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Written testimony of Matthew V. Barrett, President and CEO of the Connecticut Association of Health Care Facilities / Connecticut Center For Assisted Living (CAHCF/CCAL) concerning H.B. No. 6317 (RAISED) AN ACT PROHIBITING DISCHARGES FROM NURSING HOMES AND RESIDENTIAL CARE HOMES TO TEMPORARY OR UNSTABLE HOUSING.

Good morning Senator Moore, Representative Abercrombie and to the distinguished members of the Human Services Committee. My name is Matt Barrett. I am President and CEO of the Connecticut Association of Health Care Facilities / Connecticut Center For Assisted Living (CAHCF/CCAL). CAHCF/CCAL is a one hundred and fifty member trade association of skilled nursing facilities and assisted living communities. Thank you for this opportunity to submit testimony on H.B. No. 6317 (RAISED) AN ACT PROHIBITING DISCHARGES FROM NURSING HOMES AND RESIDENTIAL CARE HOMES TO TEMPORARY OR UNSTABLE HOUSING. The proposed legislations provides that that no nursing home resident shall be involuntarily transferred or discharged from a facility to any housing where the health or safety needs of the resident cannot be met in accordance with section 47a-7 or by an available and willing designated caregiver pursuant to section 19a-535c.

State of Federal Rules Prohibit Improper Involuntary Transfer and Discharges

A significant body of state and federal law now prohibits the involuntarily transfer and discharge of nursing home residents to the community except for certain reasons, and only when the nursing homes follow detailed procedures to protect the due process rights of the residents and a discharge planning process. These longstanding rules prohibit an involuntary transfer and discharge if it is medically contraindicated. In short, a safe discharge is required, and only allowed under specific situations, such as the medical care that the resident requires can't be provided in a nursing home setting, or the resident no longer needs nursing home care because the resident's condition has improved, or the health or safety of other individuals in the home is endangered. Strict notice (including a copy to the state long term care ombudsman) must be delivered in writing within 30 days of the proposed discharge, details of the residents right to contest the discharge and the right to a hearing at the Department of Social Services. The filing of an appeal stays the discharge until a hearing decision is rendered. See CSG 19a-535, the Regulations of Connecticut State Agencies, Section 19-13-d8t, and, 42 Code of Federal Regulations Section 483.15.

Governor Lamont's Executive Order 7XX Prohibits Involuntary Discharges to Homeless Shelters

Moreover, by Executive Order 7XX, Governor Lamont in June 2020, and for the duration of the public health emergency, suspends involuntary homeless shelters discharges and any hearing or decision in connection with the involuntary discharge of a resident pursuant to Section 19a-535 of the Connecticut General Statutes, where the notice of intent to discharge

identifies one or more homeless shelters as the location to which discharge is intended. However, the EO is a time-limited public health measure to help prevent the spread of COVID-19 and not intended to address the underlying causes of housing instability among certain nursing home residents. Further, there are no provisions in Connecticut's Medicaid program to reimburse facilities when a resident has or may experience housing instability when the services of a nursing home are no longer needed.

Outside Nursing Home Purview to Ensure Compliance with Landlord Responsibilities

Section 47a-7 lays out various requirements for landlords (e.g. makes repairs to ensure premises are in habitable condition, keep all common areas of premises in clean and safe condition; maintain electrical, plumbing, etc. in safe and good working order). Nursing homes cannot be expected to ensure that these requirements are being met by the discharge location – this would require the nursing home to effectively inspect each potential discharge location and make assessments about whether plumbing and electricity are in working order, if repairs are being made etc. This is not within the purview of nursing homes and would be an unreasonable burden to place on them.

A New Connecticut Supportive Housing Initiative CHESS Will Address Housing Instability and Homelessness for Nursing Home Residents

Acknowledging that housing instability strongly correlates to an individual's health, with significant implications for Medicaid utilization in nursing homes and other settings, Connecticut has designed a new program to support individuals served by Medicaid in accessing and retaining stable housing and meaningfully engaging with their health goals in a new supportive housing initiative. The new effort is called the Connecticut Housing Engagement and Support Services (CHESS) initiative. Specifically, a Medicaid state plan home and community-based services benefit has been developed by DSS and other state agencies in consultation with the Connecticut Coalition to End Homelessness. The new program may be authorized by the federal government as early as April 2021. It will serve up to 850 individuals who experience homelessness and who have high Medicaid with new housing vouchers and services. Nursing home residents experiencing housing instability with benefit greatly from this new program.

CAHCF/CCAL recommends addressing the underlying causes of housing instability as it relates to nursing home admissions and discharges issues with supportive housing initiatives like CHESS and the enforcement of a significant body of state and federal rules as the best approach to address the housing instability experienced by individuals also served by Connecticut nursing homes. At once, Connecticut's Medicaid program should adopt nursing home payment procedures to provide nursing home reimbursement for recipient who await stable housing, but no longer meet nursing home level of care.

Thank you and I would be happy to answer any questions you may have.

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