



State of Connecticut
Department of Developmental Services

DDS

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Deputy Commissioner

Date: August 1, 2014

To: Interested Persons

From: Christine Pollio Cooney & Rod O'Connor

Re: 2014 DDS Legislative Session Summary

The bills and public acts contained in this document from the 2014 session of the General Assembly in some way impact upon, or might be of interest to, DDS consumers and their families or guardians, DDS employees or DDS providers. If you are reading this online or via email, we have included the link to each Public Act for bills that passed. [Bracketed] language indicates a deletion. Underlined language or the word "NEW" indicates new language. We have also attached a list of bills that we were tracking that did NOT pass as of the end of session on May 7, 2014. We have provided a link to the bill history page for all bills in this summary, regardless of whether they passed or not. These lists are by no means exhaustive. Please keep in mind that many bills on the same or similar issues that did not pass (died) during the session may have been incorporated into a compromise bill. Also, if there were multiple bills on a similar subject, we may have only included the one that went the furthest in the legislative process. Please note: SB stands for Senate Bill, HB stands for House Bill, PA stands for Public Act and FY stands for Fiscal Year. A fiscal year runs from July 1st to June 30th. The fiscal year that begins July 1, 2014 and ends June 30, 2015 is considered FY15.

Summaries in this document include information from the Connecticut General Assembly's Office of Legislative Research and the Office of Fiscal Analysis. Please note that this document is up-to-date as of August 1, 2014.

If you have questions on these or any other bills from the 2014 legislative session, please contact us at Rod.OConnor@ct.gov or Christine.Pollio@ct.gov. Enjoy!

Links to Sections of the 2014 Legislative Summary

[Bills Proposed by \(or at the Request of\) the Department of Developmental Services](#)

[Bills That Were Signed into Law](#)

[Bills That Were Vetoed by the Governor](#)

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Budget Bills

Bills That Were Reported Out of Committee and Did Not Pass

Bills That Were Not Reported Out of Committee and Did Not Pass

BILLS PROPOSED BY (OR AT THE REQUEST OF) THE DEPARTMENT OF DEVELOPMENTAL SERVICES:

S.B. No. 255 AN ACT CONCERNING UNIFIED SCHOOL DISTRICT #3 The bill would have repealed statutes relating to Unified School District #3 due to the closure of the Birth-to-Three Early Connections program. **S.B. No. 255** died on the House Calendar. Provisions of **S.B. No. 255** are incorporated in **Sections 62 through 65, inclusive**, of **H.B. No. 5537 Public Act 14-231** AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.

S.B. No. 256 AN ACT CONCERNING THE DEPARTMENT OF DEVELOPMENTAL SERVICES REVOLVING LOAN FUND The bill would have allowed the Department of Developmental Services to administer the residential facility revolving loan program through an agreement with the Connecticut Housing Finance Authority. **S.B. No. 256** died on the House Calendar. Provisions of **S.B. No. 256** are incorporated in **Section 66** of **H.B. No. 5537 Public Act 14-231** AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.

S.B. No. 362 AN ACT CONCERNING MANDATORY REPORTING OF ABUSE AND NEGLECT OF INDIVIDUALS WITH AUTISM SPECTRUM DISORDER AND THE DEFINITION OF ABUSE The bill would have required reporting of suspected abuse or neglect of persons between the ages of 18 to 59, who receive services from the Department of Developmental Services' Division of Autism Spectrum Disorder Services and would have expanded the definition of abuse to include verbal abuse, sexual abuse, psychological abuse and financial exploitation for purposes of the registry of persons who have been terminated or separated from employment as a result of substantiated abuse or neglect. **S.B. No. 362** died in the Public Health Committee. Provisions of **S.B. No. 362** are incorporated in **H.B. No. 5456 Public Act 14-165** AN ACT CONCERNING MANDATORY REPORTING OF ABUSE AND NEGLECT OF INDIVIDUALS WITH AUTISM SPECTRUM DISORDER, THE DEFINITION OF ABUSE, AND THE DEPARTMENT OF DEVELOPMENTAL SERVICES ABUSE AND NEGLECT REGISTRY.

S.B. No. 463 Public Act 14-121 AN ACT CONCERNING THE APPOINTMENT OF A CONSERVATOR FOR A PERSON WITH INTELLECTUAL DISABILITY This act allows psychological evidence from a psychologist to be introduced in place of medical evidence from a physician at a probate court hearing or review on involuntary conservatorship for a person with intellectual disability. EFFECTIVE DATE: October 1, 2014

H.B. No. 5328 Public Act 14-143 AN ACT CONCERNING ADVISORY AND PLANNING COUNCILS FOR STATE DEVELOPMENTAL SERVICES REGIONS, A CHANGE IN TERMINOLOGY AND THE AUTISM SPECTRUM DISORDER ADVISORY COUNCIL This act makes several changes to the Council on Developmental Services, the Autism Spectrum Disorder Advisory Council, and the advisory and planning councils for state developmental services regions. The act increases, from 13 to 15, the membership of the Council on Developmental Services. One of the additional members, appointed by the House majority leader, must be a person with autism spectrum disorder who is receiving, or has received, services from the Department of Developmental Services' Division of Autism Spectrum Disorder Services. The other new

member is appointed by the Senate majority leader. It expands those eligible to serve in certain positions on the council to include other relatives, not just parents or guardians, of individuals with an intellectual disability. The act also changes how often the council must meet from every other month to six times per year. The act increases, from 23 to 24, the membership of the Autism Spectrum Disorder Advisory Council. The additional member must be a physician who treats or diagnoses persons with autism spectrum disorder appointed by the governor. The act allows a member of a DDS regional advisory and planning council to serve beyond the current limit of two consecutive three-year terms if waiting for the appointment of a successor. This act also updates terminology. EFFECTIVE DATE: October 1, 2014

H.B. No. 5456 Public Act 14-165 AN ACT CONCERNING MANDATORY REPORTING OF ABUSE AND NEGLECT OF INDIVIDUALS WITH AUTISM SPECTRUM DISORDER, THE DEFINITION OF ABUSE, AND THE DEPARTMENT OF DEVELOPMENTAL SERVICES ABUSE AND NEGLECT REGISTRY This act creates a process for investigating claims of abuse of persons with autism spectrum disorder who receive services from the Department of Developmental Services' Autism Division. Currently, the Office of Protection and Advocacy for Persons with Disabilities (OPA), the Department of Children and Families, and the Department of Social Services investigate claims of abuse (depending on the age of the person). Individuals with autism spectrum disorder who do not have intellectual disability and who are at least age 18 and under the age of 60 are not specifically covered by any investigative process. The act grants specific authority to the Department of Developmental Services (DDS) to investigate reports of abuse of individuals ages 18 to 60 with autism spectrum disorder receiving services from DDS's Division of Autism Spectrum Disorder Services (the "division") made against a DDS employee or an employee of any agency, organization, or individual licensed or funded by DDS. By law, certain people, by virtue of their job title, must report suspected abuse to OPA. The act requires any such mandated reporter to report suspected abuse of a person receiving division services or funding to OPA. It makes conforming changes that require mandated reporters to follow the same procedures as when reporting other suspected cases of abuse. This includes filing a report that indicates their belief that the person they suspect is being abused receives services or funding from the division, among other things.

Public Act 14-165 also expands DDS's abuse and neglect registry definition of abuse to include (1) financial exploitation and (2) psychological, verbal, and sexual abuse. By law, DDS maintains a registry of the names of any person who has been fired from his or her job because of a substantiated abuse complaint against them. These are people who were employed by DDS or an agency, organization, or individual who DDS licenses or funds. DDS, its provider network, specific state agencies and volunteer organizations have access to the DDS registry for purposes of checking to if an applicant for employment is on the registry. EFFECTIVE DATE: October 1, 2014

H.B. No. 5537 Public Act 14-231 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES Sections 62 through 65 of this act repeal the statutes establishing Unified School District #3 and make conforming statutory changes, to reflect the planned closure of the district. Unified School District #3 oversees the Birth to Three System's Early Connections program, the state-run Birth to Three provider. Early Connections has been phased out and the last child in the program has exited as the child turned three in July 2014. Going forward, all Birth to Three services will be provided by private agencies under contract with the Department of Developmental Services. EFFECTIVE DATE: July 1, 2014

Section 66 of this act allows the Department of Developmental Services (DDS) to enter a memorandum of understanding with the Connecticut Housing Finance Authority to administer DDS' residential facility revolving loan program. Under the program, DDS makes loans to private nonprofit organizations for purchasing, building, and renovating community-based facilities for individuals with intellectual disability or autism spectrum disorder. Also, section 59 of this act creates an advisory council to advise the Commissioner of Public Health on

research, diagnosis, treatment and education relating to pediatric autoimmune neuropsychiatric disorder.
EFFECTIVE DATE: July 1, 2014

BILLS THAT WERE SIGNED INTO LAW:

S.B. No. 10 Public Act 14-97 AN ACT CONCERNING COPAYMENTS FOR BREAST ULTRASOUND SCREENINGS AND OCCUPATIONAL THERAPY SERVICES This act prohibits certain health insurance policies from imposing a copayment of more than \$20 for a breast ultrasound screening for which the policies are required to provide coverage. The act also prohibits certain health insurance policies from imposing a copayment of more than \$30 per visit for in-network occupational therapy services performed by a state-licensed occupational therapist. The act applies to individual and group policies delivered, issued, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; or (4) hospital or medical services, including coverage under an HMO plan. The copayment limitation for breast ultrasound screening also applies to individual policies that cover limited benefits. EFFECTIVE DATE: January 1, 2015

S.B. No. 25 Public Act 14-41 AN ACT ESTABLISHING THE CONNECTICUT SMART START PROGRAM This act requires the Office of Early Childhood (OEC), in consultation with the State Department of Education (SDE), to design and administer the Connecticut Smart Start competitive grant program for local and regional boards of education to establish or expand preschool programs. It also makes changes to **H.B. No. 5562 Public Act 14-39 AN ACT ESTABLISHING THE OFFICE OF EARLY CHILDHOOD, EXPANDING OPPORTUNITIES FOR EARLY CHILDHOOD EDUCATION AND CONCERNING DYSLEXIA AND SPECIAL EDUCATION**, which establishes the OEC. These changes require: 1. OEC's early childhood information system to track the health, safety, and school readiness of all young children receiving early care and education services in a preschool under the Smart Start program and 2. OEC's commissioner to develop a plan to provide access to a preschool program established or expanded under the Smart Start program, which she must submit to the governor by January 1, 2015. Effective Date: July 1, 2014, except for provisions relating to tracking Smart Start students in the early childhood information system, which are effective upon passage.

S.B. No. 29 Public Act 14-98 AN ACT AUTHORIZING AND ADJUSTING BONDS OF THE STATE FOR CAPITAL IMPROVEMENTS, TRANSPORTATION AND OTHER PURPOSES, AND CONCERNING MISCELLANEOUS PROGRAMS, INCLUDING THE SMART START PROGRAM, THE WATER IMPROVEMENT SYSTEM PROGRAM, SCHOOL SECURITY GRANTS, THE REGENERATIVE MEDICINE RESEARCH FUND, THE CONNECTICUT MANUFACTURING INNOVATION FUND AND THE BOARD OF REGENTS FOR HIGHER EDUCATION INFRASTRUCTURE ACT Among the act's several provisions, it (1) broadens the scope of the existing Stem Cell Research Fund to include regenerative medicine and renames it the Regenerative Medicine Fund; (2) adds bond authorizations for specific state capital projects and grant programs, and (3) modifies the bond authorizations for the preschool competitive grant program (i.e., Smart Start). The act increases bonding by \$30 million for grants to private, nonprofit, tax-exempt health and human service organizations for alterations, renovations, improvements, additions, and new construction, including (1) health, safety, ADA compliance, and energy conservation improvements; (2) information technology systems; (3) technology for independence; and (4) vehicle purchases. The act also (1) restricts these grants to nonprofits that receive state funds to provide direct health or human services to state agency clients, (2) allows the grants to be used for property acquisition, and (3) allows OPM to allocate \$20 million of the total authorization to FY 14 project applications. EFFECTIVE DATE: July 1, 2014, except certain sections which are effective upon passage.

S.B. No. 32 Public Act 14-1 AN ACT CONCERNING WORKING FAMILIES' WAGES This act increases the state's minimum hourly wage from \$8.70 to \$9.15 on January 1, 2015, to \$9.60 on January 1, 2016, and to \$10.10 on January 1, 2017. The act does not change the "tip credit" allowed by law. Thus, it will automatically increase the employer's share of minimum wages for (1) hotel and wait staff from \$5.69 to \$5.78 in 2015, to \$6.07 in 2016, and to \$6.38 in 2017 and (2) bartenders from \$7.34 to \$7.46 in 2015, to \$7.82 in 2016, and to \$8.23 in 2017. The law also allows employers to pay learners, beginners, and people younger than age 18 at a rate equal to 85% of the minimum wage for their first 200 hours of employment. The act effectively increases the learner's wage from \$7.40 to \$7.78 in 2015, to \$8.16 in 2016, and to \$8.59 in 2017. EFFECTIVE DATE: July 1, 2014

S.B. No. 35 Public Act 14-168 AN ACT CONCERNING NOTICE OF ACQUISITIONS, JOINT VENTURES, AFFILIATIONS OF GROUP MEDICAL PRACTICES AND HOSPITAL ADMISSIONS, MEDICAL FOUNDATIONS AND CERTIFICATES OF NEED Among its several provisions, this act makes several changes affecting medical group practices, medical foundations, the certificate of need (CON) process for health care facilities, and hospital conversions from nonprofit to for-profit. It: 1. requires parties to certain transactions that materially change the business or corporate structure of a medical group practice to notify the attorney general; 2. requires parties to certain transactions involving a hospital, hospital group, or health care provider that are subject to federal antitrust review to (a) notify the Attorney General and (b) upon request, provide him a copy of the information filed with the federal agencies; 3. allows a for-profit hospital or health system to organize and become a medical foundation member, limits who may serve on a foundation's board of directors, and changes medical foundation reporting requirements; 4. requires a CON for the ownership transfer of certain group medical practices to a hospital or specified health care entities; and 5. for hospital conversions, requires the purchaser and hospital to hold a hearing on the CON determination letter, allows conditions to be placed on the conversion's approval, and changes one factor in DPH's consideration of whether to approve the application. EFFECTIVE DATE: Various dates

S.B. No. 36 Public Act 14-12 AN ACT CONCERNING THE GOVERNOR'S RECOMMENDATIONS TO IMPROVE ACCESS TO HEALTH CARE This act allows advanced practice registered nurses (APRNs) who have been licensed and practicing in collaboration with a physician for at least three years to practice independently. The act generally requires APRNs, when applying for their annual license renewal, to attest in writing that they have earned at least 50 contact hours of continuing education in the previous 24 months. Starting in 2015, the act requires manufacturers of covered drugs, devices, biologicals, and medical supplies to report to the Department of Public Health information concerning payments or other transfers of value they make to APRNs. EFFECTIVE DATE: July 1, 2014 for the provisions on APRNs' collaboration and independent practice, upon passage for the continuing education provisions, and October 1, 2014 for the manufacturers' disclosure provisions.

S.B. No. 45 Public Act 14-99 AN ACT CONCERNING THE DEPARTMENT OF CHILDREN AND FAMILIES AND THE EDUCATION OF CHILDREN This act requires the superintendent of each school district providing education to a neglected or abused child in the custody of the Department of Children and Families (DCF) to provide certain education-related information to (1) DCF, (2) the student's foster parent, and (3) the student's attorney. It also requires DCF and the Judicial Branch's Court Support Services Division (CSSD) to promptly review the educational files of any child or youth when he or she enters a facility or school program they run or contract with to determine if the child or youth may be eligible for special education and related services under state law. EFFECTIVE DATE: October 1, 2014

S.B. No. 92 Public Act 14-23 AN ACT PERMITTING THE JOINT COMMITTEE ON LEGISLATIVE MANAGEMENT TO PURCHASE CERTAIN GOODS AND SERVICES USING EXISTING CONTRACTS This act allows the General Assembly's Legislative Management Committee, when it serves the state's best interest, to make certain purchases from vendors with existing sales contracts with other states,

Connecticut political subdivisions, nonprofit organizations, or public consortia, subject to the same contract terms and conditions as the other entities. EFFECTIVE DATE: Upon passage

S.B. No. 100 Public Act 14-24 AN ACT CONCERNING BAZAARS AND RAFFLES Among its several provisions, this act changes the initial governmental entity to which an organization submits its bazaar or raffle license application and fees, from the local municipality to the Department of Consumer Protection (DCP). DCP will then remit the appropriate portion of the fee payments and forward the applications to the municipality, rather than the municipality submitting them to the state. Both the municipality and DCP retain the same application review powers and fee amounts. The act allows organizations to use all types of bazaar or raffle advertisements. EFFECTIVE DATE: October 1, 2014

S.B. No. 106 Public Act 14-172 AN ACT CONCERNING IMPROVING EMPLOYMENT OPPORTUNITIES THROUGH EDUCATION AND ENSURING SAFE SCHOOL CLIMATES This act (1) makes several changes in the responsibilities of school districts to address bullying, (2) allows educational courses to qualify as a Temporary Family Assistance (TFA) work activity, and (3) establishes a competitive early childhood grant program. Concerning bullying, it requires separate meetings with the parents or guardians of a bullying victim and those of his or her assailants, rather than a combined meeting, and makes related minor and conforming changes. The act also requires the Departments of Social Services and Labor to permit a TFA recipient to take educational courses as part of the requirements of her or his employability plan. Finally, the act allows the Office of Early Childhood (OEC) to offer a grant for up to three alliance school districts to develop and implement a strategy to promote the social and emotional well-being and health of children from age three to third grade. EFFECTIVE DATE: July 1, 2014

S.B. No. 152 Public Act 14-173 AN ACT CONCERNING COURT SUPPORT SERVICES Among its several provisions, this act: 1. allows the Department of Children and Families (DCF) to disclose certain information to the Court Support Services Division (CSSD) to help the division determine the supervision and treatment needs of a child or youth and provide appropriate supervision and treatment; 2. specifies that court juvenile matters records may be disclosed if the law requires it and expands when probate court judges and employees can access these records; and 3. allows (a) the Judicial Branch to enter into a central computer system any order or process to take a child into custody, (b) a child to be taken into custody based on an order in the system, and (c) certain disclosures of information about children subject to an order. EFFECTIVE DATE: October 1, 2014

S.B. No. 154 Public Act 14-103 AN ACT CONCERNING PROBATE COURT OPERATIONS Among this act's provisions, it allows probate courts, when appointing a conservator, to designate a successor. It also allows people to designate their own successor conservators. The act shifts the jurisdiction of civil commitment review hearings from the probate court that ordered the commitment to the court where the hospital is located. It specifies that all rules of civil evidence that apply to Superior Court civil cases, not just judge-adopted rules, apply to conservatorship hearings. EFFECTIVE DATE: October 1, 2014 and various other dates

S.B. No. 155 Public Act 14-104 AN ACT CONCERNING PROBATE COURTS This act makes numerous changes in the laws that govern adult adoptions. The act also makes numerous changes in the laws that govern the distribution of the property of a person who dies without a will. It also establishes a framework that allows a party in a probate court case involving guardianship, parental rights, or adoption to petition the court to make certain findings that a person may use to apply to the U.S. Citizenship and Immigration Services (USCIS) for special immigrant juvenile status (SIJS). SIJS allows an immigrant child who has been abused, neglected, or abandoned to legally remain in the United States. The act also expands the circumstances in which the Superior Court may disclose confidential juvenile records. EFFECTIVE DATE: October 1, 2014

S.B. No. 178 Special Act 14-20 AN ACT CONCERNING SENIOR SAFETY ZONES The act establishes a task force to study the establishment of senior safety zones to protect senior citizens from registered sexual offenders. The task force shall examine: (1) Best practices nationwide for protecting senior citizens in their homes, at senior centers and at long-term nursing facilities from interaction with sexual offenders; (2) legal considerations related to identifying persons convicted of sexual offenses and preventing them from entering public facilities where senior citizens may live or congregate; (3) data regarding the percentage of sexual offenders whose victims are elderly persons; and (4) the most effective means to identify sexual offenders and limit their movements without affecting their constitutional rights. EFFECTIVE DATE: Upon passage

S.B. No. 179 Public Act 14-194 AN ACT CONCERNING THE ALZHEIMER'S DISEASE AND DEMENTIA TASK FORCE'S RECOMMENDATIONS ON TRAINING This act establishes mandatory Alzheimer's and dementia-specific training for a wide range of personnel, such as emergency medical technicians (EMTs), probate judges, paid conservators, and protective services employees. In section 3 of the act, it requires the Commissioner of Developmental Services to develop regulations to mandate that residential facilities serving people age 50 or older with Down syndrome have at least one employee trained in Alzheimer's disease and dementia symptoms and care. It also requires any Alzheimer's special care unit staff hired on or after October 1, 2014 to complete the currently required initial Alzheimer's and dementia-specific training within the first 120 days of employment. EFFECTIVE DATE: October 1, 2014, except for the provisions on Alzheimer's training for nursing home administrator license applicants, which take effect November 1, 2014.

