

**Act Number:** 09-017

**Bill Number:** 5297

**Senate Pages:** 1592, 1657, 1659 **3**

**House Pages:** 1343-1350 **8**

**Committee:** Aging: 15, 20, 26-29, 41, 44-  
45, 65, 69, 92, 94, 196-198, 201, 220A, 223, 237, 239,  
273, 275 **23**

**Page Total:** **34**

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**CONNECTICUT  
GENERAL ASSEMBLY  
SENATE**

**PROCEEDINGS  
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ordered, sir.

SENATOR LOONEY:

Thank you, Mr. President. Calendar 392, PR.

Calendar 393, PR.

Moving to calendar page 11, Calendar 394 is  
marked go.

Calendar 395, House Bill Number 5297, Mr.

President, I move to place this item on the Consent  
Calendar.

THE CHAIR:

Motion is on the floor for consent. Seeing no  
objection, so ordered.

SENATOR LOONEY:

Yes, thank you, Mr. President. Calendar 397, PR.

Calendar 398, PR.

Calendar 401 is PR.

Mr. President, calendar page 11, Calendar 403,  
House Bill Number 6462, Mr. President, I move to place  
this item on the Consent Calendar.

THE CHAIR:

Motion on the floor for consent. Seeing no  
objection, so ordered.

SENATOR LOONEY:

Thank you, Mr. President. Moving to calendar

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Calendar page 6, Calendar 245, Substitute for House Bill 6266.

Calendar page 7, Calendar 272, Substitute for Senate Bill 1040.

Calendar Page 8, Calendar 359, Senate Bill 1082.

Calendar page 10, Calendar 389, Substitute for House Bill 6327; Calendar 391, Substitute for House Bill 5930.

Calendar page 11, Calendar 395, Substitute for House Bill 5297; Calendar 403, House Bill 6462.

Calendar page 12, Calendar 414, Senate Bill 905.

Calendar page 13, Calendar 416, Senate Bill 998;  
Calendar 432, Substitute for Senate Bill 1020.

Calendar page 15, Calendar 457, Substitute for House Bill 6356.

Calendar page 16, Calendar 460, Substitute for House Bill 6301; Calendar 465, Senate Bill 963.

Calendar page 18, Calendar 487, Senate Bill 707;  
Calendar 489, Substitute for Senate Bill 810.

Calendar page 21, Calendar Number 506, Senate Bill 1136; Calendar 507, Senate Bill 1141.

Calendar page 22, Calendar 515, Substitute for Senate Bill 832.

Calendar page 23, Calendar 524, Substitute for

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Have all Senators voted?

If all Senators have voted, please check the machine. The machine will be locked, the Clerk will call the tally.

THE CLERK:

Motion is on adoption of Consent Calendar Number 1. Total number voting, 36; those voting yea, 36; those voting nay, 0; those absent/not voting, 0.

THE CHAIR:

Consent Calendar Number 1 passes.

Senator Looney.

SENATOR LOONEY:

Thank you, Mr. President. Mr. President, I would move that all items referred to various committees from the chamber today be transmitted to those committees immediately.

THE CHAIR:

Without objection, so ordered, sir.

SENATOR LOONEY:

Thank you, Mr. President. Mr. President, also, would announce that we will be convening tomorrow about -- at 11:30 a.m., it's our intention to pick up with bills that had previously been marked "go" today. So I would move that all items previously marked go

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action later today.

Will the Clerk please call Calendar 228.

THE CLERK:

On page 16, Calendar 228, substitute for House Bill Number 5297, AN ACT CONCERNING THE STATUS OF THE MONEY FOLLOWS THE PERSON PROJECT, favorable report of the Committee on Human Services.

DEPUTY SPEAKER McCLUSKEY:

Representative Serra of the 33rd.

REP. SERRA (33rd):

Thank you, Mr. Speaker. I move the joint -- favorable joint report of the -- hold one second. I got the wrong file.

I move that -- the joint favorable report and the passage of the bill.

DEPUTY SPEAKER McCLUSKEY:

Thank you. The question before the Chamber is on acceptance of the --

REP. SERRA (33rd):

On adoption.

DEPUTY SPEAKER McCLUSKEY:

-- committee's favorable report and adoption of the resolution -- or excuse me, passage of the bill.

Will you remark?

REP. SERRA (33rd):

Thank you, Mr. Speaker. Mr. Speaker, what this bill does is to provide committees of cognizance, the Aging Committee and Human Services Committee, with reports filed by the department of DSS to the federal government. The committees have requested that they receive these reports from the Department of Social Services. That's about what this bill does, Mr. Speaker. Thank you.

DEPUTY SPEAKER McCLUSKEY:

Thank you. Are there any other remarks on this bill? Representative Cafero of the 142nd.

REP. CAFERO (142nd):

Thank you, Mr. Speaker. Mr. Speaker, through you, a question to Representative Serra.

DEPUTY SPEAKER McCLUSKEY:

Please prepare yourself, Representative Serra.

REP. SERRA (33rd):

Thank you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Cafero.

REP. CAFERO (142nd):

Thank you, Mr. Speaker. Through you, Representative Serra, was this bill done at the

request of a particular agency or an entity? Or --  
trying to understand the general purpose behind it.  
Through you, Mr. Speaker.

REP. SERRA (33rd):

This bill does Money Follows the Person. It's  
requested by the Committee on Aging. The committee  
had asked the Commissioner of DSS about this and said,  
how come we don't receive any of these reports that  
you have to file with the federal government? And so  
we ask that the committees of cognizance receive these  
reports.

DEPUTY SPEAKER McCLUSKEY:

Representative Cafero.

