



General Assembly

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Amendment

LCO No. 8423

HB0661808423HDO

Offered by:

REP. RITTER E., 38th Dist.

SEN. GERRATANA, 6th Dist.

To: Subst. House Bill No. 6618

File No. 544

Cal. No. 343

"AN ACT CONCERNING VARIOUS REVISIONS TO PUBLIC HEALTH RELATED STATUTES."

1 Change the effective dates of sections 1, 2 and 6 to "Effective July 1,
2 2011"

3 Change the effective dates of sections 30 and 36 to "Effective from
4 passage"

5 In line 73, strike "and shall" and substitute "in taking such
6 disciplinary action." in lieu thereof

7 Strike lines 74 and 75 in their entirety

8 In line 103, after the period, insert: "Nothing in this section shall be
9 construed to prohibit a hospital from designating persons who are
10 authorized to transport a patient with a portable oxygen source."

11 Strike sections 3 to 5, inclusive, in their entirety and renumber the
12 remaining sections and internal references accordingly

13 Strike lines 327 and 328 in their entirety and substitute the following
14 in lieu thereof:

15 "surviving spouse; (6) a conservator of the person appointed for
16 such person; (7) members of genealogical societies"

17 Strike section 16 in its entirety and substitute the following in lieu
18 thereof:

19 "Sec. 16. Section 10-204a of the general statutes is repealed and the
20 following is substituted in lieu thereof (*Effective October 1, 2011*):

21 (a) Each local or regional board of education, or similar body
22 governing a nonpublic school or schools, shall require each child to be
23 protected by adequate immunization against diphtheria, pertussis,
24 tetanus, poliomyelitis, measles, mumps, rubella, hemophilus
25 influenzae type B and any other vaccine required by the schedule for
26 active immunization adopted pursuant to section 19a-7f, as amended
27 by this act, before being permitted to enroll in any program operated
28 by a public or nonpublic school under its jurisdiction. Before being
29 permitted to enter seventh grade, a child shall receive a second
30 immunization against measles. Any such child who (1) presents a
31 certificate from a physician, physician assistant, advanced practice
32 registered nurse or local health agency stating that initial
33 immunizations have been given to such child and additional
34 immunizations are in process under guidelines and schedules
35 specified by the Commissioner of Public Health; or (2) presents a
36 certificate from a physician, physician assistant or advanced practice
37 registered nurse stating that in the opinion of such physician,
38 physician assistant or advanced practice registered nurse such
39 immunization is medically contraindicated because of the physical
40 condition of such child; or (3) presents a statement from the parents or
41 guardian of such child that such immunization would be contrary to
42 the religious beliefs of such child; or (4) in the case of measles, mumps
43 or rubella, presents a certificate from a physician, physician assistant
44 or advanced practice registered nurse or from the director of health in

45 such child's present or previous town of residence, stating that the
46 child has had a confirmed case of such disease; or (5) in the case of
47 hemophilus influenzae type B has passed his fifth birthday; or (6) in
48 the case of pertussis, has passed his sixth birthday, shall be exempt
49 from the appropriate provisions of this section. If the parents or
50 guardians of any children are unable to pay for such immunizations,
51 the expense of such immunizations shall, on the recommendations of
52 such board of education, be paid by the town.

53 (b) The definitions of adequate immunization shall reflect the
54 schedule for active immunization adopted pursuant to section 19a-7f₂
55 as amended by this act, and be established by regulation adopted in
56 accordance with the provisions of chapter 54 by the Commissioner of
57 Public Health, who shall also be responsible for providing procedures
58 under which said boards and said similar governing bodies shall
59 collect and report immunization data on each child to the Department
60 of Public Health for compilation and analysis by said department.

61 (c) The Commissioner of Public Health may issue a temporary
62 waiver to the schedule for active immunization for any vaccine if the
63 National Centers for Disease Control and Prevention recognizes a
64 nation-wide shortage of supply for such vaccine."

65 In line 653, strike "twenty" and insert "fifteen" in lieu thereof

66 In line 915, strike "health or his" and insert in lieu thereof "health₂ [or
67 his] the local director's"

68 In line 919, bracket "either" and after the closing bracket insert "the
69 local director of health, the local director's authorized agent or the
70 Department of Public Health"

71 Strike section 33 in its entirety and insert the following in lieu
72 thereof:

73 "Sec. 33. Subdivisions (8) and (9) of section 19a-177 of the general
74 statutes are repealed and the following is substituted in lieu thereof

75 (Effective from passage):

76 (8) (A) Not later than October 1, 2001, develop or cause to be
77 developed a data collection system that will follow a patient from
78 initial entry into the emergency medical service system through arrival
79 at the emergency room and, within available appropriations, may
80 expand the data collection system to include clinical treatment and
81 patient outcome data. The commissioner shall, on a quarterly basis,
82 collect the following information from each licensed ambulance service
83 or certified ambulance service that provides emergency medical
84 services: (i) The total number of calls for emergency medical services
85 received by such licensed ambulance service or certified ambulance
86 service through the 9-1-1 system during the reporting period; (ii) each
87 level of emergency medical services, as defined in regulations adopted
88 pursuant to section 19a-179, required for each such call; (iii) the
89 response time for each licensed ambulance service or certified
90 ambulance service during the reporting period; (iv) the number of
91 passed calls, cancelled calls and mutual aid calls during the reporting
92 period; and (v) for the reporting period, the prehospital data for the
93 nonscheduled transport of patients required by regulations adopted
94 pursuant to subdivision (6) of this section. The information required
95 under this subdivision may be submitted in any written or electronic
96 form selected by such licensed ambulance service or certified
97 ambulance service and approved by the commissioner, provided the
98 commissioner shall take into consideration the needs of such licensed
99 ambulance service or certified ambulance service in approving such
100 written or electronic form. The commissioner may conduct an audit of
101 any such licensed ambulance service or certified ambulance service as
102 the commissioner deems necessary in order to verify the accuracy of
103 such reported information.

104 (B) The commissioner shall prepare a report to the Emergency
105 Medical Services Advisory Board, established pursuant to section 19a-
106 178a, that shall include, but not be limited to, the following
107 information: (i) The total number of calls for emergency medical
108 services received during the reporting year by each licensed

109 ambulance service or certified ambulance service; (ii) the level of
110 emergency medical services required for each such call; (iii) the name
111 of the provider of each such level of emergency medical services
112 furnished during the reporting year; (iv) the response time, by time
113 ranges or fractile response times, for each licensed ambulance service
114 or certified ambulance service, using a common definition of response
115 time, as provided in regulations adopted pursuant to section 19a-179;
116 and (v) the number of passed calls, cancelled calls and mutual aid calls
117 during the reporting year. The commissioner shall prepare such report
118 in a format that categorizes such information for each municipality in
119 which the emergency medical services were provided, with each such
120 municipality grouped according to urban, suburban and rural
121 classifications. [Not later than March 31, 2002, and annually thereafter,
122 the commissioner shall submit such report to the joint standing
123 committee of the General Assembly having cognizance of matters
124 relating to public health, shall make such report available to the public
125 and shall post such report on the Department of Public Health web site
126 on the Internet.]

127 (C) If any licensed ambulance service or certified ambulance service
128 does not submit the information required under subparagraph (A) of
129 this subdivision for a period of six consecutive months, or if the
130 commissioner believes that such licensed ambulance service or
131 certified ambulance service knowingly or intentionally submitted
132 incomplete or false information, the commissioner shall issue a written
133 order directing such licensed ambulance service or certified ambulance
134 service to comply with the provisions of subparagraph (A) of this
135 subdivision and submit all missing information or such corrected
136 information as the commissioner may require. If such licensed
137 ambulance service or certified ambulance service fails to fully comply
138 with such order not later than three months from the date such order is
139 issued, the commissioner (i) shall conduct a hearing, in accordance
140 with chapter 54, at which such licensed ambulance service or certified
141 ambulance service shall be required to show cause why the primary
142 service area assignment of such licensed ambulance service or certified

143 ambulance service should not be revoked, and (ii) may take such
144 disciplinary action under section 19a-17, as amended by this act, as the
145 commissioner deems appropriate.

146 (D) [On and after October 1, 2006, the] The commissioner shall
147 collect the information required by subparagraph (A) of this
148 subdivision, in the manner provided in said subparagraph, from each
149 person or emergency medical service organization licensed or certified
150 under section 19a-180 that provides emergency medical services; [. On
151 and after October 1, 2006, such information shall be included in the
152 annual report prepared by the commissioner in accordance with
153 subparagraph (B) of this subdivision and such person or emergency
154 medical service organization shall be subject to the provisions of
155 subparagraph (C) of this subdivision;]

156 (9) (A) Establish rates for the conveyance of patients by licensed
157 ambulance services and invalid coaches and establish emergency
158 service rates for certified ambulance services, provided (i) the present
159 rates established for such services and vehicles shall remain in effect
160 until such time as the commissioner establishes a new rate schedule as
161 provided in this subdivision, and (ii) any rate increase not in excess of
162 the Medical Care Services Consumer Price Index, as published by the
163 Bureau of Labor Statistics of the United States Department of Labor,
164 for the prior year, filed in accordance with subparagraph (B)(iii) of this
165 subdivision shall be deemed approved by the commissioner. For
166 purposes of this subdivision, licensed ambulance service shall not
167 include emergency air transport services.

168 (B) Adopt regulations, in accordance with the provisions of chapter
169 54, establishing methods for setting rates and conditions for charging
170 such rates. Such regulations shall include, but not be limited to,
171 provisions requiring that on and after July 1, 2000: (i) Requests for rate
172 increases may be filed no more frequently than once a year, except
173 that, in any case where an agency's schedule of maximum allowable
174 rates falls below that of the Medicare allowable rates for that agency,
175 the commissioner shall immediately amend such schedule so that the

176 rates are at or above the Medicare allowable rates; (ii) only licensed
177 ambulance services and certified ambulance services that apply for a
178 rate increase in excess of the Medical Care Services Consumer Price
179 Index, as published by the Bureau of Labor Statistics of the United
180 States Department of Labor, for the prior year, and do not accept the
181 maximum allowable rates contained in any voluntary state-wide rate
182 schedule established by the commissioner for the rate application year
183 shall be required to file detailed financial information with the
184 commissioner, provided any hearing that the commissioner may hold
185 concerning such application shall be conducted as a contested case in
186 accordance with chapter 54; (iii) licensed ambulance services and
187 certified ambulance services that do not apply for a rate increase in any
188 year in excess of the Medical Care Services Consumer Price Index, as
189 published by the Bureau of Labor Statistics of the United States
190 Department of Labor, for the prior year, or that accept the maximum
191 allowable rates contained in any voluntary state-wide rate schedule
192 established by the commissioner for the rate application year shall, not
193 later than July fifteenth of such year, file with the commissioner a
194 statement of emergency and nonemergency call volume, and, in the
195 case of a licensed ambulance service or certified ambulance service that
196 is not applying for a rate increase, a written declaration by such
197 licensed ambulance service or certified ambulance service that no
198 change in its currently approved maximum allowable rates will occur
199 for the rate application year; and (iv) detailed financial and operational
200 information filed by licensed ambulance services and certified
201 ambulance services to support a request for a rate increase in excess of
202 the Medical Care Services Consumer Price Index, as published by the
203 Bureau of Labor Statistics of the United States Department of Labor,
204 for the prior year, shall cover the time period pertaining to the most
205 recently completed fiscal year and the rate application year of the
206 licensed ambulance service or certified ambulance service.

207 (C) Establish rates for licensed ambulance services and certified
208 ambulance services for the following services and conditions: (i)
209 "Advanced life support assessment" and "specialty care transports",

210 which terms shall have the meaning provided in 42 CFR 414.605; and
211 (ii) intramunicipality mileage, which means mileage for an ambulance
212 transport when the point of origin and final destination for a transport
213 is within the boundaries of the same municipality. The rates
214 established by the commissioner for each such service or condition
215 shall be equal to (I) the ambulance service's base rate plus its
216 established advanced life support/paramedic surcharge when
217 advanced life support assessment services are performed; (II) two
218 hundred twenty-five per cent of the ambulance service's established
219 base rate for specialty care transports; and (III) "loaded mileage", as the
220 term is defined in 42 CFR 414.605, multiplied by the ambulance
221 service's established rate for intramunicipality mileage. Such rates shall
222 remain in effect until such time as the commissioner establishes a new
223 rate schedule as provided in this subdivision;"

224 In line 1428, strike "19a-6i,"

225 After the last section, add the following and renumber sections and
226 internal references accordingly:

227 "Sec. 501. Subdivision (10) of subsection (b) of section 1-210 of the
228 general statutes is repealed and the following is substituted in lieu
229 thereof (*Effective October 1, 2011*):

230 (10) Records, tax returns, reports and statements exempted by
231 federal law or [state] the general statutes or communications
232 privileged by the attorney-client relationship, marital relationship,
233 clergy-penitent relationship, doctor-patient relationship, therapist-
234 patient relationship or any other privilege established by the common
235 law or the general statutes, including any such records, tax returns,
236 reports or communications that were created or made prior to the
237 establishment of the applicable privilege under the common law or the
238 general statutes;

239 Sec. 502. Subsection (b) of section 1-210 of the general statutes is
240 amended by adding subdivision (26) as follows (*Effective October 1,*
241 *2011*):

242 (NEW) (26) All records obtained during the course of inspection,
243 investigation, examination and audit activities of an institution, as
244 defined in section 19a-490, that are confidential pursuant to a contract
245 between the Department of Public Health and the United States
246 Department of Health and Human Services relating to the Medicare
247 and Medicaid programs.

248 Sec. 503. Subsections (a) and (b) of section 19a-32f of the general
249 statutes are repealed and the following is substituted in lieu thereof
250 (*Effective October 1, 2011*):

251 (a) (1) There is established a Stem Cell Research Advisory
252 Committee. The committee shall consist of the Commissioner of Public
253 Health, or the commissioner's designee, and eight members who shall
254 be appointed as follows: Two by the Governor, one of whom shall be
255 nationally recognized as an active investigator in the field of stem cell
256 research and one of whom shall have background and experience in
257 the field of bioethics; one each by the president pro tempore of the
258 Senate and the speaker of the House of Representatives, who shall
259 have background and experience in private sector stem cell research
260 and development; one each by the majority leaders of the Senate and
261 House of Representatives, who shall be academic researchers
262 specializing in stem cell research; one by the minority leader of the
263 Senate, who shall have background and experience in either private or
264 public sector stem cell research and development or related research
265 fields, including, but not limited to, embryology, genetics or cellular
266 biology; and one by the minority leader of the House of
267 Representatives, who shall have background and experience in
268 business or financial investments. Members shall serve for a term of
269 four years commencing on October first, except that members first
270 appointed by the Governor and the majority leaders of the Senate and
271 House of Representatives shall serve for a term of two years. No
272 member may serve for more than two consecutive four-year terms and
273 no member may serve concurrently on the Stem Cell Research Peer
274 Review Committee established pursuant to section 19a-32g. All initial
275 appointments to the committee shall be made by October 1, 2005. Any

276 vacancy shall be filled by the appointing authority.

277 (2) On and after July 1, 2006, the advisory committee shall include
278 eight additional members who shall be appointed as follows: Two by
279 the Governor, one of whom shall be nationally recognized as an active
280 investigator in the field of stem cell research and one of whom shall
281 have background and experience in the field of ethics; one each by the
282 president pro tempore of the Senate and the speaker of the House of
283 Representatives, who shall have background and experience in private
284 sector stem cell research and development; one each by the majority
285 leaders of the Senate and House of Representatives, who shall be
286 academic researchers specializing in stem cell research; one by the
287 minority leader of the Senate, who shall have background and
288 experience in either private or public sector stem cell research and
289 development or related research fields, including, but not limited to,
290 embryology, genetics or cellular biology; and one by the minority
291 leader of the House of Representatives, who shall have background
292 and experience in business or financial investments. Members shall
293 serve for a term of four years, except that (A) members first appointed
294 by the Governor and the majority leaders of the Senate and House of
295 Representatives pursuant to this subdivision shall serve for a term of
296 two years and three months, and (B) members first appointed by the
297 remaining appointing authorities shall serve for a term of four years
298 and three months. No member appointed pursuant to this subdivision
299 may serve for more than two consecutive four-year terms and no such
300 member may serve concurrently on the Stem Cell Research Peer
301 Review Committee established pursuant to section 19a-32g. All initial
302 appointments to the committee pursuant to this subdivision shall be
303 made by July 1, 2006. Any vacancy shall be filled by the appointing
304 authority.

305 (b) The Commissioner of Public Health, or the commissioner's
306 designee, shall serve as the chairperson of the committee and shall
307 schedule the first meeting of the committee, which shall be held no
308 later than December 1, 2005.

