



Senate

General Assembly

File No. 383

January Session, 2025

Substitute Senate Bill No. 1470

Senate, April 1, 2025

The Committee on Human Services reported through SEN. LESSER of the 9th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

**AN ACT CONCERNING TWICE ANNUAL REPORTING BY THE
DEPARTMENT OF SOCIAL SERVICES ON MEDICAID
REIMBURSEMENT FOR COMMUNITY HEALTH WORKER SERVICES.**

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

1 Section 1. Section 17b-28l of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective from passage*):

3 (a) For purposes of this section, "certified community health worker"
4 has the same meaning as provided in section 20-195ttt. The
5 Commissioner of Social Services shall design and implement a program
6 to provide Medicaid reimbursement to certified community health
7 workers for services provided to HUSKY Health program members,
8 including, but not limited to: (1) Coordination of medical, oral and
9 behavioral health care services and social supports; (2) connection to
10 and navigation of health systems and services; (3) prenatal, birth,
11 lactation and postpartum supports; and (4) health promotion, coaching
12 and self-management education.

13 (b) The Commissioner of Social Services and the commissioner's
14 designees shall consult with certified community health workers,
15 Medicaid beneficiaries and advocates, including, but not limited to,
16 advocates for persons with physical, mental and developmental
17 disabilities, and others throughout the design and implementation of
18 the certified community health worker reimbursement program in a
19 manner that (1) is inclusive of community-based and clinic-based
20 certified community health workers; (2) is representative of medical
21 assistance program member demographics; and (3) helps shape the
22 reimbursement program's design and implementation. The
23 commissioner, in consultation with community health workers,
24 Medicaid beneficiaries and such advocates, shall explore options for the
25 reimbursement program's design that ensures access to such
26 community health workers, encourages workforce growth to support
27 such access and averts the risk of creating financial incentives for other
28 providers to limit access to such community health workers.

29 (c) [Not later than January 1, 2024, and annually thereafter until the
30 reimbursement program is fully implemented, the] The Commissioner
31 of Social Services shall twice annually submit a report, in accordance
32 with the provisions of section 11-4a, to the joint standing committee of
33 the General Assembly having cognizance of matters relating to human
34 services and the Council on Medical Assistance Program Oversight. The
35 initial report shall be submitted not less than six months prior to the
36 implementation of the reimbursement program. The reports shall be
37 submitted every six months and contain an update on the certified
38 community health worker reimbursement program design and
39 implementation, including, but not limited to (1) an analysis regarding
40 the program elements designed to ensure access to such services,
41 promote workforce growth and avert the risk of creating financial
42 incentives for other providers to limit access to such community health
43 workers, and (2) an evaluation of any impact of the program on health
44 outcomes and health equity.

This act shall take effect as follows and shall amend the following sections:		
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Section 1	<i>from passage</i>	17b-28l
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Statement of Legislative Commissioners:

The title was changed.

HS *Joint Favorable Subst. -LCO*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: None

Municipal Impact: None

Explanation

The bill, which increases certain reporting requirements for the Department of Social Services (DSS), is not anticipated to result in a fiscal impact as the agency has the expertise necessary to meet the requirements of the bill.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis**sSB 1470****AN ACT CONCERNING TWICE ANNUAL REPORTING BY THE DEPARTMENT OF SOCIAL SERVICES ON MEDICAID REIMBURSEMENT FOR COMMUNITY HEALTH WORKER SERVICES.****SUMMARY**

This bill increases the frequency and duration of the Department of Social Services's (DSS) required report on a program to provide Medicaid reimbursement to certified community health workers (CHW). The bill requires DSS to submit the report twice annually (every six months) rather than annually. The bill also removes a sunset provision that, under current law, would have stopped this reporting once the program was fully implemented.

By law, DSS must submit the reports to the Medical Assistance Program Oversight Council and the Human Services Committee. The report must contain an update on the program's design including an (1) analysis of program elements designed to ensure access to CHW services, promote workforce growth, and avert the risk of creating financial incentives for other providers to limit access to CHWs; and (2) evaluation of any program impact on health outcomes and health equity. The bill requires the report to also include an update on program implementation.

EFFECTIVE DATE: Upon passage

COMMITTEE ACTION

Human Services Committee

Joint Favorable

Yea 20 Nay 2 (03/13/2025)