

JOINT FAVORABLE REPORT

Bill No.: HB-5001

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

Vote Date: 3/12/2024

Vote Action: Joint Favorable Substitute

PH Date: 3/5/2024

File No.:

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SPONSORS OF BILL:

Aging Committee

REASONS FOR BILL:

This is comprehensive legislation that is a product of the Speakers' office. It contains 40 sections designed to support Connecticut seniors and includes improvements of nursing and homes-based care.

Section 1 directs the DSS Commissioner to develop and maintain a home care provider registry and data processing system for people receiving Medicaid home and community-based services, it allows the commissioner to apply to CMS for federal financial participation for the registry's development, maintenance and ongoing operation.

Section 2, 3 and 4 requires the PCA Workforce Council and homemaker-companion agencies to develop training for PCAs on techniques for recognizing and responding to consumer harassment, abuse and discrimination. And to require employees to complete training on how to recognize and respond to harassment, abuse and discrimination as a condition of state licensure.

Section 5 requires the DSS Commissioner to develop and implement a training program for family caregivers and requires family caregivers to complete the training to be eligible for compensation.

Section 8 directs the agency to develop and implement a plan to expand the number of finger printing location and the state and to report to committees of cognizance in the legislature.

Section 9 and 10 requires the DSS to investigate consumer complaints. It also authorizes them to reduce Medicaid reimbursement rate for nursing homes that receive a two star or less on Medicare Nursing Home Care compare reports.

Sections 11, 12 and 13 requires home health care, home health aide, homemaker-companion and hospice agencies to send a client a photograph of the person scheduled to provide them services at least one day prior to their appointment. It also requires that employees wear a badge with their name and photograph.

Sections 14, 15,16,17 and 18 requires the DSS Commissioner to establish a presumptive Medicaid eligibility system for people applying to the Medicaid-funded portion of CHCPE and requires the state to pay for up to 90 days of home care applicants determined to be eligible.

Sections 19, 20 and 21 increases the DSS temporary family assistance payment to nonparent caretaker relatives who are the legal guardian of a child and expands the scope of SDE family resources centers and DCF parent education and support centers to include resources for nonparent caretaker relatives and legal guardians.

Section 22 makes the duties of municipal agents for the elderly mandatory and expands their scope to include people with disabilities. Requires the ADS Commissioner to create a directory with these agents' contact information.

Sections 23 and 24 requires MRCs to provide information to residents in writing in residency agreements concerning monthly fees, fee increases and refunds.

Sections 25 and 27 requires ALSAs to disclose fee increases and MRCs to notice to residents concerning changing the facilities owners.

Sections 26 and 28 requires the DPH Commissioner to provide notice to the Long-Term Care Ombudsman of granting a license and requires the Long-Term Care Ombudsman to develop a consumer guide.

Section 29 establishes a nine-member working group to study and make recommendations on the state's managed residential communities and assisted living facilities with findings submitted to the Aging Committee by January 1, 2025.

Sections 30, 31, 32 and 33 makes changes in the Office of the Long-Term Care Ombudsman and Community Ombudsman's regarding duties and responsibilities.

Section 34 requires the DPH Commissioner to study the practices nursing homes use to diagnose a resident with a cognitive disorder.

Sections 35 thru 40 makes General Fund appropriations for additional hires in the Community Ombudsman Program, purchase of a new data system for the Community Ombudsman Program, a two-year analysis of nursing home acuity data and a grant to the Alzheimer's Association, CT Chapter

JFS Language (LCO 2994)

Section 1 adds Sec. (c) regarding required registry information.

Sections 2 and 3 were added to require home health care, home health aide, hospice, and homemaker-companion agencies to report information required by Sec. 1(c) to relevant Commissioners.

Sections 9 and 10 are deleted.

Section 11 and 12 removes the requirement to send a photo of an employee to a client before an appointment and requires them to wear a badge during an appointment with a client.

Section 19 is revised and directs that the services shall study the reimbursement rate options for families that benefit under the temporary family assistance program.

Section 22 removes disabled persons from the municipal agents' requirements.

Section 23 changes the date for residence requirement from July 1, 2024, to October 1, 2024

Section 25 Changes the date from July 1, 2024, to October 1 2024 and the term resident to client.

Section 29 has been deleted.

Section 34 Adds an appropriation of \$400,000 to the Dept of Aging & Disability.

