



General Assembly

February Session, 2024

***Raised Bill No. 369***

LCO No. 2630



Referred to Committee on PUBLIC HEALTH

Introduced by:  
(PH)

***AN ACT CONCERNING HOME CARE WORKER SAFETY.***

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

1 Section 1. (NEW) (*Effective October 1, 2024*) Each home health care  
2 agency and home health aide agency, as such terms are defined in  
3 section 19a-490 of the general statutes, shall, during intake of a  
4 prospective client, collect and provide to any employee assigned to  
5 provide services to such client, information regarding:

6 (1) The client, including, if applicable, the client's (A) psychiatric  
7 history, (B) history of violence, (C) history of substance use, (D) history  
8 of domestic abuse, (E) current infections, if any, and the treatment the  
9 client has received for such infections, and (F) whether the client's  
10 diagnoses or symptoms have remained stable over time;

11 (2) Other persons present or anticipated to be present at the location  
12 where the employee will provide services, including, if known to the  
13 agency, each person's (A) name and relationship to the client, (B)  
14 psychiatric history, (C) history of violence or domestic abuse, (D)  
15 criminal record, and (E) history of substance use; and

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16 (3) The location where the employee will provide services, including,  
17 if known to the agency, the (A) crime rate for the municipality in which  
18 the employee will provide services, as determined by the most recent  
19 Crime in Connecticut annual report issued by the Department of  
20 Emergency Services and Public Protection, (B) presence of any  
21 hazardous materials at the location, including, but not limited to, used  
22 syringes, (C) presence of firearms or other weapons at the location, (D)  
23 status of the location's fire alarm system, and (E) presence of any other  
24 safety hazards at the location, including, but not limited to, electrical  
25 hazards.

26 Sec. 2. (NEW) (*Effective October 1, 2024*) Each home health care agency  
27 and home health aide agency, as such terms are defined in section 19a-  
28 490 of the general statutes, shall (1) provide staff training consistent with  
29 the health and safety training curriculum for home care workers  
30 endorsed by the Centers for Disease Control and Prevention's National  
31 Institute for Occupational Safety and Health and the Occupational  
32 Safety and Health Administration, including, but not limited to, training  
33 to recognize hazards commonly encountered in home care workplaces  
34 and applying practical solutions to manage risks and improve safety; (2)  
35 conduct monthly safety assessments with each staff member; and (3)  
36 provide staff with a mechanism to perform safety checks, which may  
37 include, but need not be limited to, (A) a mobile application that allows  
38 staff to access safety information relating to a client, including  
39 information collected pursuant to section 1 of this act, and a method of  
40 communicating with local police or other staff in the event of a safety  
41 emergency, and (B) a global positioning system-enabled, wearable  
42 device that allows staff to contact local police by pressing a button or  
43 through another mechanism.

44 Sec. 3. (NEW) (*Effective October 1, 2024*) (a) Each home health care  
45 agency and home health aide agency, as such terms are defined in  
46 section 19a-490 of the general statutes, and each staff member of any  
47 such agency shall report each instance of verbal abuse that is perceived  
48 as a threat or danger to the staff member, physical abuse, sexual abuse

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49 or any other abuse by an agency client against a staff member in a form  
50 and manner prescribed by the Commissioner of Public Health.

51 (b) Not later than January 1, 2025, and annually thereafter, the  
52 commissioner shall report, in accordance with the provisions of section  
53 11-4a of the general statutes, to the joint standing committee of the  
54 General Assembly having cognizance of matters relating to public  
55 health regarding the number of reports received pursuant to subsection  
56 (a) of this section and the actions taken to ensure the safety of the staff  
57 member about whom the report was made.

58 Sec. 4. Subsection (a) of section 17b-242 of the 2024 supplement to the  
59 general statutes is repealed and the following is substituted in lieu  
60 thereof (*Effective from passage*):

61 (a) The Department of Social Services shall determine the rates to be  
62 paid to home health care agencies and home health aide agencies by the  
63 state or any town in the state for persons aided or cared for by the state  
64 or any such town. The Commissioner of Social Services shall establish a  
65 fee schedule for home health services to be effective on and after July 1,  
66 1994. The commissioner may annually modify such fee schedule if such  
67 modification is needed to ensure that the conversion to an  
68 administrative services organization is cost neutral to home health care  
69 agencies and home health aide agencies in the aggregate and ensures  
70 patient access. Utilization may be a factor in determining cost neutrality.  
71 The commissioner shall increase the fee schedule for home health  
72 services provided under the Connecticut home-care program for the  
73 elderly established under section 17b-342, effective July 1, 2000, by two  
74 per cent over the fee schedule for home health services for the previous  
75 year. On and after January 1, 2024, the commissioner shall increase the  
76 fee schedule for complex care nursing services provided to individuals  
77 over the age of eighteen such that the rate of reimbursement is equal to  
78 the rate for such services provided to individuals age eighteen and  
79 under. There shall be no differential in fees paid for such services based  
80 on the age of the patient. The commissioner may increase any fee

