
OLR Bill Analysis

sHB 5001

AN ACT SUPPORTING CONNECTICUT SENIORS AND THE IMPROVEMENT OF NURSING AND HOME-BASED CARE.

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Allows nursing home residents or complainants to give consent visually or by using auxiliary aids for the Office of the Long-Term Care Ombudsman to disclose their files or records; requires an office representative to document the consent in writing

SUMMARY

This bill evaluates and expands supports and services for older adults as described in the section-by-section analysis below.

EFFECTIVE DATE: October 1, 2024, unless otherwise noted below.

§ 1 — PERSONAL CARE ATTENDANT WORKFORCE COUNCIL PCA TRAINING

Requires the PCA Workforce Council, starting January 1, 2025, to develop training for PCAs on techniques for recognizing and responding to consumer harassment, abuse, and discrimination

Starting January 1, 2025, the bill expands the responsibilities of the

Personal Care Attendant Workforce Council to include developing training for personal care attendants (PCAs) on techniques for recognizing and responding to consumer harassment, abuse, and discrimination.

§ 2 — HOME CARE WORKER TRAINING ON CONSUMER HARASSMENT, ABUSE, AND DISCRIMINATION

Starting January 1, 2025, requires home health care, home health aide, and hospice agencies, as a condition of licensure, to require their employees to complete training on how to recognize and respond to consumer harassment, abuse, and discrimination

Starting January 1, 2025, home health aide, home health care, and hospice agencies must require their employees to complete training on how to recognize and respond to consumer harassment, abuse, and discrimination. Under the bill, the agencies must do this as a condition of state licensure, as the Department of Public Health (DPH) commissioner prescribes.

§§ 3 & 4 — MEDICARE NURSING HOME CARE COMPARE WEBSITE LINK

Requires the DPH and DSS commissioners to prominently post, on their department websites, a link to the Medicare Nursing Home Care Compare website

The bill requires the Department of Social Services (DSS) and DPH commissioners to post, in a prominent location on their respective department websites, a link to the Medicare Nursing Home Care Compare website. This online reporting tool uses a five-star rating system that allows the public to compare nursing homes by quality of care, health inspections, and staffing.

§ 5 — EXPANDING FINGERPRINTING LOCATIONS

Requires the DESPP commissioner to develop and implement a plan to expand fingerprinting locations in the state and report on the plan to the Aging, Public Health, and Public Safety and Security committees by January 1, 2025

The bill requires the Department of Emergency Services and Public Protection (DESPP) commissioner, in consultation with the DPH commissioner, to develop and implement a plan to expand fingerprinting locations in the state to facilitate more access to these locations for people required to complete state and national criminal history records checks for employment or licensing purposes.

The commissioner must report to the Aging, Public Health, and Public Safety and Security committees on the plan by January 1, 2025.

EFFECTIVE DATE: Upon passage

§§ 6-8 — HOME CARE EMPLOYEE BADGES AND PHOTOGRAPHS

Requires home health care, home health aide, homemaker-companion, and hospice agencies to require their employees to wear an identification badge with their name and photograph during client appointments; subjects agencies to disciplinary action for violating the requirements

The bill requires each home health care, home health aide, homemaker-companion, and hospice agency to require employees to wear an identification badge that includes their name and photograph during each client appointment. The requirement takes effect July 1, 2025, for homemaker-companion agency employees and October 1, 2024, for all other agency employees.

Under the bill, violators may be subject to various disciplinary actions (e.g., license suspension or revocation or probation) by (1) the Department of Consumer Protection, for homemaker-companion agencies and (2) DPH, for all other agencies.

The bill also makes a related conforming change.

§§ 9 & 10 — FAMILY RESOURCE CENTERS AND PARENT EDUCATION AND SUPPORT CENTERS

Expands the scope of SDE family resource centers and DCF parent education and support centers to include resources, programs, and services for nonparent caretaker relatives and legal guardians; requires the centers to make referrals to certain community programs

The bill expands the scope of (1) State Department of Education (SDE) family resource centers and (2) Department of Children and Families (DCF) parent education and support centers to include resources, programs, and services for nonparent caretaker relatives and legal guardians (see BACKGROUND). It also requires these centers to make referrals for parents, nonparent caretaker relatives, and legal guardians to community programs on childhood development and positive parenting practices.