REP. CAFERO (142nd):

Thank you. So, through you, Mr. Speaker, this is  
nothing more than having them instructed to submit the  
reports, which they heretofore were not required to  
do, to the committees of cognizance. Is that correct?  
Through you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Serra.

REP. SERRA (33rd):

Through you, Mr. Speaker, that is correct,  
Mr. Minority Leader.

REP. CAFERO (142nd):

Thank you very much. Thank you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Thank you. Will you remark further on the bill?  
Representative Santiago of the 130th.

I guess not. Is -- anyone else care to remark  
further on this bill? Will you remark?  
Representative Cafero from the 142nd for the second  
time.

REP. CAFERO (142nd):

Thank you, Mr. Speaker. Mr. Speaker, thank you.  
I was -- just pointed out that I might have neglected  
to ask a question of great importance, through you,  
Mr. Speaker, to Representative Serra.

DEPUTY SPEAKER McCLUSKEY:

Prepare yourself, Representative Serra.

REP. CAFERO (142nd):

Thank you, Mr. Speaker. Is there anything in the  
bill, through you, Mr. Speaker, that would result in a  
fiscal note, either to this fiscal year or future  
fiscal years if this reporting process set out by this  
particular bill was not adhered to? Through you, Mr.  
Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Serra.

REP. SERRA (33rd):

Through you, Mr. Speaker, not to my knowledge with the exception of being able to prepare the reports for the various commission -- committees of cognizance, to my knowledge.

DEPUTY SPEAKER McCLUSKEY:

Representative Cafero.

REP. CAFERO (142nd):

Thank you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Gibbons of the 150th.

REP. GIBBONS (150th):

Thank you, Mr. Speaker. I was trying to find my notes and -- because I remembered one of the questions I have. If I may ask, through you, a question to the proponent of the bill, please.

DEPUTY SPEAKER McCLUSKEY:

Please proceed, madam. Representative Serra, please prepare yourself.

REP. GIBBONS (150th):

Thank you, Mr. Speaker. Through you, one of the concerns we had in Human Services that DSS has to file Money Follows the Person reports with the federal

government. I'm not sure how often. Could you tell me, please, that, Mr. Serra, or Representative? Is it every six months or once a year, please? Through you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Serra.

REP. SERRA (33rd):

Through you, Mr. Speaker, if my memory serves me correctly, every six months.

REP. GIBBONS (150th):

Through you, Mr. Speaker, that was part of the concern that we had in the Human Services that possibly we did not have to file that report with the feds every six months and were -- was DSS then going to have to file a full-blown report with DSS, with Human -- I mean, with Human Services and with Aging at that time. We said that we would really like just a one-page report that said how many people had applied for Money Follows the Person, how many people had been accepted. Through you, Mr. Speaker, I guess my question is, is this your understanding too, and will these interim reports be as short and small as we asked for? Thank you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Representative Serra.

REP. SERRA (33rd):

Through you, Mr. Speaker, that is my recollection. We just really want to know how Money Follows the Person is working and how many people are coming off of the program and out of the convalescent homes.

DEPUTY SPEAKER McCLUSKEY:

Representative Gibbons.

REP. GIBBONS (150th):

Thank you, Mr. Speaker. If these reports really are as short as we all describe them to be, then I would accept this bill, and I urge support for the bill. However, if it turns out that DSS feels that they've got to file a ten-page report, I would like to revisit this later on. Thank you, Mr. Speaker.

DEPUTY SPEAKER McCLUSKEY:

Thank you, madam. Will you remark further on this bill? Will you remark further on this bill? If not, will the staff and guests please come to the well of the House. Will the members please take your seats. The machine will be open.

THE CLERK:

The House of Representatives is voting by roll

call. Members to the chamber. The House is voting by roll call. Members to the chamber please.

DEPUTY SPEAKER McCLUSKEY:

Have all the members voted? Have all the members voted? Will the members please check the board to determine whether your vote is properly cast. If all the members have voted, the machine will be locked and the Clerk will please take the tally. Clerk, please announce the tally.

THE CLERK:

House Bill Number 5297.

Total Number Voting	143
Necessary for Passage	72
Those voting Yea	140
Those voting Nay	3
Those absent and not voting	8

DEPUTY SPEAKER McCLUSKEY:

The bill passes.

Will the Clerk please call Calendar Number 75.

THE CLERK:

On page 2, Calendar 75, substitute for House Bill Number 5669, AN ACT CONCERNING EMPLOYER HEALTH INSURANCE PREMIUM PAYMENTS FOR TERMINATED EMPLOYEES, favorable report of the Committee on Insurance and

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eligibility. So I'll check that out, and I'll share that information with Senator Debicella.

PEGGY DESCHENES: I'm sure he'll appreciate that.  
Thank you.

SENATOR PRAGUE: So, thank you.

REP. SERRA: Any other questions? Thank you.

Commissioner Starkowski, please. Thank you.  
Good morning, Commissioner. You're the man of the hour, they tell me.

MICHAEL STARKOWSKI: I hope it's not an hour.

REP. SERRA: I do, too.

MICHAEL STARKOWSKI: Good morning, Senator Prague and Representative Serra, and members of the Select Committee on Aging. My name is Michael Starkowski. I'm the Commissioner of the Department of Social Services.

I'm here to testify on a number of bills before you. Some of those bills are -- my testimony is just going to be the written testimony, and some of them, I'll actually comment on the written testimony.

SB 450, An Act Concerning the Nursing Home Oversight, this bill would reestablish and revise the membership of the Nursing Home Financial Advisory Committee. The bill adds the comptroller or designee and a state ombudsman to the committee comprised of representation from DSS, the Office of Policy and Management, the Department of Public Health, CHFA, the Office of Fiscal Analysis and two representatives of nursing homes appointed by the governor. The bill makes the comptroller the chairperson of the committee.

