
OLR Bill Analysis

sSB 433

AN ACT EXPANDING LONG-TERM CARE OPTIONS.

SUMMARY

This bill requires the Department of Social Services (DSS), starting July 1, 2026, to rebalance the strategic plan for long-term care supports and services (LTSS) (see BACKGROUND) to increase opportunities for Medicaid beneficiaries and others with income up to 300% of the federal poverty level (FPL) who do not qualify for HUSKY C to receive care at home or in community-based settings. The bill requires the rebalanced strategic plan to include:

1. increased DSS outreach to Medicaid beneficiaries and others who may be eligible for the Connecticut Home Care Program for Elders and Medicaid waiver programs that provide home- and community-based care, and
2. help provided by DSS for these beneficiaries and others to complete program applications.

The bill also requires the Long-Term Care Planning Committee (see BACKGROUND) to study ways to expand long-term care options for Medicaid beneficiaries and others with income up to 300% of FPL who do not qualify for HUSKY C, including allowing more of these beneficiaries and others to receive care at home or in a community-based setting rather than in nursing homes. The committee must report by December 1, 2027, to the Aging, Appropriations, Human Services, and Public Health committees on the study and recommended appropriations or legislation needed to expand these options. The report must also include any estimated savings to the state related to reducing care in nursing homes by increasing options for care at home or in community-based settings.

EFFECTIVE DATE: Upon passage

BACKGROUND

Strategic Plan to Rebalance Medicaid LTSS

Existing law requires DSS to develop this plan to rebalance Medicaid LTSS with community-based and institutional providers and consider various topics (for example, trends in demand for home, community-based, and institutional services). The law requires the strategic plan to be consistent with the Long-Term Care Planning Committee's long-term care plan.

Long-Term Care Planning Committee

The law establishes the Long-Term Care Planning Committee to exchange information on long-term care issues, coordinate policies development, and establish a long-term care plan for all people in need of long-term care. The committee includes committee leadership from the Aging, Human Services, and Public Health committees and appointments from various executive branch agencies, including DSS, the Department of Aging and Disability Services, the Department of Public Health, and the Department of Mental Health and Addiction Services. Among other things, existing law requires the committee to submit its long-term care plan to the Aging, Human Services, and Public Health committees every three years. The plan must guide state agencies in developing and making changes to programs that serve people in need of long-term care.

Legislative History

The Senate referred the bill (File 364) to the Appropriations Committee, which reported a substitute that extends the due date for the Long-Term Care Planning Committee's report by one year, to December 1, 2027.

Related Bill

sSB 495 (File 484), favorably reported by the Human Services Committee, requires the Long-Term Care Planning Committee to study certain topics, including state long-term care financing models, and makes changes to the committee's membership.

COMMITTEE ACTION

Human Services Committee

Joint Favorable

Yea 23 Nay 0 (03/19/2026)

Appropriations Committee

Joint Favorable Substitute

Yea 50 Nay 0 (04/14/2026)