S.B. No. 208 Public Act 14-197 AN ACT CONCERNING PHARMACY REWARDS PROGRAMS AND PROTECTED HEALTH INFORMATION This act requires a retailer to give consumers a written, plain-language summary of a pharmacy reward program's terms and conditions before enrolling consumers in the program. Under the act, a "pharmacy rewards program" is a promotional arrangement where a retailer gives a consumer store credits, discounts, or other tangible benefits in exchange for the consumer filling prescriptions through the retailer or its affiliate. The act also requires additional disclosures about the use of protected health information if consumers must sign a HIPAA authorization form to participate in the programs. The act defines "HIPAA authorization" as permission to disclose medical records that meets the privacy requirements of the federal Health Insurance Portability and Accountability Act of 1996 or its associated regulations. EFFECTIVE DATE: July 1, 2014

S.B. No. 247 Public Act 14-202 AN ACT ELIMINATING AND MODIFYING CERTAIN REPORTING AND REGULATORY REQUIREMENTS OF THE DEPARTMENT OF ADMINISTRATIVE SERVICES AND REPEALING OBSOLETE PROVISIONS This act makes several changes affecting the Department of Administrative Services (DAS). Among the provisions of the act, it: 1. shifts, from individual agencies to DAS, the duty to report annually to the State Bond Commission and the Finance, Revenue and Bonding Committee on the status of certain public works projects; and 2. eliminates a requirement that DAS, in consultation with the Office of Policy and Management (OPM) and the State Properties Review Board (SPRB), adopt regulations concerning state agency leases. EFFECTIVE DATE: Upon passage

S.B. No. 260 Public Act 14-204 AN ACT CONCERNING THE DUTIES OF A CONSERVATOR AND OTHER PERSONS AUTHORIZED TO MAKE DECISIONS RELATING TO THE CARE AND DISPOSITION OF A DECEASED PERSON'S BODY This act makes various changes concerning the disposition of a body after a person's death. It allows an agent with power of attorney to execute a written document before the principal's death (1) directing the body's disposition upon death or (2) designating someone to have custody and control of the body's disposition upon death. It gives the same authority to a conservator in regard to the conserved person's body after death, but only if the probate court expressly authorizes it. The act generally prohibits someone with custody and control of the disposition of a deceased person's body from knowingly providing for disposition in a manner inconsistent with the above documents or a person's own advance directive or other document setting forth health care instructions (including those relating to anatomical

gifts). But, a contrary disposition is allowed if approved by the probate court. EFFECTIVE DATE: October 1, 2014

S.B. No. 271 Public Act 14-112 AN ACT CONCERNING THE STATE'S AUTHORITY TO PURCHASE AND TO RECEIVE DONATIONS OF REAL PROPERTY This act allows the state, through the Department of Administrative Services (DAS) and with the governor's and Office of Policy and Management's (OPM) approval, to accept real property, interests in real property, and other rights in land or water or interests in such rights by gift, devise, or exchange. The act allows the DAS commissioner to purchase or acquire real property, interests in real property, and other rights in land or water or interests in such rights on behalf of any state agency not itself authorized to make the purchase or acquisition. EFFECTIVE DATE: Upon passage

S.B. No. 321 Public Act 14-206 AN ACT CONCERNING MEDICAID COST SAVINGS This act adds six members to the Council on Medical Assistance Program Oversight, one each appointed by the six legislative leaders. These council members must work solely on a new standing subcommittee of the council that must study and make annual recommendations to the council on evidence-based best practices concerning Medicaid cost savings. The subcommittee must file its first report with the council by January 1, 2015. EFFECTIVE DATE: Upon passage

S.B. No. 322 Public Act 14-115 AN ACT CONNECTING THE PUBLIC TO BEHAVIORAL HEALTH CARE SERVICES This act requires the Office of the Healthcare Advocate, by January 1, 2015, to establish an information and referral service to help residents and providers receive (1) behavioral health care information and (2) timely referrals and access to behavioral health care providers. The act specifies the responsibilities of the healthcare advocate in establishing the service. The act requires the office, by February 1, 2016, and annually thereafter, to submit a report that identifies gaps in services and the resources needed to improve behavioral health care options for state residents. EFFECTIVE DATE: July 1, 2014

S.B. No. 324 Public Act 14-116 AN ACT CONCERNING DEPARTMENT OF SOCIAL SERVICES PROGRAMS This act explicitly allows the Department of Social Services (DSS) to pay an acute care general hospital for a dually eligible (Medicare and Medicaid) patient's administratively necessary days when Medicare does not reimburse the hospital for those days. Administratively necessary days are those days when a patient remains in an acute care hospital, even though he or she no longer needs that level of care, while the hospital finds an appropriate placement. DSS is in the process of converting from a hospital payment methodology based on a patient's length of stay to one based on the patient's diagnosis. EFFECTIVE DATE: Upon passage, except for a provision that makes technical changes, which is effective October 1, 2014, and the provision pertaining to acute care payments, which is effective July 1, 2014.

S.B. No. 336 Public Act 14-31 AN ACT CONCERNING THE PENALTY FOR CAUSING HARM TO A VULNERABLE USER OF A PUBLIC WAY This act creates a separate violation for a motorist operating on a public way who fails to exercise reasonable care and causes the serious physical injury or death of a "vulnerable user," provided the vulnerable user exercised reasonable care in using the public way. Any motorist found to have caused the serious injury or death of a vulnerable user in such circumstances must be fined up to \$1,000. Under the act, "vulnerable users" include: 1. pedestrians, 2. highway workers, 3. people riding or driving animals, 4. bicyclists, 5. skateboarders and in-line or roller skaters, 6. people riding or driving agricultural tractors, 7. people using wheelchairs or motorized chairs, and 8. persons who are blind and their service animals. EFFECTIVE DATE: October 1, 2014

S.B. No. 357 Public Act 14-94 AN ACT CONCERNING REVISIONS TO ENERGY STATUTES Among this act's many provisions, it: 1. (a) dissolves the Connecticut Resources Recovery Authority (CRRA) and establishes the Materials Innovation and Recycling Authority (MIRA) as a successor authority; and (b) revises the authority's activities, powers, and purposes; 2. requires new regulations for state building energy efficiency

standards based on the federal Environmental Protection Agency's (EPA) national energy performance rating system and Energy Star Target Finder tool; and 3. changes the maximum cable TV late charge to 8% of the balance due, instead of 8% of the balance due per year. EFFECTIVE DATE: Upon passage, and various dates.

S.B. No. 364 Public Act 14-46 AN ACT CONCERNING THE DEPARTMENT OF HOUSING'S RECOMMENDATIONS FOR REVISIONS TO THE SUPPORTIVE HOUSING INITIATIVE

STATUTE This act adds the departments of Developmental Services and Veterans' Affairs to the entities with which the Department of Mental Health and Addiction Services (DMHAS) must collaborate in administering the state's permanent supportive housing initiative. It also gives the entities administering the initiative more discretion in determining eligibility by eliminating a provision under which services must be directed to: 1. people or families affected by psychiatric disabilities, chemical dependencies, or both, and who are homeless or at-risk of becoming homeless; 2. families who qualify for the temporary assistance for needy families program; 3. 18-to-23-year-olds who are homeless or at-risk of becoming homeless because they are transitioning out of foster care or other residential programs; and 4. community-supervised offenders with serious mental health needs who are under Judicial Branch or Department of Correction jurisdiction. The bill also specifies that all homeless individuals and families, not only those listed above, are eligible for the initiative. EFFECTIVE DATE: July 1, 2014

S.B. No. 389 Public Act 14-207 AN ACT CONCERNING COURT OPERATIONS Among this act's several provisions; it makes a number of unrelated changes regarding Judicial Branch officials, court procedures and programs, and the State Marshal Commission's composition. It also permits guardian ad litem or counsel for minor children to be heard on a matter pertaining to a medical diagnosis under specified conditions. EFFECTIVE DATE: October 1, 2014

S.B. No. 394 Public Act 14-118 AN ACT CONCERNING REQUIREMENTS FOR INSURERS' USE OF STEP THERAPY Among its several provisions, this act bars certain health insurers that use prescription drug step therapy regimens from requiring their use for more than 60 days. Under the act, "step therapy" is a protocol or program that establishes the specific sequence for prescribing drugs for a specified medical condition. At the end of the step therapy period, the act allows an insured's treating health care provider to determine that the step therapy regimen is clinically ineffective for the insured. At that point, the insurer must authorize dispensation of and coverage for the drug prescribed by the provider, if it is covered under the insurance policy or contract. The act requires insurers to establish and disclose to its providers a process by which they may request, at any time, an authorization to override any step therapy regimen. The act also expands the prohibition on insurers requiring insureds to obtain prescription drugs from a mail order pharmacy. EFFECTIVE DATE: January 1, 2015

S.B. No. 410 Public Act 14-209 AN ACT CONCERNING ADMINISTRATIVE HEARINGS CONDUCTED BY THE DEPARTMENT OF SOCIAL SERVICES

This act would have made several changes to the procedures the Department of Social Services (DSS) must follow when conducting an administrative hearing for an appeal of a department decision. The act would have exempted DSS from certain provisions of the Uniform Administrative Procedure Act (UAPA) pertaining to communications during contested cases. Under the act, if DSS is hearing a contested case and has an adverse interest to any party in the proceeding, the hearing officer cannot communicate directly or indirectly with any other DSS employee, including counsel, about any issue of fact or law in the hearing without advance notice and opportunity for all parties to participate on the record.

Public Act 14-209 also would have: 1. allowed more people to request a hearing; 2. made it easier to request a hearing by allowing such requests to be made by mail, telephone, or any electronic means DSS determines acceptable, rather than just in writing; 3. lengthened, from (a) 30 to 45, the number of days within which DSS generally must hold a hearing after receiving a request and (b) 90 to 105, the number of days within which DSS

generally must issue a final decision after the initial hearing request; 4. explicitly allowed up to three continuances; 5. broadened the circumstances in which the aggrieved person may be excused from appearing personally at the hearing. Public Act 14-209 was vetoed by the Governor.

S.B. No. 413 Special Act 14-5 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING MEDICAL ORDERS FOR LIFE-SUSTAINING TREATMENT

This special act allows the Department of Public Health (DPH) to establish a pilot program in one or more geographic areas to implement Medical Orders for Life-Sustaining Treatment (MOLST) and to establish an advisory group of health care providers and consumer advocates to make recommendations concerning the pilot program. Medical orders for life-sustaining treatment are written medical orders by a physician, advanced practice registered nurse or physician assistant to effectuate a patient's request for life-sustaining treatment when the patient has been determined by a physician to be approaching the end stage of a serious, life-limiting illness or is in a condition of advanced, chronic progressive frailty. This pilot program makes participation voluntary for both patients and medical providers. Any enforcement action will be within DPH's existing inspection and complaint process for health care institutions. After the termination of the pilot program, not later than October 1, 2016, DPH shall submit a report concerning the pilot program to the Governor and the Public Health Committee. EFFECTIVE DATE: Upon passage

S.B. No. 417 Public Act 14-211 AN ACT CONCERNING THE PROVISION OF PSYCHIATRIC AND SUBSTANCE USE TREATMENT SERVICES

This act allows a "multi-care institution" such as a licensed hospital, psychiatric outpatient clinic for adults, free-standing facility for the care or treatment of substance abusing or dependent people, hospital for psychiatric disabilities, or a general acute care hospital that provides outpatient behavioral health services to offer certain health services at locations not listed on its license. It does so by eliminating the requirement that the Department of Public Health (DPH) issue a license only for the premises and persons named in the application. The act also specifies a multi-care institution license application process and allows DPH to adopt regulations to implement its provisions. The act also specifies that all health care institutions, instead of only home health care agencies and homemaker-home health aide agencies, must obtain a DPH license if they are not otherwise required to be licensed by the state. EFFECTIVE DATE: October 1, 2014

S.B. No. 424 Special Act 14-22 AN ACT CONCERNING ACCESS TO PRESCHOOL PROGRAMS FOR CHILDREN IN THE CARE AND CUSTODY OF THE DEPARTMENT OF CHILDREN AND FAMILIES

This special act requires the Department of Children and Families, in consultation with the Office of Early Childhood, to adopt policies and procedures to maximize the enrollment of children in eligible preschool programs and submit these policies and procedures and a report to various legislative committees no later than January 1, 2015. EFFECTIVE DATE: July 1, 2014

S.B. No. 425 Public Act 14-212 AN ACT CONCERNING THE STATE EDUCATION RESOURCE

CENTER This act reconstitutes the State Education Resource Center (the "center") as a quasi-public agency created to assist the State Board of Education (SBE) in, among other things, programs and activities to promote educational equity and excellence. These activities can include training and professional development seminars; publication of technical materials; research and evaluation; and writing, managing, and administering grants. The center can support programs and activities concerning (1) early childhood education, in collaboration with the Office of Early Childhood; (2) improving school and district academic performance; (3) closing the academic achievement gap between socio-economic subgroups; and (4) other related programs and activities. The act transfers most of the responsibilities of the former center to the newly reconstituted one and gives it most of the same rights, duties, and responsibilities as other quasi-public agencies. EFFECTIVE DATE: Upon passage

S.B. No. 430 Public Act 14-221 AN ACT CONCERNING THE OPERATION OF EMERGENCY VEHICLES This act allows an emergency vehicle operator, after stopping for a school bus displaying flashing red signal lights on a highway or private road, in a parking area, or on school property, to proceed past the school bus as long as he or she does not endanger life or property in doing so. EFFECTIVE DATE: October 1, 2014

S.B. No. 432 Public Act 14-213 AN ACT CONCERNING NOTICE TO THE SUPERINTENDENT OF SCHOOLS OR CHIEF EXECUTIVE OFFICER OF A MUNICIPALITY UPON RELEASE OR RELOCATION OF A REGISTERED SEXUAL OFFENDER INTO THE SCHOOL DISTRICT OR MUNICIPALITY This act requires the Department of Emergency Services and Public Protection (DESPP) to notify a municipal chief executive officer (CEO) when someone required to register as a sex offender (1) is released into the community or notifies DESPP of an address change and (2) resides or plans to reside in the CEO's municipality. DESPP must email this notice and provide the CEO with the same registry information about the registrant that DESPP posts publicly on the Internet. It also requires DESPP to notify the superintendent of the school district where the registrant resides or plans to reside when a registered sex offender notifies DESPP of an address change. DESPP must provide the same email notice and information described above. By law, DESPP already provides this notice and information to school superintendents when registered sex offenders are released into the community. EFFECTIVE DATE: July 1, 2014

S.B. No. 463 Public Act 14-121 AN ACT CONCERNING THE APPOINTMENT OF A CONSERVATOR FOR A PERSON WITH INTELLECTUAL DISABILITY This act allows psychological evidence from a psychologist to be introduced in place of medical evidence from a physician at a probate court hearing or review on involuntary conservatorship for a person with intellectual disability. EFFECTIVE DATE: October 1, 2014

S.B. No. 493 Public Act 14-122 AN ACT CONCERNING THE REVISOR'S TECHNICAL CORRECTIONS TO THE GENERAL STATUTES This act makes various technical changes concerning grammar, clarity, accuracy of internal references and consistency in the Connecticut General Statutes. EFFECTIVE DATE: October 1, 2014

S.B. No. 494 Public Act 14-3 AN ACT CONCERNING GUARDIANS AD LITEM AND ATTORNEYS FOR MINOR CHILDREN IN FAMILY RELATIONS MATTERS This act establishes new requirements and Superior Court procedures related to the appointment of guardians ad litem (GALs) and counsel for minor children (CMCs) in family relations and other matters. Among the act's numerous provisions, it: 1. allows certain parties to seek removal of a GAL or CMC and requires the Judicial Branch to develop court procedures for removal hearings; 2. sets the parameters for GALs', CMCs', and health care professionals' participation in court proceedings; 3. provides a list of factors for GALs and CMCs to consider in determining the best interest of the child; and 4. establishes new GAL and CMC compensation requirements. EFFECTIVE DATE: Various dates

S.R. No. 9 RESOLUTION PROPOSING APPROVAL OF A COLLECTIVE BARGAINING AGREEMENT BETWEEN THE OFFICE OF EARLY CHILDHOOD AND THE CONNECTICUT STATE EMPLOYEES ASSOCIATION (CSEA-SEIU LOCAL 2001) This resolution is between the Office of Early Childhood (OEC) and the Connecticut State Employees Association (CSEA- SEIU Local 2001). This award covers four years for the period January 1, 2014 through June 30, 2017 and applies to family child care providers who are home-based providers only. Public Act 12-33 allows family child care providers paid by the state's Care4Kids program and personal care attendants (PCAs) to collectively bargain with the state through an employee organization (i.e., a union) over reimbursement rates, benefits, payment procedures, contract grievance arbitration, training, professional development, and other requirements and opportunities. EFFECTIVE DATE: January 1, 2014

S.R. No. 21 RESOLUTION PROPOSING APPROVAL OF A COLLECTIVE BARGAINING AGREEMENT BETWEEN THE PERSONAL CARE ATTENDANT WORKFORCE COUNCIL AND THE NEW ENGLAND HEALTH CARE EMPLOYEES UNION (DISTRICT 1199, SEIU) The resolution is between the Personal Care Attendant Workforce Council and the New England Health Care Employees Union (District 1199, SEIU). This agreement covers the period July 1, 2013 through June 30, 2016. Public Act 12-33 allows personal care attendants (PCAs) paid by the state and family child care providers paid by the state's Care4Kids program to collectively bargain with the state through an employee organization (i.e., a union) over reimbursement rates, benefits, payment procedures, contract grievance arbitration, training, professional development, and other requirements and opportunities. EFFECTIVE DATE: July 1, 2013

S.R. No. 22 RESOLUTION PROPOSING APPROVAL OF AN AGREEMENT BETWEEN THE STATE OF CONNECTICUT AND THE STATE EMPLOYEES BARGAINING AGENT COALITION The resolution proposes approval of a Pension Agreement between the State of Connecticut and the State Employees Bargaining Agent Coalition (SEBAC). This agreement makes certain changes regarding composition of the Medical Examining Board (MEB) of the State Employees Retirement Commission. The agreement replaces the current Memorandum of Understanding (MOU) between the University of Connecticut Health Center (UCHC) and the Office of the State Comptroller (OSC). It increases the number of physicians on the MEB from seven to up to 25. Physicians will be compensated on an unspecified per diem basis.

H.B. No. 5040 Public Act 14-186 AN ACT CONCERNING THE DEPARTMENT OF CHILDREN AND FAMILIES AND THE PROTECTION OF CHILDREN Among this act's various provisions, it expands the circumstances in which the departments of Children and Families (DCF) and Social Services (DSS) must disclose the names and records of certain people to specific entities including: 1. disclosing names and records to investigate or prosecute a person for falsely reporting child abuse and neglect; and 2. disclosing records to investigate or prosecute a mandated reporter for failing to report suspected child abuse or neglect. The act expands the circumstances in which DSS must disclose information to DCF about a child receiving DSS services or the child's immediate family. The act also requires DCF to disclose information to help the (1) Judicial Branch track juvenile offender recidivism and (2) DDS's Birth-to-Three program provide services. The act expands the mandated reporter list to include youth camp directors, among others. EFFECTIVE DATE: October 1, 2014

H.B. No. 5049 Public Act 14-187 AN ACT ELIMINATING UNNECESSARY GOVERNMENT REGULATION This act makes numerous changes to the Uniform Administrative Procedure Act (UAPA), which governs the process for adopting state agency regulations. These changes affect (1) the eRegulations System (the electronic regulation compilation), (2) notices of proposed regulations, (3) the regulation-making record, (4) procedural requirements for approved regulations, and (5) required information concerning regulations omitted from the eRegulations System. It allows the secretary of the state to publish a register of regulatory activity. The act, notwithstanding the provisions of the UAPA, which does not permit a regulation to be repealed without approval by the (1) attorney general for legal sufficiency and (2) Regulation Review Committee, repeals numerous state agency regulations. In section 54 of the act, DDS's regulations concerning "Unified School District #3" and "Respite Programs" are repealed. It is unclear whether repealing regulations through legislation is permitted by the state constitution. EFFECTIVE DATE: Upon passage, and various other dates

H.B. No. 5051 Public Act 14-55 AN ACT IMPROVING TRANSPARENCY OF NURSING HOME OPERATIONS This act expands the information that for-profit chronic and convalescent nursing homes must include about related parties in annual cost reports that the Department of Social Services (DSS) uses to establish per diem rates for caring for Medicaid-eligible residents. It also prohibits anyone from bringing a legal action against, or holding liable, the state, DSS, or any state official or agent for failing to take an action based on information that must be submitted to DSS in the cost reports. EFFECTIVE DATE: July 1, 2014

H.B. No. 5131 Public Act 14-35 AN ACT TRANSFERRING CERTAIN POWERS AND FUNCTIONS OF THE DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT TO THE DEPARTMENT OF HOUSING The act authorizes the Department of Housing (DOH), rather than the Department of Economic and Community Development (DECD), to (1) award grants to nonprofit housing organizations to plan, develop, construct, and manage housing developments and (2) adopt regulations concerning such grants. It also transfers from DECD to DOH the authority to, among other things: 1. accept federal and state grants; 2. enter into contracts on housing authorities' behalf, for state-financed projects; and 3. study, and develop plans to meet, housing needs. EFFECTIVE DATE: October 1, 2014, except for the provisions concerning grants to nonprofit housing organizations effective July 1, 2014

H.B. No. 5140 Public Act 14-124 AN ACT CONCERNING PROPERTY TAX RELIEF ON CERTAIN REAL PROPERTY HELD IN TRUST This act allows municipalities to offer the property tax relief to qualifying residents who are seniors or have disabilities who occupy, as his or her principal residence, a property held in trust for him or her. EFFECTIVE DATE: October 1, 2014, and applicable to assessment years starting on or after that date.

H.B. No. 5146 Public Act 14-15 AN ACT CONCERNING THE USE OF PUBLIC SCHOOL HEALTH ASSESSMENT FORMS BY YOUTH CAMPS AND DAY CARE CENTERS This act allows licensed youth camps, child daycare centers, and group and family day care homes to use a child's required school physical and either his or her (1) public school student health assessment form or (2) State Department of Education early childhood health assessment record form to satisfy any physical examination or health status certification they require. The act also requires the Office of Early Childhood to adopt regulations to allow a child's school health assessment form, in addition to a physical examination, to satisfy a youth camp's health examination or certification requirement. EFFECTIVE DATE: July 1, 2014

H.B. No. 5149 Public Act 14-36 AN ACT CONCERNING CARDIOPULMONARY RESUSCITATION CERTIFICATION This act allows lifeguards to be certified in cardiopulmonary resuscitation by the American Safety and Health Institute as an alternative to the American Heart Association or American Red Cross. It also requires the Department of Public Health to incorporate this provision in regulations. EFFECTIVE DATE: October 1, 2014

H.B. No. 5150 Public Act 14-137 AN ACT CONCERNING FIRE SAFETY ENFORCEMENT OFFICIALS Among its various provisions, this act eliminates one step in the two-step certification process for fire officials (local and deputy fire marshals, fire investigators, and other investigators and inspectors), requiring them to be certified as fire officials upon successful completion of certification requirements, instead of (1) first being certified as "eligible to be certified" upon completion of such requirements and (2) subsequently being certified as fire officials. The act also codifies the practice of the state fire marshal and Codes and Standards Committee (CSC) jointly certifying fire officials. To qualify for certification, the act requires local fire marshals, deputy fire marshals, and fire inspectors to have at least three years' experience performing certain fire or hazardous material work or working as a police officer or equivalent experience as determined by CSC and the state fire marshal. It allows the state fire marshal and CSC to accept training programs developed by private institutions, not just public agencies, as proof of qualification for certification. The act also makes technical changes pertaining to fire officials' authority to enforce the state Fire Safety Code and state Fire Prevention Code. EFFECTIVE DATE: October 1, 2014

H.B. No. 5222 Special Act 14-6 AN ACT CONCERNING A STUDY OF FUNDING AND SUPPORT FOR HOME AND COMMUNITY-BASED CARE FOR ELDERLY PERSONS AND PERSONS WITH ALZHEIMER'S DISEASE This act requires the Commission on Aging to study and report to the Aging Committee on (1) private sources of funding available to elderly persons and persons with Alzheimer's disease in need of home or community-based care, (2) the availability of programs funded by the state that provide

home or community-based care to elderly persons and persons with Alzheimer's disease in need of home or community-based care, and (3) the cost effectiveness of such programs funded by the state. EFFECTIVE DATE: Upon passage

H.B. No. 5227 Public Act 14-73 **AN ACT CONCERNING LIVABLE COMMUNITIES AND ELDERLY NUTRITION** This act requires the Commission on Aging, as part of the livable community initiative, to recognize communities that have implemented livable community initiatives allowing individuals to age in place and to remain in the home setting of their choice. Such initiatives include, but are not limited to: (1) Affordable and accessible housing, (2) community and social services, (3) planning and zoning regulations, (4) walkability, and (5) transportation-related infrastructure. EFFECTIVE DATE: July 1, 2014

H.B. No. 5262 Public Act 14-224 **AN ACT CONCERNING THE PHARMACY PRACTICE ACT AND COUNTERFEIT DRUGS OR DEVICES** This act makes several changes to the pharmacy laws, including adding requirements for (1) sterile compounding, including making certain compounding pharmacies register as drug manufacturers; (2) counterfeit substances; (3) nonresident pharmacies; and (4) “dispense as written” prescriptions. The act gives the Department of Consumer Protection (DCP) more oversight over sterile compounding pharmacies by, among other things, requiring them to file more reports with the department and comply with the latest pharmacopeia standards on sterile pharmaceutical preparations. It also requires sterile compounding pharmacies that provide compounded sterile products without a patient-specific prescription or medical order to obtain a DCP manufacturing license. The act bans the sale and delivery of counterfeit substances and grants DCP additional investigatory and enforcement authority, including the authority to impose civil penalties.

