

General Assembly

## Substitute Bill No. 283

February Session, 2022

## AN ACT ELIMINATING INCOME AND ASSET LIMITS FOR THE MED-CONNECT PROGRAM FOR PERSONS WITH DISABILITIES AND INCREASING INCOME AND ASSET LIMITS FOR HUSKY C.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 17b-597 of the general statutes is repealed and the
   following is substituted in lieu thereof (*Effective July 1, 2022*):
- (a) The Department of Social Services shall establish and implement
  a working persons with disabilities program to provide medical
  assistance as authorized under 42 USC 1396a(a)(10)(A)(ii), as amended
  from time to time, to persons who are disabled and regularly employed.

7 (b) The Commissioner of Social Services shall amend the Medicaid 8 state plan to allow persons specified in subsection (a) of this section to 9 qualify for medical assistance. The amendment shall [include the 10 following requirements: (1) That the person be engaged in a substantial 11 and reasonable work effort as determined by the commissioner and as 12 permitted by federal law and have an annual adjusted gross income, as 13 defined in Section 62 of the Internal Revenue Code of 1986, or any 14 subsequent corresponding internal revenue code of the United States, 15 as amended from time to time, of no more than seventy-five thousand 16 dollars per year; (2) a disregard of all countable income up to two 17 hundred per cent of the federal poverty level; (3) for an unmarried

18 person, an asset limit of ten thousand dollars, and for a married couple, 19 an asset limit of fifteen thousand dollars; (4) a disregard of any 20 retirement and medical savings accounts established pursuant to 26 21 USC 220 and held by either the person or the person's spouse; (5) a 22 disregard of any moneys in accounts designated by the person or the 23 person's spouse for the purpose of purchasing goods or services that 24 will increase the employability of such person, subject to approval by 25 the commissioner; (6) a disregard of spousal income solely for purposes 26 of determination of eligibility; and (7)] require (1) that the person be 27 engaged in a substantial and reasonable work effort as determined by 28 the commissioner and as permitted by federal law; and (2) a 29 contribution of any countable income of the person or the person's 30 spouse which exceeds two hundred per cent of the federal poverty level, 31 as adjusted for the appropriate family size, equal to ten per cent of the 32 excess minus any premiums paid from income for health insurance by 33 any family member, but which does not exceed the maximum 34 contribution allowable under Section 201(a)(3) of Public Law 106-170, as 35 amended from time to time.

36 (c) The Commissioner of Social Services shall implement the policies 37 and procedures necessary to carry out the provisions of this section 38 while in the process of adopting such policies and procedures in 39 regulation form, provided notice of intent to adopt the regulations is 40 [published in the Connecticut Law Journal within twenty days after 41 implementation] posted on the eRegulations System in accordance with 42 section 17b-10. The commissioner shall define "countable income" for 43 purposes of subsection (b) of this section which shall take into account 44 impairment-related work expenses as defined in the Social Security Act. 45 Such policies and procedures shall be valid until the time final 46 regulations are effective.

Sec. 2. (NEW) (*Effective July 1, 2022*) The Commissioner of Social
Services shall increase the asset limits used to determine eligibility for
HUSKY C, as defined in section 17b-290 of the general statutes, from (1)
one thousand six hundred dollars to five thousand dollars for a single

51 person, and (2) two thousand four hundred dollars to seven thousand52 five hundred dollars for a married couple.

Sec. 3. Section 17b-261 of the 2022 supplement to the general statutes
is repealed and the following is substituted in lieu thereof (*Effective July 1*, 2022):

