Long Term Services and Support Legislation

Passed in the 2018 Session of the Connecticut General Assembly

As of June 8, 2018

An asterisk (*) indicates legislation that addresses a recommendation in the 2016 Long-Term Care Plan.

* H.R. 8 and S.R. 7 - RESOLUTION PROPOSING APPROVAL OF A MEMORANDUM OF AGREEMENT BETWEEN THE PCA WORKFORCE COUNCIL AND THE NEW ENGLAND HEALTH CARE EMPLOYEES UNION, DISTRICT 1199, SEIU. (Adopted March 21, 2018))

The resolution passed both chambers thereby approving a memorandum of agreement (MOA) between the Personal Care Attendant (PCA) Workforce Council and the New England Health Care Employees Union, District 1199, SEIU. This agreement is for the period of July 1, 2016 through June 30, 2021.

* Public Act 18-6 (sS.B. 309) AN ACT ALIGNING THE OFFICE OF THE LONG-TERM CARE OMBUDSMAN WITH THE OLDER AMERICANS ACT (Signed by the Governor May 14, 2018)

This bill transfers the Office of the Long-Term Care Ombudsman (OLTCO) from the Office of Policy and Management (OPM) to the Department of Rehabilitative Services (DORS). It also makes various changes to the OLTCO to comply with recent federal Older Americans Act regulations including: (1) specifying that the office serves all long-term care facility residents, regardless of age, by removing statutory references to older adults; (2) expanding the state ombudsman's duties to include developing policies and procedures for documenting and communicating informed consent in resident complaint cases; (3) expanding conflict of interest provisions by requiring DORS to ensure that the state ombudsman was not an employee or participant in the management of a long-term care facility in the 12 months before becoming the ombudsman; (4) specifying that the office's activities do not constitute lobbying under federal law; (5) adding to the conditions under which the state ombudsman may remove a resident advocate from his or her position; and (6) making minor changes to provisions granting the office access to residents' medical and social records when investigating a complaint.

The bill also (1) repeals an OLTCO home and community-based pilot program in Hartford County and (2) makes minor, technical, and conforming changes. *Effective Date: Upon passage*

* Public Act 18-13 (sh.B. 5205) AN ACT CONCERNING THE CONNECTICUT LIFE AND HEALTH INSURANCE GUARANTY ASSOCIATION. (Not yet signed by the Governor)

This bill makes several substantive changes to the Connecticut Life and Health Insurance Guaranty Association (CLHIGA), which pays the valid claims of policyholders and certain other claimants when a member insurer defaults, generally up to a statutory maximum of \$500,000 per individual and \$5 million per plan sponsor for certain unallocated insurance contracts. These claims are paid through assessments on member insurers. The bill: (1) requires health care centers (i.e., HMOs) to participate in the association, which (a) broadens the scope of members who are assessed for an impairment or insolvency and (b) requires CLHIGA to cover HMO members and enrollees for impairment or insolvency; (2) equalizes the assessments for long-term care (LTC) insurer insolvencies between (a) accident and health insurers and (b) life and annuity insurers; (3) excludes from coverage Medicaid benefits and certain financial contracts and structured settlements; (4) increases the potential size of the association's board of directors; (5) includes government entities as people who can be protected under

CLHIGA; and (6) makes several other related changes. This bill also maintains inflation protection levels for long-term care insurance policies which are administered by the Life and Health Insurance Guaranty Association. *Effective Date: July 1, 2018*

Public Act 18-23 (H.B. 5255) AN ACT CONCERNING THE AUTISM SPECTRUM DISORDER ADVISORY COUNCIL. (Signed by the Governor May 24, 2018)

This bill makes the Autism Spectrum Disorder Council permanent. Under current law, the council terminates June 30, 2018. *Effective Date: Upon Passage*

Public Act 18-38 (sS.B. 150) AN ACT PROVIDING PROTECTIONS FOR CONSUMERS APPLYING FOR REVERSE MORTGAGES. (Signed by the Governor May 29, 2018)

This bill expands the counseling and certification requirements for reverse annuity mortgages by (1) establishing counseling requirements that must be met before any entity, including a state or federally chartered bank or credit union, may (a) accept a final and complete reverse annuity mortgage loan application or (b) assess any fees for such a mortgage. (2) It requires reverse mortgage lenders to receive and store a signed certification from the borrower or his or her authorized representative stating that the counseling requirements were met. And (3) the bill prohibits a reverse mortgage lender, originator, or loan servicer from compensating counseling agencies and specifies that any violation of the counseling and certification provisions is a violation of the state's unfair trade practices law. *Effective Date: October 1, 2018*