Public Act 14-224 also establishes new procedures for prescribing practitioners and pharmacists when dispensing drugs that cannot be substituted for a generic version. For written, telephonic and electronic prescriptions, the act requires the prescribing practitioner to indicate on the prescription form that the product is “brand medically necessary” or “no substitution.” The act specifies that no prescription form may default to these terms. The act eliminates the specific “Medicaid dispense as written” prescription requirements and instead requires them to conform to the act's prescription requirements. EFFECTIVE DATE: July 1, 2014

H.B. No. 5269 Public Act 14-126 **AN ACT CREATING PARITY BETWEEN PAID SICK LEAVE BENEFITS AND OTHER EMPLOYER-PROVIDED BENEFITS** Among this act’s many provisions, it changes the method for determining if a nonmanufacturing business must provide paid sick leave to certain employees. Under the act, the business must determine if it meets the annual 50-employee threshold based on the number of employees on its payroll for the week containing October 1. The act prohibits the business from firing, dismissing, or transferring an employee from one job site to another to come under the 50-employee threshold. The act also changes the timeframe for accruing paid sick leave. Under the act, employees accrue one hour of paid sick leave for every 40 hours worked during whatever 365-day year the business uses to calculate employee benefits. This allows the employer to start the benefit year on any date, rather than only on January 1. EFFECTIVE DATE: January 1, 2015

H.B. No. 5273 Public Act 14-129 **AN ACT RESTORING THE COMMISSIONER OF ECONOMIC AND COMMUNITY DEVELOPMENT'S DUTY TO DETERMINE WHETHER SURPLUS STATE PROPERTY CAN BE USED FOR ECONOMIC DEVELOPMENT PURPOSES** This act requires the Department of Economic and Community Development, instead of the Department of Housing, to notify the Office of Policy and Management (OPM) if certain surplus state property can be (1) used or adapted for economic development or (2) exchanged for property that can be used for that purpose. By law, OPM must notify all state agencies when an agency informs OPM it no longer needs a property it controls. Current law requires specified commissioners to determine and notify OPM if the property can be used for certain purposes related to their agency's mission. EFFECTIVE DATE: Upon passage

H.B. No. 5285 Special Act 14-1 AN ACT CONCERNING A STUDY OF THE RENEWAL TIMES FOR OCCUPATIONAL LICENSES The act requires the Departments of Public Health and Consumer Protection to review the renewal times for occupational licenses for all categories of health care and pharmacy professionals and report their recommendations for which professionals' license renewal times may be extended without jeopardizing the public's health or safety while achieving a cost savings for such professionals. EFFECTIVE DATE: Upon passage

H.B. No. 5290 Public Act 14-130 AN ACT REVISING MOTOR VEHICLE LAWS Among its several provisions, this act: 1. requires police to report to the Department of Motor Vehicles (DMV) the arrest on certain charges of a person whose driver's license allows him or her to transport members of the public; 2. allows someone whose noncommercial driver's license allows him or her to carry passengers (e.g., taxi driver or student transportation vehicle (STV) driver) to renew his or her license if he or she is controlling an otherwise disqualifying medical condition with medication and is eligible for a waiver or exemption under federal regulations; and 3. requires DMV to assign as many motor vehicle inspectors as needed to inspect school buses and investigate accidents and complaints involving them, rather than requiring DMV to create eight inspection districts and allowing the addition of six inspectors. EFFECTIVE DATES: Various dates

H.B. No. 5311 Special Act 14-18 AN ACT ESTABLISHING THE CONSTRUCTION CONTRACTING AND BIDDING TRANSPARENCY WORKING GROUP This act establishes the Construction Contracting and Bidding Transparency Working Group to study state construction contracting and subcontracting processes. The Working Group is required to issue a report that: (1) reviews and analyzes the current general contractor and construction manager at risk practices for receiving subcontractor and lower tier subcontractor bid submissions on capital projects; (2) reviews existing laws regarding state enforcement, compliance, and licensing authorities that govern general contractors, construction managers at risk and subcontractors; (3) reviews existing construction contracting methods; and (4) examines best practices for subcontractor and lower tier subcontractor bid submissions on capital projects used by other states and government jurisdictions. EFFECTIVE DATE: Upon passage

H.B. No. 5312 Public Act 14-188 AN ACT CONCERNING STATE CONTRACTING, GOVERNMENT ADMINISTRATION AND NOTIFICATION REGARDING EXTENSIONS OF POLLING PLACE HOURS This act makes several unrelated changes concerning state contracting, government administration, and elections. Among this act's provisions, it increases, from \$500,000 to \$1.5 million, the (1) threshold triggering requirements for a competitive bidding process for state public works projects administered by the Department of Administrative Services (DAS) and (2) cost of emergency repairs that DAS may contract for without first securing the governor's consent and certifying the need for repairs to the Legislative Management Committee. It establishes a separate selection process for DAS-administered projects that cost \$1.5 million or less. It also requires certain subcontractors to be prequalified by DAS at the time a bid is submitted, rather than the time the project starts.

In sections 11 through 14, **Public Act 14-188** allows the DAS commissioner to expand the janitorial work program for people with a disability or disadvantage to include "contractual services" such as laundry and cleaning services, mail supply room staffing, data entry, call center staffing, and other services he specifies. The act requires the contractor to employ at least 200 people who perform janitorial work or contractual services in Connecticut. The commissioner must post on the department's website a list of the contractual services he deems appropriate to include in the program. By law, this work program must create and expand work opportunities, specifically full-time jobs or full-time equivalents at standard wage rates, for people with a disability (excluding blindness) and people with a disadvantage.

In section 16, **Public Act 14-188** requires a state contracting agency to evaluate a contract for services that is currently privatized to determine if entering into or renewing it is the most cost-effective way of delivering the service. The agency must do so by determining the service's costs, which by law are all reasonable, relevant, and verifiable expenses, including, among other things, salary, materials, supplies, overhead, and the normal

cost of fringe benefits, as calculated by the state's comptroller. The act also defines the normal cost of fringe benefits for purposes of the contract privatization law as the amount of contributions required to fund the benefit, allocated to the current year of service. By law, a privatization contract is an agreement or series of agreements between a state contracting agency and a person or entity in which the person or entity agrees to provide services that are substantially similar to and in lieu of services provided, in whole or in part, by state employees. It does not include contracts with a nonprofit agency that were in effect as of January 1, 2009 and, through a renewal, modification, extension, or rebidding of contracts, continue to be provided by a nonprofit agency. EFFECTIVE DATE: Various dates

H.B. No. 5321 Special Act 14-15 AN ACT CONCERNING INTERPRETER QUALIFICATIONS This act requires the Department of Rehabilitation Services, in consultation with the Office of Protection and Advocacy for Persons with Disabilities and the Connecticut Registry of Interpreters for the Deaf task force on interpreting, to: (1) Develop a plan with the Department of Education to ensure that an adequate number of qualified interpreters are available to assist students who are deaf or hard of hearing, and (2) submit a report recommending (A) any new standards necessary to ensure that an adequate number of qualified interpreters are available to assist state residents, (B) a timeline to implement such new standards, (C) a fee structure, if advisable, for interpreters to register with the Department of Rehabilitation Services, and (D) methods to monitor compliance with interpreter qualification standards. EFFECTIVE DATE: July 1, 2014

H.B. No. 5323 Public Act 14-132 AN ACT CONCERNING THE CHILD POVERTY AND PREVENTION COUNCIL This act adds three members, or their designees, to the Child Poverty and Prevention Council: the (1) housing commissioner, (2) agriculture commissioner, and (3) executive director of the Office of Early Childhood. By law, the council terminates on June 30, 2015. EFFECTIVE DATE: Upon passage

H.B. No. 5325 Public Act 14-142 AN ACT ELIMINATING THE HOME-CARE COST CAP This act eliminates the cost cap on community-based, Medicaid waiver-funded services provided by the Connecticut Home Care Program for Elders (CHCPE) to frail elders as an alternative to nursing home care, which, under prior law, was set at 60% of the weighted average cost of care in skilled nursing and intermediate care facilities. The act also specifies that the state's cost for long-term facility care and all CHCPE services, not just the program's community-based services, cannot exceed the cost the state would have incurred to pay for nursing home care without the program. EFFECTIVE DATE: July 1, 2014

H.B. No. 5328 Public Act 14-143 AN ACT CONCERNING ADVISORY AND PLANNING COUNCILS FOR STATE DEVELOPMENTAL SERVICES REGIONS, A CHANGE IN TERMINOLOGY AND THE AUTISM SPECTRUM DISORDER ADVISORY COUNCIL This act makes several changes to the Council on Developmental Services, the Autism Spectrum Disorder Advisory Council, and the advisory and planning councils for state developmental services regions. The act increases, from 13 to 15, the membership of the Council on Developmental Services. One of the additional members, appointed by the House majority leader, must be a person with autism spectrum disorder who is receiving, or has received, services from the Department of Developmental Services' Division of Autism Spectrum Disorder Services. The other new member is appointed by the Senate majority leader. It expands those eligible to serve in certain positions on the council to include other relatives, not just parents or guardians, of individuals with an intellectual disability. The act also changes how often the council must meet from every other month to six times per year. The act increases, from 23 to 24, the membership of the Autism Spectrum Disorder Advisory Council. The additional member must be a physician who treats or diagnoses persons with autism spectrum disorder appointed by the governor. The act allows a member of a DDS regional advisory and planning council to serve beyond the current limit of two consecutive three-year terms if waiting for the appointment of a successor. This act also updates terminology. EFFECTIVE DATE: October 1, 2014

H.B. No. 5337 Public Act 14-145 AN ACT CONCERNING FEES CHARGED FOR SERVICES

PROVIDED AT HOSPITAL-BASED FACILITIES This act requires a hospital or health system to notify individual patients and the public that it charges a facility fee for outpatient services. The facility providing the service (hospital-based facility) must notify a patient in writing (1) that the facility is part of a hospital or health system that charges a facility fee, (2) about the patient's potential financial liability, and (3) that the patient should contact his or her health insurance company for additional information. The patient notice requirements do not apply to Medicare or Medicaid patients or those receiving services under a workers' compensation plan. Under the act, a "facility fee" means any fee a hospital or health system charges or bills for outpatient hospital services provided in a hospital-based facility that is (1) intended to compensate the hospital or health system for its operational expenses and (2) separate and distinct from a professional fee, which is any fee charged or billed by a provider for professional medical services provided in a hospital-based facility. EFFECTIVE DATE: October 1, 2014

H.B. No. 5374 Special Act 14-8 AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE LEGISLATIVE PROGRAM REVIEW AND INVESTIGATIONS COMMITTEE STUDY ON THE DEPARTMENT OF CHILDREN AND FAMILIES AS THEY RELATE TO PREPARATION OF YOUTHS AGING OUT OF STATE CARE

The act requires the Department of Children and Families (DCF) to prepare a progress report on the steps DCF has taken to comply with each of the recommendations contained in the 2014 Legislative Program Review and Investigations report on services to prepare youths aging out of state care. EFFECTIVE DATE: Upon passage

H.B. No. 5378 Public Act 14-62 AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE LEGISLATIVE PROGRAM REVIEW AND INVESTIGATIONS COMMITTEE CONCERNING MEDICAID-FUNDED EMERGENCY DEPARTMENT VISITS

This act requires administrative service organizations (ASOs) that contract with the departments of Social Services (DSS), Children and Families (DCF), and Mental Health and Addiction Services (DMHAS) to administer and manage medical and behavioral health services provided to Medicaid recipients, also, to provide intensive case management services that, among other things, (1) identify hospital emergency departments (EDs) with high numbers of "frequent users" (i.e., Medicaid clients with 10 or more annual ED visits), (2) create regional intensive case management teams to work with ED doctors, and (3) assign at least one regional intensive case management team staff member to participating EDs during the EDs' hours of highest use. The act also requires these ASOs to (1) assess medical and behavioral health providers on certain criteria including ease of access and (2) perform outreach to Medicaid clients to encourage their use of these providers. The act additionally requires certain DSS-contracted ASOs to annually report to DSS and the Council on Medical Assistance Program Oversight (MAPOC) information on Medicaid clients', including frequent users', ED use. Finally, the bill requires state-issued Medicaid benefits cards to include the name and contact information for the Medicaid beneficiary's primary care provider, if he or she has chosen one. EFFECTIVE DATE: Various dates

H.B. No. 5386 Public Act 14-148 AN ACT CONCERNING CARE COORDINATION FOR CHRONIC DISEASE

This act requires the Department of Public Health (DPH) to develop and implement a plan to (1) reduce the incidence and effects of chronic disease, (2) improve chronic disease care coordination in Connecticut, and (3) improve outcomes for conditions associated with chronic disease. This plan must address chronic cardiovascular disease, cancer, lupus, stroke, chronic lung disease, diabetes, arthritis or another metabolic disease, and the effects of behavioral health disorders. It must be consistent with (1) DPH's Healthy Connecticut 2020 health improvement plan and (2) the state healthcare innovation plan developed under the State Innovation Model Initiative by the Centers for Medicare and Medicaid Services Innovation Center. The report must include a description of the diseases most likely to cause death or disability and recommendations for what health care providers and patients can do to reduce the diseases' incidence and effects. EFFECTIVE DATE: October 1, 2014

H.B. No. 5402 Public Act 14-150 AN ACT CONCERNING WAIVERS FOR MEDICAID-FINANCED, HOME AND COMMUNITY-BASED PROGRAMS FOR INDIVIDUALS WITH ACQUIRED BRAIN INJURY This act authorizes the Department of Social Services (DSS) to seek federal approval for a second waiver for the Medicaid-financed, home- and community-based program for individuals with an acquired brain injury (ABI). The act requires the commissioner to ensure that (1) services provided under the first ABI waiver are not phased out and (2) no person receiving services under the first waiver program is institutionalized in order to meet its federal cost neutrality requirements. It also requires DSS to operate the first waiver program continuously, to the extent permissible under federal law. Finally, the act establishes an advisory committee for the second ABI waiver program. EFFECTIVE DATE: July 1, 2014

H.B. No. 5439 Public Act 14-158 AN ACT CONCERNING BRAND NAME DRUG PRESCRIPTIONS FOR STATE MEDICAL ASSISTANCE RECIPIENTS This act makes it easier for a medical practitioner to order a brand-name drug prescription for a medical assistance recipient by eliminating a requirement that the practitioner submit a hand-written prescription to a pharmacist stating “brand medically necessary” when he or she electronically submits a prescription for a medical assistance recipient specifying that there can be no substitution for the brand-name drug prescribed. The act instead requires the prescriber to select the code on the certified electronic prescription that indicates a substitution is not allowed. Additionally, the act changes the law to reflect current Department of Social Services (DSS) practice by replacing references to “Medicaid” recipient with “medical assistance” recipient. DSS administers medical assistance through Medicaid and HUSKY B (the State Children's Health Insurance Program, or SCHIP). The term “medical assistance” encompasses all such programs DSS administers. EFFECTIVE DATE: July 1, 2014

H.B. No. 5440 Public Act 14-160 AN ACT CONCERNING MEDICAID REIMBURSEMENT FOR EMERGENCY DEPARTMENT PHYSICIANS This act allows, under certain circumstances, an emergency department physician to (1) enroll separately as a Medicaid provider and (2) qualify for direct reimbursement for professional services he or she provides in a hospital emergency department to a Medicaid recipient. These include services provided on the same day the recipient is admitted to the hospital. These provisions apply on and after January 1, 2015 and concurrent with the Department of Social Services (DSS) implementing a diagnosis-related group (DRG) method of reimbursing hospitals for serving Medicaid recipients. The act requires the DSS commissioner to pay these physicians the Medicaid rate for physicians under the physician fee schedule in effect at that time. If the commissioner determines that paying a physician under this provision increases the state's cost, he must adjust the physician's rates to ensure budget neutrality. EFFECTIVE DATE: July 1, 2014

H.B. No. 5441 Public Act 14-164 AN ACT CONCERNING DIRECT PAYMENT OF RESIDENTIAL CARE FACILITIES This act allows the Department of Social Services (DSS) to pay Temporary Family Assistance (TFA) and State Supplement Program (SSP) benefits directly to a licensed residential care home or certain types of “rated housing facilities” through a per diem or monthly rate. Under the act, “rated housing facilities” are (1) boarding facilities or homes licensed by the Departments of Developmental Services, Mental Health and Addiction Services, or Children and Families and (2) New Horizons, Inc. The act extends certain regulations that apply to licensed residential care homes to rated housing facilities. These regulations concern SSP payments and the safeguarding of residents' personal funds. The act also extends provisions concerning retroactive payments and debits that already apply to residential care homes to rated housing facilities. It directs DSS to adopt regulations concerning payments to these facilities for residents and, when adopting regulations regarding direct payment to facilities, to do so without regard to periods when the resident is absent, provided the resident can reasonably be expected to return to the facility before the end of the month following the month in which the resident left the facility. This allows DSS to pay a resident's SSP benefits directly to a facility when the resident is absent from the facility within this time period. EFFECTIVE DATE: Upon passage

H.B. No. 5443 Public Act 14-157 AN ACT CONCERNING COVERAGE UNDER STATE MEDICAL ASSISTANCE PROGRAMS FOR CERTAIN OVER-THE-COUNTER DRUGS This act expands the types of over-the-counter drugs the Department of Social Services (DSS) may pay for through its medical assistance programs to include those that must be covered as essential health benefits under the federal Affordable Care Act (ACA), including drugs rated “A” or “B” in the current U. S. Preventive Services Task Force (USPSTF) recommendations for people with specific diagnoses. USPSTF's recommendations currently include (1) aspirin for men age 45 to 79 and women age 55 to 79 to prevent cardiovascular disease and (2) folic acid for women who are pregnant or capable of pregnancy. The law generally bans DSS from paying for over-the-counter drugs, with the following exceptions: 1. over-the-counter drug coverage through the Connecticut AIDS Drug Assistance Program (CADAP), 2. insulin or insulin syringes, 3. nutritional supplements for people who must be tube fed or who cannot safely get nutrition in any other form, and 4. smoking cessation drugs. EFFECTIVE DATE: Upon passage

H.B. No. 5453 Public Act 14-159 AN ACT CONCERNING EMPLOYERS AND HOME CARE WORKERS This act allows a “sleep-time” exclusion from overtime pay requirements for certain employees employed by third-party providers (e.g., home care agencies) to provide “companionship services” as defined by federal regulations. In general, “companionship services” means providing fellowship, protection, and limited care for an elderly person or person with an illness, injury, or disability. The act allows a home care employee and third-party provider to agree to exclude a regularly scheduled sleep period from the work hours used to determine the employee's overtime pay if (1) the employee is required to be present at a worksite for at least 24 consecutive hours, (2) adequate on-site sleeping facilities are provided to the employee, and (3) the employee receives at least five hours of sleep time. Under such an agreement, the employee's sleep time would not be included when determining whether the employee qualified for overtime pay by working more than 40 hours in a week. The act prohibits excluding more than eight hours per sleep period, even if the scheduled sleep period is longer than eight hours. If the sleep period is interrupted by a work assignment, the interruption must be counted as hours worked. If the employee receives less than five hours of sleep time during the scheduled sleep period, the entire sleep period must be considered hours worked. EFFECTIVE DATE: January 1, 2015

H.B. No. 5456 Public Act 14-165 AN ACT CONCERNING MANDATORY REPORTING OF ABUSE AND NEGLECT OF INDIVIDUALS WITH AUTISM SPECTRUM DISORDER, THE DEFINITION OF ABUSE, AND THE DEPARTMENT OF DEVELOPMENTAL SERVICES ABUSE AND NEGLECT REGISTRY This act creates a process for investigating claims of abuse of persons with autism spectrum disorder who receive services from the Department of Developmental Services’ Autism Division. Currently, the Office of Protection and Advocacy for Persons with Disabilities (OPA), the Department of Children and Families, and the Department of Social Services investigate claims of abuse (depending on the age of the person). Individuals with autism spectrum disorder who do not have intellectual disability and who are at least age 18 and under the age of 60 are not specifically covered by any investigative process. The act grants specific authority to the Department of Developmental Services (DDS) to investigate reports of abuse of individuals ages 18 to 60 with autism spectrum disorder receiving services from DDS's Division of Autism Spectrum Disorder Services (the “division”) made against a DDS employee or an employee of any agency, organization, or individual licensed or funded by DDS. By law, certain people, by virtue of their job title, must report suspected abuse to OPA. The act requires any such mandated reporter to report suspected abuse of a person receiving division services or funding to OPA. It makes conforming changes that require mandated reporters to follow the same procedures as when reporting other suspected cases of abuse. This includes filing a report that indicates their belief that the person they suspect is being abused receives services or funding from the division, among other things.

Public Act 14-165 also expands DDS's abuse and neglect registry definition of abuse to include (1) financial exploitation and (2) psychological, verbal, and sexual abuse. By law, DDS maintains a registry of the names of any person who has been fired from his or her job because of a substantiated abuse complaint against them.

