



General Assembly

February Session, 2024

***Raised Bill No. 365***

LCO No. 2627



Referred to Committee on HUMAN SERVICES

Introduced by:  
(HS)

***AN ACT CONCERNING SAFETY IN THE HEALTH CARE  
WORKFORCE.***

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

1 Section 1. (NEW) (*Effective October 1, 2024*) (a) Any hospital, chronic  
2 disease hospital, nursing home, behavioral health facility, multicare  
3 institution or psychiatric residential treatment facility, as those terms are  
4 defined in section 19a-490 of the general statutes, that receives  
5 reimbursement for services rendered under the medical assistance  
6 program, shall adopt and implement the workplace violence prevention  
7 standards that apply to all Joint Commission-accredited hospitals and  
8 critical access hospitals.

9 (b) The Commissioner of Social Services shall require any institution  
10 listed in subsection (a) of this section to provide evidence of adoption  
11 and implementation of the workplace violence prevention standards  
12 that apply to all Joint Commission-accredited hospitals and critical  
13 access hospitals in order to obtain reimbursement for services provided  
14 under the medical assistance program.

15 (c) The commissioner may provide a rate enhancement under the

16 medical assistance program for institutions listed in subsection (a) of  
17 this section for timely reporting of any workplace violence incident. For  
18 purposes of this section, "timely reporting" means reporting such  
19 incident not later than seven calendar days after its occurrence to the  
20 Department of Social Services and the Department of Public Health.

21       Sec. 2. (NEW) (*Effective October 1, 2024*) (a) Any home health care  
22 agency, home health aide agency, assisted living services agency,  
23 hospice agency, residential care home or residential facility for a person  
24 with intellectual disability, as those terms are defined in section 19a-490  
25 of the general statutes, that receives reimbursement for services  
26 rendered under the medical assistance program, shall adopt and  
27 implement the health and safety training curriculum for home care  
28 workers endorsed by the Centers for Disease Control and Prevention's  
29 National Institute for Occupational Safety and Health and the  
30 Occupational Safety and Health Administration, including, but not  
31 limited to, training to recognize hazards commonly encountered in  
32 home care workplaces and applying practical solutions to manage risks  
33 and improve safety.

34       (b) The Commissioner of Social Services shall require any agency,  
35 home or facility listed in subsection (a) of this section to provide  
36 evidence of adoption and implementation of such health and safety  
37 training curriculum, or, at the commissioner's discretion, an alternative  
38 workplace safety training program applicable to such agency, home or  
39 facility, in order to obtain reimbursement for services provided under  
40 the medical assistance program.

41       (c) The commissioner may provide a rate enhancement under the  
42 medical assistance program for any agency, home or facility listed in  
43 subsection (a) of this section for timely reporting of any workplace  
44 violence incident. For purposes of this section, "timely reporting" means  
45 reporting such incident not later than seven calendar days after its  
46 occurrence to the Department of Social Services and the Department of  
47 Public Health.

48 Sec. 3. Subsection (a) of section 17b-242 of the 2024 supplement to the  
49 general statutes is repealed and the following is substituted in lieu  
50 thereof (*Effective from passage*):

51 (a) The Department of Social Services shall determine the rates to be  
52 paid to home health care agencies and home health aide agencies by the  
53 state or any town in the state for persons aided or cared for by the state  
54 or any such town. The Commissioner of Social Services shall establish a  
55 fee schedule for home health services to be effective on and after July 1,  
56 1994. The commissioner may annually modify such fee schedule if such  
57 modification is needed to ensure that the conversion to an  
58 administrative services organization is cost neutral to home health care  
59 agencies and home health aide agencies in the aggregate and ensures  
60 patient access. Utilization may be a factor in determining cost neutrality.  
61 The commissioner shall increase the fee schedule for home health  
62 services provided under the Connecticut home-care program for the  
63 elderly established under section 17b-342, effective July 1, 2000, by two  
64 per cent over the fee schedule for home health services for the previous  
65 year. On and after January 1, 2024, the commissioner shall increase the  
66 fee schedule for complex care nursing services provided to individuals  
67 over the age of eighteen such that the rate of reimbursement is equal to  
68 the rate for such services provided to individuals age eighteen and  
69 under. There shall be no differential in fees paid for such services based  
70 on the age of the patient. The commissioner may increase any fee  
71 payable to a home health care agency or home health aide agency upon  
72 the application of such an agency evidencing extraordinary costs related  
73 to (1) serving persons with AIDS; (2) high-risk maternal and child health  
74 care; or (3) [escort services; or (4)] extended hour services. On and after  
75 July 1, 2024, the commissioner shall increase the fee payable to a home  
76 health care agency or home health aide agency that provides escorts for  
77 safety purposes to staff conducting a home visit. In no case shall any rate  
78 or fee exceed the charge to the general public for similar services. A  
79 home health care agency or home health aide agency which, due to any  
80 material change in circumstances, is aggrieved by a rate determined  
81 pursuant to this subsection may, within ten days of receipt of written

82 notice of such rate from the Commissioner of Social Services, request in  
83 writing a hearing on all items of aggrievement. The commissioner shall,  
84 upon the receipt of all documentation necessary to evaluate the request,  
85 determine whether there has been such a change in circumstances and  
86 shall conduct a hearing if appropriate. The Commissioner of Social  
87 Services shall adopt regulations, in accordance with chapter 54, to  
88 implement the provisions of this subsection. The commissioner may  
89 implement policies and procedures to carry out the provisions of this  
90 subsection while in the process of adopting regulations, provided notice  
91 of intent to adopt the regulations is posted on the eRegulations System  
92 not later than twenty days after the date of implementing the policies  
93 and procedures. Such policies and procedures shall be valid for not  
94 longer than nine months. For purposes of this subsection, "complex care  
95 nursing services" means intensive, specialized nursing services  
96 provided to a patient with complex care needs who requires skilled  
97 nursing care at home.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2024</i>	New section
Sec. 2	<i>October 1, 2024</i>	New section
Sec. 3	<i>from passage</i>	17b-242(a)

**Statement of Purpose:**

To require that providers contracting with the Department of Social Services for reimbursement under the medical assistance program provide training to staff on workplace violence prevention and to authorize the department to offer rate enhancements for escorts for home visits deemed hazardous and for timely reporting of workplace violence.

*[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.]*