309 Sec. 504. Subdivision (4) of subsection (a) of section 20-74ee of the
310 general statutes is repealed and the following is substituted in lieu
311 thereof (*Effective October 1, 2011*):

312 (4) Nothing in subsection (c) of section 19a-14, as amended by this
313 act, sections 20-74aa to 20-74cc, inclusive, and this section shall be
314 construed to require licensure as a radiographer or to limit the
315 activities of a [Nuclear Medicine Technologist certified by the Nuclear
316 Medicine Technology Certification Board] technologist certified by the
317 International Society for Clinical Densitometry or the American
318 Registry of Radiologic Technologists, provided such individual is
319 engaged in the operation of a bone densitometry system under the
320 supervision, control and responsibility of a physician licensed
321 pursuant to chapter 370.

322 Sec. 505. Section 19a-270 of the general statutes is repealed and the
323 following is substituted in lieu thereof (*Effective October 1, 2011*):

324 The first selectman of any town, the mayor of any city, the
325 administrative head of any state correctional institution or the
326 superintendent or person in charge of any almshouse, asylum,
327 hospital, morgue or other public institution which is supported, in
328 whole or in part, at public expense, having in his or her possession or
329 control the dead body of any person which, if not claimed as provided
330 in this section, would have to be buried at public expense, or at the
331 expense of any such institution, shall, immediately upon the death of
332 such person, notify such person's relatives thereof, if known, and, if
333 such relatives are not known, shall notify the person or persons
334 bringing or committing such person to such institution. Such official
335 shall, within twenty-four hours from the time such body came into his
336 or her possession or control, give notice thereof to the Department of
337 Public Health and shall deliver such body to The University of
338 Connecticut, Quinnipiac University, the Yale University School of
339 Medicine or the University of Bridgeport College of Chiropractic or its
340 successor institution, as said department may direct and in accordance
341 with an agreement to be made among said universities in such manner

342 as is directed by said department and at the expense of the university
343 receiving the body, if The University of Connecticut, Quinnipiac
344 University, Yale University, or the University of Bridgeport College of
345 Chiropractic or its successor institution, at any time within one year,
346 has given notice to any of such officials that such bodies would be
347 needed for the purposes specified in section 19a-270b; provided any
348 such body shall not have been claimed by a relative, either by blood or
349 marriage, or a legal representative of such deceased person prior to
350 delivery to any of said universities. The university receiving such body
351 shall not embalm such body for a period of at least forty-eight hours
352 after death, and any relative, either by blood or marriage, or a legal
353 representative of such deceased person may claim such body during
354 said period. If any such body is not disposed of in either manner
355 specified in this section, it may be cremated or buried. When any
356 person has in his or her possession or control the dead body of any
357 person which would have to be buried at public expense or at the
358 expense of any such institution, he or she shall, within forty-eight
359 hours after such body has come into his or her possession or control,
360 file, with the registrar of the town within which such death occurred, a
361 certificate of death as provided in section 7-62b, unless such certificate
362 has been filed by a funeral director. Before any such body is removed
363 to any of said universities, the official or person contemplating such
364 removal shall secure a removal, transit and burial permit which shall
365 be delivered with the body to the official in charge of such university,
366 who shall make return of such removal, transit and burial permit in the
367 manner provided in section 7-66.

368 Sec. 506. (*Effective from passage*) Notwithstanding the provisions of
369 subsection (a) of section 20-206bb of the general statutes, during the
370 period commencing on the effective date of this section and ending
371 thirty days after said effective date, the Department of Public Health
372 shall issue a license as an acupuncturist under chapter 384c of the
373 general statutes to any applicant who presents satisfactory evidence to
374 the department that the applicant: (1) Passed the National Commission
375 for the Certification of Acupuncture and Oriental Medicine written

376 examination by test or by credentials review prior to April 28, 2010; (2)
377 successfully completed the practical examination of point location
378 skills offered by the National Commission for the Certification of
379 Acupuncture and Oriental Medicine; and (3) successfully completed
380 the Clean Needle Technique Course offered by the Council of Colleges
381 of Acupuncture and Oriental Medicine on March 13, 2010.

382 Sec. 507. Section 19a-902 of the general statutes is repealed and the
383 following is substituted in lieu thereof (*Effective October 1, 2011*):

384 On or before January 1, 2011, the Department of Public Health, in
385 consultation with the Department of Mental Health and Addiction
386 Services, shall (1) amend the department's substance abuse treatment
387 regulations; [and shall] (2) implement a dual licensure program for
388 behavioral health care providers who provide both mental health
389 services and substance abuse services, and (3) permit the use of saliva-
390 based drug screening or urinalysis when conducting initial and
391 subsequent drug screenings of persons who abuse substances other
392 than alcohol at facilities which are licensed by the Department of
393 Public Health.

394 Sec. 508. Section 19a-6i of the general statutes is repealed and the
395 following is substituted in lieu thereof (*Effective from passage*):

396 [The committee established under section 51 of public act 06-195*
397 shall meet at least once every calendar quarter and report annually to
398 the joint standing committees of the General Assembly having
399 cognizance of matters relating to public health and education, in
400 accordance with the provisions of section 11-4a, on recommended
401 statutory and regulatory changes to improve health care through
402 access to school-based health clinics.]

403 (a) There is established a school-based health center advisory
404 committee for the purpose of assisting the Commissioner of Public
405 Health in developing recommendations for statutory and regulatory
406 changes to improve health care through access to school-based health
407 centers.

408 (b) The committee shall be composed of the following members:

409 (1) The Commissioner of Public Health, or the commissioner's
410 designee;

411 (2) The Commissioner of Social Services, or the commissioner's
412 designee;

413 (3) The Commissioner of Mental Health and Addiction Services, or
414 the commissioner's designee;

415 (4) The Commissioner of Education, or the commissioner's designee;
416 and

417 (5) Three school-based health center providers who shall be
418 appointed by the board of directors of the Connecticut Association of
419 School-Based Health Centers.

420 (c) The committee shall meet not less than quarterly. On or before
421 January 1, 2012, and annually thereafter, the committee shall report, in
422 accordance with the provisions of section 11-4a, on its activities to the
423 joint standing committees of the General Assembly having cognizance
424 of matters relating to public health and education.

425 (d) Administrative support for the activities of the committee may
426 be provided by the Connecticut Association of School-Based Health
427 Centers.

428 Sec. 509. Section 20-12i of the general statutes is repealed and the
429 following is substituted in lieu thereof (*Effective October 1, 2011*):

430 (a) On and after October 1, 2011, prior to engaging in the use of
431 fluoroscopy for guidance of diagnostic and therapeutic procedures, a
432 physician assistant shall: (1) Successfully complete a course that
433 includes forty hours of [training on topics that include, but are]
434 didactic instruction relevant to fluoroscopy which includes, but is not
435 limited to, [radiation physics, radiation biology, radiation safety and
436 radiation management applicable to fluoroscopy, provided not less

437 than ten hours of such training shall address radiation safety and not
438 less than fifteen hours of such training shall address both radiation
439 physics and] radiation biology and physics, exposure reduction,
440 equipment operation, image evaluation, quality control and patient
441 considerations; (2) successfully complete a minimum of forty hours of
442 supervised clinical experience that includes a demonstration of patient
443 dose reduction, occupational dose reduction, image recording and
444 quality control of fluoroscopy equipment; and [(2)] (3) pass an
445 examination prescribed by the Commissioner of Public Health.
446 Documentation that the physician assistant has met the requirements
447 prescribed in this subsection shall be maintained at the employment
448 site of the physician assistant and made available to the Department of
449 Public Health upon request.

450 (b) Notwithstanding the provisions of this section or sections 20-
451 74bb and 20-74ee, as amended by this act, nothing shall prohibit a
452 physician assistant [from] who is engaging in the use of fluoroscopy
453 for guidance of diagnostic and therapeutic procedures or [from]
454 positioning and utilizing a mini C-arm in conjunction with
455 fluoroscopic procedures prior to October 1, 2011, from continuing to
456 engage in such procedures, nor require the physician assistant to
457 complete the course or supervised clinical experience described in
458 subsection (a) of this section, provided such physician assistant shall
459 pass the examination prescribed by the commissioner on or before
460 [October 1, 2011] July 1, 2012. If a physician assistant does not pass the
461 required examination on or before [October 1, 2011] July 1, 2012, such
462 physician assistant shall not engage in the use of fluoroscopy for
463 guidance of diagnostic and therapeutic procedures or position and
464 utilize a mini C-arm in conjunction with fluoroscopic procedures until
465 such time as such physician assistant meets the requirements of
466 subsection (a) of this section.

467 Sec. 510. Section 19a-87e of the general statutes is repealed and the
468 following is substituted in lieu thereof (*Effective October 1, 2011*):

469 (a) The Commissioner of Public Health may (1) refuse to license

470 under section 19a-87b, as amended by this act, a person to own,
471 conduct, operate or maintain a family day care home, as defined in
472 section 19a-77, as amended by this act, [or to] (2) refuse to approve
473 under section 19a-87b, as amended by this act, a person to act as an
474 assistant or substitute staff member in a family day care home, as
475 defined in section 19a-77, as amended by this act, or (3) suspend or
476 revoke the license or approval or take any other action that may be set
477 forth in regulation that may be adopted pursuant to section 19a-79 if
478 the person who owns, conducts, maintains or operates the family day
479 care home, the person who acts as an assistant or substitute staff
480 member in a family day care home or a person employed in such
481 family day care home in a position connected with the provision of
482 care to a child receiving child day care services, has been convicted, in
483 this state or any other state of a felony, as defined in section 53a-25,
484 involving the use, attempted use or threatened use of physical force
485 against another person, or has a criminal record in this state or any
486 other state that the commissioner reasonably believes renders the
487 person unsuitable to own, conduct, operate or maintain or be
488 employed by a family day care home, or act as an assistant or
489 substitute staff member in a family day care home, or if such persons
490 or a person residing in the household has been convicted in this state
491 or any other state of cruelty to persons under section 53-20, injury or
492 risk of injury to or impairing morals of children under section 53-21,
493 abandonment of children under the age of six years under section 53-
494 23, or any felony where the victim of the felony is a child under
495 eighteen years of age, a violation of section 53a-70, 53a-70a, 53a-70b,
496 53a-71, 53a-72a, 53a-72b or 53a-73a, illegal manufacture, distribution,
497 sale, prescription, dispensing or administration under section 21a-277
498 or 21a-278, or illegal possession under section 21a-279, or if such
499 person, a person who acts as assistant or substitute staff member in a
500 family day care home or a person employed in such family day care
501 home in a position connected with the provision of care to a child
502 receiving child day care services, either fails to substantially comply
503 with the regulations adopted pursuant to section 19a-87b, as amended
504 by this act, or conducts, operates or maintains the home in a manner

505 which endangers the health, safety and welfare of the children
506 receiving child day care services. Any refusal of a license or approval
507 pursuant to this section shall be rendered in accordance with the
508 provisions of sections 46a-79 to 46a-81, inclusive. Any person whose
509 license or approval has been revoked pursuant to this section shall be
510 ineligible to apply for a license or approval for a period of one year
511 from the effective date of revocation.

512 (b) When the commissioner intends to suspend or revoke a license
513 or approval or take any other action against a license or approval set
514 forth in regulation adopted pursuant to section 19a-79, the
515 commissioner shall notify the licensee or approved staff member in
516 writing of the commissioner's intended action. The licensee or
517 approved staff member may, if aggrieved by such intended action,
518 make application for a hearing in writing over the licensee's or
519 approved staff member's signature to the commissioner. The licensee
520 or approved staff member shall state in the application in plain
521 language the reasons why the licensee or approved staff member
522 claims to be aggrieved. The application shall be delivered to the
523 commissioner within thirty days of the licensee's or approved staff
524 member's receipt of notification of the intended action. The
525 commissioner shall thereupon hold a hearing within sixty days from
526 receipt of such application and shall, at least ten days prior to the date
527 of such hearing, mail a notice, giving the time and place of the hearing,
528 to the licensee or approved staff member. The provisions of this
529 subsection shall not apply to the denial of an initial application for a
530 license or approval under section 19a-87b, as amended by this act,
531 provided the commissioner shall notify the applicant of any such
532 denial and the reasons for such denial by mailing written notice to the
533 applicant at the applicant's address shown on the license or approval
534 application.

535 (c) Any person who is licensed to conduct, operate or maintain a
536 family day care home or approved to act as an assistant or substitute
537 staff member in a family day care home shall notify the commissioner
538 of any conviction of the owner, conductor, operator or maintainer of

539 the family day care home or of any person residing in the household or
540 any person employed in such family day care home in a position
541 connected with the provision of care to a child receiving child day care
542 services, of a crime which affects the commissioner's discretion under
543 subsection (a) of this section, immediately upon obtaining knowledge
544 of such conviction. Failure to comply with the notification requirement
545 of this subsection may result in the suspension or revocation of the
546 license or approval or the taking of any other action against a license or
547 approval set forth in regulation adopted pursuant to section 19a-79
548 and shall subject the licensee or approved staff member to a civil
549 penalty of not more than one hundred dollars per day for each day
550 after the person obtained knowledge of the conviction.

551 (d) It shall be a class A misdemeanor for any person seeking
552 employment in a position connected with the provision of care to a
553 child receiving family day care home services to make a false written
554 statement regarding prior criminal convictions pursuant to a form
555 bearing notice to the effect that such false statements are punishable,
556 which statement such person does not believe to be true and is
557 intended to mislead the prospective employer.

558 (e) Any person having reasonable cause to believe that a family day
559 care home, as defined in section 19a-77, is operating without a current
560 and valid license or in violation of the regulations adopted under
561 section 19a-87b, as amended by this act, or in a manner which may
562 pose a potential danger to the health, welfare and safety of a child
563 receiving child day care services, may report such information to any
564 office of the Department of Public Health. The department shall
565 investigate any report or complaint received pursuant to this
566 subsection. The name of the person making the report or complaint
567 shall not be disclosed unless (1) such person consents to such
568 disclosure, (2) a judicial or administrative proceeding results from such
569 report or complaint, or (3) a license action pursuant to subsection (a) of
570 this section results from such report or complaint. All records obtained
571 by the department in connection with any such investigation shall not
572 be subject to the provisions of section 1-210, as amended by this act, for

573 a period of thirty days from the date of the petition or other event
574 initiating such investigation, or until such time as the investigation is
575 terminated pursuant to a withdrawal or other informal disposition or
576 until a hearing is convened pursuant to chapter 54, whichever is
577 earlier. A formal statement of charges issued by the department shall
578 be subject to the provisions of section 1-210, as amended by this act,
579 from the time that it is served or mailed to the respondent. Records
580 which are otherwise public records shall not be deemed confidential
581 merely because they have been obtained in connection with an
582 investigation under this section.

583 Sec. 511. Subsection (g) of section 20-222 of the general statutes is
584 repealed and the following is substituted in lieu thereof (*Effective*
585 *October 1, 2011*):

586 (g) Any person, firm, partnership or corporation engaged in the
587 funeral service business shall maintain at the address of record of the
588 funeral service business identified on the certificate of inspection:

589 (1) All records relating to contracts for funeral services, prepaid
590 funeral service contracts or escrow accounts for a period of not less
591 than six years after the death of the individual for whom funeral
592 services were provided;

593 (2) Copies of all death certificates, burial permits, authorizations for
594 cremation, documentation of receipt of cremated remains and written
595 agreements used in making arrangements for final disposition of dead
596 human bodies, including, but not limited to, copies of the final bill and
597 other written evidence of agreement or obligation furnished to
598 consumers, for a period of not less than six years after such final
599 disposition; and

600 (3) Copies of price lists, for a period of not less than six years from
601 the last date such lists were distributed to consumers.

602 Sec. 512. Section 20-222b of the general statutes is repealed and the
603 following is substituted in lieu thereof (*Effective October 1, 2011*):

604 (a) Each person, firm or corporation that carries on or engages in a
605 funeral service business, as defined in section 20-207, shall display, on
606 a sign located immediately inside of such funeral service business, in a
607 place proximate to the display of the license and certificate required by
608 this chapter and in a manner visible to the public, the following
609 ownership information:

610 (1) The name of every licensed funeral director, as defined in section
611 20-207, who holds an ownership interest of ten per cent or more in the
612 corporation, limited liability company, partnership, limited
613 partnership or other business entity that operates such funeral service
614 business; and

615 (2) The name of any corporation, limited liability company,
616 partnership, [or] limited partnership or other business entity that holds
617 an ownership interest of ten per cent or more in such funeral service
618 business.

619 (b) Each person, firm or corporation that carries on or engages in
620 such funeral service business shall include, on any contract for the sale
621 of funeral services or merchandise, the name, business address and
622 business telephone number of any corporation, limited liability
623 company, partnership, [or] limited partnership or other business entity
624 that holds an ownership interest of ten per cent or more in such funeral
625 service business.