These are people who were employed by DDS or an agency, organization, or individual who DDS licenses or funds. DDS, its provider network, specific state agencies and volunteer organizations have access to the DDS registry for purposes of checking to if an applicant for employment is on the registry. EFFECTIVE DATE: October 1, 2014

H.B. No. 5500 Public Act 14-162 AN ACT CONCERNING PROVIDER AUDITS UNDER THE MEDICAID PROGRAM Among its numerous provisions, this act makes several changes to the Department of Social Services' (DSS) processes for auditing (1) Medicaid providers and (2) facilities that receive Medicaid or other state payments including nursing homes, residential care homes, and intermediate care facilities for individuals with intellectual disabilities. Specifically, it: 1. limits the circumstances in which DSS may extrapolate audited claims; 2. allows an audited provider or facility to present evidence to the commissioner or an auditor to refute the audit's findings; 3. allows the DSS commissioner, when determining which providers and facilities to audit, to consider a provider's or facility's compliance history in addition to other audit criteria; and 4. requires DSS and DSS-contracted auditors, for auditing purposes, to have on staff or consult with, as needed, health care providers experienced in relevant treatment, billing, and coding procedures. The act requires the DSS commissioner to adopt facility audit regulations to ensure fairness in the audit process, including associated sampling methodologies. EFFECTIVE DATE: July 1, 2014

H.B. No. 5521 Public Act 14-176 AN ACT CONCERNING THE STORAGE AND ADMINISTRATION OF EPINEPHRINE AT PUBLIC SCHOOLS This act requires schools to designate and train nonmedical staff to administer emergency epinephrine in cartridge injectors ("epipens") to students having allergic reactions who were not previously known to have serious allergies. It authorizes the emergency use of epipens by nonmedical staff only if (1) the school nurse is not present or available and (2) certain conditions are met. The act permits the following individuals (i.e., "qualified school employees") to be trained and authorized: principal, teacher, licensed athletic trainer, licensed physical or occupational therapist employed by a school district, coach of school intramural or interscholastic athletics, and school paraprofessional. The act requires schools to (1) have at least one qualified professional on the school grounds during regular school hours and (2) maintain a store of epipens for emergency use. The act also extends the immunity from liability for employees and local boards provided under the existing prior-authorization glycogen and epipen laws to the epinephrine provisions. EFFECTIVE DATE: July 1, 2014

H.B. No. 5528 Public Act 14-226 AN ACT CONCERNING ESSENTIAL PUBLIC HEALTH SERVICES AND THE EUTHANIZATION OF ANIMALS IN A FACILITY SUBJECT TO REGULATION BY THE UNITED STATES DEPARTMENT OF AGRICULTURE Among its many provisions, this act requires municipal health departments, as well as local health districts (1) with populations of 50,000 or more or (2) that serve three or more municipalities, to provide a basic health program as a prerequisite to receiving annual funding from the Department of Public Health (DPH). Each of these basic health programs must include: 1. monitoring the community's health status to identify and solve problems; 2. investigating and diagnosing health problems and hazards in the community; 3. informing, educating, and empowering people in the community regarding health issues; 4. connecting people to needed health care services when appropriate; and 5. assuring a competent public health and personal care workforce. EFFECTIVE DATE: October 1, 2014.

H.B. No. 5535 Public Act 14-180 AN ACT CONCERNING NOTICE OF A PATIENT'S OBSERVATION STATUS This act generally requires hospitals to provide patients with oral and written notice when the hospital has placed them in observation status, no later than 24 hours after the placement. The requirement does not apply if the patient was discharged or left the hospital before the end of the 24-hour period. The act specifies that certain information must be included in the notice such as 1. a statement that the patient is not admitted to the hospital but is under observation status; 2. a statement that this observation status may affect coverage under Medicare, Medicaid, or private insurance for (a) hospital services, including medications and pharmaceutical supplies or (b) home or community-based care or care at a skilled nursing facility upon the patient's discharge;

and 3. a recommendation that the patient contact his or her health insurance provider or the Office of the Healthcare Advocate to better understand the implications of placement in observation status. In general, observation status refers to patients who are being treated in a hospital but are classified as outpatients rather than as admitted to the hospital. EFFECTIVE DATE: October 1, 2014

H.B. No. 5537 Public Act 14-231 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES Sections 62 through 65 of this act repeal the statutes establishing Unified School District #3 and make conforming statutory changes, to reflect the planned closure of the district. Unified School District #3 oversees the Birth to Three System's Early Connections program, the state-run Birth to Three provider. Early Connections has been phased out and the last child in the program has exited as the child turned three in July 2014. Going forward, all Birth to Three services will be provided by private agencies under contract with the Department of Developmental Services. EFFECTIVE DATE: July 1, 2014

Section 66 of **Public Act 14-231** allows the Department of Developmental Services (DDS) to enter a memorandum of understanding with the Connecticut Housing Finance Authority to administer DDS' residential facility revolving loan program. Under the program, DDS makes loans to private nonprofit organizations for purchasing, building, and renovating community-based facilities for individuals with intellectual disability or autism spectrum disorder. Also, section 59 of this act creates an advisory council to advise the Commissioner of Public Health on research, diagnosis, treatment and education relating to pediatric autoimmune neuropsychiatric disorder. EFFECTIVE DATE: July 1, 2014

H.B. No. 5550 Special Act 14-23 AN ACT CONCERNING THE CONVEYANCE OF CERTAIN PARCELS OF STATE LAND AND THE RATE OF ASSESSMENT OF CERTAIN RESIDENTIAL PROPERTY IN HARTFORD The act conveys various parcels of state land and amends or repeals prior conveyances. No Department of Developmental Services' (DDS) property was conveyed in this year's act. EFFECTIVE DATE: Upon passage

H.B. No. 5562 Public Act 14-39 AN ACT ESTABLISHING THE OFFICE OF EARLY CHILDHOOD, EXPANDING OPPORTUNITIES FOR EARLY CHILDHOOD EDUCATION AND CONCERNING DYSLEXIA AND SPECIAL EDUCATION This act establishes the Office of Early Childhood (OEC), led by a commissioner who serves at the pleasure of the governor. It eliminates the coordinated system of early care and education and child development ("coordinated system") and the position of planning director, precursors to OEC and its commissioner, and incorporates the coordinated system's goals and duties into enumerated OEC duties. OEC assumes the responsibility for administering early childhood programs and services currently run by the State Department of Education (SDE), the Department of Social Services (DSS), and the Department of Public Health (DPH). For some programs, the act designates OEC as the lead agency; for others, the existing administering agency maintains a consultative role. Program content generally remains the same after transfer to OEC. The transfer process makes OEC responsible for the following major programs as of July 1, 2014: 1. school readiness; 2. the Children's Trust Fund; 3. Connecticut Charts-a-Course; 4. state and federally funded child day care subsidies; 5. child day care services management, evaluation, and professional development; 6. child day care facilities licensing and inspection, and 7. youth camp oversight. The act also reassigns various funds, grants, and loans to OEC oversight.

Public Act 14-39 makes several changes to school readiness program funding, which the state provides through various grants allowing towns to purchase seats for three- to five-year olds who are too young to attend kindergarten. The act makes several other major substantive changes in the following ways: 1. requires OEC to make more frequent unannounced visits to all licensed day care centers, group day care homes, and family day care homes; 2. gives OEC more authority over school readiness staff qualification requirements; and 3. changes the organization and membership of certain councils, committees, and cabinets. The act also requires that (1)

dyslexia be added to the special education individualized education program (IEP) form as a separate category and (2) instruction in dyslexia be added to teacher preparation programs that lead to a professional teacher certification. EFFECTIVE DATE: Upon passage and various other dates.

[H.B. No. 5566 Public Act 14-230](#) AN ACT CONCERNING MINOR REVISIONS TO THE EDUCATION STATUTES This act makes numerous changes to the education statutes including changing the standards for allowable nutritional drinks, including limiting the types of milk, in public schools. The Governor vetoed the act because of the act's new standards for types of milk served in schools.

[H.B. No. 5578 Public Act 14-40](#) AN ACT CONCERNING THE HEALTH INSURANCE GRIEVANCE PROCESS FOR ADVERSE DETERMINATIONS Among this act's various provisions, it eliminates the requirement that health carriers (insurers) contract with "clinical peers" to conduct utilization reviews. The act requires that carriers have procedures to ensure that appropriate or required individuals, rather than clinical peers, are designated to conduct these reviews. By law, clinical peers are health care professionals licensed in the same or a similar specialty as the one that typically manages the medical condition, procedure, or treatment under review. Carriers must contract with health care professionals to administer their utilization review programs. By law, for cases when an urgent care request involves a substance use or mental disorder, the clinical peer must be a psychologist or psychiatrist with specified qualifications. In such cases involving psychologists, the act requires the psychologist to hold a doctoral level psychology degree instead of board certification. The act also requires the psychologist to have both, rather than either, training and relevant experience in the relevant field (i.e., child and adolescent substance use disorder, child and adolescent mental disorder, adult substance use disorder or adult mental disorder). The act also eliminates the requirement that psychiatrists evaluating such cases have training or clinical experience in the relevant field. By law, such psychiatrists must be board-certified. EFFECTIVE DATE: Upon passage

EMERGENCY CERTIFIED [H.B. No. 5596 Public Act 14-47](#) AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES AND REVENUES FOR THE FISCAL YEAR ENDING JUNE 30, 2015. This is the state budget act that contains midterm budget adjustments for FY 2015. The act passed the legislature and was signed by the Governor. Among numerous other provisions, the act: provides \$1.9 million in the Early Intervention account for the Birth to Three Program to reflect a decrease in commercial insurance receipts and an increase in supplemental services costs which support children with autism spectrum disorder; increases funding to the Division of Autism Spectrum Services by \$342,436 to fund children with autism who were transferred to DDS from DCF under the Voluntary Services Program; provides \$1,418,000 for union contract costs for Personal Care Attendants; provides \$4 million to reflect half year funding of 100 individuals designated priority one placements on the department's Waiting List with parents or caregivers age 70 and older; provides \$600,000 for family support grants to serve individuals on the Waiting and Planning lists that are not currently receiving any residential services; and transfers \$1 million from the Department of Social Services (DSS) for the Early Childhood Autism Waiver. EFFECTIVE DATE: July 1, 2014, unless otherwise noted

EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015 This act implements the state budget for FY 2015. Below is a description of some of the provisions of [Public Act 14-217](#) that have potential to impact, or might be of interest to, DDS consumers and their families or guardians, DDS employees or DDS providers.

[Detail by Section Number of Public Act 14-217 "Budget Implementer for FY 2015"](#)

[H.R. No. 5](#) RESOLUTION PROPOSING APPROVAL OF A COLLECTIVE BARGAINING AGREEMENT BETWEEN THE OFFICE OF EARLY CHILDHOOD AND THE CONNECTICUT STATE EMPLOYEES ASSOCIATION (CSEA-SEIU LOCAL 2001) This resolution is between the Office

of Early Childhood (OEC) and the Connecticut State Employees Association (CSEA- SEIU Local 2001). This award covers four years for the period January 1, 2014 through June 30, 2017 and applies to family child care providers who are home-based providers only. Public Act 12-33 allows family child care providers paid by the state's Care4Kids program and personal care attendants (PCAs) to collectively bargain with the state through an employee organization (i.e., a union) over reimbursement rates, benefits, payment procedures, contract grievance arbitration, training, professional development, and other requirements and opportunities.
EFFECTIVE DATE: January 1, 2014

H.R. No. 11 RESOLUTION PROPOSING APPROVAL OF A COLLECTIVE BARGAINING AGREEMENT BETWEEN THE PERSONAL CARE ATTENDANT WORKFORCE COUNCIL AND THE NEW ENGLAND HEALTH CARE EMPLOYEES UNION (DISTRICT 1199, SEIU) The resolution is between the Personal Care Attendant Workforce Council and the New England Health Care Employees Union (District 1199, SEIU). This agreement covers the period July 1, 2013 through June 30, 2016. Public Act 12-33 allows personal care attendants (PCAs) paid by the state and family child care providers paid by the state's Care4Kids program to collectively bargain with the state through an employee organization (i.e., a union) over reimbursement rates, benefits, payment procedures, contract grievance arbitration, training, professional development, and other requirements and opportunities. EFFECTIVE DATE: July 1, 2013

H.R. No. 12 RESOLUTION PROPOSING APPROVAL OF AN AGREEMENT BETWEEN THE STATE OF CONNECTICUT AND THE STATE EMPLOYEES BARGAINING AGENT COALITION The resolution proposes approval of a Pension Agreement between the State of Connecticut and the State Employees Bargaining Agent Coalition (SEBAC). This agreement makes certain changes regarding composition of the Medical Examining Board (MEB) of the State Employees Retirement Commission. The agreement replaces the current Memorandum of Understanding (MOU) between the University of Connecticut Health Center (UCHC) and the Office of the State Comptroller (OSC). It increases the number of physicians on the MEB from seven to up to 25. Physicians will be compensated on an unspecified per diem basis.

BILLS THAT WERE VETOED BY THE GOVERNOR:

Governor Malloy vetoed eight Public Acts that had been passed by both the Senate and the House. The links to the respective bills that were vetoed follow: [PA 14-58 —HB 5373](#), [PA 14-96 —HB 5348](#), [PA 14-125 —HB 5220](#), [PA 14-171 —SB 75](#), [PA 14-190 —HB 5417](#), [PA 14-209 —SB 410](#), [PA 14-218 —SB 426](#), [PA 14-230 —HB 5566](#). Only the veto of [Public Act 14-209 AN ACT CONCERNING ADMINISTRATIVE HEARINGS CONDUCTED BY THE DEPARTMENT OF SOCIAL SERVICES](#) had a potential impact for DDS consumers because the Public Act would have changed certain administrative hearing processes for Department of Social Services' eligibility determinations. The seven other vetoed Public Acts would have had no direct impact on DDS. The House and the Senate convened a Veto Session on June 23, 2014 but did not override any of the Governor's vetoes.

BUDGET BILLS:

H.B. No. 5030 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR THE FISCAL YEAR ENDING JUNE 30, 2015 This bill was the Governor's proposed budget bill that was subsequently amended by the Appropriations Committee. The bill died on the House Calendar and was ultimately replaced by [H.B. 5596 Public Act 14-47 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES AND REVENUES FOR THE FISCAL YEAR ENDING JUNE 30, 2015](#) (See budget section above.)

H.B. No. 5031 AN ACT CONCERNING THE BUDGET RESERVE FUND This bill would have raised the maximum allowable percentage of net General Fund appropriations in the Budget Reserve Fund (aka “Rainy Day Fund”) from ten percent to fifteen percent. The bill died on the House Calendar.

H.B. No. 5032 AN ACT CONCERNING THE EXPENDITURE CAP AND REDUCING LONG-TERM LIABILITIES This bill would have amended the definition of “evidences of indebtedness” for spending cap purposes to include expenditures above the annual required contribution to the State Employees' Retirement System (SERS) and Teachers' Retirement System, thus exempting these items from the spending cap. The bill died on the House Calendar.

H.B. No. 5034 AN ACT MAKING DEFICIENCY APPROPRIATIONS FOR THE FISCAL YEAR ENDING JUNE 30, 2014 This bill was the proposed deficiency bill for FY14. The general fund increase of \$44.3 million and transportation fund increase of \$0.6 million are offset by reductions in appropriations to various agencies and accounts listed in the bill. The bill died on the House Calendar. Provisions of **H.B. No. 5034** are incorporated into the budget bill **H.B. 5596 Public Act 14-47** **AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES AND REVENUES FOR THE FISCAL YEAR ENDING JUNE 30, 2015.**

EMERGENCY CERTIFIED H.B. No. 5596 Public Act 14-47 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES AND REVENUES FOR THE FISCAL YEAR ENDING JUNE 30, 2015. This is the state budget act that contains midterm budget adjustments for FY 2015. The act passed the legislature and was signed by the Governor. Among numerous other provisions, the act: provides \$1.9 million in the Early Intervention account for the Birth to Three Program to reflect a decrease in commercial insurance receipts and an increase in supplemental services costs which support children with autism spectrum disorder; increases funding to the Division of Autism Spectrum Services by \$342,436 to fund children with autism who were transferred to DDS from DCF under the Voluntary Services Program; provides \$1,418,000 for union contract costs for Personal Care Attendants; provides \$4 million to reflect half year funding of 100 individuals designated priority one placements on the department's Waiting List with parents or caregivers age 70 and older; provides \$600,000 for family support grants to serve individuals on the Waiting and Planning lists that are not currently receiving any residential services; and transfers \$1 million from the Department of Social Services (DSS) for the Early Childhood Autism Waiver. EFFECTIVE DATE: July 1, 2014, unless otherwise noted

EMERGENCY CERTIFIED H.B. No. 5597 Public Act 14-217 AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015 This act implements the state budget for FY 2015. Below is a description of some of the provisions of **Public Act 14-217** that have potential to impact, or might be of interest to, DDS consumers and their families or guardians, DDS employees or DDS providers.

[Detail by Section Number of Public Act 14-217 “Budget Implementer for FY 2015”](#)

BILLS THAT WERE REPORTED OUT OF COMMITTEE AND DID NOT PASS:

S.B. No. 5 AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR PEDIATRIC AUTOIMMUNE NEUROPSYCHIATRIC DISORDER ASSOCIATED WITH STREPTOCOCCAL INFECTIONS This bill would have required certain health insurance policies to cover the diagnosis and treatment of pediatric autoimmune neuropsychiatric disorder associated with streptococcal infections (PANDAS). It would have applied to individual and group policies delivered, issued, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; or (4) hospital or medical services, including coverage under an HMO plan. The bill died on the Senate Calendar. Section 59 of **H.B. No. 5537 Public Act 14-231** **AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS**

REVISIONS TO THE PUBLIC HEALTH STATUTES creates an advisory council to advise the Commissioner of Public Health on research, diagnosis, treatment and education relating to pediatric autoimmune neuropsychiatric disorder.

[S.B. No. 21](#) AN ACT IMPLEMENTING THE BUDGET RECOMMENDATIONS OF THE GOVERNOR CONCERNING GENERAL GOVERNMENT Among its various provisions, in section 3, the bill would have required each basic and review training program for State Police and municipal police officers to include a course on handling incidents involving an individual affected by a serious mental illness. The bill died on the Senate Calendar. Section 46 of **EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** includes the provisions of section 3 of **[S.B. No. 21](#)** requiring police training in the handling of incidents involving persons with serious mental illness.

[S.B. No. 22](#) AN ACT CONCERNING THE PREVENTION OF FRAUD IN GOVERNMENT PROGRAMS This bill would have expanded application of the Connecticut False Claims Act from Medicaid to: (1) all health and human services agencies and programs, (2) state payments made for state employee and retiree health and (3) state-paid Workers' Compensation medical claims. The bill died on the Senate Calendar. Sections 1 through 18 and 257 of **EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** contain provisions of **[S.B. No. 22](#)**.

[S.B. No. 23](#) AN ACT CONCERNING BENEFIT CORPORATIONS AND ENCOURAGING SOCIAL ENTERPRISE The bill would have established a legal framework for forming a for-profit corporation that both pursues social benefits and increases value for its shareholders (benefit corporation or b-corp). B-corps formed under the bill would operate under the same laws as traditional business corporations and would seek to increase shareholder value. But their corporate purpose also would have included doing things that generally benefit society and the environment or create specific public benefits. The bill died on the Senate Calendar. Sections 140 through 157 of **EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** contain provisions of **[S.B. No. 23](#)**.

[S.B. No. 26](#) AN ACT EXPANDING OPPORTUNITIES FOR EARLY CHILDHOOD EDUCATION This bill would have made several changes to school readiness program funding. The bill would have: 1. expanded the competitive grant program for the purchase of school readiness seats from program providers; 2. allowed the education commissioner to (a) give preference to towns that increase the number of school readiness seats when awarding competitive grants and (b) use unexpended school readiness funds to develop a plan for providing universal access to school readiness spaces; and 3. increased the state's per-pupil cost reimbursement for school readiness programs from a maximum of \$8,346 to a minimum of \$8,670, within available appropriations, beginning in FY 15. It also would have required the Office of Early Childhood (OEC) to: 1. create a new plan and grant program designed to achieve universal school readiness access; and 2. assume the Department of Public Health's (DPH) duties regarding (a) day care licensing and inspection and (b) youth camp regulation. The bill died on the Senate Calendar.

Provisions of **[S.B. No. 26](#)** are contained in **[S.B. No. 25 Public Act 14-41](#) AN ACT ESTABLISHING THE CONNECTICUT SMART START PROGRAM** that requires OEC, in consultation with the State Department of Education, to design and administer the Connecticut Smart Start competitive grant program. Also provisions of **[S.B. No. 26](#)** are incorporated in sections 47 through 62 of **[H.B. No. 5562 Public Act 14-39](#) AN ACT ESTABLISHING THE OFFICE OF EARLY CHILDHOOD, EXPANDING OPPORTUNITIES FOR EARLY CHILDHOOD EDUCATION AND CONCERNING DYSLEXIA AND SPECIAL EDUCATION** that transfers day care licensing and inspection to OEC from DPH; sections 75 through 83 of **[Public Act 14-39](#)** transfers youth camp oversight and regulation to OEC; section 84 of **[Public](#)**

[Act 14-39](#) requires OEC to develop a plan to provide spaces in school readiness programs for all eligible children; and section 85of [Public Act 14-39](#) requires OEC to establish a new grant program to enable eligible towns and regional school readiness councils to (1) start up new school readiness classrooms and (2) provide spaces to eligible children in school readiness programs.

[S.B. No. 28](#) **AN ACT CONCERNING REVENUE ITEMS TO IMPLEMENT THE GOVERNOR'S BUDGET** The bill would have made various changes to state tax laws. It would have: 1. authorized sales and gas tax refunds of \$55 for single filers and \$110 for joint filers and required the comptroller to designate up to \$155 million in FY 14 General Fund resources to pay for them; 2. exempted nonprescription drugs and medicines from the sales tax; 3. exempted a portion of state teacher pension income from the state income tax; and 4. allocated \$500,000 to the Office of Legislative Management for a study of the state's tax structure. The bill died on the Senate Calendar.

[S.B. No. 31](#) **AN ACT CONCERNING CONTINUED DELIVERY OF LEGAL SERVICES TO THE POOR** This bill would have made permanent certain court filing fee increases and fees that took effect July 1, 2012 and are currently set to expire on July 1, 2015. It also would have raised, from 70% to 95%, the portion of revenue received from these fee increases that the chief court administrator must transfer to the organization administering the interest on lawyers' trust accounts (IOLTA) program to fund legal services for the poor. The bill died on the Senate Calendar.

