



General Assembly

January Session, 2019

***Raised Bill No. 895***

LCO No. 4635



Referred to Committee on HUMAN SERVICES

Introduced by:  
(HS)

***AN ACT CONCERNING MEDICAID COVERAGE OF IN-HOME  
COUNSELING PROVIDED BY A HOME HEALTH CARE AGENCY.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (a) of section 17b-242 of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective July*  
3 *1, 2019*):

4 (a) The Department of Social Services shall determine the rates to be  
5 paid to home health care agencies and homemaker-home health aide  
6 agencies by the state or any town in the state for persons aided or  
7 cared for by the state or any such town. [For the period from February  
8 1, 1991, to January 31, 1992, inclusive, payment for each service to the  
9 state shall be based upon the rate for such service as determined by the  
10 Office of Health Care Access, except that for those providers whose  
11 Medicaid rates for the year ending January 31, 1991, exceed the median  
12 rate, no increase shall be allowed. For those providers whose rates for  
13 the year ending January 31, 1991, are below the median rate, increases  
14 shall not exceed the lower of the prior rate increased by the most  
15 recent annual increase in the consumer price index for urban

16 consumers or the median rate. In no case shall any such rate exceed the  
17 eightieth percentile of rates in effect January 31, 1991, nor shall any rate  
18 exceed the charge to the general public for similar services. Rates  
19 effective February 1, 1992, shall be based upon rates as determined by  
20 the Office of Health Care Access, except that increases shall not exceed  
21 the prior year's rate increased by the most recent annual increase in the  
22 consumer price index for urban consumers and rates effective  
23 February 1, 1992, shall remain in effect through June 30, 1993. Rates  
24 effective July 1, 1993, shall be based upon rates as determined by the  
25 Office of Health Care Access except if the Medicaid rates for any  
26 service for the period ending June 30, 1993, exceed the median rate for  
27 such service, the increase effective July 1, 1993, shall not exceed one  
28 per cent. If the Medicaid rate for any service for the period ending June  
29 30, 1993, is below the median rate, the increase effective July 1, 1993,  
30 shall not exceed the lower of the prior rate increased by one and one-  
31 half times the most recent annual increase in the consumer price index  
32 for urban consumers or the median rate plus one per cent.] The  
33 Commissioner of Social Services shall establish a fee schedule for home  
34 health services to be effective on and after July 1, 1994. The  
35 commissioner may annually modify such fee schedule if such  
36 modification is needed to ensure that the conversion to an  
37 administrative services organization is cost neutral to home health care  
38 agencies and homemaker-home health aide agencies in the aggregate  
39 and ensures patient access. Utilization may be a factor in determining  
40 cost neutrality. The commissioner shall increase the fee schedule for  
41 home health services provided under the Connecticut home-care  
42 program for the elderly established under section 17b-342, effective  
43 July 1, 2000, by two per cent over the fee schedule for home health  
44 services for the previous year. The commissioner may increase any fee  
45 payable to a home health care agency or homemaker-home health aide  
46 agency upon the application of such an agency evidencing  
47 extraordinary costs related to (1) serving persons with AIDS; (2) high-  
48 risk maternal and child health care; (3) escort services; or (4) extended  
49 hour services. In no case shall any rate or fee exceed the charge to the  
50 general public for similar services. The commissioner shall include in

51 the fee schedule rates to be paid under the medical assistance program  
52 for behavioral health counseling provided to a medical assistance  
53 beneficiary in his or her home by a social worker employed by a home  
54 health care agency who is licensed pursuant to chapter 383b. A home  
55 health care agency or homemaker-home health aide agency which, due  
56 to any material change in circumstances, is aggrieved by a rate  
57 determined pursuant to this subsection may, within ten days of receipt  
58 of written notice of such rate from the Commissioner of Social Services,  
59 request in writing a hearing on all items of aggrievement. The  
60 commissioner shall, upon the receipt of all documentation necessary to  
61 evaluate the request, determine whether there has been such a change  
62 in circumstances and shall conduct a hearing if appropriate. The  
63 Commissioner of Social Services shall adopt regulations, in accordance  
64 with chapter 54, to implement the provisions of this subsection. The  
65 commissioner may implement policies and procedures to carry out the  
66 provisions of this subsection while in the process of adopting  
67 regulations, provided notice of intent to adopt the regulations is  
68 [published in the Connecticut Law Journal not later than twenty days  
69 after the date of] posted on the eRegulations System prior to the date  
70 of adopting the regulations and implementing the policies and  
71 procedures. Such policies and procedures shall be valid for not longer  
72 than nine months.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2019</i>	17b-242(a)

**Statement of Purpose:**

To provide Medicaid coverage for behavioral counseling provided to Medicaid beneficiaries in their homes by licensed social workers employed by home health care agencies.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*