§ 11 — MUNICIPAL AGENTS FOR THE ELDERLY

Makes the duties of municipal agents for the elderly mandatory and expands them to include helping seniors access housing assistance resources; requires the ADS commissioner to create a directory with these agents' contact information and post it on the department's website

By law, municipalities must appoint a municipal agent for the elderly to help seniors learn about community resources and file for benefits. The bill makes the agents' duties mandatory, rather than permissive as under current law. It also expands their duties to include helping seniors access resources on housing opportunities, including information on accessing elderly housing waiting lists, applications, and consumer reports.

The bill also requires the Department of Aging and Disability Services (ADS) commissioner, by January 1, 2025, to create a directory of these municipal agents that includes their names and titles, phone numbers, and email and mailing addresses. The commissioner must post a link to the directory on the ADS website.

§§ 12 & 13 — MANAGED RESIDENTIAL COMMUNITY RESIDENCY AGREEMENTS AND FEES

Requires MRCs to (1) include information in written residency agreements on the way they may adjust monthly or other recurring fees; (2) give residents, or their representatives, 90 days' notice of any fee increases; and (3) give residents prorated or full refunds of certain fees if the facility cannot meet the resident's needs within the first 45 days of occupancy

Existing law requires managed residential communities (MRCs) to give each resident a written residency agreement that clearly sets forth the resident's and the MRC's rights and responsibilities. The bill modifies the contents of the agreement and establishes notification and reimbursement requirements for certain resident fees.

EFFECTIVE DATE: October 1, 2024, except the provisions on the residency agreements are effective upon passage.

Written Residency Agreement

The bill adds to the required contents of the agreement the way in which MRCs may adjust monthly or other recurring fees, including (1) how often fees may increase, (2) the schedule or specific dates of these increases, and (3) the history of fee increases over the past three calendar years.

Under current law, written residency agreements must include, among other things, a full and fair disclosure of all charges, fees, expenses, and costs to be borne by the resident. The bill specifies that this includes nonrefundable charges, fees, expenses, and costs.

The bill's provisions apply to written residency agreements entered into on and after October 1, 2024.

Fee Notifications and Reimbursements

The bill requires MRCs to give residents, or their representatives, 90 days' advance notice of any increase in monthly or recurring fees and written disclosure of any nonrefundable charges.

It also requires MRCs to give residents prorated or full reimbursements of certain charges if the MRC determines it can no longer meet the resident's needs during the first 45 days of the resident's occupancy (e.g., prorated first month's rent, prorated community fee, full last month's rent, and full security deposit).

§ 14 — ALSA FEES

Requires ALSAs to (1) disclose fee increases to residents or their representatives at least 90 days before they take effect and (2) upon request, give them the history of fee increases over the past three years

Existing law requires an assisted living services agency (ALSA) to ensure all services provided individually to clients are fully understood by the client or the client's representative, and that the client or representative is made aware of their cost.

The bill also requires an ALSA to (1) disclose fee increases to the client or representative at least 90 days before they take effect and (2) upon request, give the client or representative the history of fee increases over the past three calendar years.

The bill specifies that this requirement does not limit an ALSA from immediately adjusting fees if (1) they are directly related to a change in the level of care or services necessary to meet the client's safety needs at the time of a scheduled resident care meeting or (2) the client's condition changes, resulting in a required change in services.

§ 15 — LONG-TERM CARE OMBUDSMAN NOTIFICATION OF ALSA LICENSURE

Requires the DPH commissioner to notify the Long-Term Care Ombudsman within 30 days after granting a license to an ALSA that operates an MRC or provides services at an MRC

The bill requires the DPH commissioner to notify the Long-Term Care Ombudsman within 30 days after granting a license to an ALSA that operates an MRC or provides services at an MRC.

Under existing law, the state does not license assisted living facilities. Instead, it licenses and regulates ALSAs that provide assisted living services. ALSAs can only provide these services at an MRC. MRCs that wish to provide assisted living services must obtain a DPH license as an ALSA or arrange for the services with a licensed ALSA.

