



General Assembly

Substitute Bill No. 812

January Session, 2021



**AN ACT EXPANDING ELIGIBILITY FOR THE ALZHEIMER'S DISEASE
RESPITE CARE PROGRAM.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 17b-349e of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective July 1, 2021*):

3 (a) As used in this section:

4 (1) "Respite care services" means support services which provide
5 short-term relief from the demands of ongoing care for an individual
6 with Alzheimer's disease.

7 (2) "Caretaker" means a person who has the responsibility for the care
8 of an individual with Alzheimer's disease or has assumed the
9 responsibility for such individual voluntarily, by contract or by order of
10 a court of competent jurisdiction.

11 (3) "Copayment" means a payment made by or on behalf of an
12 individual with Alzheimer's disease for respite care services.

13 (4) "Individual with Alzheimer's disease" means an individual with
14 Alzheimer's disease or related disorders.

15 (b) The Commissioner of Aging and Disability Services shall operate

16 a program [, within available appropriations,] to provide respite care
17 services for caretakers of individuals with Alzheimer's disease,
18 provided such individuals with Alzheimer's disease meet the
19 requirements set forth in subsection (c) of this section. Such respite care
20 services may include, but need not be limited to: (1) [homemaker]
21 Homemaker services; (2) adult day care; (3) temporary care in a licensed
22 medical facility; (4) home-health care; (5) companion services; or (6)
23 personal care assistant services. Such respite care services may be
24 administered directly by the Department of Aging and Disability
25 Services, or through contracts for services with providers of such
26 services, or by means of direct subsidy to caretakers of individuals with
27 Alzheimer's disease to purchase such services.

28 (c) (1) No individual with Alzheimer's disease may participate in the
29 program if such individual (A) has an annual income of more than
30 [forty-one] fifty-five thousand dollars or liquid assets of more than one
31 hundred [nine] thirty-five thousand dollars, or (B) is receiving services
32 under the Connecticut home-care program for the elderly. [On July 1,
33 2009, and annually thereafter, the commissioner shall] The
34 commissioner shall annually increase such income and asset eligibility
35 criteria over that of the previous fiscal year to reflect the annual cost of
36 living adjustment in Social Security income, if any.

37 (2) No individual with Alzheimer's disease who participates in the
38 program may receive more than three thousand five hundred dollars for
39 services under the program in any fiscal year or receive more than thirty
40 days of out-of-home respite care services other than adult day care
41 services under the program in any fiscal year, except that the
42 commissioner shall adopt regulations pursuant to subsection (d) of this
43 section to provide up to seven thousand five hundred dollars for
44 services to a participant in the program who demonstrates a need for
45 additional services.

46 (3) The commissioner may require an individual with Alzheimer's
47 disease who participates in the program to pay a copayment for respite
48 care services under the program, except the commissioner may waive

49 such copayment upon demonstration of financial hardship by such
50 individual.

51 (d) The commissioner shall adopt regulations in accordance with the
52 provisions of chapter 54 to implement the provisions of this section.
53 Such regulations shall include, but need not be limited to: (1) [standards]
54 Standards for eligibility for respite care services; (2) the basis for priority
55 in receiving services; (3) qualifications and requirements of providers,
56 which shall include specialized training in Alzheimer's disease,
57 dementia and related disorders; (4) a requirement that providers
58 accredited by the Joint Commission on the Accreditation of Healthcare
59 Organizations, when available, receive preference in contracting for
60 services; (5) provider reimbursement levels; (6) limits on services and
61 cost of services; and (7) a fee schedule for copayments.

62 (e) The commissioner may allocate any funds appropriated in excess
63 of five hundred thousand dollars for the program among the five area
64 agencies on aging according to need, as determined by the
65 commissioner.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2021	17b-349e

AGE *Joint Favorable Subst. C/R* **APP**