Under the current statute, the committee is cochaired by representatives of the Department

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hours and nursing aide hours.

Based upon a preliminary review of the reported paid nursing and nursing aide hours and 2007 cost reports filings, it's estimated that 80 facilities would need to add both nursing and nurse aide staff, and 84 facilities would need to add either nurses or nurse aides to comply with the proposed staffing standards. Initial estimates of the annual Medicaid costs are between \$45 to \$55 million. As a result, the department must oppose the bill because of the significant cost to the State.

House Bill 5297, An Act Concerning the Status of the Money Follows the Person Project. Currently, the department's required to file approximately 35 reports to the federal government on the Money Follows the Person Program. As an alternative to the legislation, in an effort not to increase the workload on the department, we would offer to meet with members of the committee to determine which of those 35 reports you'd like to get a copy of, and we would gladly submit those reports to you on a regular basis.

HB 5298, An Act Concerning the Asset Limitations Under the State -- Connecticut Home Care Program for the Elderly. DSS opposes this increase for several reasons since the limit -- the asset limitations and the state-funded home care program have risen significantly. In April, 2007, they were \$20,328 for an individual and \$30,492 for a couple. Based on two major increases that were given, they've risen to 32,868 for an individual and \$43,824 for a couple. That's a significant increase in the past, about 18 months.

appreciate your sentiments regarding that, and they do perform a valuable service. It doesn't sound as if we're at the point where, at least from your perspective, we're losing any ground. We may have barriers to other folks entering into the field that would prove to be very helpful, but if I catch wind from folks that are involved in the adult day care enterprises out there, that they're in danger of going out of business, I'll give your office a call, and maybe we can try to come up with something creative to pull them through.

MICHAEL STARKOWSKI: Okay. Thank you.

SENATOR KISSEL: Let's see. And there was -- yeah. Why in heaven's name are we providing -- and is this just federal government out of control -- 35 reports regarding Money Follows the Person? Because if I -- well, Senator Prague is jumping into my question and wants to know who's paying for that as well. That just sounds like an inordinate amount of paperwork and report preparation for a program that's barely getting off the ground as we speak, and I'm just wondering what's at the heart of that.

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MICHAEL STARKOWSKI: You know, it's a new program. It's completely innovative as far as the federal government is concerned. You remember individuals have to be, in order to get the federal extra -- federal part -- financial participation, the individuals have to move into one of our federally-funded programs, the waiver programs. The federal government has made that a stipulation as part of accepting the enhanced part -- participation. It wasn't a requirement that we went out and said we could report 35 different ways to you. It was the federal government wanting to know every aspect of the program to see if the program

was successful and that people were put in a safe, secure environment after they left the nursing facility, and did the person continue to be provided services in the community after the one year of the enhanced match.

SENATOR KISSEL: If we had -- I remember in some of the presentations that you've made, and I want to thank you for everything that you do because I think you've been doing an excellent job as commissioner, and you have your hands full with the budget that's coming down the road.

If we had, sort of, one omnibus waiver as opposed to all these isolated waivers, would that help with the reporting process, or that because it's a new program, the federal government is requiring these 35 reports? And I can't even imagine how you should break it down into 35 components.

MICHAEL STARKOWSKI: I know. Senator, one omnibus waiver would help not only in the reporting for the Money Follows the Person, but would not only help there, it would help with all of the financial systems that we had to put in place to report on the individuals in each one of those waivers.

On the eligibility system that we have, we have 40 different eligibility categories. Most of those are because of different types of eligibility and different criteria for everyone of those waiver programs.

A universal waiver would be a lot more preferable than -- preferable than the situation we're in now.

SENATOR KISSEL: Is that something we can do unilaterally as a state, or do we have to --

or the federal government won't allow it?

MICHAEL STARKOWSKI: It's -- well, depending on where the federal government is going to come through in the new administration. In the past administration with all the regulations and requirements, it was a lengthy process starting with the development of the waiver, which was at least a six-month process, because you had to substantiate that when you provide the services under the waiver, they're going to be no more costly than had the individuals not been under the waiver.

So you have to do all the actuarial work on the front end, all the rationale, all the trends for the three to five years. Then you have to go -- we have to go before the committees of cognizance here. We have to submit something to the federal government. They have 90 days. And then -- and I don't think we've ever had either a state plan amendment approved or a waiver approved in 90 days. They come back normally with a list of significant questions. They normally come back and question your trend lines, your actuarial analysis to make sure that we're not using it as a revenue max project, revenue maximization to get more dollars from the federal government, but we're really trying to change the paradigm on how we provide services.

SENATOR KISSEL: Okay. Well, I very much appreciate that. I find it unfortunate that from the federal government's position, that they have so many hurdles that one has to cross when one is trying to meet the critical needs of the human population. And then you turn around and you read in the paper that they can give hundreds of millions of dollars to banks, and then those banks turn around and

-- Citigroup, I just heard last night is turning around and buying a plane for \$50 million with our tax dollars, and apparently, nobody is following that whatsoever. And so there's a real disconnect down in Washington, and I think they have to get their act together, but that's just me.

Thank you very much, Mr. Chairman.

REP. SERRA: Thank you.

Commissioner, I just have two quick questions. Looking at this, adult care centers, let me ask you, is there a -- money aside, which I think we all understand, is there a test in the sense that -- my experience in Middletown, from Middletown people who send their parents or loved one to an adult care center usually work, have no problem taking care of the individual in the evening and on weekends, but because they work, they have to either send them to an adult care center, and if that wasn't available, maybe they then have to put them into a convalescent home, which, obviously, you know better than I, that the costs would be substantially different.