Section 35 adds \$20,000 to the Dept of Public Health to analyze data to determine if skilled nursing facilities are staffing to the acuity needs of skilled nursing.

Section 40 is deleted.

RESPONSE FROM ADMINISTRATION/AGENCY:

Office of the Comptroller, Mr. Sean Scanlon, Comptroller: His testimony is in support of this legislation. He believes that it will make this important process easier by allowing local police or private vendors to obtain fingerprints.

Dept of Social Services, Ms. Andrea Barton Reeves, Commissioner: They are in **opposition** to this proposal. Section 5 would establish a new training program for family caregivers providing personal care assistance services under the Community First Choice Program. The Dept. supports this concept and agrees that such training will provide value to the care provided to their members. Because of the complexities they would suggest an implementation date of April 1, 2025. In Section 9(a) they believe that adding a regulatory role to the Depts. function would be a significant conflict of interest in DSS rate-setting decisions. Sections 9(c) and 10(b) they suggest that it would require the Dept. to implement a quality program that is in direct conflict with PA 21-2, so they are opposed to this change. Section 14(c) They are concerned that presumptive eligibility would substantially increase enrollment which would require an appropriation. They are also unable to support 14(f), 14(j), and Sections 15, 17 and 19 due to unbudgeted cost and changes in eligibility rules.

Dept. of Public Health, Dr. Manisha Juthani, Commissioner: The Dept strongly **opposes** Section 9 of this bill because this proposal would breach the nearly 40-year agreement the state has with the Centers for Medicare and Medicaid Services to perform this work on behalf of the federal government. Their testimony included details of why they think this proposal will likely create more problems than it would solve but point out that there are other sections that could provide significant benefits to our communities living in nursing homes. They do believe that it could pose a serious threat to millions of dollars in federal funding and could weaken the state's entire system for regulating all healthcare providers.

Connecticut Aging and Disability Services, Ms. Amy Porter, Commissioner: They are in **support** of this proposal with some qualifications. They request that in Section 22 the bill be amended to use person-first language. They also expressed concerns about Sections 35 to 40 since the funding was not included in the Governor's budget.

Connecticut Aging and Disability Services, Ms. Mairead Painter, State Long-Term Care Ombudsman: They are in **support** for this legislation. Their testimony is in some detail and broken out, section by section.

Connecticut Dept. of Consumer Protection, Mr. Brian Cafferelli, Commissioner: The Dept. does not take a position on this proposal but offers some advice and suggestions. They

point out that PA 23-48 already began to evaluate and develop a proposed plan for the transition of oversight from DCP to the DPH. This process has already been started. They suggest that deleting Section 3 in the bill would eliminate any confusion.

Commission on Women, Children, Seniors, Equity and & Opportunity, Mr. Michael Werner, Lead Aging Policy Analyst: They offered testimony in **support** of this bill. They also request that the DSS is made accessible to all communities.

NATURE AND SOURCES OF SUPPORT:

Rep. Tami Zawistowski, 61st Assembly District: Her comments were in **support** of this bill. She indicated that she was supportive of Sections 19, 20 and 21 concerning nonparent caretakers, relative and legal guardians, of children, and specifically in support of grandparents who for a variety of reasons assume full custody and the duties of parenthood for the children in their care.

Rep. Al Paolillo, 97th District: His testimony was submitted in **support** of this legislation. He would also like to see language added that would include a blanket "no shut off" in winter moratorium when it comes to utility bills for all seniors. He would also suggest wording that would require routine inspection of elevators in nursing homes and senior living facilities.

Connecticut Legal Services, Mr. Christopher Carlson, Elder Law Attorney: He offered testimony in **support** of this bill. He also is in favor of Section 22 which is responding to the crisis of elder homelessness and requiring housing-related assistance for elders and the disabled at the local level.

West Side Care Center, Manchester, Mr. Robert Willis, Resident Council President: He submitted testimony in **support** of this bill. This bill, particularly Sections 8, 10 and 35 are essential for improving the quality of life and care for residents.

Apple Hewett Rehab. Mr. John Balisciano, Vice President of the Statewide Coalition of Presidents of Resident Councils: His written testimony was in **support** of this proposal. He mentioned how important Sections 8 and 35 were to seniors.

The Arc of Connecticut, Inc., Ms. Carol Scully, Director of Advocacy: Their comments were in **support** of this proposal. They particularly like Sections 11 and 22 concerning photographs and municipal agents.

