

Long Term Services and Supports Legislation

Passed in the 2019 Session of the Connecticut General Assembly

Updated September 14, 2019

An asterisk (*) indicates legislation that addresses a recommendation in the 2019 Long-Term Care Plan.

***Public Act 19-34 (H.B. 5521) - AN ACT EXPANDING REQUIRED HEALTH INSURANCE COVERAGE FOR PREEXISTING CONDITIONS (Signed by the Governor July 1, 2019)**

This act prohibits short-term health insurance policies issued on a nonrenewable basis for a term of six months or less from containing a preexisting condition provision. The act redefines the term “preexisting condition provision” to include preexisting conditions whether or not medical advice, diagnosis, care, or treatment was recommended or received before the coverage effective date. Current law limits the provision to preexisting conditions for which medical advice, diagnosis, care, or treatment was recommended or received. *Effective Date: January 1, 2020.*

Special Act 19-12 (H.B. 7093) AN ACT ESTABLISHING A TASK FORCE TO INCREASE EMPLOYMENT OPPORTUNITIES FOR PERSONS WITH DISABILITIES (Signed by the Governor June 18, 2019)

This act establishes a task force to study how to increase employment opportunities for persons with disabilities. The task force shall study and make recommendations concerning matters including, but not limited to: (1) expanding existing employment assistance programs for persons with disabilities, and (2) establishing financial incentives for businesses to employ more persons with disabilities. The task force shall submit a report on its findings and recommendations to the joint standing committees of the General Assembly having cognizance of matters relating to finance, revenue and bonding, human services, labor and public health, by February 1, 2020. The task force shall terminate on the date that it submits such report or February 1, 2020, whichever is later. *Effective Date: Upon Passage.*

Public Act 19-137 (H.B. 7104) AN ACT CONCERNING ADOPTION OF THE CONNECTICUT UNIFORM TRUST CODE (Signed By the Governor July 12, 2019)

This act adopts the Connecticut Uniform Trust Code, establishing numerous rules on creating, modifying, terminating, and enforcing trusts. With some exceptions, the bill establishes default rules that the terms of a trust can override. Among several other topics, the act addresses the trustee’s duties, powers, and liability; the rights of creditors; revocable trusts (in which the settlor retains the authority to amend or revoke the trust); representation of beneficiaries or other parties; and establishment of a trust’s principal place of administration.

The act outlines the powers and obligations of parties administering directed trusts, which are trusts in which a person other than a trustee has power over some aspect of the trust’s administration (§§ 81-98). Among other things, the act addresses trust directors’ and directed trustee’s duties. It also sets up a framework for creating self-settled asset protection trusts, which are irrevocable trusts, the assets of which (1) the grantor may still benefit personally from and (2) creditors generally cannot reach (§§ 99-108), makes changes to the rule against perpetuities, extending the period in which future interests must vest to be valid (§§ 119), and makes minor, technical, and conforming changes. *Effective Date: January 1, 2020.*

*** Public Act 19-157 (H.B. 7163) AN ACT CONCERNING THE DEPARTMENT OF AGING AND DISABILITY SERVICES (Signed By the Governor July 8, 2019)**

This act does several things:

- 1) Allows the Department of Social Services (DSS) commissioner, beginning July 1, 2020, to annually increase the reimbursement rate for meals-on-wheels providers under the Connecticut Home Care Program for Elders by at least the consumer price index's cost of living adjustment. It also allows the commissioner to further increase a provider's rate if the provider submits evidence of extraordinary costs related to delivering these meals in sparsely populated rural areas of the state. *(Effective Date: July 1, 2020)*
- 2) Requires elderly nutrition providers to report annually to the Department of Rehabilitation Services (DORS) service level and cost data. Additionally, DORS is required to include this data in: (a) review of the method for allocating federal Older Americans Act (OAA) funds to the Area Agencies on Aging (AAAs) for supportive services and elderly nutrition. Such review is done in consultation with the five AAAs; and (b) report any findings and recommendations from its review to the Appropriations and Human Services committees. *(Effective Date: July 1, 2019)*
- 3) Requires the Department of Public Health (DPH), as part of its quality of care program for licensed health care facilities (e.g., hospitals and nursing homes), to develop recommendations on collecting and analyzing data on patient malnutrition to improve quality of care. *(Effective Date: July 1, 2019)*
- 4) Makes technical changes throughout statute in reference to the Department of Rehabilitation Services being renamed the "Department of Aging and Disability Services" and adds the new agency title to the statutory list of executive branch agencies. *(Effective Date: October 1, 2019)*
- 5) Deletes obsolete provisions, including two references to the Department of Aging. PA 18-169 transferred the functions, powers, duties, and personnel of the former State Department on Aging from DSS to DORS. *(October 1, 2019)*

