



**March 6, 2025**

**Testimony of the Connecticut Association of Health Care Facilities / Connecticut Center For Assisted Living (CAHCF/CCAL):**

On behalf of the Connecticut Association of Health Care Facilities / Connecticut Center For Assisted Living (CAHCF/CCAL), a trade association of skilled nursing facilities and assisted living communities, my name is Matthew Barrett, the association's President and CEO. Thank for this opportunity to present testimony **in opposition to S.B. No. 1415 AN ACT CONCERNING MEDICAID AND MEDICAID-FUNDED PROGRAMS.**

Section 1 of S.B. 1415 would require a Connecticut nursing home to implement a schedule of wage increases to employees who provide direct care so that all such employees attain a minimum hourly wage of twenty-two dollars and fifty cents not later than January 1, 2026, and twenty-five dollars not later than January 1, 2027. The definition of "direct care" is the same as provided in section 19a-563h of the general statutes, which mirrors pending staffing regulations before the Legislative Regulations Review Committee. The proposed legislation provides that a nursing home won't be required to provide any minimum wage increases "unless state rates of payment are sufficient to fund such wage increases."

A provision that correlates the sufficiency of available state resources and the intended final wage increase amount is essential to assure both the nursing home operators and their direct care employees that funding is available to actually implement any final wage increase policy adopted in statute. Indeed, it is essential the adopted Connecticut state budget fully fund the increased costs of any new mandated requirements, including incremental increases in in the minimum nursing home wage to \$25 per hour by January 1, 2027.

For example, in the past, nursing home wages, shift differentials, paid time off (vacation, sick, holiday), health benefits, training fund, pensions enhancement, and associated payroll taxes