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81 payable to a home health care agency or home health aide agency upon  
82 the application of such an agency evidencing extraordinary costs related  
83 to (1) serving persons with AIDS; (2) high-risk maternal and child health  
84 care; or (3) [escort services; or (4)] extended hour services. On and after  
85 July 1, 2024, the commissioner shall increase the fee payable to a home  
86 health care agency or home health aide agency that provides escorts for  
87 safety purposes to staff conducting a home visit. In no case shall any rate  
88 or fee exceed the charge to the general public for similar services. A  
89 home health care agency or home health aide agency which, due to any  
90 material change in circumstances, is aggrieved by a rate determined  
91 pursuant to this subsection may, within ten days of receipt of written  
92 notice of such rate from the Commissioner of Social Services, request in  
93 writing a hearing on all items of aggrievement. The commissioner shall,  
94 upon the receipt of all documentation necessary to evaluate the request,  
95 determine whether there has been such a change in circumstances and  
96 shall conduct a hearing if appropriate. The Commissioner of Social  
97 Services shall adopt regulations, in accordance with chapter 54, to  
98 implement the provisions of this subsection. The commissioner may  
99 implement policies and procedures to carry out the provisions of this  
100 subsection while in the process of adopting regulations, provided notice  
101 of intent to adopt the regulations is posted on the eRegulations System  
102 not later than twenty days after the date of implementing the policies  
103 and procedures. Such policies and procedures shall be valid for not  
104 longer than nine months. For purposes of this subsection, "complex care  
105 nursing services" means intensive, specialized nursing services  
106 provided to a patient with complex care needs who requires skilled  
107 nursing care at home.

108       Sec. 5. (NEW) (*Effective January 1, 2025*) Each individual health  
109 insurance policy providing coverage of the type specified in  
110 subdivisions (1), (2), (4), (11) and (12) of section 38a-469 of the general  
111 statutes delivered, issued for delivery, renewed, amended or continued  
112 in this state, shall provide coverage for escorts for the safety of home  
113 health care agency or home health aide agency staff, as deemed

114 necessary by such staff or agency.

115       Sec. 6. (NEW) (*Effective January 1, 2025*) Each group health insurance  
116 policy providing coverage of the type specified in subdivisions (1), (2),  
117 (4), (11) and (12) of section 38a-469 of the general statutes delivered,  
118 issued for delivery, renewed, amended or continued in this state, shall  
119 provide coverage for escorts for the safety of home health care agency  
120 or home health aide agency staff, as deemed necessary by such staff or  
121 agency.

122       Sec. 7. (*Effective July 1, 2024*) On or before October 1, 2024, the  
123 Commissioner of Public Health shall establish and administer a home  
124 care staff safety grant program. Such program shall provide grants to  
125 home health care and home health aide agencies for the purposes of  
126 purchasing staff safety technology, which may include, but need not be  
127 limited to, (1) a mobile application that allows staff to access safety  
128 information relating to a client, including information collected  
129 pursuant to section 1 of this act, and a method of communicating with  
130 either local police or other staff in the event of a safety emergency, and  
131 (2) a global positioning system-enabled, wearable device that allows  
132 staff to contact local police by pressing a button or through another  
133 mechanism. The commissioner shall establish eligibility requirements,  
134 priority categories, funding limitations and the application process for  
135 the grant program. Not later than January 1, 2025, and annually  
136 thereafter, the commissioner shall report, in accordance with the  
137 provisions of section 11-4a of the general statutes, to the joint standing  
138 committee of the General Assembly having cognizance of matters  
139 relating to public health regarding the grant program.

140       Sec. 8. (*Effective from passage*) (a) The chairpersons of the joint standing  
141 committee of the General Assembly having cognizance of matters  
142 relating to public health shall convene a working group to study staff  
143 safety issues affecting home health care and home health aide agencies,  
144 as such terms are defined in section 19a-490 of the general statutes.

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145 (b) The working group shall include, but need not be limited to, the  
146 following members:

147 (1) Three employees of a home health care or home health aide  
148 agency;

149 (2) Two representatives of a home health care or home health aide  
150 agency;

151 (3) One representative of a collective bargaining unit representing  
152 home health care or home health aide agency employees;

153 (4) One representative of a mobile crisis response services provider;

154 (5) One representative of an assertive community treatment team;

155 (6) One representative of a police department; and

156 (7) One representative of an association of hospitals in the state.

157 (c) The chairpersons of the joint standing committee of the General  
158 Assembly having cognizance of matters relating to public health shall  
159 schedule the first meeting of the working group, which shall be held not  
160 later than sixty days after the effective date of this section.

161 (d) The members of the working group shall select two  
162 cochairpersons from among the members of the working group.

163 (e) The administrative staff of the joint standing committee of the  
164 General Assembly having cognizance of matters relating to public  
165 health shall serve as administrative staff of the working group.

166 (f) Not later than January 1, 2025, the working group shall submit a  
167 report on its findings and recommendations to the joint standing  
168 committee of the General Assembly having cognizance of matters  
169 relating to public health, in accordance with the provisions of section 11-  
170 4a of the general statutes. The working group shall terminate on the date  
171 that it submits such report or January 1, 2025, whichever is later.

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172       Sec. 9. (*Effective July 1, 2024*) The sum of one million dollars is  
173 appropriated to the Department of Public Health from the General  
174 Fund, for the fiscal year ending June 30, 2025, for the purposes of  
175 establishing and administering the home care staff safety grant program  
176 established pursuant to section 7 of this act.

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|---|------------------------|-------------|
| This act shall take effect as follows and shall amend the following sections: |                        |             |
| Section 1   | <i>October 1, 2024</i> | New section |
| Sec. 2  | <i>October 1, 2024</i> | New section |
| Sec. 3  | <i>October 1, 2024</i> | New section |
| Sec. 4  | <i>from passage</i>    | 17b-242(a)  |
| Sec. 5  | <i>January 1, 2025</i> | New section |
| Sec. 6  | <i>January 1, 2025</i> | New section |
| Sec. 7  | <i>July 1, 2024</i>    | New section |
| Sec. 8  | <i>from passage</i>    | New section |
| Sec. 9  | <i>July 1, 2024</i>    | New section |

**Statement of Purpose:**

To protect the safety of home health care agency and home health aide agency staff.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*