

Aging Committee JOINT FAVORABLE REPORT

Bill No: HB-5143 / [Bill Status](#) / [Public Hearing Testimony](#)

AN ACT REQUIRING TRAINING FOR HOMEMAKER-COMPANION AGENCY

Title: EMPLOYEES.

Vote Date: 3/5/2026

Vote Action: Joint Favorable Substitute

PH Date: 2/19/2026

File No.:

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SPONSORS OF BILL:

Aging Committee

REASONS FOR BILL:

This bill requires that homemaker-companion agencies provide not less than ten hours of initial training to new employees and continuing education to their current employees.

SUBSTITUTE LANGUAGE (IF APPLICABLE):

Propose Substitute Language (LCO 2770) This language makes a number of changes to the original bill.

1/ It removes CPR training requirement for homemaker-companion agencies.

2/ It lowers the amount of required training from 10 hours to 8.

3/ It allows for the training to be transferable within a certain timeframe if an employee if the employee moves to another agency.

4/ Exempts certified nurse's aides, home health aides and personal care assistants from the training requirements.

5/ Clarifies that this law only applies to direct care workers.

RESPONSE FROM ADMINISTRATION/AGENCY:

Mr. Bryan Cafferelli, Commissioner, Dept. of Consumer Protection: They expressed concerns about developing and enforcing medical training during the Task Force and in the subsequent plan created. Not only does the Dept. lack the medical expertise to determine what the appropriate training will be for homemaker-companion employees, it will also generate confusion across the industry if the Dept. mandates medical training for employees

who can only provide non-medical services to those they serve. The Dept. will also require additional resources that are not included in the governor's budget to effectively execute this training program and ensure compliance as currently contemplated.

Mr. Michael Werner, Lead Aging Policy Analyst: Commission on Women, Children, Seniors, Equity & Opportunity: They **support** requiring homemaker-companion agencies to provide training to new employees and continuing education to current employees and they recommend including oral health screening and hygiene support as well as emphasizing training that addresses cultural competency.

NATURE AND SOURCES OF SUPPORT:

Ms. Marie Allen, CEO, Southwestern Connecticut Agency on Aging: They are in **support** of this legislation. Homemaker-companion workers are often the primary support for older adults and individuals with disabilities who wish to remain in their homes. They believe that this bill provides a thoughtful and achievable framework for ensuring consistent, safe and quality homemaker-companion services in our state.

Ms. Mag Morelli, President, LeadingAge Connecticut & Rhode Island: We believe that the workforce who is providing home and community-based supports be prepared to handle the needs of those consumers. They request that the law specifically states that the list of approved training programs must be varied and diverse in their sponsorship, cost, location and teaching mode that will give agencies options. They also ask that homemaker-companion agencies be given the option of submitting their own training programs for approval.

Ms. Jenette Sullivan-Martinez, President, Statewide Coalition of Presidents of Residents Councils: They are in **support** of this bill and suggest that that the training should follow the worker from job to job.

Ms. Mariene Chickerella, Chairperson, Home Care Association of America CT.:As an agency owner she supports best practices and standardized training on skills based on the caregiver role. Her testimony outlines a number of comments and suggestions on the proposed legislation and offers to act as a resource and assist identifying standard training curriculum.

Mr. William Lenahan, Director, State Issues, Southwest Connecticut Agency on Aging: They advocate for the passage of this proposal. This initial and continual standardized training will provide increased safety and well-being for our vulnerable senior community, especially the most vulnerable suffering with dementia or Alzheimer's.

Ms. Maureen McIntyre, CEO, Atwood Dementia Group: They submitted testimony in **support** of this legislation. Because of their expertise in dementia care, we recognize the importance of continuity and familiarity with one's environment during the progression of the disease. The Companion Homemaker Task Force provides reinforcement of the recommendations of the Long-Term Care Planning Committee. If we are prioritizing long term care in the community, then requiring training in dementia services is of critical importance and the least we can do to provide peace of mind to families who are working to keep loved ones at home.

Ms. Carol Scully, Daughter/Advocate: She offered testimony in **support** of this bill. Her testimony describes the experiences she has had caring for her 95-year-old mother and her experiences that she had with four homemaker-companion agencies. One suggestion she offered was that the training should be completed within 30 days rather than 90 days.

