



# Expanding Access to Care

2020 Issues Conference  
Office of Legislative Research



# About OLR

The nonpartisan **Office of Legislative Research (OLR)** helps the Connecticut General Assembly (CGA) make policy by providing it with accurate, timely, and objective research, policy analysis, and assistance in the development of legislation.



# Telehealth

- CONNECTICUT'S TELEHEALTH LAW
- RECENT LEGISLATIVE CHANGES



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# Connecticut's Telehealth Law

CGS §19a-906

## ■ CT TELEHEALTH LAW

State law establishes requirements for providers who choose to deliver health care services via telehealth.

## ■ EXECUTIVE ORDERS

The governor issued several executive orders (EOs) to modify the practice of telehealth to ensure continued access to care.

## ■ COVID-19 CHALLENGE

During the pandemic, access to in-person non-emergency health care services was significantly reduced.

## ■ LEGISLATIVE CHANGES

During the July 2020 Special Session, the legislature enacted a law that temporarily codifies several provisions of the governor's EOs.



# PA 20-2: Major Provisions



## 1. Expands Authorized Telehealth Providers

Allows 9 additional types of health professionals and certain out-of-state providers to provide telehealth services



## 2. Expands Service Delivery Methods

Allows the use of audio-only phone and certain 3rd party video communication applications



## 3. Payment Requirements for Under and Uninsured

Sets amounts providers must accept as payment in full for underinsured or uninsured patients



## 4. Requires Insurance Coverage

Requires insurance coverage and prohibits reimbursed providers from seeking payment beyond cost sharing

# Additional Notes

## PA 20-2, JSS

- Its provisions are only effective through March 15, 2021
- It applies only to telehealth providers who are (1) in-network providers in fully-insured plans and (2) CT Medical Assistance Program (e.g., Medicaid) providers
- It authorizes the DPH commissioner to waive, modify, or suspend regulatory requirements during this time period to protect the public health

## OLR REPORTS

- 2020-R-0138, COVID-19 Executive Orders Concerning Telehealth
- 2020-R-0226, Recent Changes to Connecticut's Telehealth Law
- Available on the OLR website: [www.cga.ct.gov/olr](http://www.cga.ct.gov/olr)

# For More Information

# Long-Term Care Facilities

- EXECUTIVE ORDERS
- INDEPENDENT EVALUATION
- BI-PARTISAN WORKING GROUP





# EXECUTIVE ORDERS: MAJOR PROVISIONS



## COVID-19 RECOVERY FACILITIES

- EO 7Y established the state's first two COVID-19 Recovery Facilities (CRF) at two existing nursing homes
- DPH designated 2 additional Alternate COVID-19 Recovery Facilities (ACRF)
- These CRFs and ACRFs provide up to 334 beds statewide to treat COVID-19 patients.

## FEDERAL CORONAVIRUS RELIEF FUNDS

EO 7NN authorized the distribution of:

- federal Coronavirus Relief Funds to nursing homes
- Coronavirus Relief Fund grants of \$600 per bed per day to CRFs and ACRFs
- additional funds to certain nursing homes requesting additional hardship relief.





# EXECUTIVE ORDERS: MAJOR PROVISIONS



## RESTRICTING VISITOR ACCESS AT LTC FACILITIES

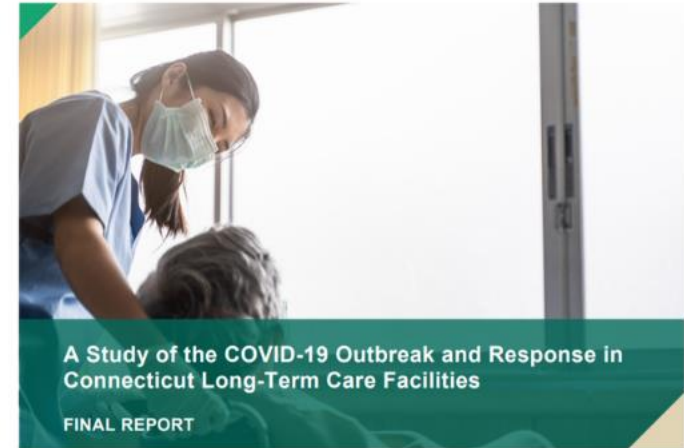
- EOs 7 and 7A authorized DPH to issue orders restricting visitor access to nursing homes, residential care homes, or chronic disease hospitals
- DPH issued several orders that generally banned visitor access with limited exceptions.
- In September, DPH rescinded these restrictions following a federal CMS directive.

