DEPARTMENT of SOCIAL SERVICES

Notice of Intent to Renew the Home Care Program for Elders Medicaid Waiver

In accordance with the provisions of section 17b-8 of the Connecticut General Statutes, notice is hereby given that the Commissioner of the Department of Social Services intends to renew the Connecticut Home Care Program for Elders Medicaid Waiver. As part of the renewal process, the Department is seeking to 1.) add new services; 2.) add subacute level of care; and 3.) apply concurrently for a 1915b(4) waiver to continue the practice of selectively contracting with care management providers as a result of a competitive procurement.

1. **New Services** - The department is proposing to add Care Transitions and Chronic Disease Self-Management evidence based programs to the service array. Additionally, the department intends to add a Bill Payer service, Recovery Assistant and Independent Support Broker.

2. **Sub-acute level of care** - It has become evident that there are individuals with extensive care needs, beyond what is provided as part of nursing facility level of care, who are seeking home and community based services. We propose to add this level of care to the waiver for up to 100 participants to allow for a higher individual cost cap to be able to meet the needs of this population.

3. **1915b(4) Waiver** - The department is concurrently applying for a 1915b(4) waiver that will permit us to continue our current practice of contracting with a limited pool of care management providers based on the results of a competitive procurement process. The procurement process resulted in the most qualified providers being selected to provide care management services in specified geographic regions of the state.

A complete text of the waiver amendment is available, at no cost, upon request to the Alternate Care Unit, Department of Social Services, 55 Farmington Ave., Hartford, Connecticut 06105; email shirlee.stoute@ct.gov.

All written comments, questions, and concerns regarding this renewal application may be submitted within 15 days of the publication of this notice to the Department of Social Services, Alternate Care Unit, 55 Farmington Ave, Hartford, CT 06105; Attention: Kathy Bruni, Manager; email kathy.a.bruni@ct.gov.