626 Sec. 513. Section 20-222c of the general statutes is repealed and the
627 following is substituted in lieu thereof (*Effective October 1, 2011*):

628 Upon the transfer of more than a fifty per cent ownership share,
629 discontinuance or termination of a funeral service business, the person,
630 firm, partnership or corporation to whom the inspection certificate has
631 been issued shall:

632 (1) Notify each person who has purchased a prepaid funeral service
633 contract from such funeral service business of such transfer,
634 discontinuance or termination;

635 (2) Mail a letter to each person for whom the funeral service
636 business is storing cremated remains notifying such person of such
637 transfer, discontinuance or termination; and

638 (3) Provide the Department of Public Health with a notice of such
639 transfer, discontinuance or termination and a list of all unclaimed
640 cremated remains held by the funeral service business at the time of
641 such transfer, discontinuance or termination not later than ten days
642 after any such transfer, discontinuance or termination.

643 Sec. 514. (*Effective from passage*) (a) As used in this section:

644 (1) "Electronic technology" or "telepharmacy" means the process: (A)
645 By which each step involved in the preparation of IV admixtures is
646 verified through use of a bar code tracking system and documented by
647 means of digital photographs which are electronically recorded and
648 preserved; and (B) which is monitored and verified through video and
649 audio communication between a licensed supervising clinical
650 pharmacist and a pharmacy technician;

651 (2) "IV admixture" means an IV fluid to which one or more
652 additional drug products have been added;

653 (3) "Pharmacist" means an individual who is licensed to practice
654 pharmacy under the provisions of section 20-590, 20-591, 20-592 or
655 20-593 of the general statutes, and who is thereby recognized as a
656 health care provider by the state of Connecticut; and

657 (4) "Pharmacy technician" means an individual who is registered
658 with the department and qualified in accordance with section 20-598a
659 of the general statutes.

660 (b) The Commissioner of Consumer Protection, in consultation with
661 the Commissioner of Public Health, may establish a pilot program to
662 permit a hospital, licensed in accordance with the provisions of chapter
663 368v of the general statutes, which operates a hospital pharmacy to use
664 electronic technology or telepharmacy at the hospital's satellite or

665 remote locations for purposes of allowing a clinical pharmacist to
666 supervise pharmacy technicians in the preparation of IV admixtures.
667 Under the pilot program, notwithstanding the provisions of
668 chapter 400j of the general statutes or regulations adopted pursuant to
669 said chapter, a clinical pharmacist shall be permitted to supervise a
670 pharmacy technician through use of electronic technology. A
671 supervising clinical pharmacist shall monitor and verify the activities
672 of a pharmacy technician through audio and video communication. In
673 the event of a malfunction of the electronic technology, no IV
674 admixtures prepared by a pharmacy technician during the time period
675 of the malfunction may be distributed to patients, unless an
676 appropriately licensed individual is able to: (1) Personally review and
677 verify the accuracy of all processes utilized in the preparation of the IV
678 admixture; or (2) upon the restoration of the electronic technology,
679 utilize the mechanisms of the electronic technology which recorded the
680 actions of the pharmacy technician to confirm that all proper steps
681 were followed in the preparation of the IV admixture. Under the pilot
682 program, all orders for medication shall be verified by a pharmacist
683 prior to being delegated to a pharmacy technician for preparation of an
684 IV admixture. A hospital participating in the pilot program shall
685 ensure that appropriately licensed personnel administer medications at
686 the hospital's satellite or remote locations. All of the processes
687 involved in the operation of the pilot program shall be under the
688 purview of the hospital's director of pharmacy.

689 (c) A hospital selected to participate in the pilot program shall
690 undertake periodic quality assurance evaluations which shall
691 minimally include review of any error in medication administration
692 which occurs under the pilot program. A hospital shall make such
693 quality assurance evaluations available for review and inspection by
694 the Departments of Consumer Protection and Public Health.

695 (d) A pilot program established pursuant to this section may
696 commence operation on or after July 1, 2011, and shall terminate not
697 later than December 31, 2012, provided the Commissioner of
698 Consumer Protection may terminate the pilot program prior to

699 December 31, 2012, for good cause shown.

700 Sec. 515. Subsection (d) of section 4b-3 of the general statutes is
701 repealed and the following is substituted in lieu thereof (*Effective*
702 *October 1, 2011*):

703 (d) Notwithstanding any other statute or special act to the contrary,
704 the Commissioner of Public Works shall be the sole person authorized
705 to represent the state in its dealings with third parties for the
706 acquisition, construction, development or leasing of real estate for
707 housing the offices or equipment of all agencies of the state or for the
708 state-owned public buildings or realty hereinafter provided for in
709 sections 2-90, 4b-1 to 4b-5, inclusive, 4b-21, 4b-23, 4b-24, 4b-26, 4b-27,
710 4b-30 and 4b-32, subsection (c) of section 4b-66 and sections 4b-67 to
711 4b-69, inclusive, 4b-71, 4b-72, 10-95, 10a-72, 10a-89, 10a-90, 10a-114,
712 10a-130, 10a-144, 17b-655, 22-64, 22a-324, 26-3, 27-45, 32-1c, 32-39, 48-9,
713 51-27d and 51-27f, except that (1) the Joint Committee on Legislative
714 Management may represent the state in the planning and construction
715 of the Legislative Office Building and related facilities, in Hartford; (2)
716 the Chief Court Administrator may represent the state in providing for
717 space for the Court Support Services Division as part of a new or
718 existing contract for an alternative incarceration program pursuant to
719 section 54-103b or a program developed pursuant to section 46b-121i,
720 46b-121j, 46b-121k or 46b-121l; (3) the board of trustees of a constituent
721 unit of the state system of higher education may represent the state in
722 the leasing of real estate for housing the offices or equipment of such
723 constituent unit, provided no lease payments for such realty are made
724 with funds generated from the general revenues of the state; (4) the
725 Labor Commissioner may represent the state in the leasing of premises
726 required for employment security operations as provided in subsection
727 (c) of section 31-250; (5) the Commissioner of Developmental Services
728 may represent the state in the leasing of residential property as part of
729 the program developed pursuant to subsection (b) of section 17a-218,
730 provided such residential property does not exceed two thousand five
731 hundred square feet, for the community placement of persons eligible
732 to receive residential services from the department; (6) the

733 Commissioner of Mental Health and Addiction Services may represent
734 the state in the leasing of residential units as part of a program
735 developed pursuant to section 17a-455a, provided each such
736 residential unit does not exceed two thousand five hundred square
737 feet; and (7) the Connecticut Marketing Authority may represent the
738 state in the leasing of land or markets under the control of the
739 Connecticut Marketing Authority, and, except for the housing of
740 offices or equipment in connection with the initial acquisition of an
741 existing state mass transit system or the leasing of land by the
742 Connecticut Marketing Authority for a term of one year or more in
743 which cases the actions of the Department of Transportation and the
744 Connecticut Marketing Authority shall be subject to the review and
745 approval of the State Properties Review Board. The Commissioner of
746 Public Works shall have the power to establish and implement any
747 procedures necessary for the commissioner to assume the
748 commissioner's responsibilities as said sole bargaining agent for state
749 realty acquisitions and shall perform the duties necessary to carry out
750 such procedures. The Commissioner of Public Works may appoint,
751 within the commissioner's budget and subject to the provisions of
752 chapter 67, such personnel deemed necessary by the commissioner to
753 carry out the provisions hereof, including experts in real estate,
754 construction operations, financing, banking, contracting, architecture
755 and engineering. The Attorney General's office, at the request of the
756 commissioner, shall assist the commissioner in contract negotiations
757 regarding the purchase, lease or construction of real estate.

758 Sec. 516. Subsection (h) of section 19a-533 of the general statutes is
759 repealed and the following is substituted in lieu thereof (*Effective*
760 *October 1, 2011*):

761 (h) Notwithstanding the provisions of this section, a nursing home
762 may, without regard to the order of its waiting list, admit an applicant
763 who (1) seeks to transfer from a nursing home that is closing, or (2)
764 seeks to transfer from a nursing home in which the applicant was
765 placed following the closure of the nursing home where such applicant
766 previously resided or, in the case of a nursing home placed in

767 receivership, the anticipated closure of the nursing home where such
768 applicant previously resided, provided (A) the transfer occurs not later
769 than sixty days following the date that such applicant was transferred
770 from the nursing home where he or she previously resided, and (B) the
771 applicant submitted an application to the nursing home to which he or
772 she seeks admission at the time of the applicant's transfer from the
773 nursing home where he or she previously resided.

774 Sec. 517. Section 20-206aa of the general statutes is repealed and the
775 following is substituted in lieu thereof (*Effective October 1, 2011*):

776 As used in this section and sections 20-206bb, as amended by this
777 act, and 20-206cc:

778 (1) "Commissioner" means the Commissioner of Public Health.

779 (2) "Department" means the Department of Public Health.

780 (3) ["Acupuncture" means the treating, by means of mechanical,
781 thermal or electrical stimulation effected by the insertion of needles or
782 by the application of heat, pressure or electrical stimulation at a point
783 or combination of points on the surface of the body predetermined on
784 the basis of the theory of physiological interrelationship of body
785 organs with an associated point or combination of points for diseases,
786 disorders and dysfunctions of the body for the purpose of achieving a
787 therapeutic or prophylactic effect but shall not include the practice of
788 physical therapy.] "The practice of acupuncture" means the system of
789 restoring and maintaining health by the classical and modern Oriental
790 medicine principles and methods of assessment, treatment and
791 prevention of diseases, disorders and dysfunctions of the body, injury,
792 pain and other conditions. The practice of acupuncture includes:

793 (A) Assessment of body function, development of a comprehensive
794 treatment plan and evaluation of treatment outcomes according to
795 acupuncture and Oriental medicine theory;

796 (B) Modulation and restoration of normal function in and between

797 the body's energetic and organ systems and biochemical, metabolic
798 and circulation functions using stimulation of selected points by
799 inserting needles, including, trigger point, subcutaneous and dry
800 needling, and other methods consistent with accepted standards
801 within the acupuncture and Oriental medicine profession;

802 (C) Promotion and maintenance of normal function in the body's
803 energetic and organ systems and biochemical, metabolic and
804 circulation functions by recommendation of Oriental dietary
805 principles, including, use of herbal and other supplements, exercise
806 and other self-treatment techniques according to Oriental medicine
807 theory; and

808 (D) Other practices that are consistent with the recognized
809 standards of the acupuncture and Oriental medicine profession and
810 accepted by the National Certification Commission for Acupuncture
811 and Oriental Medicine.

812 (4) "Recognized regional accrediting body" means one of the
813 following regional accrediting bodies: New England Association of
814 Schools and Colleges; Middle States Association of Colleges and
815 Schools; North Central Association of Colleges and Schools; Northwest
816 Association of Schools and Colleges; Southern Association of Colleges
817 and Schools; and Western Association of Schools and Colleges.

818 Sec. 518. Section 20-206bb of the general statutes is repealed and the
819 following is substituted in lieu thereof (*Effective October 1, 2011*):

820 (a) No person shall [perform] engage in the practice of acupuncture
821 without a license as an acupuncturist issued pursuant to this section.

822 (b) Each person seeking licensure as an acupuncturist shall make
823 application on forms prescribed by the department, pay an application
824 fee of two hundred dollars and present to the department satisfactory
825 evidence that the applicant (1) has completed sixty semester hours, or
826 its equivalent, of postsecondary study in an institution of
827 postsecondary education that, if in the United States or its territories,

828 was accredited by a recognized regional accrediting body or, if outside
829 the United States or its territories, was legally chartered to grant
830 postsecondary degrees in the country in which located, (2) has
831 successfully completed a course of study in acupuncture in a program
832 that, at the time of graduation, was in candidate status with or
833 accredited by an accrediting agency recognized by the United States
834 Department of Education and included a minimum of one thousand
835 three hundred fifty hours of didactic and clinical training, five
836 hundred of which were clinical, (3) has passed an examination
837 prescribed by the department, and (4) has successfully completed a
838 course in clean needle technique prescribed by the department. Any
839 person successfully completing the education, examination or training
840 requirements of this section in a language other than English shall be
841 deemed to have satisfied the requirement completed in that language.

842 (c) An applicant for licensure as an acupuncturist by endorsement
843 shall present evidence satisfactory to the commissioner of licensure or
844 certification as an acupuncturist, or as a person entitled to perform
845 similar services under a different designation, in another state or
846 jurisdiction whose requirements for practicing in such capacity are
847 equivalent to or higher than those of this state and that there are no
848 disciplinary actions or unresolved complaints pending. Any person
849 completing the requirements of this section in a language other than
850 English shall be deemed to have satisfied the requirements of this
851 section.

852 (d) Notwithstanding the provisions of subsection (b) of this section,
853 the department shall, prior to September 1, 2005, issue a license to any
854 applicant who presents to the department satisfactory evidence that
855 the applicant has (1) earned, or successfully completed requirements
856 for, a master's degree in acupuncture from a program that includes a
857 minimum of one thousand three hundred fifty hours of didactic and
858 clinical training, five hundred of which are clinical, from an institution
859 of higher education accredited by the Department of Higher Education
860 at the time of the applicant's graduation, (2) passed all portions of the
861 National Certification Commission for Acupuncture and Oriental

862 Medicine acupuncture examination, including the acupuncture portion
863 of the comprehensive written examination in acupuncture, the clean
864 needle technique portion of the comprehensive written examination in
865 acupuncture and the practical examination of point location skills, and
866 (3) successfully completed a course in clean needle technique offered
867 by the Council of Colleges of Acupuncture and Oriental Medicine.

868 (e) Licenses shall be renewed once every two years in accordance
869 with the provisions of subsection (e) of section 19a-88. The fee for
870 renewal shall be two hundred fifty dollars.

871 (f) No license shall be issued under this section to any applicant
872 against whom professional disciplinary action is pending or who is the
873 subject of an unresolved complaint in this or any other state or
874 territory of the United States.

875 (g) Nothing in section 19a-89c, 20-206aa, as amended by this act,
876 20-206cc or this section shall be construed to prevent licensed
877 practitioners of the healing arts, as defined in sections 20-1 and 20-196,
878 physical therapists or dentists from providing care or performing
879 services consistent with accepted standards within their respective
880 professions.

881 (h) Notwithstanding the provisions of subsection (a) of this section,
882 any person certified by an organization approved by the
883 Commissioner of Public Health may practice auricular acupuncture for
884 the treatment of alcohol and drug abuse, provided the treatment is
885 performed under the supervision of a physician licensed under chapter
886 370 and is performed in either (1) a private free-standing facility
887 licensed by the Department of Public Health for the care or treatment
888 of substance abusive or dependent persons, or (2) a setting operated by
889 the Department of Mental Health and Addiction Services. The
890 Commissioner of Public Health shall adopt regulations, in accordance
891 with the provisions of chapter 54, to ensure the safe provision of
892 auricular acupuncture within private free-standing facilities licensed
893 by the Department of Public Health for the care or treatment of

894 substance abusive or dependent persons.

895 (i) Notwithstanding the provisions of subsection (a) of this section,
896 no license to [practice] engage in the practice of acupuncture is
897 required of: (1) Students enrolled in a college or program of
898 acupuncture if (A) the college or program is recognized by the
899 Accreditation Commission for Acupuncture and Oriental Medicine or
900 licensed or accredited by the Board of Governors of Higher Education,
901 and (B) the practice that would otherwise require a license is pursuant
902 to a course of instruction or assignments from a licensed instructor and
903 under the supervision of the instructor; or (2) [licensed] faculty
904 members providing the didactic and clinical training necessary to meet
905 the accreditation standards of the Accreditation Commission for
906 Acupuncture and Oriental Medicine at a college or program
907 recognized by the commission or licensed or accredited by the Board
908 of Governors of Higher Education. For purposes of this subsection,
909 ["licensed faculty member" and] "licensed instructor" means a faculty
910 member or instructor licensed under this section or otherwise
911 authorized to [practice] engage in the practice of acupuncture in this
912 state.

913 (j) No person shall use the title "acupuncturist", or use in connection
914 with his or her name, any letters, words or insignia indicating or
915 implying that such person is a licensed acupuncturist or advertise
916 services as an acupuncturist, unless such person holds a license as an
917 acupuncturist issued pursuant to this section. No person shall
918 represent himself or herself as being certified to practice auricular
919 acupuncture for the treatment of alcohol and drug abuse, or use in
920 connection with his or her name the term "acupuncture detoxification
921 specialist", or the letters "A.D.S." or any letters, words or insignia
922 indicating or implying that such person is certified to practice
923 auricular acupuncture for the treatment of alcohol and drug abuse
924 unless such person is certified in accordance with subsection (h) of this
925 section. Nothing in this subsection shall be construed to prevent a
926 person from providing care, or performing or advertising services
927 within the scope of such person's license or as otherwise authorized in

928 this section.