56 (a) Medical assistance shall be provided for any otherwise eligible 57 person (1) whose income, including any available support from legally 58 liable relatives and the income of the person's spouse or dependent 59 child, is not more than one hundred [forty-three per cent, pending 60 approval of a federal waiver applied for pursuant to subsection (e) of 61 this section, of the benefit amount paid to a person with no income 62 under the temporary family assistance program in the appropriate 63 region of residence and if] thirty-eight per cent of the federal poverty 64 <u>level</u>, and (2) if such person is an institutionalized individual as defined 65 in Section 1917 of the Social Security Act, 42 USC 1396p(h)(3), [and] such 66 person has not made an assignment or transfer or other disposition of property for less than fair market value for the purpose of establishing 67 68 eligibility for benefits or assistance under this section. Any such 69 disposition shall be treated in accordance with Section 1917(c) of the 70 Social Security Act, 42 USC 1396p(c). Any disposition of property made 71 on behalf of an applicant or recipient or the spouse of an applicant or 72 recipient by a guardian, conservator, person authorized to make such 73 disposition pursuant to a power of attorney or other person so 74 authorized by law shall be attributed to such applicant, recipient or 75 spouse. A disposition of property ordered by a court shall be evaluated 76 in accordance with the standards applied to any other such disposition 77 for the purpose of determining eligibility. [The commissioner shall 78 establish the standards for eligibility for medical assistance at one 79 hundred forty-three per cent of the benefit amount paid to a household 80 of equal size with no income under the temporary family assistance 81 program in the appropriate region of residence.] In determining 82 eligibility, the commissioner shall not consider as income Aid and 83 Attendance pension benefits granted to a veteran, as defined in section

27-103, or the surviving spouse of such veteran. Except as provided in 84 85 section 17b-277 and section 17b-292, the medical assistance program 86 shall provide coverage to persons under the age of nineteen with 87 household income up to one hundred ninety-six per cent of the federal 88 poverty level without an asset limit and to persons under the age of 89 nineteen, who qualify for coverage under Section 1931 of the Social 90 Security Act, with household income not exceeding one hundred 91 ninety-six per cent of the federal poverty level without an asset limit, 92 and their parents and needy caretaker relatives, who qualify for 93 coverage under Section 1931 of the Social Security Act, with household 94 income not exceeding one hundred fifty-five per cent of the federal 95 poverty level without an asset limit. Such levels shall be based on the 96 regional differences in such benefit amount, if applicable, unless such 97 levels based on regional differences are not in conformance with federal 98 law. Any income in excess of the applicable amounts shall be applied as 99 may be required by said federal law, and assistance shall be granted for 100 the balance of the cost of authorized medical assistance. The 101 Commissioner of Social Services shall provide applicants for assistance 102 under this section, at the time of application, with a written statement 103 advising them of [(1)] (A) the effect of an assignment or transfer or other 104 disposition of property on eligibility for benefits or assistance, [(2)] (B) 105 the effect that having income that exceeds the limits prescribed in this 106 subsection will have with respect to program eligibility, and [(3)] (C) the 107 availability of, and eligibility for, services provided by the Connecticut 108 Home Visiting System, established pursuant to section 17b-751b. For 109 coverage dates on or after January 1, 2014, the department shall use the 110 modified adjusted gross income financial eligibility rules set forth in 111 Section 1902(e)(14) of the Social Security Act and the implementing 112 regulations to determine eligibility for HUSKY A, HUSKY B and 113 HUSKY D applicants, as defined in section 17b-290. Persons who are 114 determined ineligible for assistance pursuant to this section shall be 115 provided a written statement notifying such persons of their ineligibility 116 and advising such persons of their potential eligibility for one of the 117 other insurance affordability programs as defined in 42 CFR 435.4.

(b) For the purposes of the Medicaid program, the Commissioner of
Social Services shall consider parental income and resources as available
to a child under eighteen years of age who is living with his or her
parents and is blind or disabled for purposes of the Medicaid program,
or to any other child under twenty-one years of age who is living with
his or her parents.

124 (c) For the purposes of determining eligibility for the Medicaid 125 program, an available asset is one that is actually available to the 126 applicant or one that the applicant has the legal right, authority or power to obtain or to have applied for the applicant's general or medical 127 128 support. If the terms of a trust provide for the support of an applicant, 129 the refusal of a trustee to make a distribution from the trust does not 130 render the trust an unavailable asset. Notwithstanding the provisions of 131 this subsection, the availability of funds in a trust or similar instrument 132 funded in whole or in part by the applicant or the applicant's spouse 133 shall be determined pursuant to the Omnibus Budget Reconciliation Act 134 of 1993, 42 USC 1396p. The provisions of this subsection shall not apply 135 to a special needs trust, as defined in 42 USC 1396p(d)(4)(A), as 136 amended from time to time. For purposes of determining whether a 137 beneficiary under a special needs trust, who has not received a disability 138 determination from the Social Security Administration, is disabled, as 139 defined in 42 USC 1382c(a)(3), the Commissioner of Social Services, or 140 commissioner's designee, shall independently make such the 141 determination. The commissioner shall not require such beneficiary to 142 apply for Social Security disability benefits or obtain a disability 143 determination from the Social Security Administration for purposes of 144 determining whether the beneficiary is disabled.

