

NOTICE

STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES

Notice of Proposed Medicaid State Plan Amendment (SPA)

SPA 25-H: Community First Choice - Reimbursement Updates to Implement Personal Care Attendant Collective Bargaining Agreement

The State of Connecticut Department of Social Services (DSS) proposes to submit the following Medicaid State Plan Amendment (SPA) to the Centers for Medicare & Medicaid Services (CMS) within the U.S. Department of Health and Human Services (HHS). Public comment information is listed below.

Changes to Medicaid State Plan

Effective on or after January 1, 2025, this SPA will amend Attachment 4.19-B of the Medicaid State Plan in order to make the reimbursement increases described below for the Community First Choice (CFC) benefit pursuant to section 1915(k) of the Social Security Act.

The CFC self-directed personal care attendant (PCA) rates are being increased to comply with the Collective Bargaining Agreement (CBA) between the state's PCA Workforce Council and the union representing self-directed PCAs, which, after approval by the Connecticut General Assembly on March 25, 2024, was recently amended and extended through June 30, 2026. As required by the CBA, the state is to increase the payment rates for applicable CFC services, incorporating all of the relevant changes as detailed in the CBA, including, but not limited to: (1) wage increases, which comprise (A) specified hourly wage increases and (B) minimum percent-based wage increases for individuals already receiving rates above the set minimum wages; (2) additional holidays added for holiday pay; (3) increase in the methodology for calculating the rate add-on to support individuals' health care expenses; and (4) increases in the methodology for calculating paid time off.

As detailed in the current approved Medicaid State Plan, the payment rates are calculated for each PCA to reflect all applicable components of the rate set forth

in the Medicaid State Plan, including, but not limited to, applicable wage, employer taxes, and workers' compensation coverage (which are final components of the rate), plus the interim components of the rate, which include paid time off and rate add-on to support PCA's health care expenses. The calculation of the rate also incorporates all provisions required by applicable state and federal law, including minimum wage and other applicable labor law, which may result in adjustment of the overall analysis of the fiscal impact. Fee schedules are published on the Connecticut Medical Assistance Program website: www.ctdssmap.com. From this web page go to 'Provider,' then to 'Provider Fee Schedule Download,' then select the applicable fee schedule.

The purpose of this SPA is to implement the CBA referenced above and to support ongoing access to quality CFC services for Medicaid members.

Fiscal Impact

Based on the information currently available, DSS estimates this SPA will increase annual aggregate expenditures by approximately \$3,561,973 in State Fiscal Year (SFY) 2025 and \$9,418,819 in State Fiscal Year (SFY) 2026.

Obtaining SPA Language and Submitting Comments

The proposed SPA is posted on the DSS website at this link: <https://portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-State-Plan-Amendments>. The proposed SPA may also be obtained at any DSS resource center, at the Town of Vernon Social Services Department, or upon request from DSS (see below).

To request a copy of the SPA from DSS or to send comments about the SPA, please email: Public.Comment.DSS@ct.gov or write to: Department of Social Services, Medical Policy Unit, 55 Farmington Avenue, 9th Floor, Hartford, CT 06105. Please reference "**SPA 25-H: Community First Choice - Reimbursement Updates to Implement Personal Care Attendant Collective Bargaining Agreement**".

Anyone may send DSS written comments about this SPA. Written comments must be received by DSS at the above contact information no later than **January 17, 2025**.