§ 16 — MANAGED RESIDENTIAL COMMUNITY RESIDENT NOTIFICATION

Requires MRCs to give at least 30 days' notice to residents, and their legal representatives, before changing the facility's operator or ALSA that provides facility services

The bill requires MRCs to give at least 30 days' notice to residents, and their legal representatives, before changing the facility's operator or ALSA that provides services at the facility.

§ 17 — MANAGED RESIDENTIAL COMMUNITY CONSUMER GUIDE

Requires the Long-Term Care Ombudsman, in consultation with the public health commissioner, to develop an MRC consumer guide and post the guide on specified agency websites by January 1, 2025

The bill requires the Long-Term Care Ombudsman, in consultation with the public health commissioner, to develop an MRC consumer guide that includes information on (1) resident protections; (2) housing protections, including those related to evictions; (3) MRC fees; and (4) any other information the ombudsman deems relevant.

By January 1, 2025, the ombudsman and commissioner must post the consumer guide on their respective agency websites; the DSS commissioner must post it on the MyPlaceCT website.

EFFECTIVE DATE: Upon passage

§ 18 — OFFICE OF THE LONG-TERM CARE OMBUDSMAN CLIENT RECORDS DISCLOSURE

Allows nursing home residents or complainants to give consent visually or by using auxiliary aids for the Office of the Long-Term Care Ombudsman to disclose their files or records; requires an office representative to document the consent in writing

Existing law authorizes the Office of the Long-Term Care Ombudsman to disclose its files and records only at the discretion of the ombudsman or her designee. The office cannot identify the associated complainant or resident without the person's consent, or the consent of the person's legal representative, unless a court orders the disclosure.

Under existing law, a resident or complainant, or their legal representative, may give consent in writing or orally. The bill also allows them to give consent visually or by using auxiliary aids and services. As under existing law, a representative of the office must document the consent in writing.

BACKGROUND***Legislative History***

The House referred the bill (File 121) to the Appropriations Committee, which reported out a substitute bill that replaced the prior bill and eliminated provisions (1) establishing a DSS home care provider registry and data processing system, (2) requiring certain training for homemaker-companion agencies' prospective employees and contractors, (3) requiring certain training for family caregivers who provide PCA services under specified DSS-administered programs, (4) establishing presumptive Medicaid eligibility for homecare, (5) requiring ADS to study financial assistance for nonparent caretaker relatives, (6) expanding regional long-term care ombudsmen's duties, (7) modifying requirements for the disclosure of Community Ombudsman files or records, (8) requiring DPH to study nursing home diagnostic practices for cognitive disorders, (9) authorizing up to \$1 million in state general obligation bonds to expand the Aging in Place Safely Program, and (10) authorizing certain FY 25 General Fund appropriations to ADS and DPH for various initiatives related to older adults.

Related Bill

HB 5046, favorably reported by the Aging, Appropriations, and Judiciary committees, similarly (1) modifies the contents and notification requirements for MRC residency agreements entered into on and after July 1, 2024, instead of October 1, 2024, and (2) requires ALSAs to disclose fee increases to residents or their representatives at least 60 days before they take effect and, upon request, give them the history of fee increases over the past three years.

DCF Parent Education and Support Centers

DCF operates, within available appropriations, community-based, multiservice parent education and support centers. The goal of each center is to improve parenting and family functioning to give children and youths more opportunities for positive development. Centers provide (1) education, training, and support services; (2) information on, and coordination of, other community services; (3) consultation services; and (4) coordination of child care and transportation services to facilitate participation in the center’s programs.

SDE Family Resource Centers

By law, SDE and DSS must coordinate family resource centers together. These centers are generally located in public elementary schools and provide comprehensive child care services, remedial educational and literary services, families-in-training programs, and supportive services to parents who receive Temporary Family Assistance and other parents who need services.

COMMITTEE ACTION

Aging Committee

Joint Favorable Substitute
Yea 15 Nay 0 (03/12/2024)

Appropriations Committee

Joint Favorable Substitute
Yea 52 Nay 0 (04/15/2024)