

Connecticut



Connecticut - HB 5001

Sponsor: Senator Saud Anwar (D)

Actions: 02/25/2022 Hearing held
02/17/2022 Introduced; referred to Joint Public Health Committee

Summary: Summary for 2/17/2022 Version -- Social Workers and Counselors

This measure allows certain licensure requirements for social workers to be waived.

This measure applies to licensed social workers, counselors, and other mental and behavioral health care providers.

This measure requires the Commissioner of Public Health and Commissioner of Children and Families to create a plan for licensure reciprocity for mental and behavioral health care providers that have an active and unencumbered license in another state. The Plan must be implemented on or before January 1, 2023.

This measure authorizes the commissioner to waive the examination requirement for licensed master social workers applicants who are English language learners and who failed the examination requirement. The social worker must provide written certification to the commissioner of their intent to retake the examination within six months or at the next examination date, whichever is later. The applicant must continue to be supervised by a licensed social worker when practicing and submit a signed document from their supervising social worker granting them permission to seek a waiver for the examination requirement. This measure clarifies that the waiver has a maximum duration of one year.

This measure also states that prior to June 30, 2024, a temporary social worker permit is valid for up to a year after obtaining a master's degree in social work and is unrenewable. The temporary permit will be valid for 120 days on or after July 1, 2024.

This measure also requires the commissioner of public health to establish a social workers examination preparation grant program to cover the costs of examination preparation courses.

These sections take effect immediately upon enactment.

Summary for 2/17/2022 Medicaid Provisions

This measure provides for review of behavioral health reimbursement under Medicaid and establishment of a new model for behavioral health reimbursement.

This section is applicable to Medicaid reimbursement and Medicaid managed care.

Section 65 requires the state to review its Medicaid reimbursement practices to assess increases necessary to attract private behavioral health providers, and cost to the state thereof, as well as payment parity across behavioral and mental health services, other services, and the private and Medicaid markets. This section is effective upon passage.

Section 66 requires creation of a collaborative care model between primary care providers and behavioral and mental health providers, including the use of CoCM codes, a billing system for this purpose designed by CMS. This section is effective July 1, 2022.

Summary for 2/17/2022 Certificate of Need Exemption

This measure provides that certain facilities do not need a certificate of need under certain circumstances.

This measure provides that a certificate of need is not required for new mental health facilities or existing mental health facilities that increase the bed capacity, provided the facility accepts reimbursement for any covered benefit provided to covered individuals under an individual or group health insurance policy, a self-insured employee welfare benefit plan, or HUSKY health.

Summary for 2/17/2022 Telehealth

This measure requires insurance coverage for plans issued, renewed, or amended on or after January 1, 2023 for mental health therapy.

This measure applies to telehealth providers and health insurers.

This measure extends several telehealth provider requirements and insurance coverage provisions from May 10, 2021 through June 30, 2024. One of the extensions expands who can receive telehealth services from the CHIP to all CT Medical Assistance Program participants. The extension includes the elimination of facility fees for providers, the provider ensuring the patient has insurance coverage for telehealth services, and the prohibition on prescribing certain controlled substances through telehealth. This extension also requires the same reimbursement amounts for services delivered through telehealth as they would be in person.

This measure grants a primary care provider of a pediatric patient the ability to send the pediatric patient to at least three follow-up mental health appointments with behavioral telehealth providers.

This measure takes immediate effect upon approval.

Bill Links [2/17/2022 Version](#)



Connecticut - HB 5275

Sponsor:

Actions: 03/14/2022 Hearing Scheduled
02/28/2022 Introduced; Referred to Joint Committee on Public Health

Summary: Summary for 2/28/2022 Version

This measure prohibits insurers from requiring step therapy for prescription drugs used to treat mental or behavioral health conditions.

This measure applies to insurers and pertains to step therapy protocols. Insurance companies or any other entity delivering an individual health insurance policy or contract providing coverage for prescription drugs may require the use of step therapy for a prescribed drug for treatment of a mental or behavioral health condition.

This measure takes effect January 1, 2023.

Bill Links [2/28/2022 Version](#)



Connecticut - HB 5430

Sponsor:

Actions: 03/14/2022 Hearing Scheduled
03/09/2022 Introduced; referred to Joint Committee on Public Health

Summary: Summary for 3/14/2022 Version

This measure establishes dispensing requirements for health care practitioners who are authorized to prescribe and/or dispense controlled substances and requires the monitoring of metrics regarding the opioid epidemic in the state.

This measure pertains to drug abuse and drug monitoring programs. Firstly, it requires prescribing practitioners to include nonopioid treatment options, including chiropractic regimens and spinal cord stimulation, in treatment agreements or care plans.

This measure authorizes registered nurses to approve the dispensing of take-home doses of methadone in licensed substance use disorder treatment facilities as necessary to dispense up to 28 days of take-home doses to a stable patient, and up to 14 days for a less stable patient, if the nurse believes the patient can safely tolerate the amount of methadone.

All practitioners who prescribe controlled substances and who are engaged in transporting a controlled substance must notify the department of the intent to transport such controlled substance and return any remaining amount of that substance to a secure location.

This measure requires that the commissioner collect and organize data on the opioid epidemic in the state and use such data to establish metrics for prescribing opioid drugs and treating individuals who have opioid use disorder or have experienced overdose. Such metrics must be updated on a quarterly basis.

This measure clarifies that products used by a manufacturer to test any subject prior to injection, inhalation or ingestion of a controlled substance are not considered drug paraphernalia, unless the product is being used for unlicensed manufacturing or distribution of controlled substances.

"Roach clip" is defined as an object used to hold burning material, including, but not limited to, a marijuana cigarette, that has become too small or short to be held between the fingers.