929 Sec. 519. (*Effective from passage*) The Nonprofit Liaison to the
930 Governor, in consultation with the Commissioners of Public Health,
931 Developmental Services, Social Services, Children and Families and
932 Mental Health and Addiction Services, or said commissioners'
933 designees, and two representatives of community-based providers
934 selected by the Nonprofit Liaison to the Governor, one of whom shall
935 be recommended by the Connecticut Association of Nonprofits and
936 one of whom shall be recommended by the Connecticut Community
937 Providers Association, shall study the feasibility of (1) establishing a
938 uniform state licensing process for community-based providers, and
939 (2) implementing deemed status. Such study shall minimally examine
940 whether a community-based provider may be allowed to obtain a
941 single state license that permits the provider to offer services for the
942 benefit of multiple state agencies without requiring such provider to
943 obtain separate licensure from each state agency for which services are
944 offered. On or before January 1, 2012, the Nonprofit Liaison to the
945 Governor shall report, in accordance with the provisions of section 11-
946 4a of the general statutes, to the joint standing committees of the
947 General Assembly having cognizance of matters relating to public
948 health and human services on the feasibility of (A) establishing a
949 uniform licensing process for community-based providers, and (B)
950 implementing deemed status. The Nonprofit Liaison to the Governor
951 may include any recommendations for legislative action that the
952 liaison believes are necessary for the (i) establishment of a uniform
953 licensing process for community-based providers, and (ii)
954 implementation of deemed status.

955 Sec. 520. (NEW) (*Effective July 1, 2011*) (a) A residential care home
956 that is colocated with a chronic and convalescent nursing home or a
957 rest home with nursing supervision may request permission of the
958 Department of Public Health to meet the requirements of section 19-13-
959 D6(j) of the Public Health Code concerning attendants in residence
960 from 10:00 p.m. to 7:00 a.m. through the use of shared personnel.

961 (b) A residential care home shall maintain temperatures in resident
962 rooms and all other areas used by residents at the minimum
963 temperature of seventy-one degrees Fahrenheit.

964 (c) A residential care home shall ensure that the maximum time
965 span between a resident's evening meal and breakfast does not exceed
966 fourteen hours unless a substantial bedtime nourishment is offered by
967 the residential care home.

968 (d) On and after July 1, 2011, the Department of Public Health shall
969 no longer (1) require that a person seeking a license to operate a
970 residential care home supply to the department a certificate of physical
971 and mental health, signed by a physician, at the time of an initial or
972 subsequent application for licensure; and (2) approve the time
973 scheduling of regular meals and snacks in residential care homes.

974 (e) In accordance with section 19a-36 of the general statutes, the
975 Commissioner of Public Health shall amend the Public Health Code in
976 conformity with the provisions of this section.

977 Sec. 521. Section 19a-80f of the general statutes is repealed and the
978 following is substituted in lieu thereof (*Effective October 1, 2011*):

979 (a) As used in this section, "facility" means a child day care center, a
980 group day care home and a family day care home, as defined in section
981 19a-77, and a youth camp, as defined in section 19a-420.

982 (b) Notwithstanding any provision of the general statutes, the
983 Commissioner of Children and Families, or the commissioner's
984 designee, shall provide to the Department of Public Health all records
985 concerning reports and investigations of [suspected] child abuse or
986 neglect that have been reported to, or are being investigated by, the
987 Department of Children and Families pursuant to section 17a-101g,
988 including records of any administrative hearing held pursuant to
989 section 17a-101k: (1) Occurring at any facility, and (2) by any staff
990 member or licensee of any facility and by any household member of
991 any family day care home, as defined in section 19a-77, irrespective of

992 where the abuse or neglect occurred.

993 (c) The Department of Children and Families and the Department of
994 Public Health shall jointly investigate reports of abuse or neglect
995 occurring at any facility. All information, records and reports
996 concerning such investigation shall be shared between agencies as part
997 of the investigative process.

998 (d) The Commissioner of Public Health shall compile a listing of
999 allegations of violations that have been substantiated by the
1000 Department of Public Health concerning a facility during the prior
1001 three-year period. The Commissioner of Public Health shall disclose
1002 information contained in the listing to any person who requests it,
1003 provided the information may be disclosed pursuant to sections 17a-
1004 101g and 17a-101k and does not identify children or family members
1005 of those children.

1006 (e) Notwithstanding any provision of the general statutes, when the
1007 Commissioner of Children and Families has made a finding
1008 substantiating abuse or neglect: (1) That occurred at a facility, or (2) by
1009 any staff member or licensee of any facility, or by any household
1010 member of any family day care home and such finding is included on
1011 the state child abuse or neglect registry, maintained by the Department
1012 of Children and Families pursuant to section 17a-101k, such finding
1013 may be included in the listing compiled by the Department of Public
1014 Health pursuant to subsection (d) of this section and may be disclosed
1015 to the public by the Department of Public Health.

1016 (f) Notwithstanding any provision of the general statutes, when the
1017 Commissioner of Children and Families, pursuant to section 17a-101j,
1018 has notified the Department of Public Health of [suspected] a
1019 recommended finding of child abuse or neglect at a facility and if such
1020 child abuse or neglect resulted in or involves (1) the death of a child;
1021 (2) the risk of serious physical injury or emotional harm of a child; (3)
1022 the serious physical harm of a child; (4) the arrest of a person due to
1023 abuse or neglect of a child; (5) a petition filed by the Commissioner of

1024 Children and Families pursuant to section 17a-112 or 46b-129; or (6)
1025 sexual abuse of a child, the Commissioner of Public Health may
1026 include [a] such finding of child abuse or neglect in the listing under
1027 subsection (d) of this section and may disclose such finding to the
1028 public. [If the] The Commissioner of Children and Families, or the
1029 commissioner's designee, [notifies] shall immediately notify the
1030 Commissioner of Public Health [that] when such child abuse or neglect
1031 [was] is not substantiated after an investigation [or] has been
1032 completed pursuant to subsection (b) of section 17a-101g or a
1033 recommended finding of child abuse or neglect is reversed after a
1034 hearing or appeal [, the] conducted in accordance with the provisions
1035 of section 17a-101k. The Commissioner of Public Health shall
1036 immediately remove such information from the listing and shall not
1037 further disclose any such information to the public.

1038 (g) Notwithstanding any provision of the general statutes, all
1039 records provided by the Commissioner of Children and Families, or
1040 the commissioner's designee, to the Department of Public Health
1041 regarding child abuse or neglect occurring at any facility, may be
1042 utilized in an administrative proceeding or court proceeding relative to
1043 facility licensing. In any such proceeding, such records shall be
1044 confidential, except as provided by the provisions of section 4-177c,
1045 and such records shall not be subject to disclosure pursuant to section
1046 1-210.

1047 Sec. 522. Section 16a-27 of the general statutes is repealed and the
1048 following is substituted in lieu thereof (*Effective from passage*):

1049 (a) The secretary, after consultation with all appropriate state,
1050 regional and local agencies and other appropriate persons, shall, prior
1051 to March 1, 2012, complete a revision of the existing plan and enlarge it
1052 to include, but not be limited to, policies relating to transportation,
1053 energy and air. Any revision made after May 15, 1991, shall identify
1054 the major transportation proposals, including proposals for mass
1055 transit, contained in the master transportation plan prepared pursuant
1056 to section 13b-15. Any revision made after July 1, 1995, shall take into

1057 consideration the conservation and development of greenways that
1058 have been designated by municipalities and shall recommend that
1059 state agencies coordinate their efforts to support the development of a
1060 state-wide greenways system. The Commissioner of Environmental
1061 Protection shall identify state-owned land for inclusion in the plan as
1062 potential components of a state greenways system.

1063 (b) Any revision made after August 20, 2003, shall take into account
1064 (1) economic and community development needs and patterns of
1065 commerce, and (2) linkages of affordable housing objectives and land
1066 use objectives with transportation systems.

1067 (c) Any revision made after March 1, 2006, shall (1) take into
1068 consideration risks associated with natural hazards, including, but not
1069 limited to, flooding, high winds and wildfires; (2) identify the potential
1070 impacts of natural hazards on infrastructure and property; and (3)
1071 make recommendations for the siting of future infrastructure and
1072 property development to minimize the use of areas prone to natural
1073 hazards, including, but not limited to, flooding, high winds and
1074 wildfires.

1075 (d) Any revision made after July 1, 2005, shall describe the progress
1076 towards achievement of the goals and objectives established in the
1077 previously adopted state plan of conservation and development and
1078 shall identify (1) areas where it is prudent and feasible (A) to have
1079 compact, transit accessible, pedestrian-oriented mixed-use
1080 development patterns and land reuse, and (B) to promote such
1081 development patterns and land reuse, (2) priority funding areas
1082 designated under section 16a-35c, and (3) corridor management areas
1083 on either side of a limited access highway or a rail line. In designating
1084 corridor management areas, the secretary shall make
1085 recommendations that (A) promote land use and transportation
1086 options to reduce the growth of traffic congestion; (B) connect
1087 infrastructure and other development decisions; (C) promote
1088 development that minimizes the cost of new infrastructure facilities
1089 and maximizes the use of existing infrastructure facilities; and (D)

1090 increase intermunicipal and regional cooperation.

1091 (e) Any revision made after October 1, 2008, shall (1) for each policy
1092 recommended (A) assign a priority; (B) estimate funding for
1093 implementation and identify potential funding sources; (C) identify
1094 each entity responsible for implementation; and (D) establish a
1095 schedule for implementation; and (2) for each growth management
1096 principle, determine three benchmarks to measure progress in
1097 implementation of the principles, one of which shall be a financial
1098 benchmark.

1099 (f) Any revision made after October 1, 2009, shall take into
1100 consideration the protection and preservation of Connecticut Heritage
1101 Areas.

1102 (g) Any revision made after December 1, 2011, shall take into
1103 consideration (1) the state water supply and resource policies
1104 established in sections 22a-380 and 25-33c, and (2) the list prepared by
1105 the Commissioner of Public Health pursuant to section 523 of this act.

1106 ~~[(g)]~~ (h) Thereafter on or before March first in each revision year the
1107 secretary shall complete a revision of the plan of conservation and
1108 development.

1109 Sec. 523. (NEW) (*Effective from passage*) Not later than October 31,
1110 2011, the Commissioner of Public Health, in consultation with the
1111 Water Planning Council established pursuant to section 25-33o of the
1112 general statutes, shall prepare a list designating sources or potential
1113 sources of water that require protection so that the highest quality
1114 sources of water are available to provide water for human
1115 consumption. In preparing such list, the commissioner shall take into
1116 consideration the plans produced pursuant to sections 22a-352, 25-32d
1117 and 25-33h of the general statutes and such other plans or information
1118 that the commissioner deems relevant. The commissioner shall update
1119 the list annually or more frequently as the commissioner deems
1120 necessary. Nothing in this section shall be construed to limit the
1121 commissioner's authority to approve a source of water supply that is

1122 not on the list.

1123 Sec. 524. Section 21a-137 of the general statutes is repealed and the
1124 following is substituted in lieu thereof (*Effective October 1, 2011*):

1125 A fee of one hundred fifty dollars shall accompany each application
1126 for the license provided for in section 21a-136. Each such license shall
1127 expire annually. Such license shall be in such form as the
1128 [commissioner] Commissioner of Consumer Protection determines and
1129 shall be kept exposed to view in a conspicuous place upon the
1130 premises where such business is conducted or carried on. All fees
1131 received for such licenses shall be paid by the commissioner to the
1132 State Treasurer. No person, firm, [or] corporation or distributor shall
1133 sell, [or] offer for sale or distribute within the state any beverages
1134 manufactured or bottled beyond the boundaries of the state unless
1135 such person, firm, [or] corporation or distributor has made application
1136 for and secured a license from said commissioner upon the payment of
1137 one hundred fifty dollars, and no such license shall be issued by said
1138 commissioner until such establishment has been inspected by him or
1139 his agent or until such establishment has furnished said commissioner
1140 a certificate from the commission having the enforcement of the
1141 beverage law in the state where such establishment is located that such
1142 establishment complies in every respect with the requirements of the
1143 Connecticut beverage law. The provisions of this section shall not
1144 apply to out-of-state manufacturers, bottlers or distributors of malt
1145 and cereal drinks, grape juice, lime juice, fruit-flavored syrups,
1146 powders or mixtures, concentrated fruit juices or fruit and vegetable
1147 juices.

1148 Sec. 525. Section 21a-138 of the general statutes is repealed and the
1149 following is substituted in lieu thereof (*Effective October 1, 2011*):

1150 The [commissioner] Commissioner of Consumer Protection, after
1151 hearing, of the time and place of which reasonable notice shall have
1152 been given, may suspend or revoke any such license for any of the
1153 following causes: The use of any polluted water; for bottled water

1154 obtained from a source located in the state, the failure to [use a source
1155 approved by] obtain approval for the use of such source from the
1156 Department of Public Health; for bottled water obtained from a source
1157 located out-of-state, the failure to obtain approval for the use of such
1158 source from the government entities having jurisdiction to regulate the
1159 use of such source; failure to conduct such business in a sanitary place
1160 and under sanitary conditions; the use of any ingredient impure or
1161 injurious to health; a conviction for a violation of the federal law in
1162 relation to intoxicating liquors or any state liquor control act; failure to
1163 comply with the provisions of this part, as amended by this act, part III
1164 of this chapter, as amended by this act, and chapters 416, 417 and 430,
1165 relating to the manufacture of pure foods, so far as the same may
1166 apply to the provisions of this part, or failure to comply with any order
1167 of the commissioner under the provisions of this part. No person,
1168 during any period when his license is suspended or revoked, shall
1169 manufacture any beverage or sell or offer for sale any beverage
1170 previously manufactured by him. No person shall sell any beverage
1171 from open containers.

1172 Sec. 526. Section 21a-150 of the general statutes is repealed and the
1173 following is substituted in lieu thereof (*Effective October 1, 2011*):

1174 For the purposes of this section and sections 21a-150a to 21a-150j,
1175 inclusive, as amended by this act:

1176 (1) "Approved laboratory" means a laboratory registered by the
1177 Department of Public Health pursuant to section 19a-29a or certified
1178 by the United States Environmental Protection Agency to analyze
1179 drinking water;

1180 ~~[(1)]~~ (2) "Approved source" means the source of any bottled water,
1181 including, but not limited to, a spring, artesian well, drilled well or
1182 public water supply, [which] that, for a source located in the state, has
1183 been inspected and approved by the Department of Public Health, or
1184 for a source located out-of-state, has been inspected and approved by
1185 the government entities having jurisdiction to regulate the use of such

1186 out-of-state source;

1187 [(2)] (3) "Artesian well water" means bottled natural water obtained
1188 from a well tapping an aquifer in which the level of the water is above
1189 the bottom of the confining bed of the aquifer and in which the
1190 hydraulic pressure of the water in the aquifer is greater than the
1191 atmospheric pressure;

1192 [(3)] (4) "Bottled water", or any term of similar import, means water
1193 obtained from an approved source [which] that is packaged for sale or
1194 distribution. "Bottled water" shall not include any soda or seltzer
1195 [which] that is packaged for sale or distribution;

1196 [(4)] (5) "Bottler" means any person, firm or corporation engaging in
1197 the business of bottling or distributing water for sale or distribution;

1198 [(5)] (6) "Distilled water" means purified water [which] that has been
1199 produced by a process of distillation;

1200 [(6)] (7) "Drinking water" means bottled water [which] that has been
1201 distilled, fluoridated or purified or [which] that has been disinfected
1202 by a process of ozonation and filtration or any substantially similar
1203 disinfection process;

1204 [(7)] (8) "Fluoridated water" means bottled water [which] that
1205 contains fluoride ions in an amount not less than eight-tenths of one
1206 milligram per liter and not more than one and two-tenths milligrams
1207 per liter or such alternative concentration limit as the Commissioner of
1208 Consumer Protection, with the advice and assistance of the
1209 Commissioner of Public Health, may determine by regulations
1210 adopted in accordance with the provisions of chapter 54 and [which]
1211 that otherwise complies with the provisions of [Subdivision 2 of
1212 Subsection (d) of 21 Code of Federal Regulations 103.35] Subsections
1213 (b), (c) and (d) of 21 CFR 165.110;

1214 [(8)] (9) "Mineral water" means natural water [which] that contains
1215 not less than five hundred parts per million total dissolved solids;

1216 [(9)] (10) "Natural water" means bottled spring water, artesian well
1217 water or well water, [which] that has been obtained from any
1218 approved source other than a public water supply and [which] that has
1219 not been modified by blending with water from any other source or by
1220 the addition or deletion of any mineral other than any addition or
1221 deletion [which] that may occur as a result of ozonation, filtration or
1222 any other substantially similar disinfection process;

1223 [(10)] (11) "Principal display panel" means the portion of a label on
1224 any container or package [which] that is most likely to be displayed,
1225 presented or examined under normal and customary conditions of
1226 display and purchase of bottled water;

1227 [(11)] (12) "Public water supply" means any individual, partnership,
1228 association, corporation, municipality or other entity, or the lessee
1229 thereof, [which] that owns, maintains, operates, manages, controls or
1230 employs any pond, lake, reservoir, well, stream or distributing plant or
1231 system for the purpose of supplying water by service connections or
1232 pipe distribution systems to two or more hotels, motels,
1233 boardinghouses, apartments, stores, office buildings, institutions,
1234 mechanical or manufacturing establishments or other places of
1235 business or industry to which water is supplied by a water company or
1236 to twenty-five or more persons on a regular basis;

1237 [(12)] (13) "Purified water" means bottled water [which] that is
1238 produced by distillation, deionization, reverse osmosis or any other
1239 suitable process and [which] that meets standards established for
1240 purified water in the twentieth edition of the United States
1241 Pharmacopoeia;

1242 [(13)] (14) "Spring water" means natural water obtained from an
1243 underground formation from which water flows naturally to the
1244 surface of the earth; and

1245 [(14)] (15) "Well water" means natural water obtained from a hole
1246 bored, drilled or otherwise constructed in the ground, [which] that
1247 taps the water of an aquifer.