Public Act 18-81 (S.B. 543) - AN ACT CONCERNING REVISIONS TO THE STATE BUDGET FOR FISCAL YEAR 2019 AND DEFICIENCY APPROPRIATIONS FOR FISCAL YEAR 2018 (Signed by the Governor May 15, 2018)

Of significance to long-term services and supports in the budget adjustment for fiscal year 2019 is the underfunding of the Subsidized Assisted Living Demonstration project in the Department of Housing. Additional funding of \$449,979, that had been requested by Governor Malloy in his mid-term budget adjustments, was not included for the Demonstration. The impact on the program is being assessed.

Public Act 18-96 (sh.B. 5257) AN ACT CONCERNING REPORTS OF ABUSE OR NEGLECT OF PERSONS WITH INTELLECTUAL DISABILITY OR AUTISM SPECTRUM DISORDER. Signed by the Governor June 6, 2018)

This bill reduces, from 72 to 48 hours, the amount of time a mandated reporter has to report the suspected abuse or neglect of a person (1) with an intellectual disability or (2) served by the Department of Social Services' (DSS) Division of Autism Spectrum Disorder Services. The bill also makes licensed behavioral analysts mandated reporters. *Effective Date: July 1, 2018*

*Public Act 18-99 (H.B. 5253) AN ACT EXPANDING ACCESS TO THE MONEY FOLLOWS THE PERSON DEMONSTRATION PROJECT AND REPEALING OBSOLETE STATUTES. (Signed by the Governor June 6, 2018)

This bill removes the 5,000-person cap on the number of individuals who may be served under the Money Follows the Person (MFP) demonstration program, which supports Medicaid enrollees who choose to transition from living in institutions to less restrictive, community-based settings. It also repeals various obsolete or inoperative provisions of the human services statutes.

*Public Act 18-160 (sH.B. 5290) AN ACT CONCERNING THE OFFICE OF HEALTH STRATEGY. (Signed by the Governor May 14, 2018)

Section 69 of this bill updates the composition of the Long-Term Care Planning Committee in the following ways: (1) reduces the number of Department of Public Health members from two to one by removing reference to a member from the Department of Public Health, Office of Health Care Access Division; and (2) Adding a member from the Health Systems Planning Unit of the Office of Health Strategy (OHS) to be appointed by the Executive Director of OHS. *Effective Date: Upon Passage*

*Public Act 18-169 (sH.B. 5028) AN ACT REQUIRING AN ANALYSIS OF THE ADMINISTRATIVE COSTS OF COLLECTING STATE TAXES. (*Not yet signed by the Governor*)

Section 8, subsection d through g make the following statutory changes: (1) transfers all functions of the Department on Aging to the Department from the Department of Social Services to the Department of Rehabilitation Services (DORS); (2) Designates DORS as Connecticut's State Unit on Aging; (3) moves all associated funding to DORS; and (4) replaces all statutory references to the Department on Aging with DORS.

Section 32 updates the composition of the Long-Term Care Planning Committee by adding the Department of Rehabilitation Services to the list of required members.

Effective Date: Upon Passage

* Special Act No. 18-2 (sSB 463) AN ACT ESTABLISHING A TASK FORCE TO STUDY THE NEEDS OF PERSONS WITH INTELLECTUAL DISABILITY AND PILOT PROGRAMS TO ESTABLISH AND EVALUATE ALTERNATIVE SERVICE MODELS FOR PERSONS WITH INTELLECTUAL DISABILITY (Signed by the Governor May 24, 2018)

This bill requires two actions: (1) the creation of a task force to study the needs of and manner in which services and supports can be provided to adults with intellectual disability; and (2) DDS to establish three pilot programs using alternative service models to serve individuals with intellectual disability who are eligible and waiting for residential services from the department. Details of the two sections is as follows:

