

OFFICE OF FISCAL ANALYSIS

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sSB-913

AN ACT REQUIRING FAIRNESS FOR FAMILIES IN MEDICAID
ELIGIBILITY AND REIMBURSEMENT DETERMINATIONS.

OFA Fiscal Note

State Impact:

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

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill could result in a cost to the Department of Social Services (DSS) associated with making retroactive Medicaid payments for enrollees in the Connecticut Home Care Program for Elders (CHCPE), for up to three months prior to applying for Medicaid.

For context, the average monthly gross cost per enrollee is \$2,800. Making retroactive payments for the three months prior to applying for Medicaid results in a state Medicaid cost of \$4,200 per client. This assumes the approval for such payments by the Centers for Medicare and Medicaid Services (CMS).

The bill makes other changes that could enable certain individuals to achieve Medicaid eligibility sooner to the extent they would otherwise be considered ineligible based solely on the discovery of certain assets. The actual cost to the state will depend on the number of applicable individuals and the disposition of certain assets.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to the number of eligible individuals, associated cost of care, and the disposition of certain assets.

Sources: Department of Social Services Caseload and Utilization Information