[S.B. No. 43](#) **AN ACT CONCERNING REVISIONS TO THE DEPARTMENT OF CHILDREN AND FAMILIES STATUTES** This bill would have allowed the Department of Children and Families (DCF), within available appropriations, to provide funds to foster or prospective adoptive families to make home modifications to safely accommodate a foster child with physical disabilities. The commissioner or her designee would determine the type of modification and amount of funds to provide, taking into account the family's available income and resources. This bill also would have prohibited the Department of Social Services (DSS) from awarding a child care subsidy under the Care 4 Kids program to anyone who already received a child care subsidy from DCF for the same child during the same time period for which he or she is seeking the Care 4 Kids subsidy. The bill died on the House Calendar.

[S.B. No. 56](#) **AN ACT CONCERNING SEVERE MENTAL OR EMOTIONAL IMPAIRMENT AND WORKERS' COMPENSATION COVERAGE** This bill would have expanded the definition of "personal injuries" under the workers' compensation law. This would have allowed an employee to qualify for workers' compensation benefits if: 1. during the course of duty, the employee sees (a) a person's death or maiming or (b) its immediate aftermath; 2. the death or maiming was intentionally caused by another person; and 3. a licensed psychiatrist or psychologist diagnoses the employee with a mental or emotional impairment and determines that it originated from the employee seeing the crime or crime scene. The bill died in the Appropriations Committee.

[S.B. No. 62](#) **AN ACT CONCERNING THE RETENTION OF PROMOTIONAL EXAM RESULTS** This bill would have allowed the Department of Administrative Services (DAS) to relieve state employees from re-taking promotional exams for the same position under certain circumstances. The bill would have required DAS to retain exam results for all current employees who have passed an announced promotional exam. The bill died in the Appropriations Committee.

[S.B. No. 78](#) **AN ACT EXTENDING THE JOB EXPANSION TAX CREDIT PROGRAM** This bill would have reopened the Job Expansion Tax Credit program (JET), allowing businesses to claim credits for new jobs created before January 1, 2015. By current law, businesses awarded credits (1) may claim them for three years, and (2) before the current January 1, 2014 sunset date may continue to do so until the three-year period expires. The credit would continue to be \$500 per month per new employee or \$900 per month if the new employee is

unemployed, is a veteran or is participating in employment opportunities or day services operated or funded by the Department of Developmental Services. The bill died in the Finance, Revenue and Bonding Committee.

S.B. No. 93 AN ACT CONCERNING REVISIONS TO STATUTES CONCERNING THE COMPTROLLER This bill would have made several unrelated changes affecting (1) the statewide accounting and personnel system (CORE-CT) and (2) the comptroller's duties. It would have required the comptroller to report biennially, rather than annually, on CORE-CT's status to the governor and General Assembly. It also would have eliminated the CORE-CT policy board, which is responsible for maintaining the constitutional and statutory independence of the legislative, executive, and judicial branches with respect to system implementation and operation. The bill died on the Senate Calendar.

S.B. No. 104 AN ACT PROVIDING FINANCIAL RELIEF TO NURSING HOMES FOR UNCOMPENSATED CARE This bill would have delayed the payment of resident day user fees by chronic and convalescent nursing homes (CCNH) and rest homes with nursing supervision (RHNS) that provide care for individuals who have pending Medicaid applications. Under the bill, CCNHs and RHNSs would not have had to pay the resident day user fees for any Medicaid applicant until the Department of Social Services (DSS) had made an eligibility determination and, if the applicant were eligible, provided Medicaid payment to the nursing home for his or her care. Under the bill, when a nursing home had received (1) retroactive payment for care provided to eligible individuals or (2) a Medicaid denial and retroactive payment from another source for individuals not eligible for Medicaid, the nursing home would have to pay the user fees that would have otherwise been due while the application was pending. The bill died on the Senate Calendar.

S.B. No. 105 AN ACT CONCERNING SOCIAL INNOVATION INVESTMENT This bill would have expanded the state's authority to enter into an outcome-based performance contract with a social innovation investment enterprise. By law, these contracts (1) establish outcome-based performance standards for preventive social programs delivered by nonprofit service providers and (2) guarantee investors a return of their investment and earnings if the enterprise meets the standards. The bill would have allowed the OPM secretary to authorize any agency to enter into an outcome-based performance contract with a social innovation investment enterprise for the purpose of any type of preventive social program. Current law defines a "social innovation investment enterprise" as an entity created to coordinate the delivery of preventive social programs by nonprofit service providers and that can (1) create a social investment vehicle to raise private investment capital, (2) enter into outcome-based performance contracts, and (3) contract with service providers. The bill died on the Senate Calendar.

S.B. No. 125 AN ACT CONCERNING THE LEGISLATIVE COMMISSIONERS' RECOMMENDATIONS FOR TECHNICAL CORRECTIONS TO THE PUBLIC HEALTH STATUTES The bill would have made technical changes to the public health statutes, including correcting a reference to the Pediatric Autoimmune Neuropsychiatric Disorder Advisory Council. The bill died on the House Calendar.

S.B. No. 126 AN ACT CONCERNING CHILDREN'S EXPOSURE TO CHEMICALS This bill would have required the Department of Public Health (DPH), in consultation with the Departments of Energy and Environmental Protection and Consumer Protection, to create and maintain a list of priority chemicals that are of high concern after considering the potential exposure to children and developing fetuses. It also would have authorized DPH to require anyone in the state who manufactures or distributes children's products that contain chemicals on the priority list to assess the feasibility of replacing those chemicals with safer alternatives and report the results. The bill died on the Senate Calendar.

S.B. No. 174 AN ACT CONCERNING FAIRNESS IN MEDICAID ELIGIBILITY DETERMINATIONS FOR HOME-CARE CLIENTS This bill would have required the Department of Social Services to provide, in

accordance with federal Medicaid regulations, retroactive assistance to participants in the Connecticut Home Care Program for Elders for up to three months before the date of application. The bill also would have instituted a look-back provision in accordance with federal law. If an applicant had transferred assets for less than fair market value in the 60 months prior to applying for assistance, the commissioner would have had to enforce a penalty period before an applicant could receive assistance. The bill died in the Appropriations Committee.

S.B. No. 175 AN ACT CONCERNING A STUDY OF EMERGENCY POWER NEEDS IN PUBLIC HOUSING FOR THE ELDERLY The bill would have required the Department of Housing to conduct a study on emergency power needs at certain public housing for the elderly. The bill died in the Appropriations Committee.

S.B. No. 177 AN ACT CONCERNING A COMMUNITY SPOUSE'S ALLOWABLE ASSETS This bill would have required the Department of Social Services to amend the Medicaid state plan to require that the spouse of someone in an institution (i.e., nursing home) who remains in the community be allowed to receive the maximum amount of assets allowed by federal law (i.e., the maximum community spouse protected amount (CSPA), \$117,240 in 2014). The bill died in the Appropriations Committee.

S.B. No. 186 AN ACT CONCERNING DISPENSATION AND INSURANCE COVERAGE OF A PRESCRIBED DRUG DURING REVIEW OF AN ADVERSE DETERMINATION OR A FINAL ADVERSE DETERMINATION This bill would have generally required health insurers to authorize an insured's pharmacy to provide a one-time, 14-day supply of a prescription if the insured or his or her authorized representative requests a review of a grievance on a prospective review's adverse determination (e.g., a claim denial) related to dispensing a drug prescribed by a licensed participating provider. (A prospective review is one that takes place before providing a health care service or course of treatment.) The authorization would have had to be made immediately and electronically. The insurer would have had to confirm that it will pay for the supply of the drug. The bill died on the House Calendar.

S.B. No. 191 AN ACT CONCERNING HEALTH INSURANCE COVERAGE OF ORALLY AND INTRAVENOUSLY ADMINISTERED MEDICATIONS This bill would have required certain health insurance policies that cover intravenously administered medications for the treatment, palliation, or therapeutic intervention for preventing disabling or life-threatening chronic diseases to also cover orally administered medications for the same purposes. Coverage for the orally administered medications must be no less favorable than coverage for the intravenously administered medications. The bill died on the House Calendar.

S.B. No. 192 AN ACT CONCERNING THE QUALIFICATIONS OF CLINICAL PEERS FOR ADVERSE DETERMINATION REVIEWS This bill would have modified the qualifications required of clinical peers who review adverse determinations (e.g., claims denials) by health insurers when appealed by insured persons. These qualifications would have been less stringent by eliminating the requirement that the clinical peer be licensed in the same or similar specialty as the provider. It would have made them more stringent by requiring the clinical peer to hold a doctoral or medical degree. In addition, it requires him or her to (1) hold an appropriate national board certification, including at the subspecialty level where available, or (2) (a) actively practice and typically manage the medical condition under review or (b) provide the procedure or treatment under review. The bill died on the House Calendar. Provisions of **S.B. No. 192** are included in **H.B. No. 5578 Public Act 14-40** **AN ACT CONCERNING THE HEALTH INSURANCE GRIEVANCE PROCESS FOR ADVERSE DETERMINATIONS**

S.B. No. 197 AN ACT DECREASING THE TIME FRAMES FOR URGENT CARE ADVERSE DETERMINATION REVIEW REQUESTS This bill would have reduced, from 72 to 48 hours, the deadline for health insurers to: 1. make a determination in response to a request for urgent care, other than one relating to

the treatment of substance abuse or mental disorders, and 2. notify an insured and, if applicable, his or her authorized representative, of its decision on an application for an expedited review of a grievance of its determination. The bill would have given an independent review organization 48, rather than 72, hours after the insurance commissioner assigns it to conduct an expedited external review of an adverse determination or final adverse determination to notify various parties of its decision to uphold, reverse, or revise the determination. The bill died on the House Calendar.

S.B. No. 200 AN ACT EXPANDING HEALTH INSURANCE COVERAGE FOR SPECIALIZED

FORMULA This bill would have required certain health insurance policies to cover medically necessary specialized formulas administered under a physician's direction for people with eosinophilic gastrointestinal disorders (EGIDs) up to age 26 instead of age 12. The bill died in the Appropriations Committee.

S.B. No. 202 AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR TELEMEDICINE

SERVICES This bill would have required certain health insurance policies to cover medical services provided through telemedicine to the same extent they cover the services through in-person visits between an insured person and a health care provider. The coverage would be subject to the same terms and conditions that apply to other benefits under the policy (e.g., copay requirements). The bill defined "telemedicine" as using interactive audio, video, or data communication to deliver medical advice, diagnosis, care, or treatment. This includes diagnostic or treatment services, such as primary diagnosis of pathology specimens, slides, or images, provided electronically to a person in Connecticut, regardless of where the provider is located. "Telemedicine" does not include fax or audio-only telephone contact. The bill died on the Senate Calendar.

S.B. No. 204 AN ACT CONCERNING CAMPERS' EDUCATION

This bill would have required licensed youth camps, by January 1, 2015 and to develop or approve a program on child and sexual abuse and, each year afterward, inform staff, campers, and campers' parents and legal guardians about the program. It would have required paid and volunteer camp directors and assistant directors to (1) submit to state and national criminal history record checks and (2) certify that they are not listed on the state child abuse or neglect registry. It also would have required the Department of Public Health (DPH), by January 1, 2015 and each year afterwards, to develop and distribute information on Lyme disease and other tick-borne illnesses. DPH must do this in consultation with specified organizations. The bill would have required each licensed camp to use this information to develop or approve a Lyme disease education and prevention program and inform staff, campers, and campers' parents and legal guardians about the program. The bill died in the Public Health Committee.

S.B. No. 222 AN ACT CONCERNING THE DEFINITION OF MANAGERIAL EMPLOYEE

This bill would have specified that, to be considered a state employee "manager," a state employee must play a major role in administering of collective bargaining agreements or major personnel decisions, including hiring and firing. The practical effect of this would have been fewer state employees would be considered managers, and those who were no longer managers would be eligible to form a union. By law, state employee managers cannot collectively bargain with the state. The bill died on the Senate Calendar.

S.B. No. 242 AN ACT CONCERNING SICK LEAVE FOR TEACHER ASSISTANTS AND

RADIOLOGIC TECHNOLOGISTS This bill would have expanded the service workers eligible to earn paid sick leave to include teacher's assistants and radiologic technologists. The bill died in the Appropriations Committee. Certain provisions of **S.B. No. 242** are incorporated in **H.B. No. 5269 Public Act 14-126** **AN ACT CREATING PARITY BETWEEN PAID SICK LEAVE BENEFITS AND OTHER EMPLOYER-PROVIDED BENEFITS**

S.B. No. 243 AN ACT CONCERNING ELIGIBILITY FOR UNEMPLOYMENT BENEFITS

Among the bill's many provisions, it would have expanded the circumstances under which a private-sector employer could discharge or suspend an employee without affecting the employer's unemployment taxes. It would have created

a “non-charge” against an employer's experience rate for discharging or suspending an employee who (1) lost his or her driver's license because of a drug or alcohol testing program conducted under state laws prohibiting driving under the influence (DUI), regardless of whether the testing was conducted while the employee was off duty, and (2) as a result, is disqualified from performing the work for which he or she had been hired. This would have allowed the discharged or suspended employee to collect unemployment benefits without increasing the employer's unemployment taxes. The bill died on the House Calendar.

S.B. No. 244 AN ACT INCREASING HOME CARE PROVIDER RATES This bill would have required the Department of Social Services (DSS) to increase the fee schedule for services provided under the Connecticut Home Care Program for Elders (CHCPE) and the pilot program to provide home-care services to persons with disabilities by at least one percent. The bill also would have required DSS to annually increase the fees for the following services based on their cost: homemaker, chore person, companion, respite care, meals-on-wheels, adult day care, case management and assessment, transportation, mental health counseling, and elderly foster care. The bill died on the Senate Calendar.

S.B. No. 246 AN ACT CONCERNING THE PROTECTION OF STATE AND MUNICIPAL ESSENTIAL RECORDS AND THE PRESERVATION OF ELECTRONIC RECORDS Among this bill's various provisions affecting state and municipal record preservation, it would have: 1. required a state, municipal, or probate district official with custody of a permanent electronic record to maintain it in accordance with authentication and preservation standards for electronic documents; 2. required agencies to designate and maintain, for each public record, an official record copy as the legally recognized copy for record retention, preservation, and authentication purposes; and 3. required executive branch agencies and municipalities to identify and protect essential records. The bill died in the Appropriations Committee.

S.B. No. 248 AN ACT CONCERNING PUBLIC WORKS PROJECTS AND THE THRESHOLD FOR COMPETITIVE BIDDING, SUBCONTRACTOR PREQUALIFICATION, CONSTRUCTION MANAGER AT-RISK PROJECT DELIVERY CONTRACTS, THE HIRING OF CONSULTANTS AND THE PURCHASING OF CERTAIN PROPERTY AND SERVICES Among this bill's numerous provisions, it would have 1. increased, from \$500,000 to \$1.5 million, the threshold triggering requirements for a competitive bidding process for state public works projects administered by the Department of Administrative Services (DAS); 2. required certain subcontractors to be prequalified by DAS at the time a bid is submitted; and 3. allowed DAS, when purchasing equipment, supplies, materials, or other property or services needed to fulfill its public works-related responsibilities, to (1) use cooperative purchasing and (2) purchase directly from the federal government. The bill died on the Senate Calendar. Provisions of **S.B. No. 248** are contained in **H.B. No. 5312 Public Act 14-188** **AN ACT CONCERNING STATE CONTRACTING, GOVERNMENT ADMINISTRATION AND NOTIFICATION REGARDING EXTENSIONS OF POLLING PLACE HOURS**

S.B. No. 249 AN ACT PROMOTING RETIREMENT SAVINGS This bill would have created the Connecticut Retirement Security Trust Fund (the “trust”) to provide a public retirement plan for certain private-sector employees, who would be automatically enrolled in the plan unless they opt out. The bill would have required the trust's plan to offer individual retirement accounts (IRAs) with a number of specified features, including account portability and options for spousal benefits and lump sum payments when the employee retires. The bill died on the Senate Calendar.

S.B. No. 254 AN ACT CONCERNING PRESUMPTIVE MEDICAID ELIGIBILITY FOR THE CONNECTICUT HOME-CARE PROGRAM FOR THE ELDERLY The bill would have required the Department of Social Services to create and administer a presumptive Medicaid eligibility system for the Connecticut home-care program for the elderly; establish uniform state-wide standards for the program and a

uniform assessment tool for use in the presumptive eligibility screening process; and specify conditions of eligibility for the home-care program. The bill died in the Appropriations Committee.

S.B. No. 255 AN ACT CONCERNING UNIFIED SCHOOL DISTRICT #3 The bill would have repealed statutes relating to Unified School District #3 due to the closure of the Birth-to-Three Early Connections program. **S.B. No. 255** died on the House Calendar. Provisions of **S.B. No. 255** are incorporated in Sections 62 through 65, inclusive, of **H.B. No. 5537 Public Act 14-231** **AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.**

S.B. No. 256 AN ACT CONCERNING THE DEPARTMENT OF DEVELOPMENTAL SERVICES REVOLVING LOAN FUND The bill would have allowed the Department of Developmental Services to administer the residential facility revolving loan program through an agreement with the Connecticut Housing Finance Authority. **S.B. No. 256** died on the House Calendar. Provisions of **S.B. No. 256** are incorporated in Section 66 of **H.B. No. 5537 Public Act 14-231** **AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.**

S.B. No. 261 AN ACT CONCERNING THE INHERITANCE RIGHTS OF A BENEFICIARY OR SURVIVOR WHO IS FOUND NOT GUILTY OF MURDER OR MANSLAUGHTER OF THE DECEASED BY REASON OF MENTAL DISEASE OR DEFECT This bill would have extended the prohibition of defendants found guilty of certain serious crimes from inheriting from, or receiving part of, the victim's estate or receiving life insurance or annuity benefits from the victim to those defendants found not guilty by reason of mental disease or defect. The bill died on the House Calendar.

S.B. No. 272 AN ACT ESTABLISHING A FIXED TIME PERIOD FOR AGENCY REVIEW OF EXISTING REGULATIONS This bill would have eliminated the Regulation Review Committee's discretion to establish the submission date, by which each state agency must submit to the committee a review of its existing regulations, including the committee's ability to consider the regulations' volume and complexity and the agency's personnel and other resources available to undertake the review. It would have required agencies, within available appropriations, to submit the review to the committee by July 1, 2018, and every four years thereafter. The bill died on the Senate Calendar.

S.B. No. 278 AN ACT CONCERNING RESTRICTIONS ON INSURERS FOR ADVERSE WEATHER-RELATED EVENTS This bill would have narrowed the circumstances when an insurer could cancel or decline to issue or renew a homeowner's insurance policy. The bill would have barred an insurer from taking these steps due solely to a loss incurred from an adverse weather-related event. These restrictions on insurers would not have applied to losses caused by or resulting from the insured's negligence. The bill died on the Senate Calendar.

S.B. No. 294 AN ACT CONCERNING CRIMINAL BACKGROUND CHECKS AND THE DEPARTMENTS OF CHILDREN AND FAMILIES AND DEVELOPMENTAL SERVICES This bill would have required the Department of Developmental Service (DDS) and Department of Children and Families (DCF) to require certain employees to submit to annual state criminal background checks. These yearly background checks would have applied to employees working in (1) DDS programs that provide direct services to persons with intellectual disability or (2) DCF programs that provide direct services to children or youths in DCF care or custody. The bill died on the Senate Calendar.

S.B. No. 295 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATION REGARDING WAIVER OF SOVEREIGN IMMUNITY This bill would have

extended the state's sovereign immunity from lawsuits to the Departments of Public Health and Developmental Services and their staffs against claims for damages greater than \$20,000. It would have extended the same immunity to any member of (1) the Council on Tuberculosis Control, Hospital Care and Rehabilitation; (2) the Council on Developmental Services; (3) either of the boards of trustees of the state training schools; (4) any regional advisory and planning council; or (5) superintendents, directors, employees, or staff of any chronic disease hospital, state training school, or state developmental services region. The bill would have accomplished this by repealing the statute that waives sovereign immunity for these departments, staff, and board members. The bill died on the House Calendar. Provisions of [S.B. No. 295](#) are incorporated in section 72 of [H.B. No. 5537 Public Act 14-231](#) **AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.**

[S.B. No. 317](#) **AN ACT CONCERNING EMPLOYEE PRIVACY** This bill would have prohibited employers from requesting or requiring an employee or job applicant to (1) provide the employer with a user name, password, or other way to access the employee's or applicant's personal online account or (2) access such an account in front of the employer. It would have barred employers from (1) firing, disciplining, or otherwise retaliating against an employee who refuses to provide this access or (2) refusing to hire an applicant because the applicant would not provide access to his or her personal online account. The bill would have made exceptions for accounts and devices the employer provides and for certain types of investigations. The bill died on the House Calendar.

[S.B. No. 325](#) **AN ACT CONCERNING MEDICAID RECIPIENTS WITH COMPLEX MEDICAL NEEDS** This bill would have limited a provision requiring the use of refurbished wheelchairs, parts, and components in the repair or provision of customized wheelchairs for Medicaid recipients. Current law requires the use of refurbished wheelchairs, parts, and components whenever practicable. The bill instead would have required it only for purchases by the Department of Rehabilitation Services (DORS) or the Birth-to-Three Program, whenever practicable. The bill died on the House Calendar.

[S.B. No. 326](#) **AN ACT CONCERNING FEDERAL MEDICAID WAIVERS** This bill would have prohibited the Department of Social Services (DSS) from instituting a cost cap in any program governed by a federal waiver that differs from a cost cap specified in its most recently approved Medicaid waiver application, unless authorized in statute or regulation. The bill died on the House Calendar.

[S.B. No. 327](#) **AN ACT CONCERNING NURSING HOMES** The bill would have required the Department of Social Services to conduct a study of the nursing home services in the state and to report its findings to the General Assembly. The bill died on the Senate Calendar.

[S.B. No. 329](#) **AN ACT CONCERNING LONG-TERM CARE** The bill would have required the Department of Social Services to conduct a study of the long term needs of residents of the state and to report its findings to the General Assembly. The bill died on the Senate Calendar.

[S.B. No. 344](#) **AN ACT CONCERNING EXPENDITURES OF STATE AGENCIES PROVIDING PUBLIC HEALTH, MENTAL HEALTH AND DEVELOPMENTAL SERVICES** The bill would have required review by the Office of Policy and Management of programs and services administered or provided by state agencies providing public health, mental health or developmental services. The bill died on the Senate Calendar.

[S.B. No. 350](#) **AN ACT CONCERNING THE STATE-WIDE PROCESS IMPROVEMENT INITIATIVE** This bill would have required the Office of Policy and Management (OPM), within available appropriations, to establish and oversee a statewide process improvement initiative in partnership with the judicial branch, other

executive agencies, the private sector, and others. It also would have eliminated a requirement that OPM contract with a consultant to apply Lean practices and principles to the (1) permitting and enforcement processes of certain state agencies and (2) state licensing process for commercial bus drivers. Lean is a process improvement approach used by the public sector to improve efficiency in services and administrative processes. The bill died on the Senate Calendar.