1248 Sec. 527. Section 21a-150a of the general statutes is repealed and the
1249 following is substituted in lieu thereof (*Effective October 1, 2011*):

1250 (a) [Water bottled for sale or distribution shall be obtained from a
1251 source approved by the Department of Public Health] (1) Bottled water
1252 sold or distributed in the state shall be obtained from an approved
1253 source.

1254 (2) A bottler selling or distributing bottled water obtained from a
1255 source located in the state shall obtain approval for the use of such
1256 source from the Department of Public Health. The Department of
1257 Public Health shall inspect each bottled water source located in the
1258 state and, if such source meets quality and safety requirements, issue
1259 an approval for such source. An approval issued by the Department of
1260 Public Health pursuant to this subsection shall expire three years from
1261 the date of issue.

1262 (3) A bottler selling or distributing bottled water obtained from a
1263 source located out-of-state shall submit to the Commissioner of
1264 Consumer Protection a copy of a current license or approval for the
1265 use of such source from each government entity having jurisdiction to
1266 regulate the use of the source (A) when applying or reapplying for a
1267 license issued pursuant to section 21a-136, (B) upon substantial
1268 modification of the source or source treatment, or (C) upon the
1269 addition of a new source.

1270 (b) No bottled water shall be sold or distributed which does not
1271 comply with [regulations adopted by the Department of Public Health
1272 pursuant to section 19a-36 establishing maximum contaminant levels,
1273 action levels and monitoring procedures for public drinking water,
1274 except that mineral water may be sold or distributed which contains
1275 total dissolved solids in excess of the standard set forth in any such
1276 regulations] the quality standards set forth in 21 CFR 165.110 and 21
1277 USC 342.

1278 (c) A bottler shall be subject to the provisions of sections 21a-135 to
1279 21a-145, inclusive, as amended by this act.

1280 Sec. 528. Section 21a-150b of the general statutes is repealed and the
1281 following is substituted in lieu thereof (*Effective October 1, 2011*):

1282 (a) Qualified employees of a bottler shall collect samples of water
1283 from each approved source used by such bottler not less than once
1284 annually to test for contaminants for which [maximum] allowable
1285 levels have been established in accordance with [regulations adopted
1286 pursuant to section 19a-36, concerning public drinking water,] 21 CFR
1287 165.110 and regulations adopted pursuant to sections 21a-150 to 21a-
1288 150j, inclusive, as amended by this act, and not less than once every
1289 three years to test for contaminants for which monitoring is required
1290 pursuant to sections 21a-150 to 21a-150j, inclusive, as amended by this
1291 act, but for which no [maximum] allowable level has been established.
1292 Qualified employees of [a] an approved laboratory [approved by the
1293 Department of Public Health] shall analyze such samples to determine
1294 whether such source complies with the provisions of sections 21a-150
1295 to 21a-150j, inclusive, as amended by this act, any regulation adopted
1296 pursuant to said sections and any [maximum] allowable contaminant
1297 level set forth in [regulations adopted pursuant to said section 19a-36,
1298 concerning public drinking water] 21 CFR 165.110. Microbiological
1299 analysis shall be conducted not less than once each calendar quarter if
1300 the source of such water is other than a public water supply and shall
1301 be in addition to any sampling and analysis conducted by any
1302 government agency or laboratory.

1303 (b) Qualified employees of a bottler shall collect samples of water
1304 from any source used by such bottler when such bottler knows or has
1305 reason to believe that water obtained from such source contains an
1306 unregulated contaminant in an amount which may adversely affect the
1307 health or welfare of the public. Qualified employees of [a] an approved
1308 laboratory [approved by the Department of Public Health] shall
1309 analyze such samples periodically to determine whether water
1310 obtained from any such source is safe for public consumption or use.

1311 Sec. 529. Section 21a-150c of the general statutes is repealed and the
1312 following is substituted in lieu thereof (*Effective October 1, 2011*):

1313 (a) Each bottler shall:

1314 (1) Collect, on a weekly basis, a representative sample from a batch
1315 or segment of a continuous production of each type of water sold by
1316 such bottler in this state, and have such sample analyzed by [a] an
1317 approved laboratory [approved by the Department of Public Health]
1318 to determine whether such sample complies with the microbiological
1319 standards set forth in [regulations adopted by the Department of
1320 Public Health pursuant to section 19a-36 concerning public drinking
1321 water] 21 CFR 165.110; and

1322 (2) Collect, not less than once annually, a representative sample
1323 from a batch or segment of a continuous production of each type of
1324 bottled water sold by such bottler in this state, and have such sample
1325 analyzed by [a] an approved laboratory [approved by the Department
1326 of Public Health] to determine whether such sample complies with the
1327 chemical, inorganic, organic, physical and radiological standards set
1328 forth in regulations adopted by the Department of Public Health
1329 pursuant to [said] section 19a-36 concerning public drinking water.
1330 Each bottler that uses water obtained from an out-of-state source may
1331 meet the requirements of this subdivision by demonstrating
1332 compliance with substantially similar standards established by the
1333 government entity having jurisdiction to regulate the use of such
1334 source.

1335 (b) Each sample collected in accordance with the provisions of
1336 subsection (a) of this section shall be obtained from the bottled
1337 product.

1338 Sec. 530. Section 21a-150d of the general statutes is repealed and the
1339 following is substituted in lieu thereof (*Effective October 1, 2011*):

1340 (a) A laboratory which analyzes any water sample in accordance
1341 with any provision of sections 21a-150 to 21a-150j, inclusive, as
1342 amended by this act, shall report the results of such analysis to the
1343 bottler of such water.

1344 (b) Such results shall be available for inspection by the Department
1345 of Consumer Protection, [and the Department of Public Health, upon
1346 request.]

1347 (c) A bottler shall report any result which indicates that a water
1348 sample contains contaminants in an amount exceeding any applicable
1349 standard [set forth in any regulation adopted pursuant to sections 21a-
1350 150 to 21a-150j, inclusive, or in any regulation adopted pursuant to
1351 section 19a-36 concerning public drinking water,] to the Department of
1352 Consumer Protection [and the Department of Public Health, within]
1353 not later than twenty-four hours [of] after learning of such result.

1354 (d) All records of any sampling or analysis conducted in accordance
1355 with the provisions of sections 21a-150 to 21a-150j, inclusive, as
1356 amended by this act, shall be maintained on the premises of the bottler
1357 for not less than five years.

1358 Sec. 531. Section 21a-150f of the general statutes is repealed and the
1359 following is substituted in lieu thereof (*Effective October 1, 2011*):

1360 (a) A bottler shall process and package any water bottled for sale, in
1361 accordance with [the provisions of 21 Code of Federal Regulations
1362 Parts] 21 CFR 110, [and] 21 CFR 129 and any regulation adopted in
1363 accordance with the provisions of sections 21a-150 to 21a-150j,
1364 inclusive, as amended by this act.

1365 (b) No bottler shall process or bottle water using any line or
1366 equipment through which anything other than water from an
1367 approved [by the state] source is passed, except that a bottler who
1368 bottles or processes water by using any such line or equipment, as of
1369 October 1, 1986, may continue to bottle water in such manner provided
1370 such bottled water complies with [regulations adopted by the
1371 Department of Public Health pursuant to section 19a-36 concerning
1372 public drinking water] the bottled water quality standards set forth in
1373 21 CFR 165.110 and 21 USC 342 and provided, in the event such bottler
1374 renovates [his] a bottling production process or expands [his]
1375 operations, such bottler shall establish a dedicated line for the

1376 processing of bottled water only.

1377 Sec. 532. Subsection (l) of section 21a-150h of the general statutes is
1378 repealed and the following is substituted in lieu thereof (*Effective*
1379 *October 1, 2011*):

1380 (l) Except as provided in subsection (k) of this section, a label which
1381 identifies any bottled water which is not spring water, as defined in
1382 [subdivision (10) of] section 21a-150, as amended by this act, shall not
1383 bear the words "spring", "spring fresh", "spring brand", "spring type" or
1384 any term of similar import.

1385 Sec. 533. Section 16-262m of the general statutes is repealed and the
1386 following is substituted in lieu thereof (*Effective October 1, 2011*):

1387 (a) As used in this section and section 8-25a, "water company"
1388 means a corporation, company, association, joint stock association,
1389 partnership, municipality, state agency, other entity or person, or
1390 lessee thereof, owning, leasing, maintaining, operating, managing or
1391 controlling any pond, lake, reservoir, stream, well or distributing plant
1392 or system employed for the purpose of supplying water to fifteen or
1393 more service connections or twenty-five or more persons for at least
1394 sixty days in any one year.

1395 (b) No water company may begin the construction of a water supply
1396 system for the purpose of supplying water to fifteen or more service
1397 connections or twenty-five or more persons for at least sixty days in
1398 any one year, and no person or entity, except a water company
1399 supplying more than two hundred fifty service connections or one
1400 thousand persons, may begin expansion of such a water supply
1401 system, without having first obtained a certificate of public
1402 convenience and necessity.

1403 (c) For systems serving twenty-five or more residents that are not
1404 the subject of proceedings under subsection (c) of section 16-262n or
1405 section 16-262o, an application for a certificate of public convenience
1406 and necessity shall be on a form prescribed by the Department of

1407 Public Utility Control, in consultation with the Department of Public
1408 Health, and accompanied by a copy of the applicant's construction or
1409 expansion plans, a fee of one hundred dollars and when an exclusive
1410 service area provider has been determined pursuant to section 25-33g,
1411 a copy of a signed ownership agreement between the applicant and
1412 provider for the exclusive service area, as determined pursuant to
1413 section 25-33g, detailing those terms and conditions under which the
1414 system will be constructed or expanded and for which the provider
1415 will assume service and ownership responsibilities. When an exclusive
1416 service area provider has been determined pursuant to section 25-33g,
1417 the application shall also be accompanied by a written confirmation
1418 from the exclusive service area provider, as the person that will own
1419 the water supply system, that such exclusive service area provider has
1420 received the application and is prepared to assume responsibility for
1421 the water supply system subject to the terms and conditions of the
1422 ownership agreement. Written confirmation from the exclusive service
1423 area provider shall be on a form prescribed by said departments. Said
1424 departments shall issue a certificate to an applicant upon determining,
1425 to their satisfaction, that (1) no interconnection is feasible with a water
1426 system owned by, or made available through arrangement with, the
1427 provider for the exclusive service area, as determined pursuant to
1428 section 25-33g or with another existing water system where no
1429 exclusive service area has been assigned, (2) the applicant will
1430 complete the construction or expansion in accordance with
1431 engineering standards established by regulation by the Department of
1432 Public Utility Control for water supply systems, (3) ownership of the
1433 system will be assigned to the provider for the exclusive service area,
1434 when an exclusive service area provider has been determined
1435 pursuant to section 25-33g, (4) the proposed construction or expansion
1436 will not result in a duplication of water service in the applicable
1437 service area, (5) the applicant meets all federal and state standards for
1438 water supply systems, [and] (6) the person that will own the water
1439 supply system has the financial, managerial and technical resources to
1440 (A) operate the proposed water supply system in a reliable and
1441 efficient manner, and (B) provide continuous adequate service to

1442 consumers served by the water supply system, (7) the proposed water
1443 supply system will not adversely affect the adequacy of nearby water
1444 supply systems, and (8) any existing or potential threat of pollution
1445 that the Department of Public Health deems to be adverse to public
1446 health will not affect any new source of water supply. Any
1447 construction or expansion with respect to which a certificate is
1448 required shall thereafter be built, maintained and operated in
1449 conformity with the certificate and any terms, limitations or conditions
1450 contained therein.

1451 (d) The Department of Public Utility Control and the Department of
1452 Public Health shall each adopt regulations, in accordance with the
1453 provisions of chapter 54, to carry out the purposes of subsections (a) to
1454 (c), inclusive, of this section.

1455 (e) (1) For systems serving twenty-five or more persons, but not
1456 twenty-five or more residents, at least sixty days in any one year an
1457 application for a certificate of public convenience and necessity shall
1458 be on a form prescribed by the Department of Public Health and
1459 accompanied by a copy of the construction or expansion plans. The
1460 Department of Public Health shall issue a certificate to an applicant
1461 upon determining, to its satisfaction, that (A) no interconnection is
1462 feasible with a water system owned by, or made available through
1463 arrangement with, the provider for the exclusive service area, as
1464 determined pursuant to section 25-33g or with another existing water
1465 system where no existing exclusive service area has been assigned, (B)
1466 the applicant will complete the construction or expansion in
1467 accordance with engineering standards established by regulation for
1468 water supply systems, (C) ownership of the system will be assigned to
1469 the provider for the exclusive service area, as determined pursuant to
1470 section 25-33g, if agreeable to the exclusive service area provider and
1471 the Department of Public Health, or may remain with the applicant, if
1472 agreeable to the Department of Public Health, until such time as the
1473 water system for the exclusive service area, as determined by section
1474 25-33g, has made an extension of the water main, after which the
1475 applicant shall obtain service from the provider for the exclusive

1476 service area, (D) the proposed construction or expansion will not result
1477 in a duplication of water service in the applicable service area, (E) the
1478 applicant meets all federal and state standards for water supply
1479 systems, [and] (F) the person that will own the water supply system
1480 has the financial, managerial and technical resources to (i) operate the
1481 proposed water supply system in a reliable and efficient manner, and
1482 (ii) provide continuous adequate service to consumers served by the
1483 water supply system, (G) the proposed water supply system will not
1484 adversely affect the adequacy of nearby water supply systems, and (H)
1485 any existing or potential threat of pollution that the Department of
1486 Public Health deems to be adverse to public health will not affect any
1487 new source of water supply. Any construction or expansion with
1488 respect to which a certificate is required shall thereafter be built,
1489 maintained and operated in conformity with the certificate and any
1490 terms, limitation or conditions contained therein. Properties held by
1491 the Department of Environmental Protection and used for or in
1492 support of fish culture, natural resource conservation or outdoor
1493 recreational purposes shall be exempt from the requirements of
1494 subdivisions (1), (3) and (4) of subsection (c) of this section and
1495 subparagraphs (A), (C) and (D) of subdivision (1) of subsection (e) of
1496 this section.

1497 (2) The Department of Public Health shall adopt regulations, in
1498 accordance with the provisions of chapter 54, to carry out the purposes
1499 of this subsection. Such regulations may include measures that
1500 encourage water conservation and proper maintenance.

1501 Sec. 534. Section 25-33k of the general statutes is repealed and the
1502 following is substituted in lieu thereof (*Effective October 1, 2011*):

1503 (a) For purposes of this section, "safe yield" means the maximum
1504 dependable quantity of water per unit of time that may flow or be
1505 pumped continuously from a source of supply during a critical dry
1506 period without consideration of available water limitations.

1507 (b) No source of water supply shall be abandoned by a water

1508 company or other entity without a permit from the Commissioner of
1509 Public Health. A water company or other entity shall apply for such
1510 permit in the manner prescribed by the commissioner. Not later than
1511 thirty days before filing an application for such permit, the applicant
1512 shall notify the chief elected official of any municipality and any local
1513 health department or district in which such source of supply is located.
1514 Not later than sixty days after receipt of such notification, the
1515 municipality or municipalities and local health departments or
1516 districts receiving such notice, and any water company as defined in
1517 section 25-32a, may submit comments on such application to the
1518 commissioner. The commissioner shall take such comments into
1519 consideration when reviewing the application.

1520 (c) (1) In [the commissioner's decision] determining whether to
1521 approve an application, the commissioner shall (A) consider the water
1522 supply needs of the water company, the state and any comments
1523 submitted pursuant to subsection (b) of this section, and [shall] (B)
1524 consult with the Commissioner of Environmental Protection, the
1525 Secretary of the Office of Policy and Management and the Department
1526 of Public Utility Control. The Commissioner of Public Health shall not
1527 be required to make a consultation pursuant to subparagraph (B) of
1528 this subdivision if the commissioner determines the source of water
1529 supply to be abandoned is a groundwater source with a safe yield of
1530 less than ten gallons per minute and is of poor water quality.