## MANDATORY TESTING FOR LTC FACILITY STAFF

- EOs 7AAA and 7UU require weekly testing for staff of nursing homes, managed residential communities, and assisted living services agencies who have not previously tested positive for COVID-19
- In response to rising cases in the state, DPH issued an October 23rd order mandating weekly testing for all staff until further notice.



# Statewide Evaluation: Mathematica Policy Research



## KEY FINDINGS

- facilities with (1) greater exposure to COVID-19 in the surrounding community and (2) more residents who left the facility for medical care had more cases and deaths;
- nursing homes with higher staffing ratios were better able to limit the spread of the virus; and
- total COVID-19 nursing home cases and deaths did not vary significantly across surrounding states.

## KEY RECOMMENDATIONS

- expand qualifications for infection preventionists and require them in all nursing homes;
- give facility residents priority access to COVID-19 vaccines;
- ensure all facility staff have access to guaranteed paid sick leave under the state's existing regulations;
- maintain a stockpile of personal protective equipment available to facilities;
- continue planning efforts to scale up CRF capacity



# Additional Notes

The governor and legislative leaders recently established a bi-partisan **Nursing Home and Assisted Living Oversight Working Group** to propose legislative recommendations for the 2021 session.

## OLR REPORTS

- OLR Report 2020-R-0157, “Connecticut COVID-19 Recovery Facilities”
- OLR Report 2020-R-184, “COVID-19 Executive Orders Affecting Older Adults
- OLR Report 2020-R-140, “Nursing Home Visitor Restrictions During the COVID-19 Pandemic”

# For More Information

# Health Care Workforce

- EXECUTIVE ORDERS
- DPH IMPLEMENTATION ORDERS





# Executive Orders: Major Provisions



## 1. License Renewal

Suspends license renewal requirements for Connecticut licensed/certified health professionals (EO 70, DPH Order)



## 2. Continuing Education

Suspends continuing education requirements by six months or one year, depending on the profession (EO 7DD)



## 3. Pre-Licensure Practice

Extends temporary permits and makes related changes for various health professions (EO 7V & 7DD)



## 4. Out-of-State Providers

Suspends in-state license requirements for out-of-state providers (EO 7DD, EO 7HHH, DPH Order)



# Immunity From Civil Liability

## Health Professionals

Provides immunity for providers (including retired professionals and approved volunteers) and facilities for injuries or deaths allegedly caused by their good faith actions and omissions while providing services as part of the state's COVID-19 response (EO 7V)