(d) The transfer of an asset in exchange for other valuable
consideration shall be allowable to the extent the value of the other
valuable consideration is equal to or greater than the value of the asset
transferred.

(e) The Commissioner of Social Services [shall seek a waiver fromfederal law to permit federal financial participation for Medicaid

expenditures for families with incomes of one hundred forty-three per
 cent of the temporary family assistance program payment standard]
 <u>may seek federal approval for a Medicaid waiver or a Medicaid state</u>
 plan amendment to implement the provisions of this section.

155 (f) To the extent [permitted by] permissible under federal law, Medicaid eligibility shall be extended for one year to a family that 156 157 becomes ineligible for medical assistance under Section 1931 of the 158 Social Security Act due to income from employment by one of its 159 members who is a caretaker relative or due to receipt of child support 160 income. A family receiving extended benefits on July 1, 2005, shall receive the balance of such extended benefits, provided no such family 161 162 shall receive more than twelve additional months of such benefits.

163 (g) An institutionalized spouse applying for Medicaid and having a 164 spouse living in the community shall be required, to the maximum 165 extent permitted by law, to divert income to such community spouse in 166 order to raise the community spouse's income to the level of the 167 minimum monthly needs allowance, as described in Section 1924 of the Social Security Act. Such diversion of income shall occur before the 168 169 community spouse is allowed to retain assets in excess of the 170 community spouse protected amount described in Section 1924 of the 171 Social Security Act. The Commissioner of Social Services, pursuant to 172 section 17b-10, may implement the provisions of this subsection while 173 in the process of adopting regulations, provided the commissioner 174 [prints] posts notice of intent to adopt the regulations [in the 175 Connecticut Law Journal within] on the eRegulations System not later 176 than twenty days [of] after adopting such policy. Such policy shall be 177 valid until the time final regulations are effective.

(h) To the extent permissible under federal law, an institutionalized
individual, as defined in Section 1917 of the Social Security Act, 42 USC
1396p(h)(3), shall not be determined ineligible for Medicaid solely on
the basis of the cash value of a life insurance policy worth less than ten
thousand dollars provided the individual is pursuing the surrender of
the policy.

184 (i) Medical assistance shall be provided, in accordance with the 185 provisions of subsection (e) of section 17a-6, to any child under the 186 supervision of the Commissioner of Children and Families who is not 187 receiving Medicaid benefits, has not yet qualified for Medicaid benefits 188 or is otherwise ineligible for such benefits. Medical assistance shall also 189 be provided to any child in the behavioral services program operated 190 by the Department of Developmental Services who is not receiving 191 Medicaid benefits, has not yet qualified for Medicaid benefits or is 192 otherwise ineligible for benefits. To the extent practicable, the 193 Commissioner of Children and Families and the Commissioner of 194 Developmental Services shall apply for, or assist such child in qualifying 195 for, the Medicaid program.

(j) The Commissioner of Social Services shall provide Early and
Periodic Screening, Diagnostic and Treatment program services, as
required and defined as of December 31, 2005, by 42 USC 1396a(a)(43),
42 USC 1396d(r) and 42 USC 1396d(a)(4)(B) and applicable federal
regulations, to all persons who are under the age of twenty-one and
otherwise eligible for medical assistance under this section.

(k) A veteran, as defined in section 27-103, and any member of his or
her family, who applies for or receives assistance under the Medicaid
program, shall apply for all benefits for which he or she may be eligible
through the United States Department of Veterans Affairs or the United
States Department of Defense.

207 (l) On and after January 1, 2023, the Commissioner of Social Services 208 shall, within available appropriations, provide state-funded medical 209 assistance to any child eight years of age and younger, regardless of 210 immigration status, (1) whose household income does not exceed two 211 hundred one per cent of the federal poverty level without an asset limit, 212 and (2) who does not otherwise qualify for (A) Medicaid, (B) the 213 Children's Health Insurance Program, or (C) an offer of affordable, 214 employer-sponsored insurance, as defined in the Affordable Care Act, 215 as an employee or a dependent of an employee.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2022	17b-597
Sec. 2	July 1, 2022	New section
Sec. 3	July 1, 2022	17b-261

**HS** Joint Favorable Subst.