



Special points of interest:

- **CT Commission on Aging Budget**
- **SustiNet CT Healthcare Plan**
- **2009/2010 Survey of State Legislative Issues**

CT Coalition on Aging
www.CoalitionAgingCT.org

President: John Hogarth
Secretary: Sharon Garrard
Treasurer: Ned Skinnon

If you would like to be more involved with the CCOA . . .

Be sure to regularly check the website at:

www.CoalitionAgingCT.org

Please feel free to contact
our President

John Hogarth at

JHogarth@ci.meriden.ct.us

You can contact our Secretary

Sharon Garrard at

sgarrard@hebronct.com

CT Coalition on Aging, Inc. P.O. Box 398, Cheshire, CT 06410-0398



Membership Application Form

CT Coalition on Aging

Membership dues cover one year from date of payment

Make checks payable to CCOA

Please detach and mail to: **Coalition on Aging**

c/o Ned Skinnon, West Hartford Senior Center, 15 Starkel Rd, West Hartford, CT 06117

- \$25 Individual membership includes all newsletters and notices, plus the Coalition's Legislative bulletin of the CT General Assembly session
- \$50 Membership for Municipal and Non-Profit Organizations. Receive all newsletter, the Legislative bulletin and notices of meetings
- \$100 Private organization or corporation. Receive all communications
- _____ Donation

CT Coalition on Aging, Inc.

Name:		Phone 1:
Organization:		Phone 2:
Address:		Fax:
City, State	Zip:	Email:

Connecticut Commission on Aging

An Independent, Nonpartisan Office of the Connecticut General Assembly

Update: New State Budget Affects Older Adults and Persons with Disabilities (10/5/09)

This update is provided as part of the Commission on Aging's ongoing mission to educate policymakers and stakeholders about emerging issues affecting older adults in CT.

The FY '10-'11 budget, which became law on September 8, 2009, includes the following items impacting older adults and persons with disabilities (For more information, see HB 6802 and HB 7005):

- **The Connecticut Commission on Aging** was retained, but with a 53% reduction in funding and standardized statutes for all legislative Commissions.
- **Long-Term Care Ombudsman Program** received a 20% reduction in funding.
- **Long-Term Care Providers:** Rates to providers were not increased, and nursing homes will not receive statutory rebasing or fair rent adjustments.
- **Money Follows the Person:** The administration has agreed to change the operating protocol for Money Follows the Person, bringing in an estimated \$11 million in additional federal funds. Establishment of the Long-Term Care Reinvestment Account has been delayed to July 1, 2011.
- **Assisted Living:** The budget implementer includes a provision to allow CT to receive more federal funding for community-based living. The Assisted Living Conversion Program, run through HUD, provides federal funding to low-income congregate housing facilities to convert to assisted living. The implementer changes state statutes to allow new federal funds to come to Connecticut for more conversions of these facilities.
- **Falls Prevention:** The Falls Prevention program will receive \$500,000 in state funding in each year of the biennium and will be funded through the Insurance Fund.
- **CT Home Care Program for Elders (CHCPE):**
 - o Cost sharing will increase under the state-funded portion of the CHCPE. Failure to pay this fee will render participants ineligible for services; and,
 - o Personal Care Assistants will now be a covered service under the CHCPE and the Alzheimer's Respite Care Program, providing flexibility and lower-cost alternatives in these programs.
- **Medicaid Managed Care:** The budget includes savings attributed to moving older adults and individuals with disabilities into Medicaid managed care (as opposed to fee-for-service). Advocates are concerned that these "Special Needs Plans" will restrict access to care, while proponents believe care will be better coordinated between Medicare and Medicaid.
- **Medical Necessity:** The definition of medical necessity under Medicaid will be changed, which could restrict access to prescriptions, durable medical equipment and other needed services. An oversight committee is established to advise on the amended definition.
- **Medicare Part D Wrap-Around/Dually-Eligibles:** Funding was severely cut for the Medicare Part D

Wrap-Around. Dually-eligible (Medicaid and Medicare) individuals will be expected to pay up to \$15/month in copayments.