1531 (2) The Commissioner of Public Health shall grant a permit upon a
1532 finding that any groundwater source with a safe yield of less than 0.75
1533 millions of gallons per day, any reservoir with a safe yield of less than
1534 0.75 millions of gallons per day, any reservoir system with a safe yield
1535 of less than 0.75 millions of gallons per day, or any individual source
1536 within a reservoir system when such system has a safe yield of less
1537 than 0.75 millions of gallons per day will not be needed by such water
1538 company for present or future water supply and, in the case of a water
1539 company required to file a water supply plan under section 25-32d,
1540 that such abandonment is consistent with a water supply plan filed
1541 and approved pursuant to said section. No permit shall be granted if

1542 the commissioner determines that the source would be necessary for
1543 water supply by the company owning such source in an emergency or
1544 the proposed abandonment would impair the ability of such company
1545 to provide a pure, adequate and reliable water supply for present and
1546 projected future customers. As used in this section, a future source of
1547 water supply shall be considered to be any source of water supply
1548 necessary to serve areas reasonably expected to require service by the
1549 water company owning such source for a period of not more than fifty
1550 years after the date of the application for a permit under this section.

1551 (3) The Commissioner of Public Health shall grant a permit upon a
1552 finding that any groundwater source with a safe yield of more than
1553 0.75 millions of gallons per day, any reservoir with a safe yield of more
1554 than 0.75 millions of gallons per day, any reservoir system with a safe
1555 yield of more than 0.75 millions of gallons per day, or any individual
1556 source within a reservoir system when such system has a safe yield of
1557 more than 0.75 millions of gallons per day is of a size or condition that
1558 makes it unsuitable for present or future use as a drinking water
1559 supply by the water company, other entity or the state. In making a
1560 decision, the commissioner shall consider the general utility of the
1561 source and the viability for use to meet water supply needs. The
1562 commissioner shall consider any public water supply plans filed and
1563 approved pursuant to sections 25-32d and 25-33h, and any other water
1564 system plan approved by the commissioner, and the efficient and
1565 effective development of public water supply in the state. In assessing
1566 the general utility of the source, the commissioner shall consider
1567 factors including, but not limited to, (A) the safe yield of the source, (B)
1568 the location of the source relative to other public water supply
1569 systems, (C) the water quality of the source and the potential for
1570 treatment, (D) water quality compatibility between systems and
1571 interconnections, (E) extent of water company-owned lands for source
1572 protection of the supply, (F) types of land uses and land use controls in
1573 the aquifer protection area or watershed and their potential impact on
1574 water quality of the source, and (G) physical limitations to water
1575 service, system hydraulics and topography.

1576 Sec. 535. Subsection (n) of section 25-32 of the general statutes is
1577 repealed and the following is substituted in lieu thereof (*Effective*
1578 *July 1, 2011*):

1579 (n) (1) On and after the effective date of regulations adopted under
1580 this subsection, no person may operate any water treatment plant, [or]
1581 water distribution system or small water system that treats or supplies
1582 water used or intended for use by the public, test any backflow
1583 prevention device, or perform a cross connection survey without a
1584 certificate issued by the commissioner under this subsection. The
1585 commissioner shall adopt regulations, in accordance with chapter 54,
1586 to provide: (A) Standards for the operation of such water treatment
1587 plants, [and] water distribution systems and small water systems; (B)
1588 standards and procedures for the issuance of certificates to operators
1589 of such water treatment plants, [and] water distribution systems and
1590 small water systems; (C) procedures for the renewal of such certificates
1591 every three years; (D) standards for training required for the issuance
1592 or renewal of a certificate; and (E) standards and procedures for the
1593 issuance and renewal of certificates to persons who test backflow
1594 prevention devices or perform cross connection surveys. Such
1595 regulations shall be consistent with applicable federal law and
1596 guidelines for operator certification programs promulgated by the
1597 United States Environmental Protection Agency. [, and shall be
1598 adopted and filed with the Secretary of the State pursuant to section 4-
1599 172 not later than February 1, 2001] For purposes of this subsection,
1600 "small water system" means a public water system, as defined in
1601 section 25-33d, that serves less than one thousand persons and has no
1602 treatment or has only treatment that does not require any chemical
1603 treatment, process adjustment, backwashing or media regeneration by
1604 an operator.

1605 (2) The commissioner may take any disciplinary action set forth in
1606 section 19a-17, except for the assessment of a civil penalty under
1607 subdivision (6) of subsection (a) of section 19a-17, against an operator,
1608 a person who tests backflow prevention devices or a person who
1609 performs cross connection surveys holding a certificate issued under

1610 this subsection for any of the following reasons: (A) Fraud or material
1611 deception in procuring a certificate, the renewal of a certificate or the
1612 reinstatement of a certificate; (B) fraud or material deception in the
1613 performance of the certified operator's professional activities; (C)
1614 incompetent, negligent or illegal performance of the certified
1615 operator's professional activities; (D) conviction of the certified
1616 operator for a felony; or (E) failure of the certified operator to complete
1617 the training required under subdivision (1) of this subsection.

1618 (3) The commissioner may issue an initial certificate to perform a
1619 function set forth in subdivision (1) of this subsection upon receipt of a
1620 completed application, in a form prescribed by the commissioner,
1621 together with an application fee as follows: (A) For a water treatment
1622 plant, water distribution system or small water system operator
1623 certificate, two hundred twenty-four dollars; (B) for a backflow
1624 prevention device tester certificate, one hundred fifty-four dollars; and
1625 (C) for a cross-connection survey inspector certificate, one hundred
1626 fifty-four dollars. A certificate issued pursuant to this subdivision shall
1627 expire three years from the date of issuance unless renewed by the
1628 certificate holder prior to such expiration date. The commissioner may
1629 renew a certificate for an additional three years upon receipt of a
1630 completed renewal application, in a form prescribed by the
1631 commissioner, together with a renewal application fee as follows: (i)
1632 For a water treatment plant, water distribution system or small water
1633 system operator certificate, ninety-eight dollars; (ii) for a backflow
1634 prevention device tester certificate, sixty-nine dollars; and (iii) for a
1635 cross-connection survey inspector certificate, sixty-nine dollars.

1636 Sec. 536. Section 19a-37 of the general statutes is repealed and the
1637 following is substituted in lieu thereof (*Effective October 1, 2011*):

1638 (a) The Commissioner of Public Health may adopt regulations in the
1639 Public Health Code for the preservation of the public health pertaining
1640 to (1) protection and location of new water supply wells or springs for
1641 residential construction or for public or semipublic use, and (2)
1642 inspection for compliance with the provisions of municipal regulations

1643 adopted pursuant to section 22a-354p.

1644 (b) The Commissioner of Public Health shall adopt regulations, in
1645 accordance with chapter 54, for the testing of water quality in private
1646 residential wells. Any laboratory or firm which conducts a water
1647 quality test on a private well serving a residential property shall,
1648 [within] not later than thirty days [of] after the completion of such test,
1649 [shall] report the results of such test to (1) the public health authority
1650 of the municipality where the property is located, and (2) the
1651 Department of Public Health in a format specified by the department,
1652 provided such report shall not be required if the party for whom the
1653 laboratory or firm conducted such test informs the laboratory or firm
1654 that the test was not conducted within six months of the sale of such
1655 property. No regulation may require such a test to be conducted as a
1656 consequence or a condition of the sale, exchange, transfer, purchase or
1657 rental of the real property on which the private residential well is
1658 located. For purposes of this section, "laboratory or firm" means an
1659 environmental laboratory registered by the Department of Public
1660 Health pursuant to section 19a-29a.

1661 (c) Prior to the sale, exchange, purchase, transfer or rental of real
1662 property on which a residential well is located, the owner shall
1663 provide the buyer or tenant notice that educational material
1664 concerning private well testing is available on the Department of
1665 Public Health web site. Failure to provide such notice shall not
1666 invalidate any sale, exchange, purchase, transfer or rental of real
1667 property. If the seller or landlord provides such notice in writing, the
1668 seller or landlord and any real estate licensee shall be deemed to have
1669 fully satisfied any duty to notify the buyer or tenant that the subject
1670 real property is located in an area for which there are reasonable
1671 grounds for testing under subsection (f) or (i) of this section.

1672 [(c)] (d) The Commissioner of Public Health shall adopt regulations,
1673 in accordance with chapter 54, to clarify the criteria under which the
1674 commissioner may issue a well permit exception [may be granted] and
1675 to describe the terms and conditions that shall be imposed when a well

1676 is allowed at a premises (1) that is connected to a public water supply
1677 system, or (2) whose boundary is located within two hundred feet of
1678 an approved community water supply system, measured along a
1679 street, alley or easement. Such regulations shall (A) provide for
1680 notification of the permit to the public water supplier, (B) address the
1681 quality of the water supplied from the well, the means and extent to
1682 which the well shall not be interconnected with the public water
1683 supply, the need for a physical separation, and the installation of a
1684 reduced pressure device for backflow prevention, the inspection and
1685 testing requirements of any such reduced pressure device, and (C)
1686 identify the extent and frequency of water quality testing required for
1687 the well supply.

1688 [(d)] (e) No regulation may require that a certificate of occupancy
1689 for a dwelling unit on such residential property be withheld or
1690 revoked on the basis of a water quality test performed on a private
1691 residential well pursuant to this section, unless such test results
1692 indicate that any maximum contaminant level applicable to public
1693 water supply systems for any contaminant listed in the public health
1694 code has been exceeded. No administrative agency, health district or
1695 municipal health officer may withhold or cause to be withheld such a
1696 certificate of occupancy except as provided in this section.

1697 [(e) No regulation may require the water in private residential wells
1698 to be tested for alachlor, atrazine, dicamba, ethylene dibromide (EDB),
1699 metolachlor, simazine or 2,4-D or any other herbicide or insecticide
1700 unless (1) results from a prior water test indicate a nitrate
1701 concentration at or greater than ten milligrams per liter and (2) the
1702 local director of health has reasonable grounds to suspect such
1703 chemical or chemicals are present in said residential well. For the
1704 purposes of this subsection, "reasonable grounds" includes, but is not
1705 limited to, the proximity of the particular water supply system to past
1706 or present agricultural uses of land.]

1707 (f) The local director of health may require a private residential well
1708 to be tested for radionuclides when there are reasonable grounds to

1709 suspect that such contaminants are present in the groundwater. For
1710 purposes of this subsection, "reasonable grounds" means (1) the
1711 existence of a geological area known to have naturally occurring
1712 radionuclide deposits in the bedrock; or (2) the well is located in an
1713 area in which it is known that radionuclides are present in the
1714 groundwater.

1715 (g) Except as provided in subsection (h) of this section, the collection
1716 of samples for determining the water quality of private residential
1717 wells may be made only by (1) employees of a laboratory or firm
1718 certified or approved by the Department of Public Health to test
1719 drinking water, if such employees have been trained in sample
1720 collection techniques, (2) certified water operators, (3) local health
1721 departments and state employees trained in sample collection
1722 techniques, or (4) individuals with training and experience that the
1723 Department of Public Health deems sufficient.

1724 [(f)] (h) Any owner of a residential construction, including, but not
1725 limited to, a homeowner, on which a private residential well is located
1726 or any general contractor of a new residential construction on which a
1727 private residential well is located may collect samples of well water for
1728 submission to a laboratory or firm for the purposes of testing water
1729 quality pursuant to this section, provided (1) such laboratory or firm
1730 [finds] has provided instructions to said owner or general contractor
1731 [to be qualified] on how to collect such [sample] samples, and (2) such
1732 owner or general contractor is identified to the subsequent owner on a
1733 form to be prescribed by the Department of Public Health. No
1734 regulation may prohibit or impede such collection or analysis.

1735 [(g) No regulation may require the water in private residential wells
1736 to be tested for organic chemicals unless the local director of health has
1737 reasonable grounds to suspect such organic chemicals are present in
1738 said residential well. For purposes of this subsection, "reasonable
1739 grounds" means any indication, derived from a phase I environmental
1740 site assessment or otherwise, that the particular water supply system
1741 that is to be tested exists on land or in proximity to land associated

1742 with the past or present production, storage, use or disposal of organic
1743 chemicals.

1744 (h) The amendments to sections 19-13-B51l and 19-13-B101 of the
1745 regulations of Connecticut state agencies that became effective
1746 December 30, 1996, shall be waived for those residential wells which
1747 were not tested in accordance with said amendments between
1748 December 30, 1996, and July 8, 1997.]

1749 (i) The local director of health may require private residential wells
1750 to be tested for pesticides, herbicides or organic chemicals when there
1751 are reasonable grounds to suspect that any such contaminants might
1752 be present in the groundwater. For purposes of this subsection,
1753 "reasonable grounds" means (1) the presence of nitrate-nitrogen in the
1754 groundwater at a concentration greater than ten milligrams per liter, or
1755 (2) that the private residential well is located on land, or in proximity
1756 to land, associated with the past or present production, storage, use or
1757 disposal of organic chemicals as identified in any public record.

1758 Sec. 537. Section 20-222 of the general statutes is amended by adding
1759 subsection (h) as follows (*Effective July 1, 2011*):

1760 (NEW) (h) Notwithstanding the provisions of this section, a funeral
1761 services business that has been issued an inspection certificate may
1762 operate a single satellite office for the sole purpose of meeting with
1763 clients to make arrangements for cremation services. No other funeral
1764 service business activities may be conducted at such a satellite office.
1765 Any person, firm, partnership or corporation seeking to add a satellite
1766 office shall provide thirty days' advance written notice to the
1767 Department of Public Health on a form prescribed by the department.
1768 Any authorized satellite office shall be open at all times for inspection
1769 by the department. The department may inspect any such satellite
1770 office whenever the department deems it advisable. All records
1771 pertaining to arrangements made at the satellite office shall be
1772 maintained at the address of record of the funeral service business as
1773 identified on the certificate of inspection. Failure to comply with the

1774 provisions of this section may constitute grounds for disciplinary
1775 action under section 20-227.

1776 Sec. 538. Section 19a-750 of the general statutes is repealed and the
1777 following is substituted in lieu thereof (*Effective July 1, 2011*):

1778 (a) There is hereby created as a body politic and corporate,
1779 constituting a public instrumentality and political subdivision of the
1780 state created for the performance of an essential public and
1781 governmental function, the Health Information Technology Exchange
1782 of Connecticut, which is empowered to carry out the purposes of the
1783 authority, as defined in subsection (b) of this section, which are hereby
1784 determined to be public purposes for which public funds may be
1785 expended. The Health Information Technology Exchange of
1786 Connecticut shall not be construed to be a department, institution or
1787 agency of the state.

1788 (b) For purposes of this section and sections 19a-751 to 19a-754,
1789 inclusive, "authority" means the Health Information Technology
1790 Exchange of Connecticut and "purposes of the authority" means the
1791 purposes of the authority expressed in and pursuant to this section,
1792 including the promoting, planning and designing, developing,
1793 assisting, acquiring, constructing, maintaining and equipping,
1794 reconstructing and improving of health care information technology.
1795 The powers enumerated in this section shall be interpreted broadly to
1796 effectuate the purposes of the authority and shall not be construed as a
1797 limitation of powers. The authority shall have the power to:

1798 (1) Establish an office in the state;

1799 (2) Employ such assistants, agents and other employees as may be
1800 necessary or desirable, which employees shall be exempt from the
1801 classified service and shall not be employees, as defined in subsection
1802 (b) of section 5-270;

1803 (3) Establish all necessary or appropriate personnel practices and
1804 policies, including those relating to hiring, promotion, compensation,

1805 retirement and collective bargaining, which need not be in accordance
1806 with chapter 68, and the authority shall not be an employer, as defined
1807 in subsection (a) of section 5-270;

1808 (4) Engage consultants, attorneys and other experts as may be
1809 necessary or desirable to carry out the purposes of the authority;

1810 (5) Acquire, lease, purchase, own, manage, hold and dispose of
1811 personal property, and lease, convey or deal in or enter into
1812 agreements with respect to such property on any terms necessary or
1813 incidental to the carrying out of these purposes;

1814 (6) Procure insurance against loss in connection with its property
1815 and other assets in such amounts and from such insurers as it deems
1816 desirable;

1817 (7) Make and enter into any contract or agreement necessary or
1818 incidental to the performance of its duties and execution of its powers.
1819 The contracts entered into by the authority shall not be subject to the
1820 approval of any other state department, office or agency. However,
1821 copies of all contracts of the authority shall be maintained by the
1822 authority as public records, subject to the proprietary rights of any
1823 party to the contract;

1824 (8) To the extent permitted under its contract with other persons,
1825 consent to any termination, modification, forgiveness or other change
1826 of any term of any contractual right, payment, royalty, contract or
1827 agreement of any kind to which the authority is a party;

1828 (9) Receive and accept, from any source, aid or contributions,
1829 including money, property, labor and other things of value;

1830 (10) Invest any funds not needed for immediate use or disbursement
1831 in obligations issued or guaranteed by the United States of America or
1832 the state and in obligations that are legal investments for savings banks
1833 in this state;

1834 (11) Account for and audit funds of the authority and funds of any

1835 recipients of funds from the authority;

1836 (12) Sue and be sued, plead and be impleaded, adopt a seal and alter
1837 the same at pleasure;

1838 (13) Adopt regular procedures for exercising the power of the
1839 authority not in conflict with other provisions of the general statutes;
1840 and

1841 (14) Do all acts and things necessary and convenient to carry out the
1842 purposes of the authority.