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Is there any look-see from your department when somebody applies to go into an adult care center? How does that work? I'm just curious.

MICHAEL STARKOWSKI: You know, they apply to the adult day care center and the adult day care center can take in private pay individuals besides people that are eligible for our programs.

We understand that in a lot of those situations, if that opportunity wasn't there, the individual may be limited to only going

Attorney General, we're going to recess now. You're going to go off at eleven o'clock in, I think it's room 2D.

ATTY. GEN. RICHARD BLUMENTHAL: I think that's right.

SENATOR PRAGUE: Yeah. It is. 2D.

REP. SERRA: So, at this point, the committee stands recessed till, I think 20 -- you've got 20 minutes. You don't have a 20 minute speech, do you?

ATTY. GEN. RICHARD BLUMENTHAL: Twenty minutes will probably do it.

REP. SERRA: Okay. We'll reconvene at 11:20. We stand recessed.

(Committee in recess.)

REP. SERRA: What we're going to do -- I'm going to call a public official, and then we're going to alternate between the public officials and the public. But the first public official will be Deb, Deb Polun, please.

DEBRA POLUN: Good morning, Representative Serra. I hope you're not lonely up there.

REP. SERRA: Good morning. No, they're on their way in, so...

DEBRA POLUN: Good morning. My name is Deb Polun, for the record, I'm the legislative director of the Connecticut Commission on Aging. And as you know, the Connecticut Commission on Aging is a legislative branch agency that is dedicated to enhancing the lives of older adults of today and tomorrow.

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as they're deciding whether or not to put their loved one into a nursing home. So we do support that bill.

House Bill 5045, An Act Concerning the Elderly Tax Freeze Program. I just wanted to point out that the commission last year, with this committee's support, did complete and publish a report entitled, "Property Tax Relief for Older Adults, A Profile of Connecticut's Local Programs." This report basically was an inventory of existing local property tax relief programs and a summary of the findings and came with six recommendations. All those recommendations were really geared towards greater information sharing and education about existing programs.

And we'd just like to remind the committee about this report and offer our assistance in crafting any legislation that might support the recommendations in that report. And I did bring some copies with me today.

And finally, House Bill 5297, An Act Concerning the Status of the Money Follows the Person Project. We, of course, support this bill and all efforts to provide greater transparency and information sharing between branches of government and with the public. Money Follows the Person is a much-anticipated program. We're all very excited about what it means as far as how we envision our long-term care system will work for consumers and their families.

And it is -- it's great to keep everybody in the loop. We would just recommend that if this bill goes forward, that the reporting requirement be expanded to include all the committees of cognizance, and that would most likely be Human Services, Public Health, and

Appropriations, as well.

I want to thank you for your support of these bills, and I'm available for questions.

REP. SERRA: Any questions from the committee?  
Thank you.

I'd like to call up now Chief Hutchinson from the Guilford police, then followed by Brian Ellsworth. Good morning, Chief.

JEFFREY HUTCHINSON: Good morning. First, I'd like to thank you for the opportunity to speak this morning. And in addition, having been sitting here this morning, I -- it's obvious that there's significant support from the committee as well as the Attorney General on this, and I appreciate and thank you for that support. The Act to which I'm referring is the 451, An Act Establishing a Silver Alert system. I'm here, obviously, to speak in support of that.

As other people have spoken previously, and I believe others will speak after me, I'll limit my comments to just a couple areas.

In Guilford, we've established a TRIAD program which is. I believe the 55th in the state. The TRIAD is a collaboration between the police, the business community and the seniors. And the goal is to educate the seniors on strategies for preventing them from becoming victims of crime. And in addition, we wanted to extend that out to keeping them safer.

The Silver Alert system is an idea that we had been discussing in our TRIAD meetings, and we're happy to see that this is moving forward. And I can tell you from the perspective of the TRIAD, that we certainly

Any other questions? Thank you, Dave.

DAVID EVANS: Thank you.

REP. SERRA: Next up is Nancy Shaffer. Good afternoon.

NANCY SHAFFER: Good afternoon.

Good afternoon, Representative Serra, and Senator Prague, and members of the select committee on aging. For the record, my name is Nancy Shaffer, and I am the State Long-term Care Ombudsman. I've provided written testimony, but will spare you the reading of my testimony, and I apologize for my scratchy throat today.

I'd like to testify today in support of some of the legislation before you, in particular, Senate Bill 450, An Act Concerning Nursing Home Oversight.

I'm pleased to have listened to some of the conversation this morning. It sounds like there's good dialogue going, and that an oversight bill is something that will be discussed very seriously amongst the Legislature and Department of Social Services and the various agencies.

I feel it's my job when I come before you to give you the face and the human story behind some of these things. And we all know there's been some discussion this morning about the -- what we call Haven Health, the catastrophe that happened last year. And as you probably know in December of 2008, the first Haven Health home closed its doors. They're were approximately 50 residents still residing in that home, and they all relocated. Some of them were able to go back into living in the

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dementia, who, if proper care planning and monitoring and staffing are really focused on preventing that from happening and then, by contract, they're then responsible for replacing those dentures if they're lost.

Some of the other things that are included, I would say in the admission agreements that waive or diminish resident rights are allowing the transfer/discharge at the facility's discretion of a resident, and allowing disruptive or challenging behaviors.

As we know, a lot of residents who go into a nursing home do have behaviors that aren't the norm. A dementia-related behavior such as wandering or maybe some -- I don't want to say abusiveness, but some -- some challenges, can create problems for facilities. And that sometimes is a reason the facilities will say they must transfer out. Not all residents -- not all -- not everyone is appropriate for a nursing home, but facilities need to take responsibility.