Fairfield Senior Advocates, Mr. William Lenahan, Director State Issues: They are in **support** of this bill but have reservations concerning Sections 9 and 10. The proposed transfer of investigations from DPH to DSS and a reduction of a nursing home's per diem rate based entirely on lowered star rating may be premature.

Ct Association for Healthcare at Home, Ms. Tracy Wodatch, President and CEO: Their comments are in **support** of this proposal. They are supportive of Sections 8 and 14 but they have concerns about Sections 1, 2 thru 5 and 11 thru 13. They indicated that they would like to have a seat at the table as this bill is negotiated, and they look forward to working with the stakeholders to arrive at a piece of legislation that delivers better care and services to our constituents.

Pendleton Rehabilitation and Healthcare, Ms. Jeanette Sullivan-Martinez, President of the Statewide Coalition of Presidents of Residents Council: Her testimony was in **support** of this bill. She urges caution concerning Section 10 of the bill since she does see the potential for a negative impact due to reduced payments due to poor star ratings. Any adjustments in Medicaid rate must be considered to ensure they do not worsen their living conditions. In Section 35 she does see the value of expanding the LTOCP which would allow for quicker resolutions of issues.

B&M Homemaking and Companion Services, LLP, Ms. Marlene Chickerella, Managing Partner: She is **supportive** of the legislation but does have some concerns. Section 1 is unclear as to the scope of the registry. Her concerns are the administrative costs and who will pay for it and is that the bill is not clear on its functionalities. If it is to create a caregiver registry, she would be opposed to it. She supports the photo ID but is concerned that most would not be able to meet the 24 hour turn around.

Assured Quality Homecare, LLC, Mr. Caleb Roseme, COO: In their comments they expressed concerns about two sections of the bill. One is the sending of a photo for each employee scheduled to provide services to a client in section 12. They suggest that they make a photo available to the client thru an online portal, text message or email. In section 13 they offered revised language that would allow an agency to defend itself against disciplinary action taken by DCP.

LeadingAge, Connecticut, Ms. Mag Morelli, President: They believe that all stakeholders must work together to plan and invest in a system of aging services, and they are ready to partner with the state in this planning effort. They encourage the committee to support section 8 and move forward with a plan to expand fingerprinting locations. In section 1 they do not understand the reason for including the names and contact information of individuals employed by agencies on a consumer facing registry. They suggest that the registry include the agency name and contact information instead of the list of people employed by agencies. In sections 11 thru 13 they have concerns about the requirement that the photo identification be sent in advance. In sections 23 thru 28 LeadingAge participated in a working group and supports the proposals contained in these sections but they have two suggestions. They ask that October 1, 2024, be made the effective date for all six sections and that the state demonstration affordable housing sites and the HUD Assisted Living Conversion Program provider be exempt from the new proposed requirement put forth on the MRCs. They also ask that they be included in a new working group that is proposed in section 29. They do express their concerns with sections 9 and 10 since they feel it is premature.

Alzheimer's Association, Connecticut Chapter, Ms. Christy Kovel, Director of Public Policy: They are **supportive** of this bill and make several points. In section 34 they are supportive of the concept of improving the diagnosis process and recognize resource constraints at state agencies and they offer their resources and expertise as needed. In section 39 they point out an early diagnosis allows people to plan their future with the goal of empowering them to make decisions that will help them live well with Alzheimer's for as long as possible.

AARP Connecticut, Ms. Anna Doroghazi, Associate State Director, Advocacy and Outreach: They offered their testimony in **support** of this proposal. They offered positive comments concerning Sections 6,7,8, and 14.

Home Care Association of America, Ms. Marlene Chickerella, Chairperson of HCAOA Connecticut: She is concerned that the bill may have unintended consequences by driving up the costs of care for the very persons it is intended to help. In section 1 their creation of registry raises questions about administrative costs and who will pay for it, its maintenance, and how its data and information will remain current. The Medicaid program registry of home care workers is often out of date. Section 3 requires agencies, prior to hiring a care giver, provide training that teaches techniques to recognize and respond to harassment, abuse and discrimination by clients. They support caregiver training, but home care agencies shouldn't have to bear the burden and risk of paying for training before hiring employees. Section 12 requires agencies to send a photo to clients one day before the appointment, but they think the one-day notice is unreasonable.