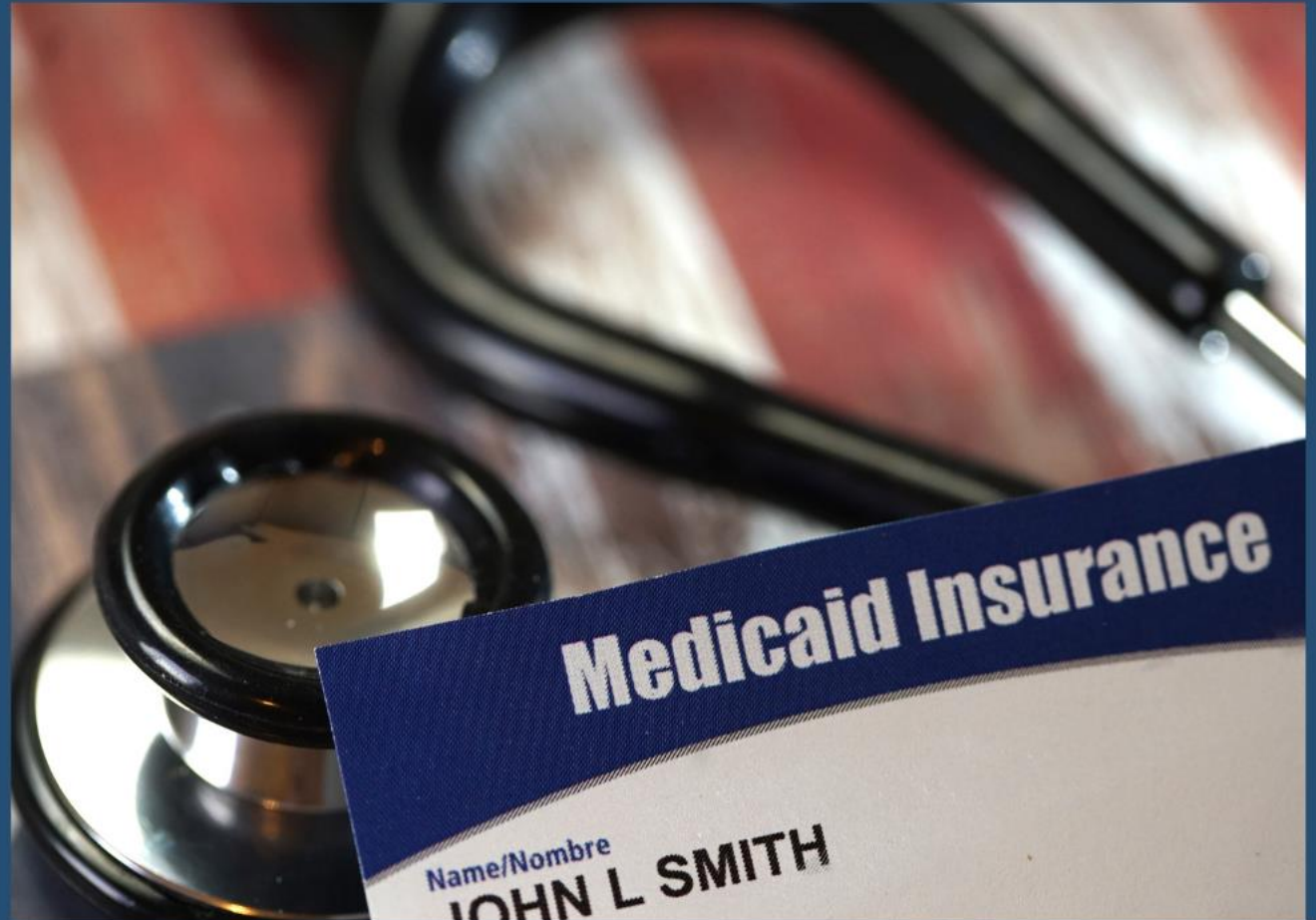
## Exceptions

Immunity does not apply to crimes, fraud, malice, gross negligence, willful misconduct, or false claims



# Medicaid and CHIP

- COVID-19 TESTING COVERAGE
- WAIVERS AND STATE PLAN AMENDMENTS
- OTHER CHANGES





## WAIVERS AND STATE PLAN AMENDMENTS

Federal Approval for DSS public health emergency waiver request:

- Authority for DSS to waive certain prior authorizations
- Deferred provider enrollment revalidations and flexibility in enrolling new providers

## COVERAGE FOR COVID-19 TESTING

Medicaid coverage for uninsured state residents of any income level for COVID-19 testing and testing-related provider visits







# Other Changes

## EXTENDED COVERAGE

Extended coverage for the duration of the federally declared public health emergency

## TELEHEALTH

Expanded telehealth coverage provided

## COST SHARING

All HUSKY B co-payments suspended(EO 7I)

## HOME HEALTH CARE

Advanced Practice Registered Nurses (APRNs) and Physician Assistants (PAs) authorized to order services (EO 7II, DSS Order)

# Pharmacy and Prescription Drugs

- MEDICARE PART D
- PRESCRIPTION REFILLS
- MEDICAL MARIJUANA







# Medicare Part D

Suspension of co-payments (of up to \$17 per month) for Medicare Part D beneficiaries who are dually eligible for Medicaid (EO 7I)



# Prescription Refills

Extension of existing authority (up to 30 day supply) for pharmacists to refill non-controlled substance prescriptions without prescriber's authorization under certain conditions (EO 7I)

# Medical Marijuana

## EXECUTIVE ORDER 7L

- Certification and follow-up care via telehealth
- 90-day extension for patient and caregiver registrations that would expire before June 1, 2020
- Changes to dispensary staffing requirements