- **ConnPACE:**

- o The new ConnPACE Plus program will maximize federal funds and save consumers money without reducing services—by expanding the eligibility requirements for the Low-Income Subsidy program of Medicare to match those of ConnPACE;
- o Income limits will be frozen at the 2009 level until 2012 (\$25,100 for singles; \$33,800 for married couples); and,
- o Annual enrollment for ConnPACE will increase from \$30 to \$45 and enrollment must occur within 31 days of eligibility or during annual open enrollment period.

- **Department on Aging:** After its fourth delay, the State Department on Aging is now slated to be established July 1, 2010.

- **Transportation:** The municipal matching grant for demand responsive transportation was retained.

SustiNet is a [Connecticut](#) health care plan passed into law in July, 2009. Its goal is to provide affordable health care coverage to 98% of Connecticut residents by 2014.

“The SustiNet law establishes a nine-member board to recommend to the legislature, by January 1, 2011, the implementation process for a self-insured health care plan called SustiNet. The recommendations must address (1) the phased-in offering of the SustiNet plan to state employees and retirees, HUSKY A and B beneficiaries, people without employer-sponsored insurance (ESI) or with unaffordable ESI, small and large employers, and others; (2) establishing an entity that can contract with insurers and health care providers, set reimbursement rates, develop medical homes for patients, and encourage the use of health information technology; (3) a model benefits package; and (4) public outreach and ways to identify uninsured citizens.”

SustiNet would emphasize preventive care and the management of chronic illnesses. It would create a large health insurance pool by combining state employees, retirees, and people covered by state assistance programs. The pool would also be open to members of the public without insurance, those with inadequate insurance, and employers, starting with small businesses, nonprofits and municipalities. Eventually, SustiNet would be open to larger employers wishing to buy into the plan for their employees.

The board must establish committees to make recommendations to it about health information technology, medical homes, clinical care and safety guidelines, and preventive care and improved health outcomes. The act also establishes an independent information clearinghouse to inform employers, consumers, and the public about SustiNet and private health care plans and creates task forces to address obesity, tobacco usage, and health care workforce issues.

-Jean Rexford

Officers and Board of Directors

President ~ [John Hogarth](#), Vice President ~, Treasurer ~ [Ned Skinnon](#), Secretary ~ [Sharon Garrard](#),

Rhona Cohen O'Brien, Dan Flynn, Sharon Gesek, Kathi Liberman, Lee Niles, Jean Pudlo, Helen Raisz, Jean Rexford, Susan Salomoni, Marlene Schempp, & Susan Sokol.



Connecticut Coalition on Aging Inc. The purpose of the Coalition on Aging is to promote actions that improve the quality of life of Connecticut's older adults.

2009/2010 Survey of State Legislative Issues

Please complete and return by DECEMBER 11, 2009 to:

Connecticut Coalition on Aging, c/o SWCAA, 10 Middle Street, Bridgeport, CT 06604

Or respond through the web-site: www.coalitionagingct.org

Name _____ Street _____ Town _____ ZIP _____

Phone (____) _____ e-mail (print clearly) _____

CCOA strives to work on behalf of its members and all Connecticut's elders to address critical issues related to aging. Of the issues listed below please CHECK FIVE ISSUES you would like CCOA to advocate for during and in anticipation of the upcoming State of Connecticut legislative session.

Health Care:

- Access to prescription drugs
Lower drug costs
Comprehensive universal health care for all
Health care workforce: Training and fair salaries for healthcare workers

Aging and Disability:

- Home and Community-based program/service expansion
End of Life issues
Resourcing and program options: information, referral, health and social service access

Funding Needs:

- Tax credits for family caregivers
Property tax reform
Maintain State Funding for municipalities
Housing improvements for seniors and disabled

What other issues are of concern to you? _____

Are you over age 65? ___ under 65? ___ Are you: 1) an individual respondent? Yes or No 2) A provider (volunteer or paid) of services to elderly? Yes or No: If Yes, Name of agency _____

Would you like to receive information about the Coalition on Aging? Yes or No

Would you like information about how to be an active advocate from your home or at the State Capitol? Yes or No

Would you be willing to contact your Connecticut State Legislator regarding your identified issues? Yes or No

About what issue(s)? _____

PLEASE RETURN BY DECEMBER 11, 2009 -

Thank you for taking the time to respond. Your voice matters!