***Public Act (19-170) H.B. 7230 AN ACT CONCERNING INTERPRETER STANDARDS (Signed By the Governor July 8, 2019)**

This act expands the circumstances that require interpreters to register with the Department of Rehabilitation Services (DORS) and creates exceptions to this requirement under narrow circumstances. The act also broadens: (1) the types of credentials an individual may hold to qualify as a registered interpreter; and (2) the categories of medical and legal settings that require interpreters to hold additional credentials.

Additionally, the act requires DORS to: (1) maintain a current listing of registered interpreters on its website; (2) annually issue interpreter identification cards listing the types of settings where the cardholder can interpret; and (3) make minor changes to the DORS-prescribed form on which interpreters must register. The act provides that people who are deaf, deaf-blind, or hard of hearing may exercise their right to request or use a different registered interpreter than the one provided in any setting in accordance with a nationally recognized interpreter code of professional conduct.

Lastly, the act authorizes anyone to report a violation related to interpreter requirements to the nonprofit entity the Governor designates as the state's protection and advocacy system for people with disabilities (i.e., Disability Rights Connecticut, Inc.). *Effective Date: July 1, 2019.*

*** Public Act 19-171 (H.B. 7244) AN ACT CONCERNING THE PROPERTY TAX EXEMPTION FOR SERVICE MEMBERS AND VETERANS HAVING DISABILITY RATINGS (Signed By the Governor July 12, 2019)**

This act increases the base property tax exemption for certain disabled service members and veterans by \$500. By doing so, it also increases the additional income-based exemption for such service members and veterans, which is calculated using the base exemption, by \$250 or \$1,000, depending on income. *Effective date: October 1, 2019, and applicable to assessment years commencing on or after October 1, 2019.*

*** Public Act 19-66 (S.B. 140) AN ACT EXPANDING ELIGIBILITY FOR TAX RELIEF FOR CERTAIN ELDERLY HOMEOWNERS (Signed By the Governor July 1, 2019)**

This act specifies that tax relief under this program also extends to owners of real property that is held in trust for the owner. Under the act, to qualify for tax relief on a home that is held in trust, the owner or the owner and his or her spouse must be both the grantor and beneficiary of the trust. Existing Tenant for Life law remains unchanged. *Effective Date: October 1, 2019 and applicable to assessment years beginning on or after that date.*

Public Act 19-89 (S.B. 375) An Act Concerning Nursing Home Staffing Levels (Signed By the Governor July 1, 2019)

This act requires nursing homes to calculate and post daily, at the beginning of each shift, information related to the number of advanced practice registered nurses (APRNs), registered nurses (RNs), licensed practical nurses (LPNs), and nurse's aides responsible for providing direct care to residents during the shift. Nursing homes must make the information available for public review, upon request, and retain the information for at least 18 months after posting it.

The Act also authorizes the Department of Public Health (DPH) Commissioner to take disciplinary action or issue a citation against a nursing home if it substantially failed to comply with current DPH nursing home minimum direct care staffing requirements (currently, 1.9 hours of direct nursing staff per resident per day). Nursing homes must prominently post on-site the staffing violation.

Additionally, the act requires a nursing home or residential care home (RCH) that discriminates or retaliates against a resident, resident's legal representative, or employee for filing a complaint or testifying in an administrative proceeding against a home to: (1) reinstate a terminated employee; or (2) restore a resident's prior housing arrangement or other living condition, as appropriate. *Effective Date: October 1, 2019.*

Special Act 19-18 (S.B. 804) AN ACT CONCERNING A COMMUNITY OMBUDSMAN (Signed By the Governor July 1, 2019)

