



CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION

MICHELLE H. SEAGULL | COMMISSIONER

Testimony of Michelle Seagull Commissioner of Consumer Protection

Homemaker and Companion Agency Task Force November 4, 2022

Chairwoman Foley, Chairman McGoldrick and Honorable Members of the Homemaker and Companion Agency (HCA) Task Force, thank you for agreeing to volunteer your time to serve as part of this important work group and for the opportunity to submit testimony about the regulation of HCAs. Also, thank you Senator Miller, for your leadership in creating this Task Force. As Connecticut's population continues to age, and policies promoting aging in place are further implemented, it is important that there is review and analysis of the entire homecare industry, including HCAs.

As brief recap of the presentation from your last meeting, the Connecticut Department of Consumer Protection (DCP) regulates the HCA portion of the homecare industry, which currently includes just over 900 registered HCAs. The registration numbers have grown steadily since 2008, when DCP started regulating HCAs, and we anticipate continual growth as our population continues to age.

As you know, HCAs serve some of our state's most vulnerable residents. At DCP, we understand the importance of ensuring the public health and safety of our elderly population, and we also recognize that clients of HCAs and their loved ones rely heavily upon homemaker and companion services.

We find that, with both consumers and agencies, there is confusion about Connecticut's homecare industry. Businesses and consumers often don't know the difference between homemaker and companion agencies, home health agencies and homemaker health aide agencies. They don't know that HCAs are prohibited from providing health care services, or that there are certain requirements HCAs must follow when writing contracts and hiring employees. There is also confusion about private payer HCA services, and HCA services provided through programs administered by the Department of Social Services (DSS). Under DSS' Community First Choice program, for example, consumers can hire personal care attendants (PCAs) who, unlike staff employed by HCAs, may administer medication to their clients under certain circumstances.

Because of the multilayered homecare industry in Connecticut, outreach and education for both consumers and agencies is an important component of regulating HCAs. DCP has published guides for consumers and HCAs which we post on our website and share with advocacy and business organizations. We attend community events such as senior fairs and events hosted by trade associations that represent HCAs, so that we can provide information and respond to questions.

We also collaborate with our sister agencies, most often, the Department of Public Health, DSS, and the Office of the Long Term Care Ombudsman, about homecare issues and complaints against HCAs.

Despite our outreach and education efforts, and collaboration with other agencies, we still receive a fair number of complaints about HCAs from consumers and industry participants. When we receive complaints, our goal is to resolve them as quickly as possible.

If a complaint involves potential threat to the health and safety of a client, the complaint is moved to the top of the list so that we can ensure the health and safety of the client as well as other clients served by the respondent. Most of the complaints we receive, however, are complaints about billing or other business practices that do not raise concerns about the health and safety of clients. In those instances, our Investigations Division works to mediate

resolutions between complainants and respondents. The Division also evaluates if more extensive investigations are needed to bring the respondents into compliance with Connecticut laws.

Tens of thousands of Connecticut's families rely heavily upon the services provided by HCAs, and more than 30,000 of Connecticut's residents work in the HCA portion of the homecare industry. That is why our main objective, when public health and safety is not a factor, is to bring the HCA into compliance in a manner that does not disrupt the lives of the clients, family members of the clients served by the agency in question, and employees.

As this Task Force receives input about HCAs from state agencies, advocacy groups, industry participants and the public, DCP encourages you to consider a holistic review of the entire homecare industry. Additionally, you may wish to consider recommendations on how to best inform consumers and their families about new consumer protections recently enacted during the 2022 legislative session. Finally, we would encourage any recommendations on future changes to appropriately consider transition timelines and budgetary implications.

Thank you again for the opportunity to provide this testimony.