

# OFFICE OF FISCAL ANALYSIS

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sSB-764

AN ACT CONCERNING MEDICAID PROVIDERS.

## **OFA Fiscal Note**

### **State Impact:**

Agency Affected	Fund-Effect	FY 22 \$	FY 23 \$
Social Services, Dept.	GF - Cost	See Below	See Below

Note: GF=General Fund

**Municipal Impact:** None

### **Explanation**

The bill results in a cost to the Department of Social Services (DSS) of at least \$524,000 in FY 22 and \$596,000 in FY 23 associated with expanded services under Medicaid.

Section 1 results in increased state costs of \$114,000 in FY 22 and \$174,000 in FY 23 associated with making Medicaid payments for services provided by licensed chiropractors. DSS would also incur increased costs to provide Medicaid coverage for licensed acupuncturists, the extent of which will depend on the fee established and utilization of such services.

Section 2 conforms to current practice and has no fiscal impact.

Section 3 results in increased state costs of approximately \$410,000 in FY 22 and \$422,000 in FY 23. The cost to increase rates for nurse-midwives to the rates paid to obstetrician-gynecologists for the same services or procedures is approximately \$253,000 in FY 22 and \$260,000 in FY 23. The cost to increase podiatrist rates to rates paid to physicians for the same services or procedures is approximately \$157,000 in FY 22 and \$162,000 in FY 23.

Section 4 results in increased Medicaid costs by requiring coverage for services provided by peer support specialists integrated into care teams. The cost will depend on the fee established and the utilization of peer support services.

***The Out Years***

The annualized ongoing fiscal impact identified above would continue into the future subject to utilization and the Medicaid rates established for such services.