

Claudette J. Beaulieu, Deputy Commissioner

November 9, 2009 Effective Date

POLICY TRANSMITTAL NO.: UP-10-07

SUBJECT: Payment for Costs Associated with Organ Donations

This transmittal provides revised policy pertaining to the payment of costs associated with organ donations in the ConnTRANS program. The changes are made pursuant to Public Act 08-184, which allows ConnTRANS payments to assist individuals who have donated an organ to a resident of the state in paying all or part of any costs associated with the organ donation, including, but not limited to, costs of transportation, accommodation and lost wages.

This regulation is effective November 9, 2009, the date that it was filed with the Secretary of State.

INSTRUCTIONS FOR UPDATING THE UPM:

Remove and Recycle 8070.10/8070.15 8070.15 page two/8070.20 8070.50/8070.55 Insert 8070.10/8070.15 8070.15 page two/8070.20 8070.50/8070.55

DISPOSITION: This policy Transmittal may be recycled once the UPM has been updated.

DISTRIBUTION: UPM List

RESPONSIBLE UNIT:

Adult Services, (860) 424-5250

Date Issued: 7/6/10

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MCS

Date: 5-1-96	Transmittal: UP-98-11	8070.10	
Section: Special Progra	ams	Type:	LICY
Chapter: Connecticut Assistance For Organ Transplant Recipients		Program: ConnTI	RANS
Subject: Categorical Eligibility Requirements			

- 8070.10 In order to be eligible for ConnTRANS, certain categorical eligibility requirements must be met.
 - A. The applicant must verify that he or she has received or is a candidate to receive an organ transplant. The types of transplants covered include but are not limited to the following:
 - 1. heart; or
 - 2. lung; or
 - 3. kidney; or
 - 4. heart/lung; or
 - 5. liver; or
 - 6. bone marrow; or
 - 7. pancreas.
 - B. The applicant or recipient must disclose and verify all assets or income and every source of remuneration including but not limited to health insurance, charitable funds, fund raisers, drug companies, etc.

•	8070.15
	Type:
	POLICY
	Program:
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8070.15 A. Basic Provisions

ConnTRANS pays benefits to individuals who have insufficient resources to pay for the medical or ancillary expenses related to an organ transplant including maintenance costs associated with a successful transplant.

B. Limits to Assistance - Certification Period

- 1. The benefit paid to each individual is subject to the discretion of the Department and the availability of funds and is based on family size and income and asset limits established by the Department. (Cross Reference: 8070.30 and 8070.45)
- 2. The maximum benefit is determined by the amount of medical expenses of the individual and ancillary expenses of the individual and members of his or her family and the organ donor which are related to the transplant and which are not covered or payable by any other source of payment such as medical insurance, private donations, etc.
- 3. On any occasion assistance is granted, the period of assistance shall not exceed twelve months and the maximum payable benefit cannot exceed one-half of the available funds in the ConnTRANS account.

C. Covered Medical and Ancillary Services

ConnTRANS will pay all or part of medical or ancillary services needed by an individual and ancillary expenses of an individual's family and organ the donor when the individual is a candidate for or a recipient of an organ transplant as determined by the Department. Covered services include but are not limited to the following:

1. Medical Services

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- a. physician services;
- b. hospital services;
- c. x-ray and laboratory services;
- d. prescription drugs; and
- e. medical expenses of an organ donor.

Date: 11-9-09	Transmittal: UP-10-07		8070.15 page 2
Section: Special Programs		Туре:	POLICY
Chapter: Connecticut Assistance fo	or Organ Transplant Patients	Program:	ConnTRANS
Subject: Standards of Assistance			

8070.15 C. Covered Medical and Ancillary Services (continued)

2. Ancillary Services

- a. transportation costs including fees for parking for the patient, family and organ donor;
- b. child care expenses related to treatment of an eligible individual;
- c. lodging for patient, family and organ donor related to treatment of an eligible individual;
- d. non-prescription drug;
- e. health insurance premiums; and
- f. lost wages of the organ donor due to participation in the transplant.

Date: 5-1-96 Transmittal: UP-98-11 8070.20

Section: Type: POLICY

Chapter: Program: Connecticut Assistance For Organ Transplant Recipients ConnTRANS

Subject: Technical and Procedural Eligibility Requirements

8070.20 A. Technical Eligibility Requirements

1. Citizenship

In order to receive benefits from the ConnTRANS program, an individual must be a citizen or an eligible non-citizen of the United States (Cross Reference 3005.06).

2. Residency

In order to receive benefits from the ConnTRANS program, an individual must be a bona fide resident of Connecticut for at least 60 days.

B. Procedural Eligibility Requirement

An individual who applies for ConnTRANS must apply for and accept all other benefits to which he or she may be entitled from the Department and other agencies. When an individual who appears eligible for such a benefit fails to apply or complete the application process, ConnTRANS will be denied or discontinued.

Date: 11-9-09	ı	Transmittal: UP-10-07	8070.50
Section: Specia	ıl Prog	grams	Type: POLICY
Chapter:	ecticut	Assistance for Organ Transplant Recipients	Program: ConnTRANS
Subject: Deterr	ninati	on of Payment	·
8070.50	<u>Det</u>	ermination of Payment	
	exp	the income eligibility is determined, payments to assuments associated with the transplant are authorized ments are based on all of the following factors:	
	1.	the applied income for the family;	
	2.	the incurred or anticipated medical and ancillary e	xpenses of the individual;
	3.	the incurred or anticipated medical and ancilla donor;	ary expenses of the organ
	4.	the incurred or anticipated ancillary expenses of the	ne family; and
	5	the availability of funds	

Date: 5-1-96	Transmittal: UP-98-11	8070.55
Section:		Type:
Special Programs		POLICY
Chapter:		Program:
Connecticut Assistance for	Organ Transplant Recipients	ConnTRANS
Subject:	· · · · · · · · · · · · · · · · · · ·	
Benefit Issuance		

- 8070.55 Benefits for medical and ancillary services are issued either directly to the recipient or as a vendor payment.
 - 1. Benefits will be issued directly to the recipient when:
 - a. the benefit is for an anticipated recurring need; or
 - b. the recipient has requested reimbursement for medical and/or ancillary expenses already paid; or
 - c. an unpaid provider's bill is less than \$500.00 and the recipient has requested that we pay him/her directly.
 - 2. Benefits will be vendored to the provider of the service when the payment is more than \$500.00.