



General Assembly  
February Session, 2006

Raised Bill No. 477  
LCO No. 2592



Referred to Committee on

**HUMAN SERVICES**

Introduced by:  
(HS)

**AN ACT CONCERNING THE AVAILABILITY OF OPTIONAL SERVICES  
UNDER THE MEDICAID PROGRAM.**

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

1 Section 1. Section 17b-28e of the general statutes is repealed and the  
2 following is substituted in lieu thereof (*Effective July 1, 2006*):

3 [Not later than September 30, 2002, the Commissioner of Social  
4 Services shall submit an amendment to the Medicaid state plan to  
5 implement the provisions of public act 02-1 of the May 9 special  
6 session\* concerning optional services under the Medicaid program.]  
7 The Commissioner of Social Services shall amend the Medicaid state  
8 plan to include as optional services covered under the Medicaid  
9 program (1) services provided by a chiropractor licensed under  
10 chapter 372, a natureopath licensed under chapter 373, a podiatrist  
11 licensed under chapter 375, a psychologist licensed under chapter 383,  
12 an optometrist licensed under chapter 380, an audiologist licensed  
13 under chapter 399, and a speech pathologist licensed under chapter  
14 399, (2) hospice services, and (3) personal care assistance services. Said  
15 state plan amendment shall supersede any regulations of Connecticut  
16 state agencies concerning such optional services.

Sec. 2. Section 17b-282a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2006*):

(a) The Commissioner of Social Services, to the extent permitted by federal law, shall amend the Medicaid state plan to provide coverage for general anesthesia, nursing and related hospital services provided in conjunction with dental services, provided such anesthesia, nursing and related hospital services are provided in conjunction with in-patient dental services if the following conditions are met:

(1) The anesthesia, nursing and related hospital services are deemed medically necessary by the treating dentist or oral surgeon and the patient's primary care physician in accordance with the department's requirements for prior authorization of services, if required; and

(2) The patient is either (A) a child under the age of four who is determined by a licensed dentist, in conjunction with a licensed physician who specializes in primary care, to have a dental condition of significant dental complexity that it requires certain dental procedures to be performed in a hospital, or (B) a person who has a developmental disability, as determined by a licensed physician who specializes in primary care, that places the person at serious risk. The expense of such anesthesia, nursing and related hospital services shall be deemed a medical expense under such health insurance policy and shall not be subject to any limits on dental benefits under such policy.

(b) The Commissioner of Social Services, shall amend the Medicaid state plan, to provide coverage to the extent permitted by federal law, for screening and treatment of periodontal disease for pregnant women under the Medicaid program.

Sec. 3. (NEW) (*Effective July 1, 2006*) The Commissioner of Social Services shall apply for a Medicaid Research and Demonstration Waiver under Section 1115 of the Social Security Act in order to establish a demonstration project for the provision of home-based telemonitoring services by not more than three licensed home health

48 care agencies who contract with the Department of Social Services to  
 49 provide home health care services to Medicaid program beneficiaries.  
 50 The demonstration project shall be designed to promote the efficient,  
 51 appropriate and cost-effective delivery of home health care services to  
 52 persons with chronic medical conditions, including, but not limited to,  
 53 diabetes. Home-based telemonitoring services available under the  
 54 demonstration project shall utilize technology to enhance collaboration  
 55 and communication between the recipient of the services and the home  
 56 health care professionals providing services to such recipient. Not later  
 57 than July 1, 2007, the commissioner shall report, in accordance with  
 58 section 11-4a of the general statutes, on the status of the demonstration  
 59 project to the joint standing committees of the General Assembly  
 60 having cognizance of matters relating to human services and  
 61 appropriations and the budgets of state agencies.

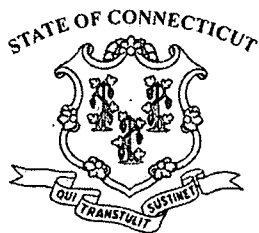
This act shall take effect as follows and shall amend the following sections:

Section 1	July 1, 2006	17b-28e
Sec. 2	July 1, 2006	17b-282a
Sec. 3	July 1, 2006	New section

**Statement of Purpose:**

To expand access to a variety of health care services under the Medicaid program.

*[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.]*



General Assembly

February Session, 2006

**Substitute Bill No. 477**



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8 plan to include as optional services covered under the Medicaid  
9 program (1) services provided by a chiropractor licensed under  
10 chapter 372, a natureopath licensed under chapter 373, a podiatrist  
11 licensed under chapter 375, a psychologist licensed under chapter 383,  
12 an optometrist licensed under chapter 380, an audiologist licensed  
13 under chapter 399, a speech pathologist licensed under chapter 399  
14 and an optician licensed under chapter 381, (2) hospice services, and  
15 (3) personal care assistance services. Said state plan amendment shall  
16 supersede any regulations of Connecticut state agencies concerning  
17 such optional services.

18 Sec. 2. Section 17b-282a of the general statutes is repealed and the  
19 following is substituted in lieu thereof (*Effective July 1, 2006*):

20 (a) The Commissioner of Social Services, to the extent permitted by  
 21 federal law, shall amend the Medicaid state plan to provide coverage  
 22 for general anesthesia, nursing and related hospital services provided  
 23 in conjunction with dental services, provided such anesthesia, nursing  
 24 and related hospital services are provided in conjunction with in-  
 25 patient dental services if the following conditions are met:

26 (1) The anesthesia, nursing and related hospital services are deemed  
 27 medically necessary by the treating dentist or oral surgeon and the  
 28 patient's primary care physician in accordance with the department's  
 29 requirements for prior authorization of services, if required; and

30 (2) The patient is either (A) a child under the age of four who is  
 31 determined by a licensed dentist, in conjunction with a licensed  
 32 physician who specializes in primary care, to have a dental condition  
 33 of significant dental complexity that it requires certain dental  
 34 procedures to be performed in a hospital, or (B) a person who has a  
 35 developmental disability, as determined by a licensed physician who  
 36 specializes in primary care, that places the person at serious risk. The  
 37 expense of such anesthesia, nursing and related hospital services shall  
 38 be deemed a medical expense under such health insurance policy and  
 39 shall not be subject to any limits on dental benefits under such policy.

40 (b) The Commissioner of Social Services, shall amend the Medicaid  
 41 state plan, to provide coverage to the extent permitted by federal law,  
 42 for screening and treatment of periodontal disease for pregnant  
 43 women under the Medicaid program.

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HS

Joint Favorable Subst. C/R

APP

SENATE  
*Thomas P. Bricker*  
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FAVORABLE REPORT OF COMMITTEE  
ON HUMAN SERVICES  
REFERRED TO COMMITTEE  
ON APPROPRIATIONS