The act requires the State Ombudsman and the Department of Social Services to develop a Community Ombudsman program to investigate complaints concerning care received by recipients of home and community-based services administered by the Department of Social Services. Not later than January 1, 2020, the State Ombudsman and the Commissioner of Social Services shall submit a report to the joint standing committees of the General Assembly having cognizance of matters relating to aging and human

services identifying: (1) The persons to be served in the Community Ombudsman program, (2) the types of services to be offered under such program, and (3) appropriations needed to staff the 12 Community Ombudsman program. *Effective Date: From Passage*

Public Act 19-115 (S.B. 827) AN ACT CONCERNING ALZHEIMER'S DISEASE AND DEMENTIA TRAINING AND BEST PRACTICES (Signed By the Governor July 1, 2019)

This act modifies continuing education requirements for physicians and advanced practice registered nurses (APRNs). Current law requires these professionals to complete at least two contact hours of training or education during the first license renewal period in which continuing education is required and at least once every six years thereafter on mental health conditions common to veterans and their family members.

Starting January 1, 2020, the bill retains this continuing education requirement for APRNs, but allows physicians to instead complete at least two contact hours of training or education in the following:

1. diagnosing and treating cognitive conditions, including Alzheimer's disease, dementia, delirium, related cognitive impairments, and geriatric depression or
2. diagnosing and treating any mental health conditions, instead of only those common to veterans and their family members.

It also allows, but does not require, APRNs to complete on the same schedule, at least two contact hours of training or education on diagnosing and treating cognitive and mental conditions, including those listed above.

Additionally, the act requires the executive director of the Commission on Women, Children, and Seniors (CWCS) to establish a nine-member working group on Alzheimer's Disease and Dementia. The working group must report its findings and recommendations by January 30, 2020, to the Aging Committee and terminates on the date it submits its report, or December 1, 2020, whichever is later.

EFFECTIVE DATE: January 1, 2020, except the provisions establishing the working group take effect upon passage.

Public Act 19-116 (S.B. 832) AN ACT CONCERNING REGISTRIES OF PERSONS FOUND RESPONSIBLE FOR ASSAULTS OR OTHER ABUSE, NEGLECT, EXPLOITATION OR ABANDONMENT OF ELDERLY PERSONS OR PERSONS WITH DISABILITIES (Signed By the Governor July 1, 2019)

This act requires the Executive Director of the Commission on Women, Children, and Seniors to do the following: (1) provide a portal on the commission's website that includes links to publicly available background databases; (2) convene a working group to develop strategies to raise public awareness of these databases to people hiring providers to care for adults aged 60 and older, children, or individuals with disabilities; (3) keep records on the number of times the portal is used and report to the Aging, Children's, Human Services, and Public Health committees by January 1, 2021.

Under this act, "publicly available background databases" include:

1. the U.S. Department of Justice's sex offender public website,
2. the Connecticut sex offender registry,

3. the U.S. Department of Health and Human Services Office of the Inspector General's list of individuals and entities excluded from participating in federally-funded health care programs for reasons including Medicare or Medicaid fraud,
4. DPH's nurse's aide registry,
5. the Judicial Branch's criminal and motor vehicle conviction database,
6. DPH's professional licensure verification database, and
7. DSS' database of practitioners and entities suspended or excluded from participating in DSS-administered programs.

Additionally, the act expands the list of disqualifying offenses under DPH's Long-Term Care Background Check Program that prohibit someone from being hired as a direct care employee or volunteer at a long-term care facility to include conviction of the following crimes:

1. 1st degree, 2nd degree, or 3rd degree assault of an elderly, blind, disabled, or pregnant person or a person with intellectual disability;
2. 2nd degree assault with a firearm of an elderly, blind, disabled, or pregnant person or a person with intellectual disability; or
3. 1st degree, 2nd degree, or 3rd degree abuse of an elderly, blind, or disabled person or a person with intellectual disability.

This is in addition to current law which also includes as a disqualifying offense (1) a state or federal agency's substantiated finding of neglect, abuse, or misappropriation of property under an investigation conducted in accordance with federal Medicare and Medicaid laws or (2) conviction for other specified state or federal crimes, such as felonies relating to health care fraud or controlled substances.

