

Human Services Committee

JOINT FAVORABLE REPORT

Bill No.: SB-1251

AN ACT IMPLEMENTING THE GOVERNOR'S RECOMMENDATIONS CONCERNING A DRIVER TRAINING PROGRAM FOR PERSONS WITH DISABILITIES, LEGISLATIVE OVERSIGHT OF MEDICAID STATE PLAN AMENDMENTS AND PENALTIES FOR VIOLATING TIMELY WHEELCHAIR

Title: REPAIR STANDARDS.

Vote Date: 3/19/2025

Vote Action: Joint Favorable Substitute

PH Date: 3/11/2025

File No.: 427

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SPONSORS OF BILL:

REQUEST OF THE GOVERNOR PURSUANT TO JOINT RULE 9

REASONS FOR BILL:

This bill makes numerous changes to the human services statutes. Including transferring driver training. for those with disabilities from ADS to the DMV, increased oversight for Medicaid state plan amendments, and making timely wheelchair repairs requirements.

This bill seeks to create positive and more efficient services for residents with mental and physical disabilities. By making programs more efficient and making sure programs are run correctly and timely.

RESPONSE FROM ADMINISTRATION/AGENCY:

[Department of Social Services \(DSS\), Commissioner, Andrea Reeves Barton:](#) supports the bill because it maintains current benefit levels for key assistance programs while achieving significant cost savings, including by eliminating or restructuring services that have become operationally challenging or financially unsustainable.

[Office of the Healthcare Advocate, Health Care Advocate, Kathleen Holt:](#) expresses concern around the proposal to place the still-unformed Office of the Behavioral Health Advocate within OHA, warning that it could create conflicts of interest between their longstanding

consumer advocacy mission and OBHA's provider-focused goals. They urge the legislature to preserve the boundary between the two offices.

[Office of Policy and Management, Senior Policy Advisor, Claudio Gualtieri](#) supports this bill because it would make delivery of several services more effective. It would prevent an increase in residential facility rates, makes it easier for disabled people to access driving instruction, restructures services for domestic violence victims, cuts funding for obesity drugs, supports a more equitable distribution of funding, and gives greater flexibility for the disbursement of the Tobacco and Health trust Fund.

[Aging and Disability Services Commissioner, Amy Porter](#) supports this bill because the driver training outlined in this bill was previously assigned to the DMV and returning it there, where it is most efficient, would be best.

NATURE AND SOURCES OF SUPPORT:

[Connecticut Coalition Against Domestic Violence \(CCADV\), CEO, Meghan Scanlon:](#) Supports the Governor's proposal to add \$1.5 million to the state budget for domestic violence services but urges that \$1 million be specifically allocated to sustain Safe Connect, the state's 24/7 domestic violence hotline, which is at risk of shutting down due to lost federal funding. They add that reduced funding could limit critical services.

[Leading Age Connecticut President, Mag Morelli](#) supports sections of the bill and encourages continues planning and investing. They support nursing home funding in sections, 10, 11, and 12 if that funding is based off required inflationary rate increases as is statutorily required.

NATURE AND SOURCES OF OPPOSITION:

[Connecticut General Assembly, State Senate President Pro Tempore, Martin Looney](#) opposes this bill because section 14 would no longer allow working disabled people to buy into Medicaid.

[Employee Benefits Consultant, Mark Gonsalves:](#) oppose this bill because it would make it unaffordable or impossible for small businesses to purchase stop loss insurance, forcing them back into fully insured plans with significantly higher premiums. This would hurt the profitability of small companies in Connecticut and make it harder for them to compete for talent.

[Connecticut Association of Residential Care Homes \(CARCH\), President, Penny Lore:](#) strongly opposes this bill that continues flat funding for residential care home. They instead urge the amending of section 10 to provide an inflationary increase to administrator base pay and other cost equitable measures. They argue that the current language would continue to underfund residential care homes.

[Essex Village Manor, Administrator, Kal Patel:](#) oppose this bill and the proposed flat funding for residential care homes. They argue that the current language continues to underfund residential care homes and offers an amendment to increase funding.

[The Arc Connecticut Inc., Director of Advocacy, Carol Scully](#): opposes this bill as they say it will reduce employment and healthcare for working disabled people in the MedConnect program. They oppose any changes proposed by this bill.

[Disability Rights CT, Litigation Attorney, Sheldon Toubman](#): opposes this bill because it would eliminate the cost-of-living adjustment for people with disabilities receiving State Supplement benefits, arguing that it unfairly targets a small, vulnerable population with already extremely limited incomes.

[Connecticut Association of Healthcare Facilities and Connecticut Center for Assisted Living President and CEO, Matthew Barrett](#) opposes line 935 of the Governor's bill because skilled nursing facilities are facing increased costs, and they need inflation to be accounted for when their funding is being considered.

[American Diabetes Association State Government Affairs Director, Monica Billger](#) opposes Section 6 pg. 6-8 of the Governor's bill because it would repeal obesity medication coverage. Obesity prevention can help prevent type 2 diabetes, reduce other health effects, and improve health outcomes.

[Avon Health Center, Director of Operations, Russel Schwartz](#) opposes this bill because it ignores the problems healthcare facilities have been facing with inflation. With serious rising costs, they need a budget that considers inflation.

[The Alliance, Senior Public Policy & Division Advisor, Julia Wilcox](#) opposes this bill. Section 3 would harm the disabled elderly people currently benefitting from the state supplement program while providing very little savings for the state. Section 9 would make it difficult for care facilities to provide services due to inflation. Section 14 would make it so that working disabled people could not buy into Medicaid. All these things would be harmful.

[Diane Smith](#) opposes this bill because capping the income for medical coverage puts them in a bad financial situation where they are unable to afford many things.

Reported by: Christian Talariski & Julia Cabral Date: 4/7/2025