And in closing, I just want to also add that there's a number of other proposals the ombudsman program fully supports. I understand that during these very difficult financial times things will be looked at very closely, but I hope that the long-term benefits and the cost savings of some of these issues before you, including the Assisted living Pilot Program in the adult day care centers, the Silver Alert system, and Money Follows the Person, will be included in your very serious conversations.

Thank you.

REP. SERRA: Any questions from the committee?

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committee?

Thank you.

Next up is Celeste Proulx from MS, yes. Good afternoon.

CELESTE PROULX: Good afternoon, Senator Prague, Republicans here -- Representatives, sorry -- and Select Committee on Aging.

[H05297]

My name is Celeste Proulx, and I'm from Cromwell, Connecticut. I'm here today to share my concerns about Raised Bill 5298.

Please support programs that provide home community-based services for people of all ages who are facing challenges and need long-term care. I'm directly impacted by this bill both as a person with multiple sclerosis and because my brother, who also has multiple sclerosis, is age 44 and lives in a nursing home. I would like to tell you a little more about why I'm concerned about these bills.

We know that the state-funded Home Care Program for Elders is saving money, and is an option to help keep people out of nursing homes. The pilot program, the Connecticut Home Care Program for Disabled Adults, has been a lifesaver for 41 individuals living with a degenerative, neurological disabilities, like MS, Parkinson's disease and early onset Alzheimer's disease. It is allowing these individuals to remain at home and out of nursing homes. We must preserve the funding for these two programs.

The Connecticut Home Care Program for the Disabled did not exist when my brother's MS became very debilitating. Now at age 44, my brother, as I said, who also has MS, has been

would have offered him a better quality of life.

Please support programs that provide home and community-based services for people of all ages who are facing challenges and need long-term care. The Connecticut Home Care program for Disabled Adults is one option. We must retain funding for the program and also for the state-funded Home Care Program for Elders.

As the State implements the Money Follows the Person Program, please keep in mind that my brother cannot be helped initially by MFP, Money Follows the Person, because the existing Medicaid personal care assistance waiver isn't an option. He has cognitive impairment that makes it impossible for him to self-direct his own care, which is necessary for that program.

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The State of Connecticut Department of Social Services must move forward to provide more comprehensive home care programs for individuals with physical disabilities who are on Medicaid and who cannot be helped by Connecticut's existing Medicaid waivers.

REP. SERRA: Thank you. Any questions from the committee?

Thank you.

CELESTE PROULX: Thank you.

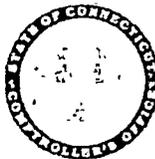
REP. SERRA: Next up is Pat Rockwell. Good afternoon.

PATRICIA ROCKWELL: Good afternoon. Thank you very much for hearing me. I will be submitting my written testimony to you after today.

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## State of Connecticut

NANCY WYMAN  
COMPTROLLER



MARK E OJAKIAN  
DEPUTY COMPTROLLER

Hartford

Testimony Before the Select Committee on Aging  
State Comptroller Nancy Wyman  
January 27, 2009

Good Morning Chairman Prague, Chairman Serra, Senator Kissel, Representative Frey and distinguished members of the Select Committee on Aging. I am State Comptroller Nancy Wyman and I appreciate the opportunity to submit testimony in favor of several proposed bills currently before you.

First, I appreciate this Committee's efforts to strengthen the financial oversight of nursing homes here in Connecticut by raising Senate Bill 450, "An Act Concerning Nursing Home Oversight." Every resident of this state is effected by either the care *or* costs associated with our nursing home industry.

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The family and friends of nursing home patients trust that their loved ones are provided with the highest quality care in a safe and reliable setting. The situation we found our selves in last year with Haven Health Care may have been avoided if greater oversight existed. In many cases the quality of care given to patients is directly linked to the financial management of the institution. Nursing homes that are fiscally un-healthy have potentially disastrous consequences for the clients who rely on their services.

Connecticut tax payers also expect that their money is being spent in the most efficient and cost effective manner. Our state ranks 4<sup>th</sup> in the nation in nursing home expenditures with \$1.3 billion spent each year on care. The public demands that we, as elected officials, enact real oversight over a sizeable industry that makes up a significant percentage of our budget.

I believe that the proposal before you today is a first step in what I hope will be increasingly thorough efforts to hold Connecticut's nursing homes financially accountable. The bill gives new authority to the Nursing Home Financial Advisory Committee, and adds my Office to the Committee strengthening its fiscal role in the regulation of the industry.

This legislation authorizes the Committee to audit the financial records of nursing homes and dig deeper into troubled companies that are financially tied to nursing homes. Additional powers are given to issue subpoenas, take testimony under oath and involve the Attorney General as a means to enforce the Committee's regulatory control

Recommendations to appoint receivership could also be made to the Department of Social Services regarding nursing homes facing dire financial distress

The state's role should not be to clean up after the irresponsible or potentially criminal financial administration of nursing home owners. Connecticut must take a proactive stance in preventing the devastating costs of mismanagement before it happens.

There are several other concepts raised before this committee today that should also be commended.

**House Bill 5297**, "An Act Concerning the Status of the Money Follows the Person Project," will require the Commissioner of Social Services to submit a semiannual report to the Select Committee on Aging. The written document will include implementation status as well as a timeline for individuals transitioning into the community. The Money Follows the Person initiative has shown great success across the nation and here in Connecticut by encouraging states to create and utilize home care and community based options over traditional and costlier, institutional care. Monitoring the progress of this project is important to its successful development.

