



*Written Testimony before the Public Health Committee
Department of Social Services
March 14, 2022*

S.B. 331 - AN ACT CONCERNING THE PROVISION OF DEVELOPMENTAL SERVICES AND MENTAL AND BEHAVIORAL HEALTH SERVICES

Section 5 of Senate Bill 331 permits the Commissioner of the Department of Social Services (DSS) to contract with one or more hospitals and one or more non-profit organizations to provide social services and referrals for social services to frequent users of hospital services, including, but not limited to, emergency department services.

The Department of Social Services appreciates the interest and concern of the committee in addressing the needs of individuals who are frequent users of hospital services.

The Department respectfully offers that there is no current impediment to the Department aligning any of its current contractual agreements with providers of social services with its efforts to coordinate health services for people served by HUSKY Health. Further, the Department already has in place a number of mechanisms to address these needs that have significantly decreased inappropriate use of the emergency department, inpatient hospital admissions and readmissions. Specifically:

- The HUSKY Health medical and behavioral health administrative services organizations (ASOs), respectively CHNCT and Beacon, maintain intensive care management (ICM) teams that include both licensed clinical staff and enabling staff – community health workers and peer supports who have lived experience with mental health conditions and substance use disorder. Individuals are identified for ICM support through self-report, referrals, and data analytics, and receive help in setting goals, accessing needed providers, and addressing social determinants of health (housing stability, food insecurity and related needs).
- CHNCT also maintains specific, targeted interventions for high-risk cohorts including women with high-risk pregnancies, people with sickle cell disease, and others. These individuals also typically receive ICM support for social determinants.
- The Department’s PCMH+ initiative, which includes both federally qualified health centers and advanced primary care networks, specifically requires those entities to enter into cooperative agreements with community-based organizations that have the capacity to address social determinant needs, many of which receive social services funding from the Department.

For these reasons, the Department does not feel that the enabling language in Section 5 of the bill is needed.

S.B. 376 AN ACT CONCERNING THE DEPARTMENT OF DEVELOPMENTAL SERVICES' RECOMMENDATIONS REGARDING ABLE ACCOUNTS.

The Department of Social Services (DSS) supports Senate Bill 376 and would suggest an amendment to include State Supplement in the bill language.

As drafted, the bill adds only state-administered general assistance (SAGA) to the list of programs in which investments in, contributions to, and distributions from an ABLE account are disregarded for the purposes of determining an individual's eligibility for assistance.

Respectfully, DSS would like to suggest the following amendment to the language to ensure this disregard is applicable to the State Supplement program as well:

(a) Notwithstanding any provision of the general statutes, moneys invested in an individual ABLE account, contributions to an individual ABLE account and distributions for qualified disability expenses pursuant to sections 3-39j to 3-39q, inclusive, shall be disregarded for purposes of determining an individual's eligibility for assistance under (1) the program of optional state supplementation, as described in section 17b-600, to the extent such invested moneys, contributions and distributions may be disregarded under the federal Supplemental Security Income Program, (2) the temporary family assistance program, as described in section 17b-112, (3) programs funded under the federal Low Income Home Energy Assistance Program block grant, (4) the state-administered general assistance program, as described in [pursuant to] section[s] 17b-191 [0 to 17b200] and (5) any other federally funded assistance or benefit program, including, but not limited to, the state's medical assistance program, whenever such program requires consideration of one or more financial circumstances of an individual for the purpose of determining the individual's eligibility to receive any assistance or benefit or the amount of any assistance or benefit.

This amendment would allow the Department to treat State Supplement recipients the same way that the partner federal program (SSI) treats recipients.

Thank you for the opportunity to provide testimony on these two bills.