Section 1: Task Force - This section of the bill establishes a task force, staffed by the administrative staff of the joint standing committee of the General Assembly having cognizance of matters relating to public health, to study the following: (1) the short-term and long-term needs of adults with intellectual disability, including, but not limited to, such adults with significant behavioral health issues or significant issues related to aging, including Alzheimer's disease, dementia and related disorders, and (2) ways in which the services and support such adults need may be provided. It specifies the composition of its membership and requires that all appointments to the task force shall be made not later than thirty days after the effective date of this section. Not later than January 1, 2019, the task force shall submit a report on its findings and recommendations to the joint standing committee of the General Assembly having cognizance of matters relating to public health. The task force shall terminate on the date that it submits such report or January 1, 2019, whichever is later. Effective date: Upon Passage

<u>Section 2: DDS Pilot Programs</u> – This section of the bill requires: (a) the Department of Developmental Services to establish, within available appropriations, up to three pilot programs that use alternative service models to serve individuals with intellectual disability who are eligible and waiting for residential services from the department. The pilot programs shall establish and evaluate alternative service

models in which individuals who are currently receiving residential services may move from their existing residential setting, with the consent of the individual or such individual's legal representative, to a more independent, less restrictive residential setting. Such alternative service models may include, but need not be limited to, shared living arrangements, community companion homes or the use of assistive technology. The department shall work in collaboration with advocacy and nonprofit stakeholder organizations in establishing the pilot program.

- (b) The department shall select up to three qualified service providers to participate in the pilot program established under subsection (a) of this section. A service provider that wants to be selected for participation in the pilot program shall submit a proposal to the Department of Developmental Services. Selection of a service provider by the department shall be based on the proposals submitted. Any cost savings generated by a service provider through the pilot program may be retained and used by such service provider to meet the needs of other individuals eligible and waiting for residential services from the department or to improve or enhance the services such service provider provides to individuals with intellectual disability. Any service provider that seeks to retain and use cost savings under this subsection shall submit a plan for retention and use of such savings to the Commissioner of Developmental Services for approval.
- (c) Not later than January 1, 2019, and annually thereafter until the conclusion of the pilot program, the Commissioner of Developmental Services shall report, to the joint standing committee of the General Assembly having cognizance of matters relating to public health regarding (1) the number of individuals served by the pilot program and the alternative service models chosen by such individuals, (2) the number of new individuals served by virtue of the cost savings generated through the pilot program and the residential or other services provided to such individuals, (3) other outcomes of the pilot program, and (4) recommendations of the department, stakeholder organizations and service providers based upon the outcomes of the pilot program. The pilot programs shall terminate on or before July 1, 2021, unless reauthorized by the General Assembly. *Effective Date: July 1, 2018*

* Special Act 18-3 (sh.B. 5245) AN ACT ESTABLISHING A TASK FORCE TO STUDY BEST PRACTICES FOR PROVIDING TRANSPORTATION FOR PERSONS WITH DISABILITIES, SENIOR CITIZENS AND VETERANS. (Not yet signed by the Governor)

This bill establishes a task force, administered by the Commission on Women, Children and Seniors, to study issues with publicly funded transportation for persons with disabilities and persons who are senior citizens or veterans. Such study shall include, but need not be limited to: (1) An examination of best practices in other states on serving such persons; (2) the services and public transportation fare discounts now available for such persons; (3) the current and anticipated transportation needs of such persons; and (4) ways the state can provide more efficient, cost-effective and reliable transportation for such persons. It also specifies the composition of the task force and requires that appointments be made not later than October 30, 2018. The task force must submit a report of its findings and recommendations to the committees of cognizance by January 1, 2019 and shall disband after the submission. *Effective Date: Upon Passage*

Special Act 18-5 (sh.B. 5460) AN ACT CONCERNING MINIMUM EMPLOYEE WAGES FOR PROVIDERS OF STATE-CONTRACTED HUMAN SERVICES. (Not yet signed by the Governor)

This bill allows the Office of Policy and Management (OPM) secretary to allocate available FY 19 funds to increase the wages of certain employees who provide services to individuals with intellectual disabilities authorized to receive services and supports through the Department of Developmental Services. The

increase applies to private providers of employment, day, and behavioral services and group home services. By December 1, 2018, the bill requires such providers to submit documentation to OPM that such funds will be used only for: (1) increasing the minimum wage paid to employees to at least \$14.75 per hour by January 1, 2019; and (2) providing a wage increase (up to 5%) to employees earning between \$14.76 and \$30.00 per hour by January 1, 2019. Additionally, OPM must reimburse the providers, within available appropriations, for the cost of employer taxes, increased benefits, and other costs associated with the wage increase provisions. *Effective Date: Upon passage*