

# CT Association of Centers for Independent Living

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## Analysis of 2008 Session of the CT General Assembly

**Raised House Bill 5621**, which sought to give a right of hearing to applicants for and increase appropriations to the Rental Assistance, T-RAP and Section 8 Programs was not acted upon prior to the end of the session.

**Raised Bill 5791**, which sought to require DSS to establish a long-term care single point of entry (SPE) system was not acted upon prior to the end of the session.

**Raised House Bill 5793, Alzheimer's Respite Program**, which sought to increase the maximum grant that is available through the program from \$3,500 to \$5,000 was not acted upon prior to the end of the session.

**Raised House Bill 5794**, which sought to 1) provide enhanced requirements for direct care of residents of nursing homes (3.5 hours per resident per day in 2008, 3.9 hours per resident per day in 2009, and 4.2 hours per resident per day from 6/1/09 on); 2) require DPH to verify that minimum standards are met through inspections; 3) require DSS to calculate, on an annual basis, the average hours of direct care per resident; 4) establish procedures for situations in which a nursing facility is noncompliant with minimum hours of direct care per resident; 5) require DPH to investigate complaints of inadequate staffing; 6) require DPH to annually report on direct care staffing to the Human Services and Public Health Committees; 7) authorize the Long-Term Care Ombudsman to inspect resident care schedules and payroll records; 7) authorize DSS to recoup Medicaid payments made to a facility that has been noncompliant with minimum hours of direct care per resident; and 8) require nursing facilities to disclose and post staffing ratios, a DPH poster depicting minimum standards, and, for each shift, a list of the names of all direct care staff was not acted upon prior to the end of the session.

**Raised House Bill 5796**, which sought to 1) expand DSS' authority as authorized representative for ConnPACE applicants or recipients to include facilitation of enrollment in the Medicaid cost-sharing programs; and 2) increase income disregards for the SLMB and QI programs to equalize income eligibility with the levels that are used ConnPACE was not acted upon prior to the end of the session.

**Raised House Bill 5797**, which sought to clarify the role of the Commission on the Deaf and Hearing Impaired in providing qualified interpreter services in criminal and civil actions, criminal investigations, proceedings before state entities, proceedings before administrative or other bodies organized to hear employee grievances, and schools was not acted upon prior to the end of the session.

**Raised House Bill 5861**, which sought to require DPH to establish standards for care of individuals with mental illness, was not acted upon prior to the Appropriations Committee deadline.

## CT Association of Centers for Independent Living

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**Raised House Bill 5864**, which sought to 1) require DSS to complete an inventory of all nursing facilities; 2) in assessing certificates of need, prioritize models that are consistent with the State Long-Term Care Plan (e.g. green house, small house); 3) require that facilities prepare nurse staffing plans; and 4) require enhanced direct care to residents was not acted upon prior to the end of the session.

**Raised Senate Bill 156**, which sought to require DPH to produce a nursing facility report card that would include specified quality measures including resident ratings, federally-required quality indicators, direct care hours, staffing ratios and findings of inspection reports was not acted upon prior to the end of the session.

**Raised Senate Bill 387**, which sought to 1) modify the language of existing statutory requirements concerning Alzheimer's "special care units" to require submission to DPH of the required disclosure documents; 2) increase the minimum annual dementia-specific training for direct care staff from 3 to 8 hours; and 3) require DPH to adopt regulations to implement the statutory requirements was not acted upon prior to the end of the session.

**Raised Senate Bill 385**, which sought to require 1) that DPH, in advance of any inspection, use reports submitted by nursing facilities to DSS to gauge the number of working hours that have been provided by direct care staff to residents; 2) that DPH compare reported figures to actual staffing at the time of the inspection; 3) that DPH assess at the time of inspection whether residents' care needs are being met and use established benchmarks for such assessment; 4) the following minimum hours of direct care per resident every 24 hours: 2.32 hours by CNA's and 1.18 hours by licensed nurses; and 5) that facilities that fail to meet requirements for minimum hours of direct care document and report such deficiencies to DPH on a quarterly basis was not acted upon prior to the end of the session.

**Raised Senate Bill 567** which sought to 1) change the eligibility age for the program from 65 to 60; 2) include PCA's as a covered service of the program; and 3) appropriate funds for rate increases to providers was not acted upon prior to the Appropriations Committee deadline.

