



General Assembly

February Session, 2022

Raised Bill No. 175

LCO No. 1436



Referred to Committee on AGING

Introduced by:
(AGE)

***AN ACT EXPANDING ELIGIBILITY FOR THE ALZHEIMER'S DISEASE
RESPITE CARE PROGRAM AND SUPPORTING AGING IN PLACE.***

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 Section 17b-349e of the general statutes is repealed and the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, 2022*):

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] The commissioner shall increase such
34 income and asset eligibility criteria over that of the previous fiscal year
35 to reflect the annual cost of living adjustment in Social Security income,
36 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.

66 Sec. 2. Subsection (g) of section 17b-650a of the general statutes is
67 repealed and the following is substituted in lieu thereof (*Effective July 1,*
68 *2022*):

69 (g) The Department of Aging and Disability Services is designated as
70 the State Unit on Aging to administer, manage, design and advocate for
71 benefits, programs and services for older persons and their families
72 pursuant to the Older Americans Act. The department shall study
73 continuously the conditions and needs of older persons in this state in
74 relation to nutrition, transportation, home care, housing, income,
75 employment, health, recreation and other matters. The department shall
76 be responsible, in cooperation with federal, state, local and area
77 planning agencies on aging, for the overall planning, development and

78 administration of a comprehensive and integrated social service
79 delivery system for older persons. The Department of Aging and
80 Disability Services is designated as the state agency for the
81 administration of nutritional programs for elderly persons described in
82 section 17a-302, the fall prevention program described in section 17a-
83 303a, the CHOICES program described in section 17a-314, the Aging
84 and Disability Resource Center Program described in section 17a-316a
85 and the Alzheimer's [respite] disease respite care program described in
86 section 17b-349e, as amended by this act.

87 Sec. 3. (*Effective July 1, 2022*) The following sums are appropriated
88 from the General Fund for the fiscal year ending June 30, 2023, for the
89 purpose of allowing more senior citizens to age in place at home: (1)
90 Two million dollars to the Department of Social Services to expand
91 access to the Connecticut home-care program for the elderly, and (2) one
92 million dollars to the Department of Aging and Disability Services to
93 expand access to the Alzheimer's disease respite care program.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2022</i>	17b-349e
Sec. 2	<i>July 1, 2022</i>	17b-650a(g)
Sec. 3	<i>July 1, 2022</i>	New section

Statement of Purpose:

To expand eligibility for the Alzheimer's disease respite care program and provide funding to allow more senior citizens to age in place at home.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]