Effective Date: October 1, 2019

**Public Act 19-57 (S.B. 848) AN ACT CONCERNING FUNERAL SERVICE CONTRACTS AND CEMETERIES
(Signed By the Governor July 3, 2019)**

This act increases, from \$8,000 to \$10,000, the maximum allowable amount of an irrevocable funeral service contract. It requires that these contracts provide that after the contract's required services are performed, the remaining funds be used to pay the state for the amount of public assistance the state provided to the decedent or his or her dependent child. It requires the funeral service establishment that provides the contract's required services to pay any such amount to the DSS commissioner within 60 days after performing all of the services. If the establishment pays the funds to someone else, the act makes the establishment liable for repayment of the funds.

The act also eliminates the prohibition on selling crypts or rooms in a public mausoleum, or niches in a public columbarium, before the structures are completed. *EFFECTIVE DATE: January 1, 2020, except the provision on selling crypts, rooms, and niches is effective July 1, 2019, and a conforming change is effective October 1, 2019.*

Public Act 19-97 (S.B. 919) AN ACT REMOVING THE TERM "HOMEMAKER" IN REFERENCE TO HOME HEALTH AIDE AGENCIES AND SERVICES (Signed By the Governor July 1, 2019)

This act makes technical changes updating terminology in statutes related to home health care. It conforms to current practice by removing references to the term “homemaker” in provisions on home health aide agencies, providers, and services. By law, home health aide services are in-home supportive services provided under a registered nurse’s supervision. Such services include, among other things, assistance with feeding, dressing, personal hygiene, or incidental household tasks. *Effective Date: July 1, 2019*

Public Act 19-118 (S.B. 920) AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS FOR VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES (Signed By the Governor July 9, 2019)

This act makes various substantive, minor, and technical changes to DPH’s related statutes and programs. The sections relevant to Long Term Services and Supports (LTSS) are as follows:

§ 5 — Nursing Home Changes In Ownership. Requires a nursing home to notify DPH of a proposed ownership change at least 120 days, instead of 90 days, before the date of the ownership transfer.

§§ 13-18 and 26 - DPH Regulations. The act permits, rather than requires, DPH to adopt regulations in the following LTSS related areas: requiring home health agencies, residential care homes, assisted living services agencies, and licensed hospice care organizations to provide training on Alzheimer’s disease and dementia to direct care staff.

§ 15 - Requires residential care homes to designate unlicensed personnel to obtain certification to administer medication to residents who require such assistance.

§ 25 — Background Checks for Department of Development Services (DDS) Applicants.

Requires DDS to conduct fingerprint and state and national background checks on job applicants who have been made a conditional employment offer, instead of only applicants who will provide direct care to individuals with intellectual disabilities.

Effective Date: July 1, 2019

Public Act 19-76 (S.B. 1052) AN ACT EXPANDING MEDICAID COVERAGE OF TELEHEALTH SERVICES (Signed By the Governor June 28, 2019)

Current law requires DSS to provide telehealth coverage, within available state and federal resources, for categories of health care services that the DSS Commissioner determines are (1) clinically appropriate, (2) cost effective, and (3) likely to expand access. This act removes the availability of state and federal resources as a condition for providing such telehealth coverage. It specifies that there must be a clinical need for telehealth in determining health care categories likely to expand access for Medicaid recipients.

Under the act, the DSS commissioner may provide coverage of telehealth services regardless of any state regulations that would otherwise prohibit it. DSS may also implement policies and procedures to carry out the bill’s provisions while adopting them in regulations. The Department may do this only if it posts the policies and procedures on the state eRegulations system before adoption.

This act requires the DSS Commissioner to submit a report to the Human Services and Public Health Committees by August 1, 2020, on 1) the health care categories utilizing telehealth services, 2) the cities

or regions where the services are being offered, and 3) any cost savings realized by the state. *Effective Date: July 1, 2019*

Public act 19-42 (S.B. 1088) AN ACT CONCERNING PARTICIPATION BY A RESIDENT OF A NURSING HOME FACILITY OR RESIDENTIAL CARE HOME IN A RECEIVERSHIP PROCEEDING (Signed By the Governor June 21, 2019)

This act requires a court to allow (1) a resident of a nursing home or residential care home that is the subject of a receivership application or (2) the resident's legally liable relative, conservator, or guardian, to be heard at the hearing on the application without having to file as a party. Existing law allows the above listed individuals to appear as a party to such proceedings. *Effective Date: July 1, 2019*