S.B. No. 351 AN ACT CONCERNING THE ASSESSMENT OF PROPOSED PRIVATIZATION

CONTRACTS This bill would have expanded the proposed privatization contracts for which a state contracting agency would be required to conduct a cost-benefit analysis and develop a business case to include certain contracts for services that are partly privatized. For certain other privatization contracts not subject to these requirements, it would have required state contracting agencies to evaluate whether continuing them is the most cost-effective way of delivering the service. The bill died in the Appropriations Committee. Section 16 of **H.B. No. 5312 Public Act 14-188 AN ACT CONCERNING STATE CONTRACTING, GOVERNMENT ADMINISTRATION AND NOTIFICATION REGARDING EXTENSIONS OF POLLING PLACE HOURS** contains provisions of **S.B. No. 351**.

S.B. No. 371 AN ACT CONCERNING RETALIATION AGAINST IMMIGRANT WORKERS This bill would have prohibited employers, including the state and municipalities, from taking certain “unfair immigration-related practices” to retaliate against immigrant employees for exercising their rights under various state labor laws. It would have prohibited (1) checking or threatening to check whether the employee can legally work in the country at a time or in a way not required by federal law or (2) contacting or threatening to contact immigration authorities to report an employee. The bill specified that its provisions do not prevent an employer from complying with state or federal laws or regulations or the rules of self-regulatory organizations. The bill, as amended by Senate Amendment E, would have also specified that it is not a discriminatory employment practice if an employer, labor organization, or employment agency discharges or expels, fails or refuses to classify properly or refer for employment, refuses to hire or employ, bars or discharges from employment or otherwise discriminates against an employee or person seeking employment current or prospective employees who (1) have been diagnosed by a licensed psychiatrist as suffering from pedophilia and (2) work or seek to work in an environment that could require any interactions with a child. The bill died on the House Calendar.

S.B. No. 388 AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE TASK FORCE ON VICTIM PRIVACY AND THE PUBLIC'S RIGHT TO KNOW The bill would have: 1. narrowed the exemption under the Freedom of Information Act (FOIA) for law enforcement records identifying minor witnesses; 2. created a procedure allowing members of the public to view and seek copies of images of homicide victims, which the law allows an agency to keep confidential if disclosure would constitute an unwarranted invasion of privacy; and 3. required the Legislative Program Review and Investigations Committee to study all aspects of victim privacy and recommend legislative changes. The bill died on the Senate Calendar.

S.B. No. 392 AN ACT CONCERNING HEALTH CARE PROVIDER NETWORK ADEQUACY This bill would have required insurers and related entities to maintain adequate health care provider networks in compliance with standards the bill set, rather than standards set by either of two nonprofit organizations, the National Committee for Quality Assurance (NCQA) or URAC, previously known as the Utilization Review Accreditation Commission that accredit and certify a wide range of health care organizations. The bill died the Appropriations Committee.

S.B. No. 407 AN ACT CONCERNING A HOSPITAL QUALITY OF CARE INITIATIVE The bill would have required the Department of Social Services (DSS) to establish a hospital reimbursement system that would provide financial incentives under the state Medicaid program to hospitals that demonstrate improvement in quality of care indicators. The bill also would have established an account containing an annual appropriation equal to three per cent of the amount paid to hospitals for the most recently completed year. Moneys in the

account would have been expended by DDS for the purpose of improving quality of care at hospitals. The bill died in the Appropriations Committee.

[S.B. No. 408](#) AN ACT CONCERNING MENTAL HEALTH OPTIONS FOR ADULT MEDICAID RECIPIENTS This bill would have required the Department of Social Services (DSS) to amend the Medicaid state plan to include services provided to Medicaid recipients who are age 21 or older by licensed psychologists and clinical social workers. It would have required DSS to (1) include these services as an optional service covered under Medicaid and (2) provide direct Medicaid reimbursements to the psychologists and clinical social workers who (a) are enrolled as Medicaid providers and (b) treat these Medicaid recipients in private offices not located in or affiliated with a clinic or federally qualified health center. The bill died in the Appropriations Committee. Section 220 of **EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** contains provisions of **[S.B. No. 408](#)**.

[S.B. No. 421](#) AN ACT CONCERNING CERTAIN BIDDING PREFERENCES IN STATE AND MUNICIPAL CONTRACTING Among this bill's various provisions, it would have allowed a state contracting agency to deduct from a bid the projected amount of income taxes to be paid to the state during the term of the contract by employees directly employed on the project. The allowable deduction for each employee would equal the employee's listed salary multiplied by a 5% tax rate multiplied by the proportion of time the employee is assigned to the bid project. The total allowable deduction would be the sum of deductions for each employee. The deduction for income taxes paid by employees would apply only to those employed directly by the bidder and not those employed by any subcontractors. The bill died in the Appropriations Committee.

[S.B. No. 437](#) AN ACT CONCERNING THE PRACTICE OF NATUREOPATHY This bill would have expanded the definition of naturopathy and its scope of practice to specifically include, among other things, the science, art, and practice of healing that comprises diagnosing, preventing, and treating diseases and optimizing health by stimulating and supporting the body's natural healing processes. It would have eliminated the requirement that the natural healing methods be recognized by the Council of Natureopathic Medical Education. The bill died on the Senate Calendar.

[S.B. No. 439](#) AN ACT CONCERNING RECOMMENDATIONS OF THE EMERGENCY MEDICAL SERVICES ADVISORY BOARD This bill would have established a hierarchy for determining which emergency medical services (EMS) provider is responsible for making patient care decisions at the scene of an emergency call. Under the bill: 1. the EMS provider holding the highest classification of emergency medical responder (EMR), emergency medical technician (EMT), or paramedic licensure or certification from the Department of Public Health (DPH) would make the decision; 2. if multiple providers hold the same licensure or classification, the provider for the primary service area responder would make the decision; and 3. if all providers on the scene are EMTs or EMRs, the EMS organization providing transportation services would make the decision. The bill requires the provider on the scene who has the decision-making responsibility to transfer patient care if a provider with a higher licensure or certification arrives. The bill died in the Public Safety and Security Committee.

[S.B. No. 441](#) AN ACT CONCERNING ELECTRONIC OR MANUAL CHECK-IN OF VOTERS, THE PROCESS OF VOTING AND ELECTRONIC FILING OF OFFICIAL CHECK LISTS Among this bill's various provisions; it would have authorized official election checkers to use a secretary of the state-approved electronic device to check in electors at the polls. The bill died in the Appropriations Committee. Sections 23 through 26 of **EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** contain provisions of **[S.B. No. 441](#)**.

S.B. No. 451 AN ACT CONCERNING GOVERNMENT ADMINISTRATION AND STATE

CONTRACTING Among this bill's many provisions, it would have expanded the janitorial work program for people with a disability or disadvantage to include services deemed appropriate by the Department of Administrative Services (DAS), including laundry and cleaning services, mail supply room staffing, data entry, call center staffing, and other services specified by DAS. The bill died in the Appropriations Committee. Sections 11 through 14 of **H.B. No. 5312 Public Act 14-188 AN ACT CONCERNING STATE CONTRACTING, GOVERNMENT ADMINISTRATION AND NOTIFICATION REGARDING EXTENSIONS OF POLLING PLACE HOURS** contain provisions of **S.B. No. 451** expanding the janitorial work program.

S.B. No. 454 AN ACT INCREASING THE TRANSPARENCY OF GENERAL BIDS FOR STATE

CONTRACTS The bill would have required the classifications of work established for prequalification purposes be set forth in a general bid, or required documentation of secondary subcontracts be submitted with the bid, required construction-managers-at-risk to list such classifications in their bid and required agents of the contracting agency to maintain certain documentation and be responsible for certain contractor violations. The bill died in the Appropriations Committee.

S.B. No. 460 AN ACT CONCERNING HOSPITAL CONVERSIONS AND OTHER MATTERS

AFFECTING HOSPITALS This bill would have generally barred applications for nonprofit hospitals to transfer ownership or control to for-profit entities. It also would have extended approval requirements to hospital transfers where all parties are nonprofits. The bill also would have made other changes affecting hospitals, including 1. requiring a certificate of need for hospitals seeking to terminate inpatient or outpatient reproductive services; 2. extending to for-profit hospitals a current reporting requirement for nonprofits regarding transfers to for-profit entities; 3. authorizing state general obligations bonds, in an unspecified amount, for DPH to provide grants for nonprofit hospitals' capital improvements; and 4. requiring the Commissioners of Public Health and Social Services to review and report on their agencies' hospital regulations. The bill died on the Senate Calendar. Provisions of **S.B. No. 460** are incorporated into **S.B. No. 35 Public Act 14-168 AN ACT CONCERNING NOTICE OF ACQUISITIONS, JOINT VENTURES, AFFILIATIONS OF GROUP MEDICAL PRACTICES AND HOSPITAL ADMISSIONS, MEDICAL FOUNDATIONS AND CERTIFICATES OF NEED**

S.B. No. 467 AN ACT CONCERNING STATE GRANTS IN LIEU OF PROPERTY TAXES This bill would have restructured the statutory formulas for state payments in lieu of taxes (PILOTs) that reimburse municipalities for lost revenue from (1) state-owned property, Indian reservation and trust land, and municipally owned airports and (2) private nonprofit college and hospital property. The bill died on the Senate Calendar.

S.B. No. 476 AN ACT CONCERNING FULL-DAY KINDERGARTEN PROGRAMS FOR ALLIANCE

DISTRICTS This bill would have expanded the uses of alliance district funds to include providing full-day kindergarten. An alliance district is a school district in the state that is among the 30 lowest academic performers, as measured by standardized tests. By law, alliance district funds can be used for a variety of specified purposes including (1) a tiered system of interventions to improve schools; (2) intensive reading instruction programs; and (3) additional learning time, including an extended school day or year. The bill died on the Senate Calendar.

S.B. No. 478 AN ACT CONCERNING THE DUTIES OF THE HEALTH REINSURANCE ASSOCIATION AND REQUIREMENTS OF THE CONNECTICUT SMALL EMPLOYER REINSURANCE POOL, UPDATING THE PREEXISTING CONDITIONS STATUTE, AND CONCERNING CERTAIN GROUP HEALTH INSURANCE POLICIES

Among this bill's various provisions, it would have: required health insurance companies to file small employer group health insurance premium rates with the insurance commissioner and prohibited them from issuing or delivering policies or

certificates in Connecticut to small employers (those with up to 50 employees) unless the commissioner approved the rates. The bill would have prohibited group health insurance policies, regardless of the employer's size, from reducing a person's coverage under a policy because he or she is eligible for Medicare for any reason (e.g., age, disability, or end stage renal disease). It would have allowed a coverage reduction for Medicare enrollees but only to the extent Medicare provides coverage. The bill also would have made numerous revisions in the insurance statutes to conform to the federal Patient Protection and Affordable Care Act (ACA) including: 1. broadening the prohibition on insurers using preexisting condition provisions, which limit or exclude benefits because a person had a health condition before coverage was effective; and 2. requiring insurers to make small employer health insurance policies available on a guaranteed issue basis (i.e., the insurer must accept every applicant). The bill died on the Senate Calendar.

[S.B. No. 489](#) AN ACT CONCERNING UNLAWFUL DISSEMINATION OF AN INTIMATE IMAGE OF ANOTHER PERSON This bill would have made it a crime to: 1. electronically disseminate without consent certain photos, film, videos, or other recorded images of a person engaging in sexual intercourse or showing a person's genitals, pubic area, buttocks, or a female's breast and 2. with the intent to harass, annoy, alarm, or terrorize the person. The bill died on the House Calendar.

[S.B. No. 492](#) AN ACT CONCERNING THE REPORTING OF SUSPECTED CHILD ABUSE BY PERSONS WHO ARE DIRECTORS, OFFICERS OR EMPLOYEES OF NONPROFIT CORPORATIONS This bill would have required directors, officers, and employees of nonprofit corporations incorporated or operating in Connecticut to file a report with the Department of Children and Families (DCF) if they had reasonable cause to suspect or believe a child under age 18 (1) had been abused or neglected; (2) had had a non-accidental injury, or injury that differs from its given history, inflicted upon him or her; or (3) would be placed at imminent risk of serious harm by a person acting on the corporation's behalf. It would have subjected nonprofit corporations to the same standards, protections, and penalties for failure to report as apply to mandated reporters under existing law without designating them as mandated reporters. The bill died in the Appropriations Committee.

[H.B. No. 5001](#) AN ACT PROVIDING RENTAL COST RELIEF TO ELIGIBLE SENIORS AND PERSONS WITH DISABILITIES This bill would have reopened the rental rebate program, which entitles qualified seniors and individuals with a total disability to a partial refund of rent and utility bills, to new and previous applicants who meet the eligibility criteria. Current law makes a person ineligible for the rental rebate program if he or she (1) did not receive a grant from the program in 2011 or (2) received a grant in 2011, but not in any subsequent calendar year. The bill died on the House Calendar. Sections 48 through 54 and section 258 of **EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** incorporate provisions of **[H.B. No. 5001](#)**.

[H.B. No. 5030](#) AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES FOR THE FISCAL YEAR ENDING JUNE 30, 2015 This bill was the Governor's proposed budget bill that was subsequently amended by the Appropriations Committee. The bill died on the House Calendar. This bill was ultimately replaced by **[H.B. 5596 Public Act 14-47](#) AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES AND REVENUES FOR THE FISCAL YEAR ENDING JUNE 30, 2015** (See **[Budget Bills](#)** above.)

[H.B. No. 5031](#) AN ACT CONCERNING THE BUDGET RESERVE FUND This bill would have raised the maximum allowable percentage of net General Fund appropriations in the Budget Reserve Fund (aka "Rainy Day Fund") from ten percent to fifteen percent. The bill died on the House Calendar.

H.B. No. 5032 AN ACT CONCERNING THE EXPENDITURE CAP AND REDUCING LONG-TERM LIABILITIES This bill would have amended the definition of “evidences of indebtedness” for spending cap purposes to include expenditures above the annual required contribution to the State Employees' Retirement System (SERS) and Teachers' Retirement System, thus exempting these items from the spending cap. The bill died on the House Calendar.

H.B. No. 5034 AN ACT MAKING DEFICIENCY APPROPRIATIONS FOR THE FISCAL YEAR ENDING JUNE 30, 2014 This bill was the proposed deficiency bill for FY14. The general fund increase of \$44.3 million and transportation fund increase of \$0.6 million are offset by reductions in appropriations to various agencies and accounts listed in the bill. The bill died on the House Calendar but provisions of the bill were incorporated into the budget bill **H.B. 5596 Public Act 14-47 AN ACT MAKING ADJUSTMENTS TO STATE EXPENDITURES AND REVENUES FOR THE FISCAL YEAR ENDING JUNE 30, 2015**. (See **Budget Bills** above.)

H.B. No. 5038 AN ACT CONCERNING HEALTHY CHILDREN This bill would have required the Department of Children and Families to conduct a study of the health of children in the state. The bill died in the Appropriations Committee.

H.B. No. 5052 AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET RECOMMENDATIONS FOR HUMAN SERVICES PROGRAMS This bill would have made administrative and programmatic changes to certain statutes governing the Departments of Children and Families (DCF), Social Services (DSS), and Housing (DOH). The bill would have 1) extended a current moratorium, from FY 15 through FY 18, on DCF per-diem rate increases for private residential treatment facilities it licenses; 2) increased, from 50 to 100, the number of people who may receive services through DSS' Connecticut Home Care Program for Adults with Disabilities (CHCPD); 3) required the housing commissioner to prioritize providing guarantees to eligible veterans through its Security Deposit Guarantee Program and within available appropriations, provided security deposit guarantees (payment for any damages that occur) to financially eligible people living in emergency housing or receiving a government rental subsidy; and 4) repealed a provision that places the nine-member Commission on Medicolegal Investigations (CMI) and the Office of the Chief Medical Examiner (OCME) under the University of Connecticut Health Center for administrative purposes only. The bill died on the House Calendar. Section 73 of **EMERGENCY CERTIFIED H.B. No. 5597 Public Act 14-217 AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** contains the provision increasing the number of persons who may receive CHCPD services.

H.B. No. 5062 AN ACT CONCERNING THE REMOVAL OF INDIVIDUALS FROM THE STATE CHILD ABUSE AND NEGLECT REGISTRY This bill would have established a procedure for individuals who are not required to register as sexual offenders to remove their names from the state child abuse and neglect registry after five years have elapsed and upon a showing of good cause. The bill died on the Senate Calendar.

H.B. No. 5064 AN ACT CONCERNING THE LABOR DEPARTMENT This bill would have required the Labor Department to study whether policy or procedural changes within the department might increase the productivity of Connecticut workers. The bill died on the House Calendar.

H.B. No. 5069 AN ACT CONCERNING LOW WAGE EMPLOYERS This bill would have required certain employers to pay a quarterly fee to the Labor Commissioner for each employee that receives wages below the standard rate of covered wages predetermined pursuant to section 31-57f of the general statutes. The bill died in the Finance, Revenue and Bonding Committee.

H.B. No. 5070 AN ACT CONCERNING VOLUNTEER FIRE DEPARTMENTS AND AMBULANCE COMPANIES AND THE DEFINITION OF EMPLOYER UNDER THE STATE OCCUPATIONAL SAFETY AND HEALTH ACT This bill would have added volunteer fire departments and ambulance companies to the definition of "employer" under the state Occupational Safety and Health Act. The bill died on the Senate Calendar.

H.B. No. 5071 AN ACT CONCERNING CIVIL ACTIONS AGAINST AN EMPLOYER FOR FAILURE TO PAY WAGES OR COMPENSATION OR MAKE PAYMENTS TO AN EMPLOYEE WELFARE FUND This bill would have allowed employees or labor organizations to recover twice the full amount of damages associated with an employer's failure to pay wages unless the employer could demonstrate a good faith belief that it was complying with the law and clarified the time period the administrator may use to calculate damages when any person, firm or corporation has wilfully failed to declare the payment of wages on payroll records. The bill died in the Judiciary Committee.

H.B. No. 5124 AN ACT CONCERNING THE PRESERVATION OF HISTORICAL RECORDS AND ACCESS TO RESTRICTED RECORDS IN THE STATE ARCHIVES This bill would have opened to the public, 75 years after their creation, government records (excluding medical records) deemed confidential, classified, or private, regardless of any prohibition or state law. It would have opened medical records housed in the state archives 50 years after the death of the person who is the subject of those records, regardless of any prohibition or state law. But it required that the person's name, address, and social security number be obscured or removed from the records before they be released. The bill required the state archives to own and retain for posterity any record transferred to them that the state archivist determines to be of historical value. The bill died on the House Calendar.

H.B. No. 5130 AN ACT CONCERNING SUPPORTIVE HOUSING This bill would have made a technical change to a statute concerning rental assistance for certain types of supportive housing. The bill died on the House Calendar.

H.B. No. 5132 AN ACT CONCERNING CONGREGATE HOUSING This bill would have made changes to certain statutes concerning congregate housing. The bill died on the House Calendar.

H.B. No. 5135 AN ACT CONCERNING THE CLOSURE OR RELOCATION OF DEPARTMENT OF CHILDREN AND FAMILIES' REGIONAL OFFICES IN HIGH NEED COMMUNITIES This bill would have ensured that regional offices of the Department of Children and Families were located in the areas of greatest need. The bill died in the Government Administration and Elections Committee.

H.B. No. 5147 AN ACT CONCERNING NEWBORN SCREENING FOR CYTOMEGALOVIRUS AND ESTABLISHING A PUBLIC EDUCATION PROGRAM FOR CYTOMEGALOVIRUS This bill would have required newborn screening for globoid cell leukodystrophy and cytomegalovirus and established a public education program for cytomegalovirus. The bill died on the Senate Calendar.

H.B. No. 5215 AN ACT CONCERNING ADOPTION OF THE CONNECTICUT UNIFORM POWER OF ATTORNEY ACT This bill would have enacted the Uniform Power of Attorney Act and repealed current law governing powers of attorney (POA), including a statutory form for a POA, a list of powers the principal can grant an agent in different subjects, and provisions terminating a POA when a conservator of the estate is appointed for a principal who can no longer manage his or her own affairs. Current law allows a principal to grant an agent authority over various subjects such as real estate, stocks and bonds, banking transactions, litigation, and personal relationships. POAs are documents used by a person (the principal) to designate someone (the agent) to make decisions and act on the principal's behalf. The bill died on the House Calendar.

H.B. No. 5223 AN ACT INCREASING FUNDING FOR ELDERLY NUTRITION This bill would have required the Department of Social Services to increase the fees for home-delivered meals, including “meals on wheels,” under the Connecticut Home-Care Program for the Elderly (CHCPE) to cover reasonable provider costs and minimize participant copayments. The bill required the commissioner to annually increase fees based on the increased service cost for “meals on wheels” and the following services: homemaker, chore person, companion, respite and adult day care, case management and assessment, transportation, mental health counseling, and elderly foster care. The bill would have appropriated \$3.7 million in FY 15 from the General Fund to the Aging Department for the Elderly Nutrition Program, which provides congregate and home-delivered meals to people age 60 and older and their spouses statewide. The bill died in the Appropriations Committee.

H.B. No. 5224 AN ACT INCREASING PUBLIC ASSISTANCE TO GRANDPARENTS AND OTHER RELATIVES RAISING CHILDREN This bill would have increased the temporary family assistance payment to families whose head of household is a nonparent caretaker relative (e.g., grandparent) and the legal guardian of a child from the temporary assistance rate to 75% of the prevailing monthly foster care rate for the equivalent number of children. It also would have eliminated regional variations in the payments to these families. The bill died in the Appropriations Committee.

H.B. No. 5226 AN ACT INCREASING THE PERSONAL NEEDS ALLOWANCE FOR CERTAIN LONG-TERM CARE FACILITY RESIDENTS This bill would have required the Department of Social Services (DSS) to increase the personal needs allowance (PNA) provided to residents of long-term care facilities who receive Medicaid or certain other federal or state assistance from \$60 to \$72 per month. It also would have required DSS, beginning July 1, 2015, to increase the PNA annually in accordance with any Social Security cost-of-living adjustments. The bill died in the Appropriations Committee.

