



General Assembly

Amendment

January Session, 2023

LCO No. 9983



Offered by:
REP. GILCHREST, 18th Dist.

To: Subst. Senate Bill No. 989

File No. 554

Cal. No. 604

(As Amended)

**"AN ACT CONCERNING NURSING HOME AIR CONDITIONING,
COST REPORTING TRANSPARENCY, WAITING LIST
REQUIREMENTS, INVOLUNTARY PATIENT TRANSFER NOTICES
AND TRANSPORTATION FOR RESIDENT SOCIAL VISITS."**

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. Section 19a-522a of the general statutes is repealed and the
4 following is substituted in lieu thereof (*Effective from passage*):

5 (a) The Department of Public Health shall conduct a review of each
6 nursing home facility, as defined in section 19a-490, to determine which
7 such facilities have air conditioning in all resident rooms. For those
8 facilities that do not have air conditioning in all resident rooms, each
9 such facility shall report to the Department of Public Health in a time
10 and manner prescribed by the Commissioner of Public Health:

11 (1) Whether and how such facility is able to adequately control the
12 climate in resident rooms;

13 (2) What air conditioning system options are feasible for installation
14 at such facility;

15 (3) The cost and physical plant needs involved in providing air
16 conditioning in each resident room; and

17 (4) Other impediments to providing air conditioning in each resident
18 room.

19 (b) Not later than January 1, 2024, the Department of Public Health
20 shall submit a report, in accordance with the provisions of section 11-4a,
21 to the joint standing committees of the General Assembly having
22 cognizance of matters relating to aging, appropriations and the budgets
23 of state agencies, human services and public health on (1) the number of
24 such facilities without air conditioning in all resident rooms, (2) how
25 many such facilities are able to adequately control the temperature and
26 humidity levels in resident rooms, (3) the overall costs for nursing home
27 facilities without air conditioning in every resident room to provide air
28 conditioning in such rooms, and (4) any impediments to providing air
29 conditioning in all resident rooms at specific nursing homes.

30 (c) A chronic and convalescent nursing home or a rest home with
31 nursing supervision may maintain temperatures in resident rooms and
32 other areas used by residents at such facilities at levels that are lower
33 than minimum temperature standards prescribed in the Public Health
34 Code provided temperature levels at such facilities comply with the
35 comfortable and safe temperature standards prescribed under federal
36 law pursuant to 42 CFR 483.15(h)(6). In accordance with section 19a-36,
37 the Commissioner of Public Health shall amend the Public Health Code
38 in conformity with the provisions of this section.

39 Sec. 2. (NEW) (Effective July 1, 2023) (a) Any nursing home facility, as
40 defined in section 19a-490 of the general statutes, with available vehicles
41 equipped to transport nonambulatory residents, may provide
42 nonemergency transportation of such residents to the homes of such
43 residents' family members, provided: (1) Such family members live
44 within fifteen miles of the nursing home facility, and (2) such

45 transportation is approved not less than five business days in advance
46 by a physician or physician's assistant, licensed pursuant to chapter 370
47 of the general statutes, or an advanced practice registered nurse licensed
48 pursuant to chapter 378 of the general statutes.

49 (b) The Commissioner of Social Services shall evaluate whether the
50 need for such transportation would qualify as a health-related social
51 need and file a report not later than October 1, 2023, with the Council on
52 Medical Assistance Program Oversight on such evaluation and
53 potential federal funding that may be available for such transportation.
54 For purposes of this subsection, "health-related social need" means a
55 health need deriving from an adverse social condition that contributes
56 to poor health and health disparities, including, but not limited to, the
57 need for reliable transportation.

58 Sec. 3. (*Effective from passage*) (a) The State Ombudsman, appointed
59 pursuant to section 17a-870 of the general statutes, and the
60 Commissioners of Public Health and Social Services shall convene a
61 working group concerning any revisions necessary to nursing home
62 waiting list requirements as described in section 19a-533 of the general
63 statutes. The working group shall include, but need not be limited to,
64 the State Ombudsman, or the State Ombudsman's designee; the
65 Commissioners of Public Health and Social Services, or their designees;
66 and not fewer than two representatives of the nursing home industry,
67 appointed by the Commissioner of Social Services.

68 (b) The State Ombudsman, or the State Ombudsman's designee, and
69 the Commissioner of Social Services, or the commissioner's designee,
70 shall serve as chairpersons of the working group, which shall meet not
71 less than once monthly. Not later than January 1, 2024, the State
72 Ombudsman and the Commissioners of Public Health and Social
73 Services shall file a report, in accordance with section 11-4a of the
74 general statutes, with the joint standing committees of the General
75 Assembly having cognizance of matters relating to human services and
76 public health with recommendations concerning any changes to the
77 waiting list requirements, including, but not limited to, authorizing

78 nursing homes to maintain waiting lists in electronic form.

79 Sec. 4. (Effective from passage) (a) The Commissioner of Social Services
80 shall conduct a two-part study of Medicaid rates of reimbursement
81 beginning with (1) an examination of such rates for physician specialists,
82 dentists and behavioral health providers followed by (2) a review of the
83 reimbursement system for all other aspects of the Medicaid program,
84 including, but not limited to, the encounter-based reimbursement
85 model for federally qualified health centers and reimbursement rates for
86 specialty hospitals, complex nursing care and methadone maintenance.

87 (b) The rate reimbursement study shall include, but need not be
88 limited to: (1) A comparison of the state's Medicaid rates with Medicaid
89 rates provided by neighboring states; and (2) a comparison of the state's
90 Medicaid rates with Medicare rates and cost-of-living increases
91 provided under Medicare compared to the state Medicaid program.

92 (c) The commissioner shall file interim reports, in accordance with the
93 provisions of section 11-4a of the general statutes, (1) not later than
94 February 1, 2024, on the aspects of the study conducted pursuant to
95 subdivision (1) of subsection (a) of this section; and (2) not later than
96 January 1, 2025, on the aspects of the study conducted pursuant to
97 subdivision (2) of subsection (a) of this section with the joint standing
98 committees of the General Assembly having cognizance of matters
99 relating to appropriations and the budgets of state agencies and human
100 services."

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	19a-522a
Sec. 2	<i>July 1, 2023</i>	New section
Sec. 3	<i>from passage</i>	New section
Sec. 4	<i>from passage</i>	New section