This measure takes effect July 1, 2022.

Bill Links [3/9/2022 Version](#)



Connecticut - HB 5449

Sponsor:

Actions: 03/17/2022 Hearing Scheduled
03/10/2022 Introduced; Referred to Joint Insurance and Real Estate Committee

Summary: Summary for 3/10/2022 version

This measure requires a medical provider to obtain a certificate of need before beginning construction on a new facility.

This measure prohibits construction bonds from being granted until the provider is granted a certificate of need.

This measure alters the application for a certificate of need from \$5,000 to \$25,000 dollars.

This measure requires the Office of Health Strategy to conduct a study and submit a report concerning certificates of need in the state. The report is due no later than January 15, 2023. This measure lays out the reporting requirements.

Section 1 of this measure takes immediate effect upon approval. Sections 2 and 3 take effect October 1, 2022.

Bill Links [3/10/2022 Version](#)



Connecticut - SB 290

Sponsor:

Actions: 03/08/2022 Hearing Held
03/03/2022 Introduced; Referred to Joint Committee on Human Services

Summary: Summary for 3/03/2022 Version

This measure modifies the certificate of need process for long-term care facilities.

This measure allows the Commissioner of Social Services to consider criteria and place conditions when evaluating a certificate of need request to relocate nursing facility beds to another facility. Conditions may include project and Medicaid reimbursement details and application requirements for audit purposes.

This measure allows the submittal of proposals to build a nontraditional, small house style nursing home designed to enhance the quality of life for nursing facility residents, provided that the nursing facility agrees to reduce its total number of licensed beds by a percentage determined by the Commissioner of Social Services per the department's strategic plan for long-term care.

This measure provides for any proposal to relocate nursing home beds from an existing facility to a new facility shall not increase the number of Medicaid-certified beds and shall result in the closure of at least one currently licensed facility other than the facility being replaced.

This measure takes effect on July 1, 2022.

Bill Links [3/3/2022 Version](#)



Connecticut - SB 415

Sponsor:

Actions: 03/17/2022 Hearing Scheduled
03/10/2022 Introduced; Referred to the Joint Committee on Insurance and Real Estate

Summary: Summary for 3/10/2022 Version

This measure prohibits requiring step therapy for drugs used to treat chronic and life threatening illness; requires a presumption of medical necessity when conducting utilization reviews or reviewing adverse determinations for services provided by healthcare professionals.

This measure pertains to step therapy requirements. This measure prohibits health carriers from requesting the use of step therapy for drugs prescribed to treat behavioral health conditions or chronic, disabling, or life-threatening conditions or diseases.

Additionally, this measure requires a presumption that each health care service is medically necessary if ordered by a health care professional for each utilization review. Carriers or other entities responsible for conducting utilization reviews hold the burden of proving a service was not medically necessary. There is a rebuttable presumption that every healthcare service under review is medically necessary for each review of an adverse determination.

This measure defines "clinical peer" as a physician or other healthcare professional who holds a doctoral or medical degree, holds an applicable national board certification, and actively practices and manages or provides procedures for the medical condition under review.

This measure takes effect on January 1, 2023.

Bill Links [3/10/2022 Version](#)



Connecticut - SB 88

Sponsor:

Actions: 03/04/2022 Hearing Held; Passed Committee
02/23/2022 Hearing Held
02/15/2022 Introduced; Referred to Joint Committee on Public Health

Summary: Summary for 2/15/2022 Version

This measure authorizes an aid in dying for terminally ill patients.

This measure authorizes a patient who is an adult, competent, a resident of the state, has been determined by an attending physician to have a terminal illness and voluntarily expressed the patient's wish to receive aid in dying to request aid in dying by submitting two written requests to their attending physician. This measure requires that the patient's second written request shall not be submitted any earlier than 15 days after the date on the first written request.

This measure prohibits an agent under a living will, an attorney-in-fact under a durable power of attorney, a guardian, or a conservator from acting on behalf of a patient. This measure provides the requirement of an attending physician when presented with a patient's written request for aid in dying which includes referring a patient to a consulting physician for medical confirmation. This measure further provides requirements for the consulting physician.

This measure requires the attending physician to document and file in the patient's medical record the basis for determining that the patient is an adult and resident of the state; all written requests by the patient; the patient's diagnosis and prognosis and the consulting physician's confirmation; a report of the outcome and determinations made during counseling; documentation of the attending physician's offer to rescind the patient's request; and a statement that all requirements have been met.

This measure requires the attending physician to dispense medication by contacting a pharmacist who chooses to participate in the provision of medication for aid in dying and inform the pharmacist of the prescription and personally deliver the written prescription by mail, fax, or electronic transmission to the pharmacist who may dispense the medication directly to the qualified patient, the attending physician or an identified agent of the qualified patient.

This measure requires any person, other than a qualified patient, in possession of medication dispensed or prescribed for aid in dying that has not been self-administered to destroy medication in a manner described on the Department of Consumer Protection's Internet website or dispose of such medication at a pharmacy that accepts and disposes of unused prescription drugs or a municipal police station that collects and disposes of unwanted pharmaceuticals. This measure requires that any contract related to an insurance policy or annuity will not be valid.

This measure requires the Department of Public Health to review forms to ensure compliance with the provisions of this act and submit a report to the joint standing committee of the General Assembly on or before January 1, 2023.

This measure defines "Competent" as patient's attending physician, consulting physician, psychiatrist, psychologist, or licensed clinical social worker, that a patient has the capacity to understand and acknowledge the nature and consequences of health care decisions, including the

benefits and disadvantages of treatment, to make an informed decision and to communicate such decision to a health care provider, including communicating through a person familiar with a patient's manner of communicating.

Bill Links [2/15/2022 Version](#)