H.B. No. 5228 AN ACT EXPANDING ELIGIBILITY FOR THE ALZHEIMER'S DISEASE RESPITE PROGRAM This bill would have increased, from \$41,000 to \$50,000, the annual income limit for participants in the Statewide Respite Care Program, which provides respite for caregivers of persons with Alzheimer's disease or related disorders, regardless of age, who are not enrolled in the Connecticut Homecare Program for Elders. The bill also would have appropriated an unspecified amount from the General Fund to the Aging Department in FY15 to expand the program. The bill died in the Appropriations Committee.

H.B. No. 5249 AN ACT CONCERNING COPAYMENTS FOR OCCUPATIONAL THERAPY SERVICES This bill would have prohibited individual and group health insurance policies from imposing a copayment for occupational therapy services greater than \$30 per visit. The bill died in the Appropriations Committee.

H.B. No. 5274 AN ACT CONCERNING UNEMPLOYED INDIVIDUALS AND DISCRIMINATORY HIRING PRACTICES Among the bill’s many provisions, it would have prohibited employers, employment agencies, and temporary help services from (1) disqualifying a person from employment, (2) refusing to refer a person for employment (or requesting that he or she not be referred), and (3) limiting a person's access to information about a job if they are based solely on a person's “status as unemployed” (i.e., his or her past or present unemployed periods, regardless of their duration). The bill also would have prohibited employers, employment agencies, and temporary help services from publishing job advertisements or announcements in any medium that state or indicate that (1) a person's status as unemployed disqualifies him or her for a job, (2) an employer will not consider a person for a job based on his or her status as unemployed, or (3) the qualifications for the job include current employment. The bill died on the Senate Calendar.

H.B. No. 5280 AN ACT CONCERNING EXECUTIVE EMPLOYEE COMPENSATION This bill would have made certain employers that compensate any executive employee at a rate greater than fifty times that of

the employer's average employee ineligible for tax credits, exemptions, abatements or financial assistance from the state. The bill died on the House Calendar.

H.B. No. 5281 AN ACT CONCERNING MEMBERS OF THE DISABILITY RETIREMENT BOARD

This bill would have required that a physician experienced in the fields of respiratory or pulmonary medicine be a member of the Medical Examining Board for Disability Retirement. The bill died on the House Calendar.

H.B. No. 5283 AN ACT CONCERNING EXPANSION OF FAMILY AND MEDICAL LEAVE This bill would have expanded the list of family members for whom an employee could use the state's Family and Medical Leave Act (FMLA) unpaid leave to include an employee's sibling, grandparent, and grandchild. Under the bill, the same FMLA scheduling, notice, and certification requirements as currently apply would have applied to leave used to care for siblings, grandparents, or grandchildren. The state's FMLA applies to private-sector employers with at least 75 employees. The bill died in the Appropriations Committee.

H.B. No. 5304 AN ACT PREVENTING HOMELESSNESS FOR YOUTH UNDER THE CARE OF THE COMMISSIONER OF CHILDREN AND FAMILIES This bill, with certain exceptions, would have (1) prohibited the Department of Children and Families (DCF) from discharging from its custody any child who did not have a long-term residence other than a shelter or a single-room occupancy hotel and (2) required children age 18 or older released from DCF custody to remain in aftercare for at least 45 days after release, during which time DCF would be required to provide case management services to the child. It also would have required a judge in certain proceedings involving a child or youth released from DCF custody to get the child's or youth's consent before providing him or her with legal representation. The bill died in the Appropriations Committee.

H.B. No. 5315 AN ACT ALLOWING EMPLOYERS TO PAY WAGES USING PAYROLL CARDS This bill would have allowed employers to pay employee wages using payroll cards, and allowed certain wage and hour information provided by an employer to employees be delivered electronically provided certain conditions are met. The bill died on the House Calendar.

H.B. No. 5322 AN ACT CONCERNING NURSING HOME FACILITY MINIMUM STAFFING LEVELS This bill would have established a statutory daily minimum ratio of total nursing staff (licensed nurses and nurse's aides) to residents for chronic and convalescent nursing homes (CCNHs). The bill died on the House Calendar.

H.B. No. 5327 AN ACT CONCERNING THE PROVISION OF SERVICES BY CLASSICAL HOMEOPATHS This bill would have allowed persons certified by the Council for Homeopathic Certification to provide homeopathy, subject to certain conditions and restrictions and defined these persons as "classical homeopaths." The bill would have required classical homeopaths to make certain written disclosures to clients, including information about their qualifications and the services being provided. The bill also specified various prohibited activities for classical homeopaths not credentialed by the Department of Public Health (DPH) to provide health care services. The bill specified that homeopathy provided by classical homeopaths in accordance with the bill is not considered the practice of medicine. Existing law, unchanged by the bill, provides for the licensure of homeopathic physicians (physicians with additional medical training in homeopathy). The bill died on the House Calendar.

H.B. No. 5345 AN ACT CONCERNING COOPERATIVE HEALTH CARE ARRANGEMENTS This bill would have permitted health care providers to enter into cooperative arrangements that would be exempt from certain antitrust laws after receiving approval from the Attorney General. The bill died on the House Calendar.

H.B. No. 5350 AN ACT CONCERNING AN ASSISTANT TO THE LONG-TERM CARE OMBUDSMAN This bill would have created the position of assistant state ombudsman in the Office of the

Long-Term Care Ombudsman. The bill established the assistant ombudsman's duties, which, with some additions, are the same as those performed by regional ombudsmen. The Office of the Long-Term Care Ombudsman represents the interests of residents of nursing and residential care homes and helps them resolve complaints about the facilities. The bill died in the Appropriations Committee.

H.B. No. 5354 AN ACT CONCERNING CHEMICALS OF HIGH CONCERN TO CHILDREN This bill would have required the Department of Public Health (DPH), in consultation with the Departments of Energy and Environmental Protection (DEEP) and Consumer Protection (DCP), to create and maintain a list of chemicals of high concern for children. These departments would consider the potential exposure of children and developing fetuses to each chemical and periodically review and update the list of chemicals. The bill would have (1) allowed DPH to require manufacturers and distributors in Connecticut to study the feasibility of replacing chemicals in their products with safer alternatives and (2) required DPH to report to legislators on the list's status. The bill died in the Public Health Committee.

H.B. No. 5367 AN ACT CONCERNING THE IMPLEMENTATION OF ENHANCED PROTECTIONS AGAINST DISCRIMINATION This bill would have made it a discriminatory practice to deprive someone of any legally guaranteed right because of his or her mental disability. By law, "mental disability" refers to a person who has a record of, or is regarded as having, one or more mental disorders, as defined in the most recent edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders. The law already bans discrimination based on mental disability in certain contexts (e.g., employment, housing, and public accommodations). The bill also would have made it a discriminatory practice to place a noose or simulation of one (1) on public property or on private property without the owner's written consent and (2) with the intent to intimidate or harass someone based on gender identity or expression or mental disability. The bill died on the Senate Calendar.

H.B. No. 5392 AN ACT CONCERNING THE COLLECTION AND DISPOSAL OF UNWANTED MEDICATION This bill would have required the State Police, in consultation with the Connecticut Pharmacists Association and Connecticut Police Chiefs Association, to develop and implement a program to collect and dispose of unwanted pharmaceuticals (medication). The program would have had to provide for (1) a secure locked box accessible to the public 24 hours a day to drop off unwanted medication anonymously at all local police stations and State Police barracks and (2) transporting the medication to a biomedical waste treatment facility for incineration. The bill also would have required the State Police, within available appropriations, to organize a public awareness campaign to educate the public about the program and the dangers of unsafe medication disposal. The bill died in the Appropriations Committee. Section 131 of **H.B. No. 5597 Public Act 14-217 AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** contains provisions of **H.B. No. 5392**.

H.B. No. 5395 AN ACT CONCERNING AGING IN PLACE This bill would have authorized up to \$5 million in bonding for a program to provide grants to help income-eligible seniors and adults with disabilities modify their homes so they might age in place. It also would have appropriated \$1 million from the General Fund to the Aging Commission for FY15 to establish a matching grant program for municipalities and nonprofit organizations involved in implementing livable community initiatives, such as accessible housing and community and social services, designed to allow aging in place. The bill died in the Finance, Revenue and Bonding Committee.

H.B. No. 5399 AN ACT CONCERNING EXPENDITURES OF THE GENERAL FUND This bill would have required a review of appropriations from the General Fund. The bill died on the House Calendar.

H.B. No. 5438 AN ACT CONCERNING THE RIGHTS AND RESPONSIBILITIES OF LANDLORDS AND TENANTS REGARDING THE TREATMENT OF BED BUG INFESTATIONS This bill would have established landlord and tenant rights and responsibilities regarding bed bug infestations in rental housing. The bill died on the Senate Calendar.

H.B. No. 5444 AN ACT CONCERNING MEDICAID COVERAGE OF CHIROPRACTIC SERVICES This bill would have added chiropractic treatment as an optional service for adult Medicaid recipients. The bill died in the Appropriations Committee.

H.B. No. 5445 AN ACT CONCERNING MEDICAID COVERAGE OF TELEMONTORING SERVICES This bill would have required the Department of Social Service (DSS), to the extent permitted under federal law, to provide Medicaid coverage for a Medicaid beneficiary with specified conditions for certain home telemonitoring services performed by a home health care agency. The bill died on the Senate Calendar.

H.B. No. 5447 AN ACT CONCERNING RATES OF REIMBURSEMENT FOR EMERGENCY AMBULANCE TRANSPORTATION FEES PAID BY THE DEPARTMENT OF SOCIAL SERVICES This bill would have restored Medicaid payment rates for emergency transportation to the rates in effect on December 31, 2010. The bill died in the Appropriations Committee.

H.B. No. 5451 AN ACT CONCERNING HEALTH CARE POOLING This bill would have required municipalities to submit information regarding such municipalities' group health policy or plan to the State Comptroller for analysis. The bill also would have allowed the comptroller to (1) convene a working group to develop health care provider payment reforms for the group health insurance plans offered to state employees and (2) enter into a cooperative agreement with certain group health insurers, administrators, and health care providers if he determines it will likely produce efficiencies and improve health care outcomes. The bill died in the Appropriations Committee.

H.B. No. 5463 AN ACT CONCERNING PREPARATION OF THE STATE BUDGET This bill would have required budget documents and even-year budget adjustment documents to present appropriations rounded to the nearest hundredth and to require additional information in even-year budget adjustment documents for greater transparency and accessibility. The bill died on the House Calendar.

H.B. No. 5469 AN ACT CONCERNING WORKFORCE DEVELOPMENT This bill would have required the Office of Workforce Competitiveness to study issues concerning workforce development. The bill died on the House Calendar.

H.B. No. 5499 AN ACT CONCERNING THE DEPARTMENT OF CHILDREN AND FAMILIES The bill would have required the Commissioner of Children and Families to conduct a study of all programs for children and families offered by the Department of Children and Families. The scope of the study would include, but not be limited to: (1) Whether current programs offered by the Department of Children and Families meet the needs of children and families, and (2) whether any programmatic or legislative changes are needed to better protect and serve children and families. The bill died on the House Calendar.

H.B. No. 5503 AN ACT CONCERNING EMERGENCY MEDICAL SERVICES FOR CERTAIN STATE FACILITIES This bill would have required certain state-owned facilities and campuses having an acute care hospital on the premises to be a single primary service area. The bill died on the Senate Calendar. Section 162 of **EMERGENCY CERTIFIED H.B. No. 5597 Public Act 14-217 AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** designates each state-owned campus that has an acute care hospital on the premises (i.e., John Dempsey

Hospital on the UConn Health Center (UCHC) campus) as the primary service area (PSA) responder for that campus. The act would allow the UCHC fire department to treat and transport such a patient. EFFECTIVE DATE: October 1, 2014

H.B. No. 5529 AN ACT CONCERNING THE DEFINITION OF MEDICAL NECESSITY This bill would have amended the definition of “medically necessary” or “medical necessity” that insurers, HMOs, and other entities are required to include in individual and group health insurance policies. The bill would have: 1. broadened what is considered medically necessary or a medical necessity, by removing the requirement that the services be based on credible scientific evidence published in peer-reviewed medical literature; 2. explicitly applied the definition to health care services for mental illness or its effects; and 3. specified that the determination of medical necessity must be based on an assessment of the patient and his or her medical condition. The bill died on the House Calendar.

H.B. No. 5533 AN ACT CONCERNING WORKERS' COMPENSATION COVERAGE FOR PUBLIC EMPLOYEES WITH POST-TRAUMATIC STRESS DISORDER This bill would have provided workers' compensation coverage to state or municipal employees suffering from post-traumatic stress disorder as a direct result of witnessing a traumatic event or the immediate aftermath of a traumatic event. The bill died on the House Calendar.

H.B. No. 5534 AN ACT CONCERNING THE PROVISION OF SERVICES TO INDIVIDUALS WITH INTELLECTUAL DISABILITIES This bill would have required the Department of Developmental Services (DDS), by July 1, 2016, to provide all persons with intellectual disability who are eligible for DDS services with the services for which they are eligible. This would include persons on a waiting list. The department would be required to do so in accordance with a plan that the DDS commissioner would be required to develop by July 1, 2015 in consultation with various groups and submit to the Public Health, Human Services and Appropriations Committees. The plan's services must include community-based residential services, respite care, emergency care, day program services, vocational services, and in-home support services. The bill also would have required that DDS's provision of these services not lead to a reduction in (1) other DDS services or (2) pay or benefits for employees of DDS or organizations funded by DDS to provide services to persons with intellectual disability. Existing law, unchanged by the bill, generally requires DDS to provide these services to eligible people with intellectual disabilities, within available appropriations. The bill died on the House Calendar.

H.B. No. 5536 AN ACT CONCERNING CONTINUING EDUCATION REQUIREMENTS FOR PSYCHOLOGISTS This bill generally would have required licensed psychologists to complete at least 10 hours of continuing education (CE) during each one-year license registration period. A licensee who failed to comply with the CE requirement would be subject to Department of Public Health disciplinary action, such as license revocation or suspension, censure, letter of reprimand, probation, or a civil penalty. The bill died on the House Calendar.

H.B. No. 5542 AN ACT CONCERNING THE RECOMMENDATIONS OF THE CONNECTICUT EMERGENCY MEDICAL SERVICES PRIMARY SERVICE AREA TASK FORCE This bill would have implemented the recommendations of the Connecticut Emergency Medical Services Primary Service Area Task Force. The bill died on the Senate Calendar. Provisions of **H.B. No. 5542** are contained in sections 19 through 22 of **EMERGENCY CERTIFIED H.B. No. 5597 Public Act 14-217 AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** that require DPH to review a municipality's emergency medical services (EMS) plan and the primary service area responder's (PSAR's) provision of services under the plan not less than once every five years and assign a rating to these plans. The act also requires DPH to determine whether to approve of the sale/transfer of more than 50% of the interest/assets of a PSAR and allow the agency to hold hearings on such applications. Further, it

requires DPH to conduct hearings on “alternative emergency medical services plans” (established under the act) and approve/disapprove of such plans. It allows DPH to develop and implement procedures to designate a temporary responder, which may include a hearing. Funding of \$144,178 and associated fringe benefit costs are included for this purpose in [H.B. No. 5596](#) [Public Act 14-47](#).

[H.B. No. 5545](#) **AN ACT CONCERNING A COMPREHENSIVE STUDY OF THE STATE'S TAX STRUCTURE** This bill would have enabled the Finance, Revenue and Bonding Committee to convene a panel of experts to conduct a comprehensive and objective review of the state's tax structure. The bill died on the House Calendar.

[H.B. No. 5584](#) **AN ACT CONCERNING REGIONALISM AND MAKING TECHNICAL CHANGES TO STATUTES CONCERNING MUNICIPAL TAX COLLECTION** This bill would have codified the nine regional councils of governments, made technical and substantive changes to statutes concerning regional councils of governments, made technical changes to statutes concerning municipal tax collection and required the Connecticut Center for Advanced Technology to conduct pilot programs recommended by the Regional Entities Subcommittee Back Office Working Group of the M.O.R.E. Commission. The bill died on the Senate Calendar.

[H.B. No. 5594](#) **AN ACT CONCERNING DIVERSIONARY PROGRAMS** This bill would have: (1) Clarified that application and program fees required by statute for certain pretrial diversionary programs are waived for a person who is represented by a public defender, (2) provided the court with discretion to place offenders in certain diversionary programs for a second or subsequent time, and (3) provided for the sealing of court files for offenders who are placed in diversionary programs. The bill died in the Appropriations Committee.

[H.B. No. 5595](#) **AN ACT CONCERNING COLLATERAL SOURCE PAYMENTS IN PERSONAL INJURY AND WRONGFUL DEATH ACTIONS AND REQUIRED DISCLOSURES UPON THE PURCHASE OF AN ANNUITY TO FUND PENSION BENEFITS** This bill would have: (1) Amended the definition of "collateral sources" with respect to personal injury and wrongful death claims to clarify that the amount of an award is not reduced by the value of health benefits provided to a Medicaid beneficiary by a private managed care plan, where a separate right of subrogation exists against such benefits, and made technical changes to the collateral sources statutes; and (2) required an insurer to provide certain disclosures to employees when the insurer issues an annuity contract to provide retirement benefits to such employees. The bill died on the House Calendar.

BILLS THAT WERE NOT REPORTED OUT OF COMMITTEE AND DID NOT PASS:

[S.B. No. 7](#) **AN ACT CONCERNING THE USE OF STEP THERAPY FOR AND OFF-LABEL PRESCRIBING OF PRESCRIPTION DRUGS** The bill would have regulated the imposition of certain prescription drug utilization requirements on insureds such as requiring a person to use a prescription drug more than once if such drug has previously failed for that person, or requiring the off-label use of a prescription drug unless this off-label use is prescribed by the person's health care provider. The bill died in the Insurance and Real Estate Committee. Provisions of [S.B. No. 7](#) are incorporated in [S.B. No. 394](#) [Public Act 14-118](#) **AN ACT CONCERNING REQUIREMENTS FOR INSURERS' USE OF STEP THERAPY.**

[S.B. No. 103](#) **AN ACT CONCERNING COMPLIANCE WITH FIRE DEPARTMENT APPARATUS MAINTENANCE STANDARDS** The bill would have required fire departments to maintain their fire apparatus in an operationally safe condition according to national standards. The bill died in the Public Safety and Security Committee.

S.B. No. 111 AN ACT CONCERNING A REVISION TO THE SUPPORTIVE HOUSING INITIATIVE STATUTE The bill would have increased the maximum financial assistance currently permitted under the rent bank program and provided for an annual cost-of-living adjustment to such amount. The bill died in the Housing Committee.

Proposed S.B. No. 120 AN ACT CONCERNING DYSLEXIA AND SPECIAL EDUCATION The bill would have required that dyslexia detection, recognition and intervention education be included as part of the professional development program for teachers and would have amended the state IEP form to include dyslexia. The bill died in the Education Committee. Sections 1 and 2 of **H.B. No. 5562 Public Act 14-39 AN ACT ESTABLISHING THE OFFICE OF EARLY CHILDHOOD, EXPANDING OPPORTUNITIES FOR EARLY CHILDHOOD EDUCATION AND CONCERNING DYSLEXIA AND SPECIAL EDUCATION** add dyslexia to the standard IEP form and require that all teacher preparation programs that lead to professional teacher certification include instruction on detection and recognition of, and evidence-based interventions for, students with dyslexia.

Proposed S.B. No. 138 AN ACT EXPANDING SERVICES UNDER A MEDICAID WAIVER FOR PERSONS WITH AUTISM SPECTRUM DISORDER The bill would have increased the number of persons who could be served under a Medicaid waiver program for persons with autism spectrum disorder overseen by the Department of Developmental Services. The bill died in the Public Health Committee.

Proposed S.B. No. 146 AN ACT EXCLUDING OVERTIME PAY FROM THE CALCULATION OF STATE EMPLOYEE PENSION BENEFITS The bill would have provided that overtime pay may not be used to increase pension benefits for state employees. The bill died in the Appropriations Committee.

Proposed S.B. No. 148 AN ACT CONCERNING FUNDING FOR THE AUDITORS OF PUBLIC ACCOUNTS The bill would have provided funding for the Auditors of Public Accounts to add five positions to reestablish the Performance Audit Unit. The bill died in the Appropriations Committee.

Proposed S.B. No. 160 AN ACT CONCERNING THE INCOME TAX TREATMENT OF SOCIAL SECURITY BENEFITS The bill would have provided tax relief to persons receiving Social Security benefits. The bill died in the Finance, Revenue and Bonding Committee.

Proposed S.B. No. 162 AN ACT INCREASING THE PERSONAL NEEDS ALLOWANCE FOR CERTAIN LONG-TERM CARE FACILITY RESIDENTS The bill would have increased the personal needs allowance to seventy-two dollars and seventy-five cents per month for long-term care facility residents. The bill died in the Aging Committee.

Proposed S.B. No. 164 AN ACT INCREASING FUNDING FOR THE DIAL-A-RIDE PROGRAM The bill would have provided additional funding for the Dial-A-Ride program. The bill died in the Appropriations Committee.

S.B. No. 223 AN ACT CONCERNING THE TIMEFRAME TO COMPLETE NEWBORN HEALTH SCREENINGS The bill would have specified a 24-hour timeframe for processing newborn health screening results. The bill died in the Public Health Committee.

S.B. No. 250 AN ACT CONCERNING FAIR HEARINGS The bill would have created within the Department of Social Services (DSS) an Office of Administrative Appeals separate from DSS's legal counsel to ensure impartial administration of justice in administrative hearings concerning contested decisions by DSS. The bill died in the Human Services Committee.

S.B. No. 251 AN ACT CONCERNING PROGRAMS ADMINISTERED BY THE DEPARTMENT OF SOCIAL SERVICES The bill would have required the Department of Social Services (DSS) to accept any documents required to be submitted by applicants for or recipients of DSS benefits by: (1) Manual delivery at any regional office of the department, (2) facsimile to a designated facsimile number or numbers, (3) mail through the United States Postal Service to a designated department postal address, or (4) electronic mail with attachments to a designated electronic mail address. It would have required DSS to date the document received and record the date in the applicant's or recipient's online benefits account, if such account exists. The bill died in the Human Services Committee.

S.B. No. 263 AN ACT CONCERNING THE EXTENSION OF WHISTLE-BLOWER PROTECTIONS TO AN EMPLOYEE WHO REPORTS A SUSPECTED VIOLATION OF LAW TO THE EMPLOYEE'S SUPERVISOR OR MANAGER The bill would have extended whistle-blower protections to an employee who reports to the employee's supervisor or manager a violation or a suspected violation of any state or federal law or regulation or any municipal ordinance or regulation. The bill died in the Judiciary Committee.

S.B. No. 279 AN ACT EXPANDING HEALTH INSURANCE COVERAGE FOR HEARING AIDS The bill would have extended individual and group health insurance policy coverage for hearing aids to all persons with these types of insurance policies, not just children twelve years of age or younger. The bill died in the Insurance and Real Estate Committee.