1843 (c) (1) The Health Information Technology Exchange of Connecticut
1844 shall be managed by a board of directors. The board shall consist of the
1845 following members: The Lieutenant Governor, or his or her designee;
1846 the Commissioners of Public Health, Social Services and Consumer
1847 Protection, or their designees; the Chief Information Officer of the
1848 Department of Information Technology, or his or her designee; three
1849 appointed by the Governor, one of whom shall be a representative of a
1850 medical research organization, one of whom shall be an insurer or
1851 representative of a health plan and one of whom shall be an attorney
1852 with background and experience in the field of privacy, health data
1853 security or patient rights; three appointed by the president pro
1854 tempore of the Senate, one of whom shall have background and
1855 experience with a private sector health information exchange or health
1856 information technology entity, one of whom shall have expertise in
1857 public health and one of whom shall be a physician licensed under
1858 chapter 370 who works in a practice of not more than ten physicians
1859 and who is not employed by a hospital, health network, health plan,
1860 health system, academic institution or university; three appointed by
1861 the speaker of the House of Representatives, one of whom shall be a
1862 representative of hospitals, an integrated delivery network or a
1863 hospital association, one of whom shall have expertise with federally
1864 qualified health centers and one of whom shall be a consumer or
1865 consumer advocate; one appointed by the majority leader of the
1866 Senate, who shall be a primary care physician whose practice utilizes

1867 electronic health records; one appointed by the majority leader of the
1868 House of Representatives, who shall be a consumer or consumer
1869 advocate; one appointed by the minority leader of the Senate, who
1870 shall be a pharmacist or a health care provider utilizing electronic
1871 health information exchange; and one appointed by the minority
1872 leader of the House of Representatives, who shall be a large employer
1873 or a representative of a business group. The Secretary of the Office of
1874 Policy and Management and the Healthcare Advocate, or their
1875 designees, shall be ex-officio, nonvoting members of the board. The
1876 Commissioner of Public Health, or his or her designee, shall serve as
1877 the chairperson of the board.

1878 (2) All initial appointments to the board shall be made on or before
1879 October 1, 2010. The initial term for the board members appointed by
1880 the Governor shall be for four years. The initial term for board
1881 members appointed by the speaker of the House of Representatives
1882 and the majority leader of the House of Representatives shall be for
1883 three years. The initial term for board members appointed by the
1884 minority leader of the House of Representatives and the minority
1885 leader of the Senate shall be for two years. The initial term for the
1886 board members appointed by the president pro tempore of the Senate
1887 and the majority leader of the Senate shall be for one year. Terms shall
1888 expire on September thirtieth of each year in accordance with the
1889 provisions of this subsection. Any vacancy shall be filled by the
1890 appointing authority for the balance of the unexpired term. Other than
1891 an initial term, a board member shall serve for a term of four years. No
1892 board member, including initial board members, may serve for more
1893 than two terms. Any member of the board may be removed by the
1894 appropriate appointing authority for misfeasance, malfeasance or
1895 wilful neglect of duty.

1896 (3) The chairperson shall schedule the first meeting of the board,
1897 which shall be held not later than November 1, 2010.

1898 (4) Any member appointed to the board who fails to attend three
1899 consecutive meetings or who fails to attend fifty per cent of all

1900 meetings held during any calendar year shall be deemed to have
1901 resigned from the board.

1902 (5) Notwithstanding any provision of the general statutes, it shall
1903 not constitute a conflict of interest for a trustee, director, partner,
1904 officer, stockholder, proprietor, counsel or employee of any person,
1905 firm or corporation to serve as a board member, provided such trustee,
1906 director, partner, officer, stockholder, proprietor, counsel or employee
1907 shall abstain from deliberation, action or vote by the board in specific
1908 respect to such person, firm or corporation. All members shall be
1909 deemed public officials and shall adhere to the code of ethics for public
1910 officials set forth in chapter 10.

1911 (6) Board members shall receive no compensation for their services,
1912 but shall receive actual and necessary expenses incurred in the
1913 performance of their official duties.

1914 (d) The board shall select and appoint a chief executive officer who
1915 shall be responsible for administering the authority's programs and
1916 activities in accordance with policies and objectives established by the
1917 board. The chief executive officer shall serve at the pleasure of the
1918 board and shall receive such compensation as shall be determined by
1919 the board. The chief executive officer (1) may employ such other
1920 employees as shall be designated by the board of directors; and (2)
1921 shall attend all meetings of the board, keep a record of all proceedings
1922 and maintain and be custodian of all books, documents and papers
1923 filed with the authority and of the minute book of the authority.

1924 (e) The board shall direct the authority regarding: (1)
1925 Implementation and periodic revisions of the health information
1926 technology plan submitted in accordance with the provisions of
1927 section 74 of public act 09-232, including the implementation of an
1928 integrated state-wide electronic health information infrastructure for
1929 the sharing of electronic health information among health care
1930 facilities, health care professionals, public and private payors, state and
1931 federal agencies and patients; (2) appropriate protocols for health

1932 information exchange; and (3) electronic data standards to facilitate the
1933 development of a state-wide integrated electronic health information
1934 system, as defined in subsection (a) of section 19a-25d, for use by
1935 health care providers and institutions that receive state funding. Such
1936 electronic data standards shall: (A) Include provisions relating to
1937 security, privacy, data content, structures and format, vocabulary and
1938 transmission protocols; (B) limit the use and dissemination of an
1939 individual's Social Security number and require the encryption of any
1940 Social Security number provided by an individual; (C) require privacy
1941 standards no less stringent than the "Standards for Privacy of
1942 Individually Identifiable Health Information" established under the
1943 Health Insurance Portability and Accountability Act of 1996, P.L. 104-
1944 191, as amended from time to time, and contained in 45 CFR 160, 164;
1945 (D) require that individually identifiable health information be secure
1946 and that access to such information be traceable by an electronic audit
1947 trail; (E) be compatible with any national data standards in order to
1948 allow for interstate interoperability, as defined in subsection (a) of
1949 section 19a-25d; (F) permit the collection of health information in a
1950 standard electronic format, as defined in subsection (a) of section 19a-
1951 25d; and (G) be compatible with the requirements for an electronic
1952 health information system, as defined in subsection (a) of section 19a-
1953 25d.

1954 (f) Applications for grants from the authority shall be made on a
1955 form prescribed by the board. The board shall review applications and
1956 decide whether to award a grant. The board may consider, as a
1957 condition for awarding a grant, the potential grantee's financial
1958 participation and any other factors it deems relevant.

1959 (g) The board may consult with such parties, public or private, as it
1960 deems desirable in exercising its duties under this section.

1961 (h) The board shall establish an advisory committee on patient
1962 privacy and security. All members of such advisory committee shall be
1963 appointed by the chairperson of the board, provided any such
1964 appointed member shall have expertise in the field of privacy, health

1965 data security or patient rights. Appointed members of the advisory
1966 committee shall include, but not be limited to, a representative from a
1967 nonprofit research and educational organization dedicated to
1968 improving access to health care, a representative from a patient
1969 advocacy group, an ethicist, an attorney with expertise in health
1970 information technology and the protections set forth in the Health
1971 Insurance Portability and Accountability Act of 1996, P.L. 104-191
1972 (HIPAA), the chief information officer of a hospital, an insurer or
1973 representative of a health plan and a primary care physician, engaged
1974 in active practice, who utilizes electronic health records. The advisory
1975 committee shall monitor developments in federal law concerning
1976 patient privacy and security relating to health information technology
1977 and shall report to the board on national and regional trends and
1978 federal policies and guidance set forth in this area. The board shall
1979 include information supplied by the advisory committee in the report
1980 submitted by the board pursuant to subsection (i) of this section. The
1981 chairperson of the advisory committee shall be appointed by the
1982 Lieutenant Governor from among the membership.

1983 [(h)] (i) Not later than February 1, 2011, and annually thereafter
1984 until February 1, 2016, the chief executive officer of the authority shall
1985 report, in accordance with section 11-4a, to the Governor and the
1986 General Assembly on (1) any private or federal funds received during
1987 the preceding year and, if applicable, how such funds were expended,
1988 (2) the amount and recipients of grants awarded, and (3) the current
1989 status of health information exchange and health information
1990 technology in the state.

1991 Sec. 539. Subsection (c) of section 20-107 of the general statutes is
1992 repealed and the following is substituted in lieu thereof (*Effective*
1993 *July 1, 2011*):

1994 (c) Notwithstanding the provisions of subsections (a) and (b) of this
1995 section, the department may issue a license to practice dentistry to any
1996 applicant holding a diploma from a foreign dental school, provided
1997 the applicant (1) is a graduate of a dental school located outside the

1998 United States and has received the degree of doctor of dental medicine
1999 or surgery, or its equivalent; (2) has passed the written and practical
2000 examinations required in section 20-108; (3) has successfully completed
2001 not less than two years of graduate dental training as a resident dentist
2002 in a program accredited by the Commission on Dental Accreditation;
2003 and (4) has successfully completed, at a level greater than the second
2004 postgraduate year, not less than [two] three years of a residency or
2005 fellowship training program accredited by the Commission on Dental
2006 Accreditation in a [community or school-based health center affiliated
2007 with and under the supervision of a] school of dentistry in this state, or
2008 has served as a full-time faculty member of a school of dentistry in this
2009 state pursuant to the provisions of section 20-120 for not less than three
2010 years.

2011 Sec. 540. Section 19a-87a of the general statutes is amended by
2012 adding subsection (e) as follows (*Effective October 1, 2011*):

2013 (NEW) (e) In addition to any powers the Department of Public
2014 Health may have, in any investigation (1) concerning an application,
2015 reinstatement or renewal of a license for a child day care center, a
2016 group day care home or a family day care home, as such terms are
2017 defined in section 19a-77, (2) of a complaint concerning child day care
2018 services, as described in section 19a-77, or (3) concerning the possible
2019 provision of unlicensed child day care services, the Department of
2020 Public Health may administer oaths, issue subpoenas, compel
2021 testimony and order the production of books, records and documents.
2022 If any person refuses to appear, testify or produce any book, record or
2023 document when so ordered, a judge of the Superior Court may make
2024 such order as may be appropriate to aid in the enforcement in this
2025 section.

2026 Sec. 541. Subsection (a) of section 20-94a of the general statutes is
2027 repealed and the following is substituted in lieu thereof (*Effective*
2028 *October 1, 2011*):

2029 (a) The Department of Public Health may issue an advanced

2030 practice registered nurse license to a person seeking to perform the
2031 activities described in subsection (b) of section 20-87a, as amended by
2032 this act, upon receipt of a fee of two hundred dollars, to an applicant
2033 who: (1) Maintains a license as a registered nurse in this state, as
2034 provided by section 20-93 or 20-94; (2) holds and maintains current
2035 certification as a nurse practitioner, a clinical nurse specialist or a nurse
2036 anesthetist from one of the following national certifying bodies that
2037 certify nurses in advanced practice: The American Nurses' Association,
2038 the Nurses' Association of the American College of Obstetricians and
2039 Gynecologists Certification Corporation, the National Board of
2040 Pediatric Nurse Practitioners and Associates or the American
2041 Association of Nurse Anesthetists, their successors or other
2042 appropriate national certifying bodies approved by the Board of
2043 Examiners for Nursing; (3) has completed thirty hours of education in
2044 pharmacology for advanced nursing practice; and (4) if first certified
2045 by one of the foregoing certifying bodies after December 31, 1994,
2046 holds a [master's] graduate degree in nursing or in a related field
2047 recognized for certification as either a nurse practitioner, a clinical
2048 nurse specialist, or a nurse anesthetist by one of the foregoing
2049 certifying bodies. No license shall be issued under this section to any
2050 applicant against whom professional disciplinary action is pending or
2051 who is the subject of an unresolved complaint.

2052 Sec. 542. (*Effective from passage*) Section 1 of public act 11-2 shall take
2053 effect on July 1, 2011.

2054 Sec. 543. Section 20-7c of the general statutes is repealed and the
2055 following is substituted in lieu thereof (*Effective October 1, 2011*):

2056 (a) For purposes of this section, ["provider"] "clinical laboratory" has
2057 the same meaning as provided in section [20-7b] 19a-30. Clinical
2058 laboratory does not include any state laboratory established by the
2059 Department of Public Health pursuant to section 19a-26 or 19a-29.

2060 (b) [(1) A] Except as provided for in subsection (e) of this section, a
2061 provider [, except as provided in section 4-194,] shall (1) supply to a

2062 patient upon request complete and current information possessed by
2063 that provider concerning any diagnosis, treatment and prognosis of
2064 the patient, [(2) A provider shall] and (2) notify a patient of any test
2065 results in the provider's possession or requested by the provider for
2066 the purposes of diagnosis, treatment or prognosis of such patient. In
2067 addition, upon the request of a patient or a provider who orders
2068 medical tests on behalf of a patient, a clinical laboratory shall provide
2069 medical test results relating to the patient to any other provider who is
2070 treating the patient for the purposes of diagnosis, treatment or
2071 prognosis of such patient.

2072 (c) A provider, who requests that his or her patient submit to
2073 repeated medical testing at regular intervals, over a specified period of
2074 time, for purposes of ascertaining a diagnosis, prognosis or
2075 recommended course of treatment for such patient, may issue a single
2076 authorization that allows the entity that conducts such medical testing,
2077 including, but not limited to, a clinical laboratory, to directly
2078 communicate the results of such testing to the patient for the period of
2079 time that such testing is requested by the provider.

2080 [(c)] (d) Upon a written request of a patient, a patient's attorney or
2081 authorized representative, or pursuant to a written authorization, a
2082 provider, except as provided in section 4-194, shall furnish to the
2083 person making such request a copy of the patient's health record,
2084 including but not limited to, bills, x-rays and copies of laboratory
2085 reports, contact lens specifications based on examinations and final
2086 contact lens fittings given within the preceding three months or such
2087 longer period of time as determined by the provider but no longer
2088 than six months, records of prescriptions and other technical
2089 information used in assessing the patient's health condition. No
2090 provider shall refuse to return to a patient original records or copies of
2091 records that the patient has brought to the provider from another
2092 provider. When returning records to a patient, a provider may retain
2093 copies of such records for the provider's file, provided such provider
2094 does not charge the patient for the costs incurred in copying such
2095 records. No provider shall charge more than sixty-five cents per page,

2096 including any research fees, handling fees or related costs, and the cost
2097 of first class postage, if applicable, for furnishing a health record
2098 pursuant to this subsection, except such provider may charge a patient
2099 the amount necessary to cover the cost of materials for furnishing a
2100 copy of an x-ray, provided no such charge shall be made for furnishing
2101 a health record or part thereof to a patient, a patient's attorney or
2102 authorized representative if the record or part thereof is necessary for
2103 the purpose of supporting a claim or appeal under any provision of the
2104 Social Security Act and the request is accompanied by documentation
2105 of the claim or appeal. A provider shall furnish a health record
2106 requested pursuant to this section within thirty days of the request. No
2107 health care provider, who has purchased or assumed the practice of a
2108 provider who is retiring or deceased, may refuse to return original
2109 records or copied records to a patient who decides not to seek care
2110 from the successor provider. When returning records to a patient who
2111 has decided not to seek care from a successor provider, such provider
2112 may not charge a patient for costs incurred in copying the records of
2113 the retired or deceased provider.

2114 [(d)] (e) If a provider reasonably determines that the information is
2115 detrimental to the physical or mental health of the patient, or is likely
2116 to cause the patient to harm himself, herself or another, the provider
2117 may withhold the information from the patient. The information may
2118 be supplied to an appropriate third party or to another provider who
2119 may release the information to the patient. If disclosure of information
2120 is refused by a provider under this subsection, any person aggrieved
2121 thereby may, within thirty days of such refusal, petition the superior
2122 court for the judicial district in which such person resides for an order
2123 requiring the provider to disclose the information. Such a proceeding
2124 shall be privileged with respect to assignment for trial. The court, after
2125 hearing and an in camera review of the information in question, shall
2126 issue the order requested unless it determines that such disclosure
2127 would be detrimental to the physical or mental health of the person or
2128 is likely to cause the person to harm himself, herself or another.

2129 [(e)] (f) The provisions of this section shall not apply to any

2130 information relative to any psychiatric or psychological problems or
2131 conditions.

2132 ~~[(f)]~~ (g) In the event that a provider abandons his or her practice, the
2133 Commissioner of Public Health may appoint a licensed health care
2134 provider to be the keeper of the records, who shall be responsible for
2135 disbursing the original records to the provider's patients, upon the
2136 request of any such patient.