**House Bill 5045**, "An Act Concerning the Elderly Tax Freeze Program," will allow new applicants to enter the program and provides for municipalities to be reimbursed by the state for lost revenues. Property tax relief is critical to low income seniors living on fixed incomes, many of whom make difficult choices juggling their monthly expenses. Connecticut's poorest 20% pay 4.4% of their income in property taxes, while the wealthiest 1% pays just 1.2% of their income in property taxes. In hard economic times, more than ever, our elderly and impoverished citizens need assistance to make ends meet.

Lastly, I'd like to lend my support to **House Bill 5298**, "An Act Concerning Increasing the Asset Limitations Under the State Funded Connecticut Home-Care Program for the Elderly." This is a program that I have continually spoken in favor of before the legislature. The bill before you today would increase access by increasing the asset threshold for participation. Currently, over 14,000 older adults benefit from the wide range of integral services in a variety of settings coordinated by this program. Creating more opportunities for care outside of the institutional setting will save the taxpayers over the long term.

Thank you.



# STATE OF CONNECTICUT

DEPARTMENT OF SOCIAL SERVICES

LONG TERM CARE OMBUDSMAN PROGRAM  
 25 SIGOURNEY STREET • HARTFORD, CONNECTICUT 06106-5033  
 Telephone Number: (860) 424-5200 Fax Number: (860) 424-4966

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## 2009 LEGISLATIVE TESTIMONY

Good morning, Senator Prague, Representative Serra, Senator Gaffey, Representative Bye and members of the Select Committee on Aging. My name is Nancy Shaffer. I am the State Long Term Care Ombudsman. I am here to testify in support of legislation before you today.

### S.B. No. 450 (Raised) AN ACT CONCERNING NURSING HOME OVERSIGHT.

In Connecticut in 2008, we experienced the catastrophe known as "Haven Health". The fiscal deterioration of the fifteen Haven Healthcare skilled nursing facilities was the direct result of mismanagement of Medicare, Medicaid and private funds earmarked to care for residents, but sadly, spent for the personal aggrandizement of the corporate head. These homes, as we know, went into bankruptcy and left residents, families, staff and the citizens of Connecticut wondering how did this happen. Today we must ask how can we keep this from happening again? The solution begins, I believe, with responsible ownership of nursing facilities.

SB 454  
 SB 455  
 SB 451  
 SB 452  
 SB 453  
 HB 5297  
 HB 5312

The human tragedy of the Haven fiasco continues. As recently as December of 2008, the Haven home in Waterford shut down operations as a skilled nursing facility-causing the disruption of the lives of about fifty frail and vulnerable individuals. By early December, 2008, most of the residents transferred to other homes in the general vicinity while a few were able to transfer to community living arrangements. Just two weeks ago, another one of the original fifteen Haven homes filed a letter of intent to close. Astonishingly, seven of the residents transferred from Waterford to the Jewett City/Griswold Haven home and will now probably be uprooted once again, after only a few short months of adjusting to their new "home". These are real people-mothers, fathers, grandparents, loved ones. It could be one of our own loved ones.

Connecticut must have clear expectations for quality care for the most vulnerable and frail members of our society. Both the government-who pays for the majority of care and the consumer-who requires the care, have the right to know who is providing that care as well as transparency related to fiscal solvency. When the entity who owns the actual physical asset of the nursing home has virtually no responsibility or accountability for finances or the adequacy of the care provided the system for expecting and providing quality care is broken. When the top priority for owners and investors is profit, rather than providing staffing and resources necessary to ensure quality care for our loved ones we must implement appropriate safeguards.

I know during these incredibly challenging fiscal times difficult decisions and choices must be made. Proposals before you may in fact raise questions about financial costs. I hope that the long term benefits and cost savings of some of the bills before you will help to inform and guide you during the legislative session.

The Long Term Care Ombudsman Program also supports the following proposals:

S.B. No. 451 (Raised) AN ACT ESTABLISHING A SILVER ALERT SYSTEM.

In theory, a Silver Alert System is beneficial to Connecticut elders and their families. We have had instances in our state of elders with dementia or otherwise ill who have wandered from their homes and been at risk. The cost to the State for a Silver Alert System is not known. Hopefully, there is some ability to "piggy back" a Silver Alert System with our Amber Alert System.

S.B. No. 452 (Raised) AN ACT CONCERNING FUNDING FOR ADULT DAY CARE CENTERS.

Our Long Term Care Needs Assessment should be our guide as we outline the future of long term care in Connecticut. We know intuitively, personally, and from the results of this study, that living at home with services is above all else the most preferred choice for Connecticut's residents. Adult Day Care Centers are a vital component of services for elders and their families and that model of care is in jeopardy if we don't commit ourselves to its funding. The cost-savings in terms of keeping an individual in a private home vs. a nursing home, lost wages of caregivers, the negative impact on the health and well being of caregivers are indicators of the benefits of ensuring that our Adult Day Care Centers remain open and viable.

S.B. No. 453 (Raised) AN ACT CONCERNING FINANCIAL ASSISTANCE TO THE STATE'S ASSISTED LIVING PILOT PROJECTS

The Assisted Living Pilot Project has proven beneficial to residents and a cost-saving for Connecticut. It makes good sense to increase the numbers of elders able to remain in a managed residential community rather than be admitted to a nursing home. The proposal increases the number from 75 to 150 individuals enrolled in the pilot program, beneficial to both consumer and state government.

H.B. No. 5297 (Raised) AN ACT CONCERNING THE STATUS OF THE MONEY FOLLOWS THE PERSON

A report to the General Assembly on the status of the Money Follows the Person demonstration project makes good sense, will keep the legislators informed of progress and maintain public awareness of the project.

Good morning, Senator Prague, Representative Serra and members Select Committee on Aging. My name is Michael P. Starkowski. I am the Commissioner of the Connecticut Department of Social Services (DSS). I am here this morning to testify on several bills concerning the programs, services and operations of DSS.