# Health Insurance



# Who Insures Connecticut?

## 2019

	Employer Coverage	Non-Group Coverage	Medicaid	Medicare	Military	Uninsured	Total
Connecticut	52.9%	4.8%	21.5%	14.1%	0.7%	5.9%	100%
United States	49.6%	5.9%	19.8%	14.2%	1.4%	9.2%	100%

Source: Kaiser Family Foundation



# Current Trends and New Challenges

**Connecticut Uninsured Rate**



So far in 2020:

- 5% increase (+4.5k enrollees) in Qualified Health Plan enrollment year over year
- 14% increase (+100.4k enrollees) in HUSKY enrollment year over year

\*Source: Access Health CT

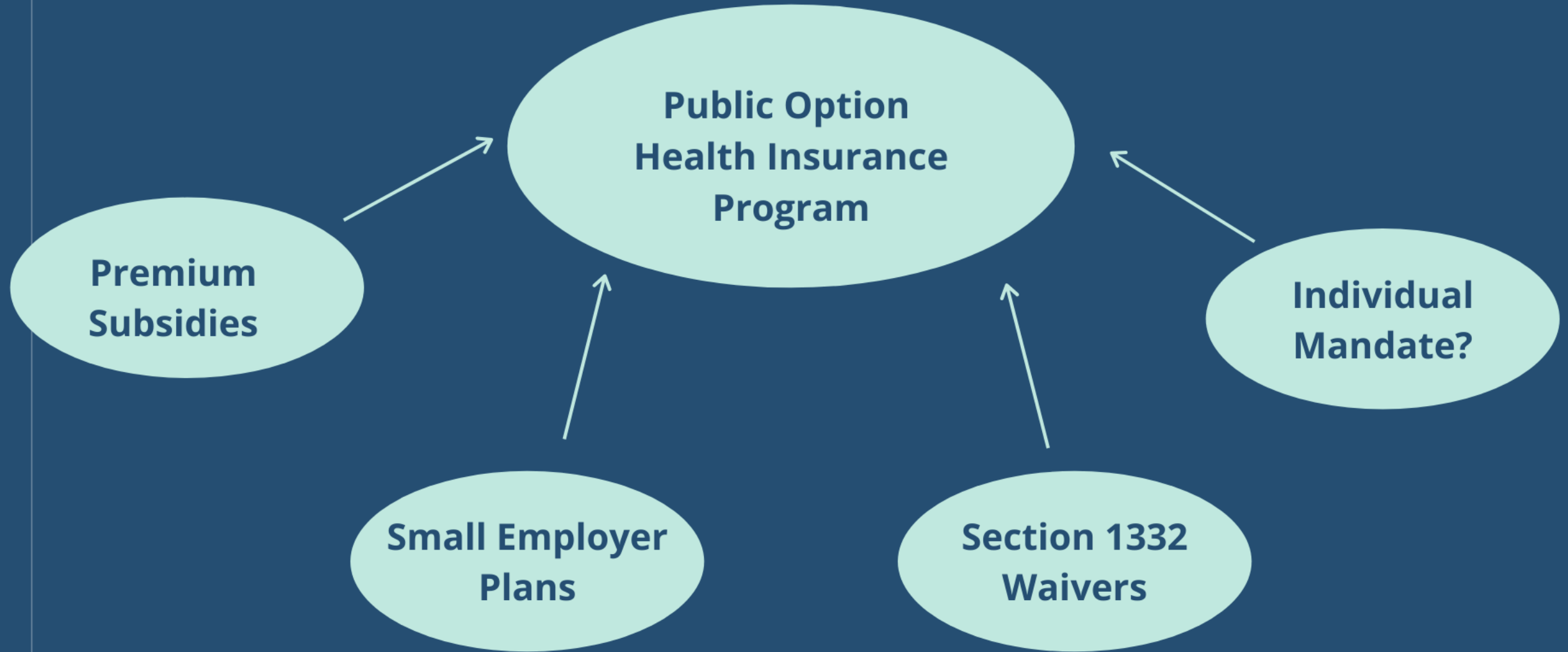
# Expanding Access to Care

- PUBLIC OPTION HEALTH INSURANCE
- REINSURANCE
- PRESCRIPTION DRUGS



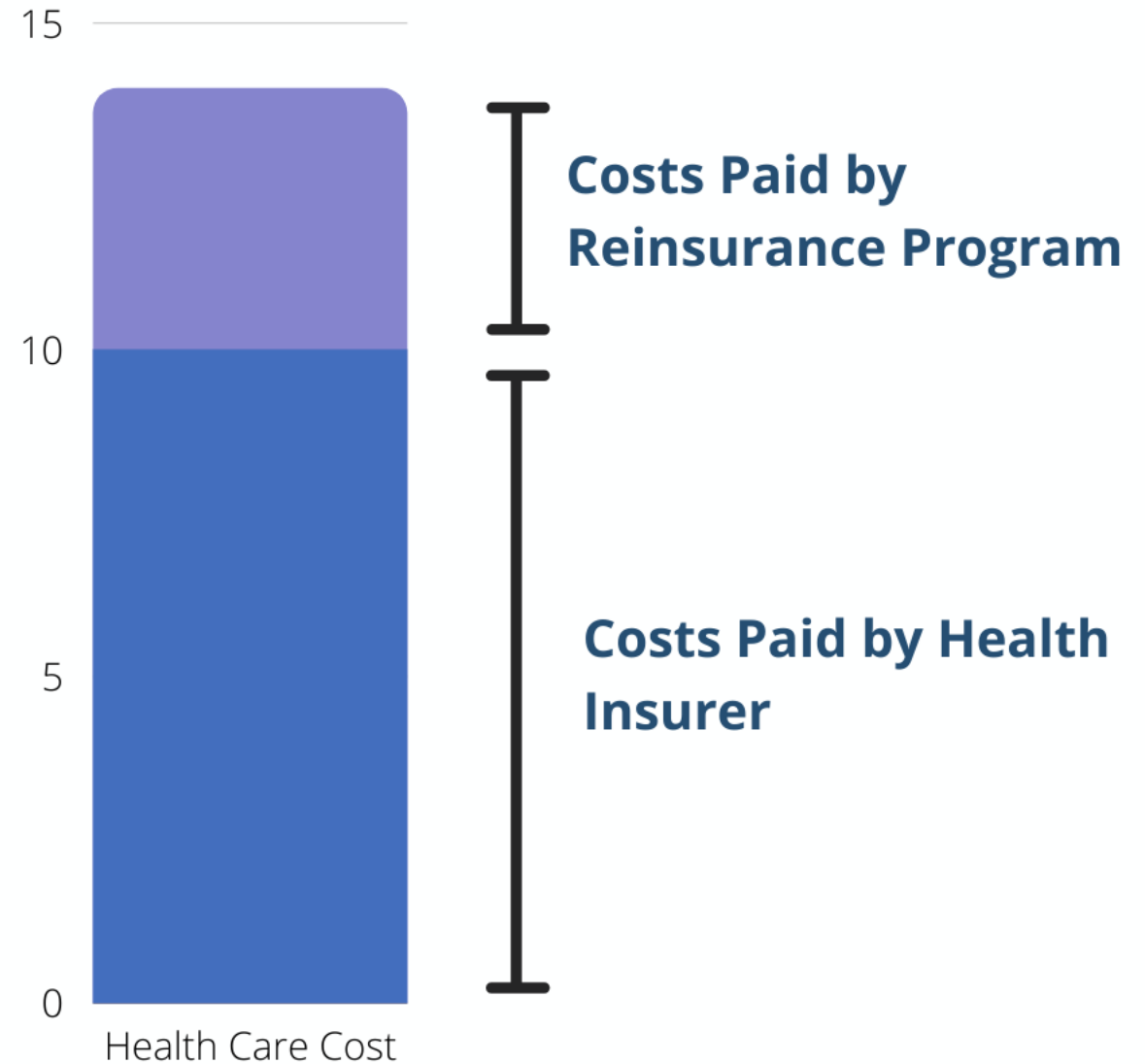


# Connecticut Public Option Proposals



# Reinsurance

**Reinsurance programs reimburse health insurers for excess expenses**





# Prescription Drugs

- **PRICE CAPPING (PA 20-4, §§ 13 & 14  
(JULY SPECIAL SESSION))**
- **STATE PURCHASING PROGRAMS**
- **IMPORTATION PROGRAMS**