**Raised Senate Bill 664**, which sought to 1) require ITN projects to offer wheelchair accessible options; 2) expand the ITN project from 4 to 5 municipalities and give each a renewed grant of \$25,000; and 3) prohibit insurers from denying coverage or imposing a surcharge on the rates of volunteer drivers for ITN was not acted upon prior to the end of the session.

**Raised Senate Bill 413**, which sought to 1) create a Community Provider Rescue Fund Account for providers of service to children and those with disabilities; 2) establish a commission on community-based services; and 3) issue bonds in support of grants-in-aid for capital improvement projects was not acted upon prior to the end of the session.

**Raised Senate Bill 422**, which sought to permit DMHAS to expand its alternate to incarceration program for individuals with mental illness or substance abuse was not acted upon prior to the Appropriations Committee deadline.

## CT Association of Centers for Independent Living

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**Raised Senate Bill 470, Workforce Development**, which sought to implement workforce proposals including 1) creation of a nursing faculty scholarship-for-service and loan forgiveness program; 2) creation of an allied health incentive faculty program; and 3) through DEH, a review of the capacity of nursing and allied health facilities, was not acted upon prior to the end of the session.

**Raised Senate Bill 480**, which sought to adopt the Charitable Gift Annuity Model Act was not acted upon prior to the end of the session.

**Raised Senate Bill 575**, which sought to establish a task force to study day program services that are provided by DDS to persons with developmental disabilities residents was not acted upon prior to the end of the session.

**Raised Senate Bill 662**, which contained various Medicaid eligibility and coverage provisions, was not acted upon prior to the Appropriations Committee deadline.

**Raised Senate Bill 705**, which sought to permit an individual who is physically incapable of signing a will or codicil to direct another person to do so on his or her behalf was not acted upon prior to the end of the session.

**Public Act 08-45 (5/7/08 Signed by the Governor)** expands the existing statute that exempts any payment received from a discrimination case from claim or lien by the state for re-payment of benefits paid to include cases including discrimination in public accommodations.

**Public Act 08-46 (5/7/08 Signed by Governor)** codifies in statute DMHAS' requirement that all prospective employees and volunteers be screened through state criminal background checks and the DCF and DDS abuse/neglect registries.

**Public Act 08-88 (5/27/08 Signed by the Governor) Connecticut Home Care Program for the Disabled (CHCPD)** 1) ties asset limits for the program to those used for the state-funded components of the Connecticut Home Care Program for Elders; and 2) requires DSS to create a waitlist when capacity is reached. Provisions that sought 1) increase the number of participants in the CHCPD from 50 to 70; 2) appropriate \$1 m. for the CHCPD; and 3) appropriate \$2.5 m. to increase participation in the PCA waiver by 150 persons were removed prior to passage of the bill.

**Public Act 08-91 (5/27/08 signed by the Governor)** requires DSS to approve up to ten proposals for development of "small house" nursing homes.

**Public Act 08-93 (5/27/08 signed by the Governor)** permits elderly persons and those with disabilities who are accepted into subsidized housing to terminate their leases with 30 days notice without penalty or liability for the remaining lease term.

## CT Association of Centers for Independent Living

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**Public Act 08-115 (5/27/08 signed by the Governor)** prohibits television and cable companies and nursing home owners and operators from charging new installation fees to residents who change rooms.

**Public Act 08-132 (6/5/08 Signed by the Governor)** requires group health insurance policies to cover pervasive developmental disorders.

**Public Act 08-140 (6/5/08 Signed by Governor)** seeks to make dividends, as well as capital gains, on contributions to a Homecare Option Program for the Elderly (HOPE) account deductible.

**Public Act 08-158 (6/12/08 Signed by the Governor)** requires DSS to amend the Medicaid state plan to include hospice and foreign language interpreters as covered services. Podiatry and chiropractic were removed prior to passage of the bill.

**Public Act 08-180 (6/12/08 Signed by the Governor) Money Follows the Person**  
1) increases participation in the Money Follows the Person project from 700 to 5,000 persons; 2) establishes a Long-Term Care Reinvestment account into which federal match funds will be deposited; 3) enumerates priorities for DSS on how these funds should be expended; and 4) requires DSS to develop a plan to establish and administer a demonstration project (colloquially known as “MFP 2”) that includes the same service array as will be provided under MFP for individuals age 18 and older who are a) institutionalized or at risk of institutionalization; and b) meet CHCPE eligibility criteria.