**S.B. No. 450 (RAISED) AN ACT CONCERNING NURSING HOME OVERSIGHT**

This bill would re-establish and revise the membership of the Nursing Home Financial Advisory Committee. The bill adds the Comptroller, or designee, and State Ombudsman to the Committee comprised of representation from DSS, OPM, DPH, CHEFA, OFA and two representatives of nursing homes appointed by the Governor. The bill makes the Comptroller chairperson of the Committee. Under current statute the Committee is co-chaired by the representatives from DSS and DPH.

The Committee would have authority to audit nursing homes and nursing home management companies. The Committee could recommend that the Commissioner of Social Services seek appointment of a receiver to take over operation of a nursing home.

The Department is not supportive of this bill as it would further fragment responsibility for nursing home oversight, replicate audit responsibilities that already exist in DSS and would inappropriately maintain nursing home representation on the Committee. The expertise for evaluating the nursing home financial stability resides in DSS, DPH and CHEFA. In addition, resources from the Office of the Attorney General's Whistleblower and Health Care units also provide valuable support. It is unnecessary to add the Office of the Comptroller. Further, any change to Committee membership should include removal of nursing home representation. It is not appropriate for representatives of existing facilities to participate in financial oversight functions of other competing facilities. The Committee would certainly consult and seek input from nursing home owners and representatives on general financial oversight topics but matters involving the financial condition of specific facilities should not be shared with individuals representing other facilities operating in Ct.

As you may know, in the 2008 session, Governor Rell offered legislation (SB 32) that would have reconstituted the Nursing Home Financial Advisory Committee as an executive branch committee to focus on financial solvency and quality of care issues with annual reporting requirements to the legislative committees of cognizance. The bill included additional financial reporting requirements, established debt restrictions and insurance coverage minimums and strengthened receivership statutes. During the last legislative session my staff and I worked extensively with legislative staff and the Office of the Attorney General to develop an enhanced nursing home oversight program. Unfortunately, that legislation was not adopted in 2008. I recommend that the oversight legislation drafted in the 2008 session be revisited and those negotiations resume.

SB451

SB452

SB453

SB454

HB5297

HB5298

HB5311

Medicaid rate setting statutes (Section 17b-340 CGS) provide that increased costs associated with changes to Federal or State laws be reflected in payment rates. Consequently, those facilities that must increase staffing to comply with the new daily minimums would be eligible for Medicaid rate adjustments with an associated state cost impact. Based upon a preliminary review of reported paid nursing and nurse aide hours in 2007 Medicaid cost report filings (and adjusting for estimated non care hours – vacation, holidays, sick, etc.), it is estimated that 80 facilities would need to add both nursing and nurse aide staff and 84 facilities would need to add either nurses or nurse aides to comply with the proposed staffing standards. Initial estimates of increased annual Medicaid costs are between \$45 million and \$55 million.

As a result, the department must oppose the bill because of the significant costs to the state

**H.B. No. 5297 (RAISED) AN ACT CONCERNING THE STATUS OF THE MONEY FOLLOWS THE PERSON PROJECT**

Currently the department is required to submit 35 reports to the federal government on the status of the Money Follows the Person Program. As an alternative to this legislation and in an effort to not increase the workload, we would offer to meet with members of this committee and review the existing federal submissions. Reports already produced for the federal government could be reproduced for members of the legislature.

**H.B. No. 5298 (RAISED) AN ACT INCREASING THE ASSET LIMITATIONS UNDER THE STATE-FUNDED CONNECTICUT HOME CARE PROGRAM FOR THE ELDERLY**

DSS opposes this increase for several reasons. First, the asset limit for the state funded program was increased significantly in April 2007 from \$20,328 for individuals and \$30,492 for a couple to \$30,492 for individuals and \$40,656 for a couple. The State-Funded CHCPE asset limit is set as a percentage of the minimum Community Spouse Protected Amount (CSPA). This increase represents a rise from 150% of the minimum CSPA to 200% of the minimum CSPA.

Moreover, this asset test by state statute increases annually on January 1 by in the Consumer Price Index for Urban Consumers (CPI-U) in the prior October through September period. The current minimum CSPA is \$21,912 compared to \$19,908 three years ago in 2006. As a result, this month the asset limit was increased again to \$32,868 for individuals and \$43,824 for a couple.

As the state funded asset test increases against the Medicaid component of the program's asset test, which has remained level, the effect is a disproportionate increase in the percentage of state funded clients versus Medicaid clients on the Home Care Program. As you know, there is no federal financial match in the state component cases compared to the 50% federal match we receive in the Medicaid component. Currently



Advocating for Older Adults of Today and Tomorrow

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Testimony of

*Handwritten initials*

Debra Polun, Legislative Director  
Connecticut Commission on Aging

Select Committee on Aging

January 27, 2009

**(TS)**

Good morning and thank you for this opportunity to comment on a number of bills before you today.

As you know, the Connecticut Commission on Aging is the independent state agency solely devoted to enhancing the lives of the present and future generations of our state's older adults. For fifteen years, the Commission has served as an effective leader in statewide efforts to promote choice, independence and dignity for Connecticut's older adults and persons with disabilities. I'd like to thank this committee for its ongoing leadership and collaboration in these efforts.

SB 452  
SB 455  
HB 5045  
HB 5297

In these difficult budget times, research-based initiatives, statewide planning efforts, vision and creative thinking are all needed to ensure a continued commitment to services and supports for individuals in need. The Connecticut Commission on Aging stands ready to assist our state in finding solutions to our fiscal problems, while keeping commitments to critical programs and services.