Assisted Living Services, Inc., Mr. Mario D'Aquila, COO and Co-Owner: They are **supportive** of increasing Medicaid Reimbursement for Home Care Providers but have reservations concerning several sections in the bill. Their concern with Section 1 is that if a registry establishes a caregiver registry they would be opposed. Their concern about Section 3 is that it would have to be properly funded for the cost of the training and they would suggest that Section 12 would state that "home care agencies will send a photograph of each caregiver scheduled to provide services to a client upon request".

Connecticut Hospital Association, Government Relations: Their testimony were comments about this bill. They indicated support for Section 8 of the proposal indicating that for many healthcare employees, state and national criminal history records checks are a requirement of employment and licensing. They suggest that expanding the locations where fingerprinting can be done is important to reducing barriers to employment. In Sections 11 and 12 they suggest that it be clarified by specifying if the photo must be sent before each appointment, regardless of whether the same employee visits the client for each visit, or it must be sent prior to each new employee visiting a client.

Connecticut Association of Health Care Facilities/Connecticut Center for Assisted Living, Mr. Matt Barrett, President and CEO: Their testimony recommended that rather than Medicaid rate reductions stated in Sections 9 and 10 the state continue with the comprehensive development (VBP) of the nursing home quality improvement approach that is under development. They offered amended language for 17b-340d (2) concerning quality metrics – "including a customer satisfaction component" and "with implementation authorized no sooner than July 1, 2026". They also recommended substitute language because the proposed language incorrectly states that skilled nursing facilities diagnose cognitive disorders. They did include the recommended substitute language for this section.

Ms. Tracy Weiss, owner of a homemaker-companion agency: Her comments point out that the DCP and DPH are in the process of developing a plan for training when the homemaker-companion agency registration moves to the DPH and given that Section 3 in the bill would not be necessary. In Section 12 all homemaker-companion agencies are required to send a photo of each employee scheduled to provide services to a client at least one day prior to the employee's scheduled appointment. While they support photo ID's homemaker

and companions need the flexibility in their work schedule should unexpected circumstances arise for them or the client. By sending their photo to the client at least 24 hours in advance and committing to services, this flexibility for the employee is lost.

CT Statewide Family Council, Mr. Frederic Kaeser, Vice Chairman: His testimony advised the Legislature to vote to support this bill.

Ms. Jessica Hill: She **supports** this bill and provided some personal experiences with nursing homes.

Comfort Keepers, Mr. Nicholas Miller, Owner: He finds most of this proposal helpful but is concerned about the mandate for photo ID's and the establishment of a registry.

Ms. Carol Rizzolo, Guilford: She testified in **support** of this bill.

Ms. Amy Badini: She **supports** this bill.

Ms. Elizabeth Stern, Family Caregiver: She gives her support for this bill. She offered some of her own experiences in her comments.

Mr. Jack Stanton, Ledyard High School: He is in **support** of this bill and asked that a section on euthanasia be added to the bill.

Ms. Irma Rappaport, National Advocate: She offers her full support for this legislation.

Mr. Peter Osowiecki, Great Grandparent: His testimony was in support of this bill. He does point out that grandparents who are raising grandchildren and are not in the DCP care receive no support. On the DCP web site it shows that over 19,000 grandchildren are living with grandparents or great grandparents many of whom have no support from the State. Grandparents need to be treated equally as foster families.

Nature and Sources of Opposition:

The Supported Living Group, Mr. Jamie Arber, Executive Director: They submitted testimony in **opposition** to the legislation. They urge the committee to explore alternative solutions that address senior's needs without further burdening struggling care agencies with financially unsustainable and non-reimbursable administrative expectations.

Fairfield Healthcare Services, Inc., Mr. Thom Gilday, Managing Director: While they are supportive of the state's efforts to improve oversight of home care, they point out that there are sections in the bill that will negatively affect agencies, caregivers and clients. The registry causes them a concern about the administrative costs, who will pay for it, and the ongoing maintenance that ensures that the data is current. Also, if the bill is to create a caregiver registry, they would have to oppose it. They are also concerned about the additional costs of the training for the agencies. They do support the photo ID but not the 24-hour notice with the photo. With additional costs associated with this bill and the burden of the increase in minimum wage they are afraid that services would be unsustainable.

Reported by:
Richard Ferrari, Assistant Clerk
Toni Lombardi, Clerk

Date: 3/27/24