

March 13, 2024

Testimony of Matthew Barrett, President and CEO of the Connecticut Association of Health Care Facilities / Connecticut Center For Assisted Living (CAHCF/CCAL):

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 testimony concerning S.B. 275 AN ACT PROHIBITING NURSING HOMES FROM REJECTING A PATIENT SOLELY ON THE BASIS THAT SUCH PATIENT RECEIVED MENTAL HEALTH SERVICES.

S.B. No. 275 prohibits a nursing home from discriminating against a person who applies for admission to the nursing home solely on the basis that such person has, at any time, received mental health services. The bill defines nursing home and mental health services as follows: "Nursing home" has the same meaning as provided in section 19a-490 of the general statutes; and "mental health services" means counseling, therapy, rehabilitation, crisis intervention, emergency services or psychiatric medication for the screening, diagnosis or treatment of mental illness.

As an initial matter, the federal American with Disabilities Act (ADA) and state law prohibit discriminatory practices in nursing home admissions. We believe that all nursing home admissions agreements include general language prohibiting discrimination. We would note, however, that federal law requires that State Medicaid Agencies implement a Preadmission Screening and Resident Review (PASRR) program to screen all applicants to nursing homes for serious mental illness and/or intellectual disability and ensure such individuals are not inappropriately placed in nursing homes for long-term care. Some nursing home applicants may therefore be denied admission to a nursing home by the State contractor under the PASRR program.

However, with the exception of PASRR denials, we agree that a general policy or practice of refusing admissions to any protected group would violate state and federal laws. Consequently, a nursing home policy or practice of denying admission based on mental illness history alone is already prohibited under existing law. Rather, admission determinations must be made on a caseby-case basis. Finally, both existing nursing home regulations and the ADA allow providers to deny admission for non-discriminatory reasons. The non-discriminatory reason for denial should always be included in the records of the nursing home.

For these reasons, CAHCF/CCAL has no objection to S.B. No. 275.

For additional information on this testimony, please contact Matthew Barrett, President and CEO of CAHCF/CCAL, at mbarrett@cahcf.org.