S.B. No. 285 AN ACT CONCERNING NEWBORN SCREENING FOR KRABBE DISEASE The bill would have required newborn screening for globoid cell leukodystrophy (Krabbe Disease). The bill died in the Committee on Children.

S.B. No. 296 AN ACT CONCERNING MEDICAL ORDERS WRITTEN BY PHYSICIAN ASSISTANTS The bill would have removed the requirement that orders written by a physician assistant be followed by the printed name of the supervising physician. The bill died in the Public Health Committee.

S.B. No. 319 AN ACT CONCERNING MAXIMUM MEDICAL IMPROVEMENT The bill would have barred employers and insurers from denying medical and surgical aid or hospital and nursing service to an employee who has suffered an injury for which worker's compensation is provided under the provisions of chapter 568 and who has attained maximum medical improvement. The bill died in the Labor and Public Employees Committee.

S.B. No. 335 AN ACT REQUIRING CONTINUING EDUCATION FOR CONNECTICUT'S DRIVERS The bill would have required a licensee seeking renewal of a motor vehicle operator's license to pass a comprehensive test as to knowledge of the laws concerning motor vehicles and the rules of the road. If such licensee were not to pass such test on the first attempt, the licensee would be required to pass an on-the-road skills test, in addition to the knowledge test. The bill died in the Transportation Committee.

S.B. No. 349 AN ACT CONCERNING REGULATIONS OF SIGNIFICANT IMPACT The bill would have required each state agency to determine whether a proposed agency regulation, and to impose additional procedural requirements for the adoption of any regulation that is determined to be of significant impact. "Significant impact" would mean if the proposed regulation (A) has a potential adverse impact on small businesses, (B) has a significant financial impact on any business that employs seventy-five or more full-time employees, or (C) is anticipated to cost the state one million dollars or more or any municipality one hundred thousand dollars or more; or (2) if the agency, the Office of Policy and Management or the Governor determines the proposed regulation (A) presents a substantial change in policy, or (B) is anticipated to place a

substantial burden on the public or on businesses in the state. The bill died in the Government Administration and Elections Committee.

[S.B. No. 352](#) AN ACT CONCERNING THE STATE BUILDING CODE The bill would have required the State Building Code to incorporate the 2015 International Energy Conservation Code. The bill died in the Energy and Technology Committee.

[S.B. No. 360](#) AN ACT CONCERNING THE APPLICABILITY OF PROBATE COURT ORDERS TO STATE AGENCIES The bill would have required each state agency to follow any order, denial or decree of a Probate Court that is applicable to a determination made by the state agency, and would clarify that a state agency has standing to appeal any such order, denial or decree to the Superior Court with respect to its applicability to the state agency's determination. The bill died in the Judiciary Committee.

[S.B. No. 362](#) AN ACT CONCERNING MANDATORY REPORTING OF ABUSE AND NEGLECT OF INDIVIDUALS WITH AUTISM SPECTRUM DISORDER AND THE DEFINITION OF ABUSE The bill would have required reporting of suspected abuse or neglect of persons between the ages of 18 to 59, who receive services from the Department of Developmental Services' Division of Autism Spectrum Disorder Services and would have expanded the definition of abuse to include verbal abuse, sexual abuse, psychological abuse and financial exploitation for purposes of the registry of persons who have been terminated or separated from employment as a result of substantiated abuse or neglect. **[S.B. No. 362](#)** died in the Public Health Committee. Provisions of **[S.B. No. 362](#)** are incorporated in **[H.B. No. 5456 Public Act 14-165](#) AN ACT CONCERNING MANDATORY REPORTING OF ABUSE AND NEGLECT OF INDIVIDUALS WITH AUTISM SPECTRUM DISORDER, THE DEFINITION OF ABUSE, AND THE DEPARTMENT OF DEVELOPMENTAL SERVICES ABUSE AND NEGLECT REGISTRY.**

[S.B. No. 378](#) AN ACT CONCERNING THE COLLECTION AND DISPOSAL OF UNWANTED PHARMACEUTICALS The bill would have established a program for the collection and disposal of unwanted pharmaceuticals. The bill died in the General Law Committee. Section 131 of **EMERGENCY CERTIFIED [H.B. No. 5597 Public Act 14-217](#) AN ACT IMPLEMENTING PROVISIONS OF THE STATE BUDGET FOR THE FISCAL YEAR ENDING JUNE 30, 2015** contains provisions of **[S.B. No. 378](#)**.

[S.B. No. 382](#) AN ACT CONCERNING THE OVERPAYMENT OF BENEFITS TO RETIRED STATE EMPLOYEES The bill would have prevented the state from recouping overpayments of retirement benefits to a retired state employee when the state had not conducted an audit of the retiree's benefits within twenty-four months. The bill died in the Government Administration and Elections Committee.

[S.B. No. 383](#) AN ACT REQUIRING REPEALER SESSIONS The bill would have required the General Assembly in each fourth regular legislative session to enact no legislation other than legislation with the sole purpose of repealing a provision of the general statutes or a public or special act. The bill died in the Government Administration and Elections Committee.

[S.B. No. 385](#) AN ACT CONCERNING REVISIONS TO STATUTES CONCERNING HUMAN RIGHTS AND OPPORTUNITIES The bill would have amended statutes concerning the duties and responsibilities of the Commission on Human Rights and Opportunities and the professional staff of the commission. The bill died in the Judiciary Committee.

[S.B. No. 406](#) AN ACT CONCERNING CERTIFICATES OF NEED FOR NURSING HOMES The bill would have updated the certificate of need process for nursing home facilities with technical and substantive

changes, including eliminating the certificate of need requirement for transfers of ownership. The bill died in the Human Services Committee.

S.B. No. 409 AN ACT CONCERNING THE DEPARTMENT OF SOCIAL SERVICES The bill would have required the Department of Social Services (DSS) to study programs offered by DSS to determine program efficacy and needs. The bill died in the Human Services Committee.

S.B. No. 414 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS CONCERNING GENEALOGISTS' ACCESS TO VITAL RECORDS The bill would have implemented the Department of Public Health's recommendations concerning access to vital records by genealogists conducting genealogical research. The bill died in the Public Health Committee.

S.B. No. 416 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING ADVANCED EMERGENCY MEDICAL TECHNICIANS This bill would have removed "advanced emergency medical technicians" as a category of certified emergency medical technicians in the Department of Public Health's statutes. The bill died in the Public Health Committee.

S.B. No. 433 AN ACT CONCERNING THE LICENSING PROCESS FOR COMMUNITY PROVIDERS The bill would have required the Commissioners of Public Health, Social Services, Mental Health and Addiction Services and Children and Families to jointly develop a plan to streamline the licensing process for community providers of health care and human services. The plan would have included the development of a single form to be used by community providers to apply for licensure; and a description of a process to simplify licensing application review. The bill died in the Public Health Committee.

S.B. No. 448 AN ACT CONCERNING RESULTS-BASED ACCOUNTABILITY FOR CERTAIN TAX CREDITS The bill would have required each state agency that administered a tax credit offered under any provision of the general statutes to implement a results-based analysis of such tax credit. For each tax credit administered by a state agency, the state agency would have been required to develop a baseline graph for measuring the tax credit's impact. The bill died in the Finance, Revenue and Bonding Committee.

S.B. No. 459 AN ACT CONCERNING MEDICAL ASSISTANTS The bill would have allowed medical assistants to administer certain medications under the supervision of a physician. The bill died in the Public Health Committee.

S.B. No. 471 AN ACT CONCERNING MENTAL AND BEHAVIORAL HEALTH SERVICES The bill would have required mental health screenings for school-age children and allowed primary care providers to offer mental health screenings to young adults. The bill also would have (1) modified the allowable educational courses for alcohol and drug counselors, (2) required the Commissioner of Mental Health and Addiction Services to establish a regional behavioral health consultation and care coordination program and (3) required the Commissioner of Mental Health and Addiction Services to ensure young adults have access the 2-1-1 Infoline program. The bill died in the Public Health Committee.

S.B. No. 482 AN ACT CONCERNING THE USE OF MUNICIPAL TAX LIENS TO GRANT PROPERTY TAX RELIEF TO CERTAIN HOMEOWNERS AND TAX ABATEMENTS FOR NONPROFIT ORGANIZATIONS This bill would have allowed any municipality to provide property tax relief to elderly and disabled homeowners in exchange for a tax lien on the homeowner's property. The bill also would have allowed any municipality to abate the taxes due for any real or personal property owned by a nonprofit organization, provided the amount of the abatement would be equal to the value of goods or services provided by such nonprofit organization to the municipality during the preceding fiscal year in the furtherance of the nonprofit organization's charitable purpose. The bill died in the Planning and Development Committee.

S.B. No. 487 AN ACT CONCERNING THE RECORDING OF TELEPHONIC COMMUNICATIONS

The bill would have made revisions to statutory provisions concerning the illegal recording of telephone communications. The bill died in the Judiciary Committee.

Proposed H.B. No. 5002 AN ACT INCREASING THE PERSONAL NEEDS ALLOWANCE FOR CERTAIN LONG-TERM CARE RESIDENTS

This bill would have raised the personal needs allowance from sixty to one hundred dollars for long-term care facility residents who receive state medical assistance to ensure residents can pay for basic personal needs, such as clothing and haircuts. The bill died in the Aging Committee.

Proposed H.B. No. 5003 AN ACT PROVIDING COST-OF-LIVING INCREASES FOR PRIVATE PROVIDERS AND ELIMINATING THE EARNED INCOME TAX CREDIT

This bill would have restored budget cuts made to private providers and eliminated the state's earned income tax credit. The bill died in the Appropriations Committee.

Proposed H.B. No. 5006 AN ACT CONCERNING FULL STATE REIMBURSEMENT FOR SPECIAL EDUCATION COSTS

This bill would have reduced towns' property tax burden by providing for one hundred per cent state funding of special education costs. The bill died in the Education Committee.

Proposed H.B. No. 5007 AN ACT LOWERING THE EXCESS COST THRESHOLD FOR SPECIAL EDUCATION COSTS

This bill would have reduced the local tax burden by requiring the state to pay more for special education by lowering the excess cost threshold. The bill died in the Education Committee.

Proposed H.B. No. 5027 AN ACT AUTHORIZING BONDS OF THE STATE FOR CHAPEL HAVEN IN NEW HAVEN

This bill would have provided funding to Chapel Haven, a private nonprofit organization supporting independent living for adults with Asperger's Syndrome. The bill died in the Finance, Revenue and Bonding Committee.

H.B. No. 5036 AN ACT CONCERNING CHILDREN'S PRODUCTS AND CHEMICALS OF HIGH CONCERN

This bill would have required the Commissioner of Public Health to identify chemicals of high concern to children. The bill died in the Children's Committee.

Proposed H.B. No. 5074 AN ACT CONCERNING THE APPROPRIATION OF MEDICAID FUNDS

This bill would have required that Medicaid funds be "gross appropriated" and included as general budget expenditures for the purpose of determining the constitutional spending cap. The bill died in the Appropriations Committee.

Proposed H.B. No. 5095 AN ACT CONCERNING A DEDICATED SOURCE TO BE USED FOR THE BUDGET RESERVE FUND, EXCESS DEBT PAYMENTS AND EXCESS PENSION PAYMENTS

This bill would have provided for additional state revenue through segregating an amount representing income taxes paid on unearned income. The bill died in the Finance, Revenue and Bonding Committee.

Proposed H.B. No. 5096 AN ACT RESTORING THE SALES AND USE TAX EXEMPTION ON NONPRESCRIPTION DRUGS

This bill would have restored the exemption from sales and use tax on nonprescription drugs. The bill died in the Finance, Revenue and Bonding Committee.

Proposed H.B. No. 5109 AN ACT CONCERNING THE BUDGET RESERVE FUND

This bill would have increased the cap on the "Rainy Day" Fund from ten per cent to twenty per cent of General Fund appropriations. The bill died in the Appropriations Committee.

Proposed [H.B. No. 5157](#) AN ACT CONCERNING NONEMERGENCY TRANSPORTATION SERVICES FOR ELDERLY AND DISABLED RESIDENTS OF SOUTHURY This bill would have provided transportation to nonemergency medical appointments for elderly and disabled residents of Southbury. The bill died in the Appropriations Committee.

Proposed [H.B. No. 5176](#) AN ACT CONCERNING THE INCOME TAXATION OF SOCIAL SECURITY AND THE ELIMINATION OF THE EARNED INCOME TAX CREDIT This bill would have exempted Social Security from the personal income tax and eliminated the state earned income tax credit. The bill died in the Finance, Revenue and Bonding Committee.

Proposed [H.B. No. 5201](#) AN ACT CONCERNING STATE INCOME TAX EXEMPTIONS FOR RETIRED GOVERNMENT EMPLOYEES AND RETIRED TEACHERS This bill would have changed the state income tax exemption for retired government employees and retired teachers. The bill died in the Finance, Revenue and Bonding Committee.

Proposed [H.B. No. 5208](#) AN ACT CONCERNING HOME CARE PROVIDER REIMBURSEMENTS This bill would have increased home care provider rates in proportion to increases in the minimum wage. The bill died in the Human Services Committee.

Proposed [H.B. No. 5209](#) AN ACT CONCERNING ENHANCED OVERSIGHT OF GUARDIANS AD LITEM AND ATTORNEYS FOR MINOR CHILDREN BY THE OFFICE OF THE CHIEF PUBLIC DEFENDER This bill would have enhanced oversight of guardians ad litem and attorneys for the minor children who are appointed to represent children in family relations matters and proceedings before the superior court for juvenile matters. The bill died in the Judiciary Committee. Provisions of [H.B. No. 5209](#) are incorporated in [S.B. No. 494 Public Act 14-3](#) **AN ACT CONCERNING GUARDIANS AD LITEM AND ATTORNEYS FOR MINOR CHILDREN IN FAMILY RELATIONS MATTERS**

Proposed [H.B. No. 5212](#) AN ACT INCREASING FUNDING FOR RESIDENTIAL PLACEMENT FOR PERSONS WITH DEVELOPMENTAL DISABILITIES This bill would have increased the number of residential placements for young adults with developmental disabilities. The bill died in the Public Health Committee.

Proposed [H.B. No. 5213](#) AN ACT CONCERNING MEDICAID COVERAGE FOR AUTISTIC WELLNESS PROGRAMS This bill would have required the Commissioner of Developmental Services to work in consultation with the Commissioner of Social Services to (1) make any changes necessary and permissible under federal law to a state Medicaid waiver program for persons with autism spectrum disorder to provide or expand physical activity programs, and (2) provide additional state resources for transportation to and from such programs. The bill died in the Public Health Committee.

[H.B. No. 5250](#) AN ACT CONCERNING CONTRACTS BETWEEN OPTOMETRISTS AND HEALTH INSURERS This bill would have prohibited the imposition of contract provisions that would limit payment to optometrists for services or procedures that are not covered benefits under a vision plan. The bill died in the Insurance and Real Estate Committee.

[H.B. No. 5251](#) AN ACT LIMITING OUT-OF-POCKET EXPENSES FOR PRESCRIPTION DRUGS This bill would have limited coinsurance, copayment, deductible or other out-of-pocket expenses imposed on insureds for covered prescription drugs. The bill died in the Insurance and Real Estate Committee.

H.B. No. 5279 AN ACT ELIMINATING THE MINIMUM FAIR WAGE EXCEPTION FOR CERTAIN CITIZENS OF CONNECTICUT This bill would have eliminated the exception to the minimum fair wage for persons whose earning capacity is impaired by age or physical or mental deficiency or injury. The bill died in the Labor and Public Employees Committee.

H.B. No. 5282 AN ACT CONCERNING WORKERS' COMPENSATION AND SMALL BUSINESS OWNERS This bill would have allowed certain small business owners to exclude themselves from workers' compensation coverage provided they notify their clients of such exclusion and agree to hold their clients harmless if they are injured while providing services to the client. The bill died in the Labor and Public Employees Committee.

H.B. No. 5303 AN ACT CONCERNING ACCESS TO EMERGENCY MEDICINE FOR CHILDREN WITH EPILEPSY This bill would have authorized certain school personnel to administer antiepileptic medication to students. The bill died in the Children's Committee.

H.B. No. 5313 AN ACT CONCERNING HOMEMAKER SERVICES AND HOMEMAKER COMPANION AGENCIES This bill would have designated a homemaker-companion agency, registry or homemaker-home health agency as the employer of individuals providing certain services to consumers for the purposes of unemployment compensation, wages and workers' compensation, and removed liability for such individual's personal injuries arising out of and in the course of employment from the consumer. The bill died in the Labor and Public Employees Committee.

Proposed H.B. No. 5319 AN ACT AUTHORIZING BONDS OF THE STATE FOR A COMMUNITY CENTER FOR NON-ENGLISH SPEAKING PERSONS WITH DISABILITIES This bill would have provided a community center for non-English speaking persons with disabilities in greater Waterbury. The bill died in the Commerce Committee.

H.B. No. 5326 AN ACT CONCERNING COMPASSIONATE AID IN DYING FOR TERMINALLY ILL PATIENTS This bill would have allowed a physician to prescribe medication at the request of a patient who is mentally competent and has a terminal illness that such patient may self-administer to bring about his or her death. The bill died in the Public Health Committee. Some of the subject matter in **H.B. No. 5326** is addressed in **S.B. No. 413 Special Act 14-5 AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING MEDICAL ORDERS FOR LIFE-SUSTAINING TREATMENT.**

H.B. No. 5358 AN ACT AUTHORIZING THE REGULATION REVIEW COMMITTEE TO RECOMMEND THE REPEAL OF OBSOLETE OR BURDENSOME REGULATIONS This bill would have permitted the General Assembly's regulation review committee to review current agency regulations and to recommend the repeal of burdensome or obsolete regulations. The bill died in the Government Administration and Elections Committee.

H.B. No. 5363 AN ACT PROHIBITING GENDER AS A RATING FACTOR FOR LONG-TERM CARE INSURANCE POLICIES This bill would have prohibited the use of gender as a factor in underwriting or rating for an individual or group long-term care insurance policy. The bill died in the Insurance and Real Estate Committee.

H.B. No. 5411 AN ACT AUTHORIZING ELECTRIC METER AGGREGATION FOR NONPROFIT ENTITIES This bill would have allowed a nonprofit entity to aggregate up to ten electric meters. The bill died in the Energy and Technology Committee.

H.B. No. 5433 AN ACT ESTABLISHING AN OFFICE OF INSPECTOR GENERAL This bill would have established an Office of the Inspector General to detect and prevent fraud, waste and abuse in state government. The bill died in the Government Administration and Elections Committee.

H.B. No. 5449 AN ACT CONCERNING RESIDENCY RESTRICTIONS FOR REGISTERED SEXUAL OFFENDERS This bill would have required that registered sexual offenders who are released into the community reside at least one thousand feet away from an elementary or secondary school or a licensed child day care center. The bill died in the Judiciary Committee.

H.B. No. 5457 AN ACT CONCERNING THE COLLECTION OF DATA BY HEALTH AND HUMAN SERVICES AGENCIES This bill would have required certain state agencies to collect and maintain identifying information concerning the persons each agency serves. The bill died in the Public Health Committee.

H.B. No. 5460 AN ACT ALLOWING PERSONS WITH MEDICAL CONDITIONS CONTROLLED WITH MEDICATION TO OBTAIN CERTAIN MOTOR VEHICLE OPERATOR'S LICENSES This bill would have allowed persons with medical conditions controlled by medication to obtain motor vehicle operator's licenses with public passenger transportation endorsements. The bill died in the Transportation Committee. Provisions of **H.B. No. 5460** are incorporated in **H.B. No. 5290 Public Act 14-130** AN ACT REVISING MOTOR VEHICLE LAWS.

H.B. No. 5475 AN ACT CONCERNING PRESCRIPTION DRUG CONTAINER LABELS This bill would have provided a standardized prescription drug label on each prescription drug container to reduce the number of patients who incorrectly take their prescribed medication. The bill died in the General Law Committee.

H.B. No. 5481 AN ACT ESTABLISHING THE CENTRAL OFFICE OF ADMINISTRATIVE HEARINGS This bill would have established a Central Office of Administrative Hearings to hear contested cases concerning the Departments of Children and Families and Transportation, the Commission on Human Rights and Opportunities, the Freedom of Information Commission, the State Elections Enforcement Commission, the Office of State Ethics, the Judicial Review Council, violations of the whistleblower statute and certain cases involving nursing facilities. The bill died in the Government Administration and Elections Committee.

H.B. No. 5523 AN ACT ESTABLISHING A TASK FORCE TO STUDY PARAPROFESSIONAL STAFFING LEVELS This bill would have established a task force to study issues relating to paraprofessional staffing levels. The bill died in the Education Committee.

H.B. No. 5548 AN ACT ESTABLISHING A TASK FORCE TO STUDY THE GENERAL STATUTES This bill would have established a task force to determine whether there are provisions of the general statutes that are obsolete or no longer relevant. The bill died in the Government Administration and Elections Committee.

H.B. No. 5549 AN ACT CONCERNING VIOLATIONS BY STATE CONTRACTORS OR PROSPECTIVE STATE CONTRACTORS OF CAMPAIGN CONTRIBUTION LAWS This bill would have required that an agency terminate a contract with any state contractor that violates a prohibition on campaign contributions and would have extended the ban from contracting with the state from one year to ten years for state contractors and prospective state contractors in the case of such a violation. The bill died in the Government Administration and Elections Committee.

H.B. No. 5558 AN ACT CONCERNING SERVICES FOR PERSONS WITH AUTISM SPECTRUM DISORDER This bill would have required the Commissioner of Developmental Services to work in consultation with the Commissioner of Social Services to (1) make any changes necessary and permissible under federal law to a state Medicaid waiver program for persons with autism spectrum disorder to provide or expand physical activity programs, and (2) provide additional state resources for transportation to and from such programs. The bill died in the Public Health Committee.

H.B. No. 5589 AN ACT CONCERNING CUSTODIAL INTERROGATIONS This bill would have provided that statements made by a person who is under investigation during a custodial interrogation at a place of detention are presumed inadmissible if obtained pursuant to misrepresentations made by the person conducting the investigation. The bill died in the Judiciary Committee.

We hope that this end of session summary is helpful. Copies of, or additional information on, any of the above mentioned or any other bills from this session can be found online at www.cga.ct.gov. Enter the bill number and click on “go”. This will bring you to the bill history page where you can see end results of any bills from the session including: if it passed both chambers, any amendments that passed, was it signed by the Governor, and any public act numbers that have been assigned. As always, please contact us at Rod.OConnor@ct.gov or Christine.Pollio@ct.gov with any questions.