Moving Forward:  
Future Unknown

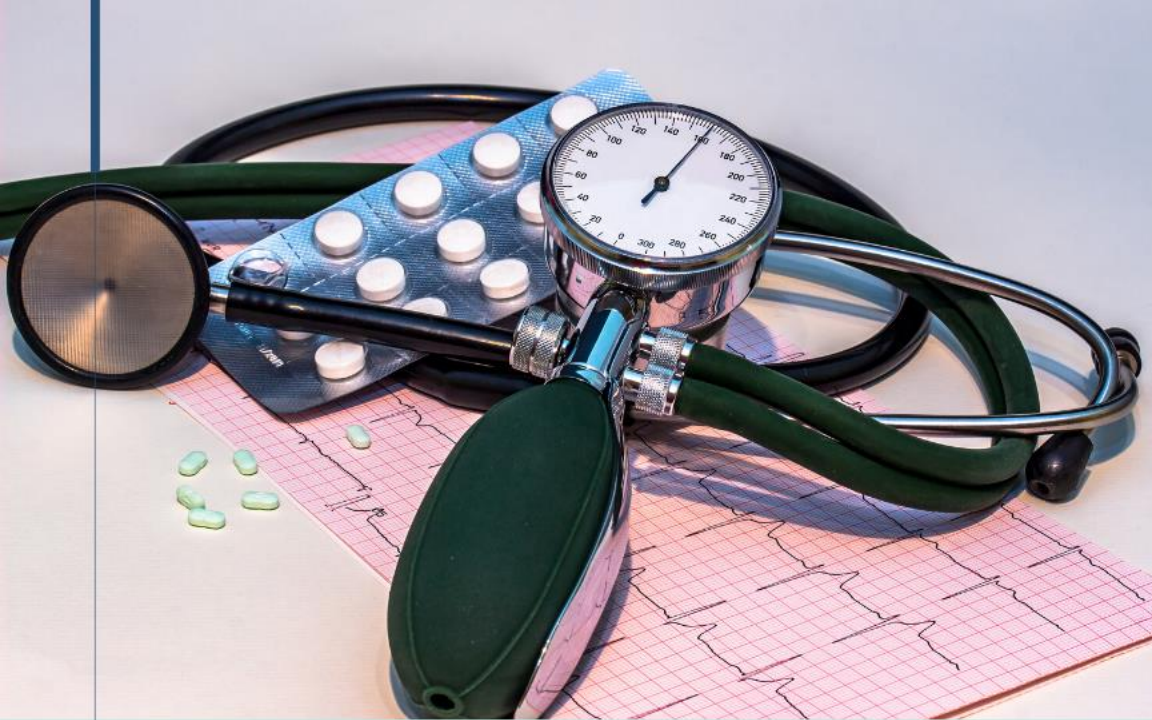


# Affordable Care Act Challenges

## California v. Texas

- Do the challengers (2 individuals and 18 states led by Texas) have legal standing to bring the case?
- Did 2017 Congressional changes render unconstitutional the ACA's requirement for individuals to buy insurance?
- If so, can the rest of the ACA be saved, or must it fall in its entirety?





# State-Mandated ACA Benefits

Benefit	Statutory Citation
• Annual and Lifetime Limits	38a-482c & 38a-512c
• Children to Age 26	38a-497 & 38a-512b
• Essential Benefits	38a-492q & 38a-518q
• Mental Health Parity	38a-476a, 38a-488a* & 514; 38a-488c* & 514c*
• Pre-existing Conditions	38a-476*

\*2020 Supplement  
The list provided above is non-exhaustive.



# Federal COVID-19 Response: Testing

The Families First Coronavirus Response Act, as amended by the Coronavirus Aid, Relief, and Economic Security (CARES) Act

- Most private health insurance plans must cover COVID-19 testing and related items and services
- Coverage must be provided without consumer cost sharing



# Federal COVID-19 Response: Vaccine and Preventive Services

The CARES Act also requires most plans to cover, without cost sharing:

- a COVID-19 vaccine, when available, if it is recommended by the Advisory Committee on Immunization Practices (ACIP)
- any other COVID-19 preventive services recommended by the U.S. Preventive Services Task Force (USPSTF)





# Questions?

## Presenters

- Nicole Dube | Principal Analyst
- James Orlando | Chief Legislative Attorney
- Alex Reger | Associate Legislative Analyst
- Janet Kaminski Leduc | Chief Legislative Attorney



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