**SB 451: An Act Establishing a Silver Alert System**

The Commission supports the concept of this bill to help identify and locate older adults who have been reported missing. Thirteen other states have "Silver Alert" systems for this purpose, similar to the Amber Alert system for missing children.

However, we do believe that the bill should be broadened to include all individuals who are missing and may be in danger. Not only would broadening the system help all other at-risk populations (including those under age 65 afflicted with dementia-related disorders), but a more integrated system would be easier for residents to understand and utilize.



**HB 5045: An Act Concerning the Elderly Tax Freeze Program**

Last year, the Commission, with the support of this committee, completed and published a report entitled "Property Tax Relief for Older Adults: A Profile of Connecticut's Local Programs." The report inventories existing local property tax relief programs, summarizes the findings and recommends six improvements designed to move our state towards greater information sharing and education.

The Commission encourages this Committee to consider these recommendations when considering modifications to or expansions of current programs:

- Information about existing state and local programs should be included in annual property tax bills, in language that is easy to read and to understand;
- The state should collect information about property tax relief programs annually and make this information available to the public;
- Local elected officials and assessors should have access to more information to help them make decisions about property tax relief programs and options for implementing revaluation;
- Property tax relief programs should be provided in an equitable manner to low and moderate income households;
- The state should examine the possibility of combining or streamlining existing property tax relief programs to achieve efficiency and for ease of use by residents; and,
- Existing programs and their use should be considered as part of comprehensive tax reform.

The property tax relief report is available on our website, at [www.cga.ct.gov/coa](http://www.cga.ct.gov/coa), and hard copies can be provided as requested. We would be happy to work with you to craft legislation that supports the recommendations of this report.

**HB 5297: An Act Concerning the Status of the Money Follows the Person Project**

The Commission on Aging supports this bill and all efforts to share information between branches of government and with the public.

The Money Follows the Person Demonstration Project is a critical component of rebalancing our long-term care system. This multi-pronged initiative will transition older adults and persons with disabilities from nursing homes back into the community; will divert individuals from nursing homes who might otherwise be sent there; and, in general, move our state forward in providing choice in how and where individuals receive long-term care services and supports.

The Commission believes such reporting would be beneficial to all committees of cognizance, and therefore recommends expanding the reporting to the Human Services, Public Health and Appropriations Committees as well.

Thank you for your support of these initiatives and of the work of the Connecticut Commission on Aging.



**Testimony of AARP Connecticut on  
H.B. 5311, S.B. 453, S.B. 455, H.B. 5297, & S.B. 451  
 Select Committee on Aging  
 January 27, 2008**

AARP is a nonprofit, nonpartisan membership organization that helps people 50+ have independence, choice and control in ways that are beneficial and affordable to them and society as a whole. On behalf of our 630,000 AARP members in Connecticut, we express our support for H.B. 5311, which will increase the TFA child-only grants for relative caregivers to the prevailing foster care rates. We also support S.B. 453, S.B. 455, and H.B. 5297, which will benefit our members by increasing and improving long-term care options that provide choice and independence for people, in a setting that is least restrictive and most appropriate to their needs. AARP also offers recommendation on S.B. 451 that will ensure that the proposed "Silver Alert" system has appropriate safeguards to protect the privacy and independence of seniors.

**H. B. 5311, An Act Increasing Temporary Family Assistance Benefits for Caretaker Relatives.**

AARP strongly supports H.B. 5311, which will increase the TFA child only grants for grandparent and relative caregivers so they are equal to the prevailing foster care rates paid by DCF. Under current law grandparents or relative caregivers are given drastically different funding and support depending on whether their grandchild was first committed to DCF foster care. Those who qualify for the Subsidized Guardianship program through DCF will get roughly double the funding of other grandparents/relative caregivers, who only qualify for a child-only TFA grant.

Under DCF's Subsidized Guardianship Program relative care can receive \$771.90 to \$847.20 (per 30-day month, per child). However, relative caregivers that do not qualify for Subsidized Guardianship Program only get \$354 to \$427 for their first child under TFA and a small fraction of that for additional children.

Grandparents are often thrust into the role of parents under traumatic emotional circumstances without any notice. Whatever the circumstances—prison, drugs, abandonment, abuse, death, illness, divorce—they're never happy. And painful emotions get mixed in. Relative caregivers rarely have the luxury to consider all their options and determine what process for getting their grandchild would provide the most support for raising that child. Instead, grandparents and relatives first and foremost see their relative in need and step up to help—not knowing that their decisions will significantly impact the amount of support and benefit the state will give them

**H. B. 5297 An Act Concerning the Status of the Money Follows the Person Project.**

As an active participant of the Money Follows the Person Steering Committee, AARP supports efforts to make the Money Follows the Person demonstration project transparent and successful. H.B. 5297 will require the Commissioner of Social Services to make semi annual reports to the General Assembly on the status of the Money Follows the Person project. These reports will add transparency and accountability to the process, ultimately making sure that the 700 transitions happen with all deliberate speed.

**S. B. 451 An Act Establishing a Silver Alert System**

If the Committee is interested in setting up a "Silver Alert" system, AARP recommends that you include appropriate limitations that address the following:

- The individual who is eligible to be the subject of an alert has been adjudicated by a court to be incapable of managing his or her own personal affairs, such as through a guardianship proceeding, or has a documented diagnosis of a mental illness, injury or condition that causes the individual to be incapable of making personal care decisions.
- Age is not an appropriate criterion for coverage by an alert system.
- The individual who is eligible to initiate an alert is a legal guardian, a close family member, lives in the same household, or is a caregiver and has had very recent contact with the subject of the alert.
- The alert system protects the privacy, dignity, independence and autonomy of the subject of the alert.