is beneficial to seniors, and to the State's Budget by preventing unnecessary admissions to nursing homes, does not allow for coverage to applicants who are not otherwise eligible for care. It does not expand Medicaid eligibility, or benefits. It will not wipe out transfer penalties or allow for any transfers that would not otherwise be allowed under current law, and retroactive coverage does not occur until financial eligibility and budget are determined.

Passing Raised Bill NO. 813 has the full support of CTNAELA because it ensures that the impoverished, elderly population can receive care in their homes without a gap in coverage. It also assists the Department of Social Services in its rebalancing plan to provide care at home for lower costs than in a nursing home.

Respectfully submitted,

Steven L. Rubin, Esquire