Ms. Christy Kovel, Government Relations Director, Alzheimer's Association, CT Chapter: Homemaker Companion Agencies provide essential, non-medical services such as personal care, housekeeping, meal preparation, and companionship. The number of HCA's have grown from 308 to 903 over the decade prior to 2023. There has been a significant amount of work done to address issues with HCA's and make recommendations for improvements in the Homemaker Companion Task Force (2022) and the OPM Report issued. (2024). They **support** passage of this bill.

Alzheimer's Association, CT. Chapter:

Ms. Casey McGannon, Certified Dementia Practitioner:

Ms. Karen Carty, Advocate and Community Educator:

Ms. Marilyn Kowalski

Ms. Erin Mahoney

Ms. Sarah Bishop

Ms. Chrisine Dileone, Professor, UCONN School of Nursing:

Ms. Lisa Marshall

Ms. Tonya Maurer, Community Educator:

All these people testified in **support** of this bill. All shared their personal experiences and antidotal evidence, both positive and negative concerning the need for training.

NATURE AND SOURCES OF OPPOSITION:

Ms. Caleb Roseme, CEO, Assured Quality Homecare: She urges the committee to align homemaker-companion training standards with the existing DSS PCA framework and to integrate future enhancements within the broader DCP-to-DPH regulatory transition. At the same time expansion of requirements must be accompanied by appropriate Medicaid rate adjustments to ensure agencies can implement these standards without reducing access to care. That goal can be best achieved, not through fragmented mandates introduced mid-transition.

Ms. Tracy Wodatch, President and CEO, Connecticut Association for Healthcare at Home: While they support the intent of improving quality and strengthening training standards some of the requirements in this bill are medically driven, including CPR, First Aid, and identifying changes in a client's Condition. It needs to be remembered that Homemaker-Companion Agencies are required by law to provide solely non-medical care. They also have concerns that the administrative and tracking requirements in the bill would create unfunded mandates for agencies. They also urge the removal of medically oriented training requirements, avoid rigid hour mandates, ensure training portability and eliminate overly burdensome compliance processes.

Ms. Julie Wilcox, Senior Policy & Division Advisor, Connecticut Community Nonprofit Alliance: It is important that the committee recognizes that ABI Waiver providers are required to hold a Homemaker-Companion license with DCP and the current reimbursement rate of \$21.40 per companion hour is already insufficient to cover the cost of employing and

supporting a direct-care worker and it cannot support the additional training requirements proposed in this bill. They believe that the requirements in this bill will negatively impact the stability of the provider network for ABI Waiver Services.

Mr. Bernard “JAY” Kiley, Jr., CEO, Synergy HomeCare: This bill will significantly increase cost for agencies, the state, and ultimately the consumers who rely on home care services to survive and stay safe at home and out of hospitals. They must oppose this bill unless it is amended to ensure training portability, clarify appropriate requirements, minimize its cost impact and create consistent standards that protect consumers without limiting access to care.

Ms. Kerry Kiley, Vice President, Synergy HomeCare: This bill has the potential of creating consumer protection concerns, as it applies to agencies but does not address caregivers hired directly by families or through registries that are not subject to the same requirements. This creates an uneven regulatory framework and may leave some consumers vulnerable while placing greater burdens on agencies that comply.

Ms. Kathy Rathan, CEO, Project Genesis, Inc.: This bill adds new training, monitoring, and documentation requirements without any accompanying increase in reimbursement so they must be **opposed** to its passage. The DSS reimbursement rate is \$21.40 per companion hour is already insufficient to cover the full cost of employing and supporting a direct-care worker.

Ms. Marlene Chickerella, Chair, Home Care Association of America: They believe that the passage of this bill could have significant adverse and unintended consequences for seniors, consumers and home care agencies. They have recommended several suggestions that should be considered before this bill is passed.

Ms. Lisa Brower, Owner, Seniors Helping Seniors: She believes that unnecessary training will be a waste. The cost of services is already putting a burden on our seniors and adding to that via a blanket training requirement is unjust and poorly thought out.

Ms. Sarah Dzialo: Central Planners lack localized knowledge, and the one size fits all training mandates can distort incentives, creating barriers to entry that reduce competition and harm smaller, innovative providers. Rather than additional training, we should strengthen liability rules and transparent performance metrics so that consumers can reward quality through their choices.

Reported by: Richard Ferrari, Assist. Clerk
Reviewed by : Elizabeth Aheart, Clerk

Date: 3/12/26