2137 (h) The Commissioner of Public Health shall adopt regulations, in
2138 accordance with the provisions of chapter 54, to carry out the
2139 provisions of this section.

2140 Sec. 544. Subsection (a) of section 19a-638 of the general statutes, as
2141 amended by public act 11-10, is repealed and the following is
2142 substituted in lieu thereof (*Effective from passage*):

2143 (a) A certificate of need issued by the office shall be required for:

2144 (1) The establishment of a new health care facility;

2145 (2) A transfer of ownership of a health care facility;

2146 (3) The establishment of a free-standing emergency department;

2147 (4) The termination by a short-term acute care general hospital or
2148 children's hospital of inpatient and outpatient mental health and
2149 substance abuse services;

2150 (5) The establishment of an outpatient surgical facility, as defined in
2151 section 19a-493b, or as established by a short-term acute care general
2152 hospital;

2153 (6) The termination of an emergency department by a short-term
2154 acute care general hospital;

2155 (7) The establishment of cardiac services, including inpatient and
2156 outpatient cardiac catheterization, interventional cardiology and
2157 cardiovascular surgery;

2158 (8) The acquisition of computed tomography scanners, magnetic
2159 resonance imaging scanners, positron emission tomography scanners
2160 or positron emission tomography-computed tomography scanners, by
2161 any person, physician, provider, short-term acute care general hospital
2162 or children's hospital, except as provided for in subdivision (23) of
2163 subsection (b) of this section;

2164 (9) The acquisition of nonhospital based linear accelerators;

2165 (10) An increase in the licensed bed capacity of a health care facility;

2166 (11) The acquisition of equipment utilizing technology that has not
2167 previously been utilized in the state; [and]

2168 (12) An increase of two or more operating rooms within any three-
2169 year period, commencing on and after October 1, 2010, by an
2170 outpatient surgical facility, as defined in section 19a-493b, or by a
2171 short-term acute care general hospital; and

2172 (13) The termination of inpatient or outpatient services offered by a
2173 hospital or other facility or institution operated by the state that
2174 provides services that are eligible for reimbursement under Title XVIII
2175 or XIX of the federal Social Security Act, 42 USC 301, as amended.

2176 Sec. 545. Section 19a-7f of the general statutes is repealed and the
2177 following is substituted in lieu thereof (*Effective July 1, 2011*):

2178 (a) The Commissioner of Public Health shall determine the standard
2179 of care for immunization for the children of this state. The standard of
2180 care for immunization shall be based on the recommended schedules
2181 for active immunization for normal infants and children published by
2182 the National Centers for Disease Control and Prevention Advisory
2183 Committee [, as determined by the Commissioner of Public Health] on
2184 Immunization Practices, the American Academy of Pediatrics and the
2185 American Academy of Family Physicians. The commissioner shall
2186 establish, within available appropriations, an immunization program
2187 which shall: (1) Provide vaccine at no cost to health care providers in

2188 Connecticut to administer to children so that cost of vaccine will not be
2189 a barrier to age-appropriate vaccination in this state; (2) with the
2190 assistance of hospital maternity programs, provide all parents in this
2191 state with the recommended immunization schedule for normal
2192 infants and children, a booklet to record immunizations at the time of
2193 the infant's discharge from the hospital nursery and a list of sites
2194 where immunization may be provided; (3) inform in a timely manner
2195 all health care providers of changes in the recommended
2196 immunization schedule; (4) assist hospitals, local health providers and
2197 local health departments to develop and implement record-keeping
2198 and outreach programs to identify and immunize those children who
2199 have fallen behind the recommended immunization schedule or who
2200 lack access to regular preventative health care and have the authority
2201 to gather such data as may be needed to evaluate such efforts; (5) assist
2202 in the development of a program to assess the vaccination status of
2203 children who are clients of state and federal programs serving the
2204 health and welfare of children and make provision for vaccination of
2205 those who are behind the recommended immunization schedule; (6)
2206 access available state and federal funds including, but not limited to,
2207 any funds available through the federal Childhood Immunization
2208 Reauthorization or any funds available through the Medicaid
2209 program; (7) solicit, receive and expend funds from any public or
2210 private source; and (8) develop and make available to parents and
2211 health care providers public health educational materials about the
2212 benefits of timely immunization.

2213 (b) (1) Commencing October 1, 2011, one group health care provider
2214 located in Bridgeport and one group health care provider located in
2215 New Haven, as identified by the Commissioner of Public Health, and
2216 any health care provider located in Hartford who administers vaccines
2217 to children under the federal Vaccines For Children immunization
2218 program that is operated by the Department of Public Health under
2219 authority of 42 USC 1396s may select under said federal program, and
2220 the department shall provide, any vaccine licensed by the federal Food
2221 and Drug Administration, including any combination vaccine and

2222 dosage form, that is (A) recommended by the National Centers for
2223 Disease Control and Prevention Advisory Committee on
2224 Immunization Practices, and (B) made available to the department by
2225 the National Centers for Disease Control and Prevention.

2226 (2) Not later than June 1, 2012, the Commissioner of Public Health
2227 shall provide an evaluation of the vaccine program established in
2228 subdivision (1) of this subsection to the joint standing committee of the
2229 General Assembly having cognizance of matters relating to public
2230 health. Such evaluation shall include, but not be limited to, an
2231 assessment of the program's impact on child immunization rates, an
2232 assessment of any health or safety risks posed by the program, and
2233 recommendations regarding future expansion of the program.

2234 (3) Provided the evaluation submitted pursuant to subdivision (2) of
2235 this subsection does not indicate a significant reduction in child
2236 immunization rates or an increased risk to the health and safety of
2237 children, commencing July 1, 2012, any health care provider who
2238 administers vaccines to children under the federal Vaccines For
2239 Children immunization program that is operated by the Department of
2240 Public Health under authority of 42 USC 1396s may select, and the
2241 department shall provide, any vaccine licensed by the federal Food
2242 and Drug Administration, including any combination vaccine and
2243 dosage form, that is (A) recommended by the National Centers for
2244 Disease Control and Prevention Advisory Committee on
2245 Immunization Practices, and (B) made available to the department by
2246 the National Centers for Disease Control and Prevention.

2247 (4) The provisions of this subsection shall not apply in the event of a
2248 public health emergency, as defined in section 19a-131, or an attack,
2249 major disaster, emergency or disaster emergency, as those terms are
2250 defined in section 28-1.

2251 Sec. 546. Section 19a-7j of the general statutes is repealed and the
2252 following is substituted in lieu thereof (*Effective July 1, 2011*):

2253 (a) Not later than September 1, 2003, and annually thereafter, the

2254 Secretary of the Office of Policy and Management, in consultation with
2255 the Commissioner of Public Health, shall (1) determine the amount
2256 appropriated for the following purposes: (A) To purchase, store and
2257 distribute vaccines for routine immunizations included in the schedule
2258 for active immunization required by section 19a-7f, as amended by this
2259 act; (B) to purchase, store and distribute (i) vaccines to prevent
2260 hepatitis A and B in persons of all ages, as recommended by the
2261 schedule for immunizations published by the National Advisory
2262 Committee for Immunization Practices, (ii) antibiotics necessary for the
2263 treatment of tuberculosis and biologics and antibiotics necessary for
2264 the detection and treatment of tuberculosis infections, and (iii)
2265 antibiotics to support treatment of patients in communicable disease
2266 control clinics, as defined in section 19a-216a; and (C) to provide
2267 services needed to collect up-to-date information on childhood
2268 immunizations for all children enrolled in Medicaid who reach two
2269 years of age during the year preceding the current fiscal year, to
2270 incorporate such information into the childhood immunization
2271 registry, as defined in section 19a-7h, and (2) inform the Insurance
2272 Commissioner of such amount.

2273 (b) Each domestic insurer or health care center doing life insurance
2274 or health insurance business in this state shall annually pay to the
2275 Insurance Commissioner, for deposit in the General Fund, a health and
2276 welfare fee assessed by the Insurance Commissioner pursuant to this
2277 section. [Not later than October 1, 2003, the Insurance Commissioner
2278 shall determine the fee to be assessed against each such domestic
2279 insurer or health care center for the fiscal year ending June 30, 2004.]
2280 Not later than October 1, 2003, and annually thereafter, the Insurance
2281 Commissioner shall determine the fee to be assessed against each such
2282 domestic insurer or health care center for the next fiscal year. Such fee
2283 shall be a percentage of the total amount appropriated, as identified in
2284 subsection (a) of this section, and shall be calculated on the basis of life
2285 insurance premiums and health insurance premiums and subscriber
2286 charges in the same manner as calculations under section 38a-48. Not
2287 later than November 1, 2003, and annually thereafter, the Insurance

2288 Commissioner shall submit a statement to each such insurer and health
2289 care center that includes the proposed fee for the insurer or health care
2290 center calculated in accordance with this section. As used in this
2291 section, "health insurance" means health insurance, as defined in
2292 subdivisions (1) to (13), inclusive, of section 38a-469.

2293 (c) Any domestic insurer or health care center aggrieved by an
2294 assessment levied under this section may appeal therefrom in the same
2295 manner as provided for appeals under section 38a-52.

2296 [(d) For the fiscal year ending June 30, 2004, the aggregate
2297 assessment under this section shall not exceed seven million one
2298 hundred thousand dollars. For the fiscal year ending June 30, 2005, the
2299 aggregate assessment under this section shall not exceed seven million
2300 one hundred thousand dollars.]

2301 Sec. 547. Section 17b-369 of the general statutes is amended by
2302 adding subsections (c) to (e), inclusive, as follows (*Effective July 1,*
2303 *2011*):

2304 (NEW) (c) The Commissioner of Social Services shall develop a
2305 strategic plan, consistent with the long-term care plan established
2306 pursuant to section 17b-337, to rebalance Medicaid long-term care
2307 supports and services, including, but not limited to, those supports
2308 and services provided in home, community-based settings and
2309 institutional settings. The commissioner shall include home,
2310 community-based and institutional providers in the development of
2311 the strategic plan. In developing the strategic plan the commissioner
2312 shall consider topics that include, but are not limited to: (1) Regional
2313 trends concerning the state's aging population; (2) trends in the
2314 demand for home, community-based and institutional services; (3)
2315 gaps in the provision of home and community-based services which
2316 prevent community placements; (4) gaps in the provision of
2317 institutional care; (5) the quality of care provided by home,
2318 community-based and institutional providers; (6) the condition of
2319 institutional buildings; (7) the state's regional supply of institutional

2320 beds; (8) the current rate structure applicable to home, community-
2321 based and institutional services; (9) the methods of implementing
2322 adjustments to the bed capacity of individual nursing facilities; and
2323 (10) a review of the provisions of subsection (a) of section 17b-354, as
2324 amended by this act.

2325 (NEW) (d) The Commissioner of Social Services may contract with
2326 nursing facilities, as defined in section 17b-357, and home and
2327 community-based providers for the purpose of carrying out the
2328 strategic plan. In addition, the commissioner may revise a rate paid to
2329 a nursing facility pursuant to section 17b-340 in order to effectuate the
2330 strategic plan. The commissioner may fund strategic plan initiatives
2331 with federal grant-in-aid resources available to the state pursuant to
2332 the Money Follows the Person demonstration project pursuant to
2333 Section 6071 of the Deficit Reduction Act, P.L. 109-171, and the State
2334 Balancing Incentive Payments Program under the Patient Protection
2335 and Affordable Care Act, P.L. 111-148.

2336 (NEW) (e) The Commissioner of Public Health, or the
2337 commissioner's designee, may waive the requirements of sections 19-
2338 13-D8t, 19-13-D6 and 19-13-D105 of the regulations of Connecticut
2339 state agencies, if a provider requires such a waiver for purposes of
2340 effectuating the strategic plan developed pursuant to subsection (c) of
2341 this section and the commissioner, or the commissioner's designee,
2342 determines that such waiver will not endanger the health and safety of
2343 the provider's residents or clients. The commissioner, or the
2344 commissioner's designee, may impose conditions on the granting of
2345 any waiver which are necessary to ensure the health and safety of the
2346 provider's residents or clients. The commissioner, or the
2347 commissioner's designee, may revoke any waiver granted pursuant to
2348 this subsection upon a finding that the health or safety of a resident or
2349 client of a provider has been jeopardized.

2350 Sec. 548. Subsection (a) of section 17b-354 of the general statutes is
2351 repealed and the following is substituted in lieu thereof (*Effective*
2352 *July 1, 2011*):

2353 (a) Except for applications deemed complete as of August 9, 1991,
2354 the Department of Social Services shall not accept or approve any
2355 requests for additional nursing home beds or modify the capital cost of
2356 any prior approval for the period from September 4, 1991, through
2357 June 30, 2012, except (1) beds restricted to use by patients with
2358 acquired immune deficiency syndrome or traumatic brain injury; (2)
2359 beds associated with a continuing care facility which guarantees life
2360 care for its residents; (3) Medicaid certified beds to be relocated from
2361 one licensed nursing facility to another licensed nursing facility, to a
2362 new facility to meet a priority need identified in the strategic plan
2363 developed pursuant to subsection (c) of section 17b-369, as amended
2364 by this act, or to a small house nursing home, as defined in section 17b-
2365 372, provided (A) the availability of beds in an area of need will not be
2366 adversely affected; (B) no such relocation shall result in an increase in
2367 state expenditures; and (C) the relocation results in a reduction in the
2368 number of nursing facility beds in the state; (4) a request for no more
2369 than twenty beds submitted by a licensed nursing facility that
2370 participates in neither the Medicaid program nor the Medicare
2371 program, admits residents and provides health care to such residents
2372 without regard to their income or assets and demonstrates its financial
2373 ability to provide lifetime nursing home services to such residents
2374 without participating in the Medicaid program to the satisfaction of
2375 the department, provided the department does not accept or approve
2376 more than one request pursuant to this subdivision; (5) a request for no
2377 more than twenty beds associated with a free standing facility
2378 dedicated to providing hospice care services for terminally ill persons
2379 operated by an organization previously authorized by the Department
2380 of Public Health to provide hospice services in accordance with section
2381 19a-122b; and (6) new or existing Medicaid certified beds to be
2382 relocated from a licensed nursing facility in a municipality with a 2004
2383 estimated population of one hundred twenty-five thousand to a
2384 location within the same municipality provided such Medicaid
2385 certified beds do not exceed sixty beds. Notwithstanding the
2386 provisions of this subsection, any provision of the general statutes or
2387 any decision of the Office of Health Care Access, (i) the date by which

2388 construction shall begin for each nursing home certificate of need in
2389 effect August 1, 1991, shall be December 31, 1992, (ii) the date by which
2390 a nursing home shall be licensed under each such certificate of need
2391 shall be October 1, 1995, and (iii) the imposition of such dates shall not
2392 require action by the Commissioner of Social Services. Except as
2393 provided in subsection (c) of this section, a nursing home certificate of
2394 need in effect August 1, 1991, shall expire if construction has not begun
2395 or licensure has not been obtained in compliance with the dates set
2396 forth in subparagraphs (i) and (ii) of this subsection.

2397 Sec. 549. Subsection (a) of section 19a-494 of the general statutes is
2398 repealed and the following is substituted in lieu thereof (*Effective*
2399 *October 1, 2011*):

2400 (a) The Commissioner of Public Health, after a hearing held in
2401 accordance with the provisions of chapter 54, may take any of the
2402 following actions, singly or in combination, in any case in which [he]
2403 the commissioner finds that there has been a substantial failure to
2404 comply with the requirements established under this chapter, the
2405 Public Health Code [and] or licensing regulations:

2406 (1) Revoke a license or certificate;

2407 (2) Suspend a license or certificate;

2408 (3) Censure a licensee or certificate holder;

2409 (4) Issue a letter of reprimand to a licensee or certificate holder;

2410 (5) Place a licensee or certificate holder on probationary status and
2411 require him to report regularly to the department on the matters which
2412 are the basis of the probation;

2413 (6) Restrict the acquisition of other facilities for a period of time set
2414 by the commissioner; [and]

2415 (7) Issue an order compelling compliance with applicable statutes or
2416 regulations of the department; or

2417 (8) Impose a directed plan of correction.

2418 Sec. 550. Subsection (e) of section 19a-632 of the general statutes is
2419 repealed and the following is substituted in lieu thereof (*Effective July*
2420 *1, 2011*):

2421 (e) If any assessment is not paid when due, [a late fee of ten dollars
2422 shall be added thereto and interest at the rate of one and one-fourth
2423 per cent per month or fraction thereof shall be paid on such assessment
2424 and late fee] the commissioner shall impose a fee equal to (1) two per
2425 cent of the assessment if such failure to pay is for not more than five
2426 days, (2) five per cent of the assessment if such failure to pay is for
2427 more than five days but not more than fifteen days, or (3) ten per cent
2428 of the assessment if such failure to pay is for more than fifteen days. If
2429 a hospital fails to pay any assessment for more than thirty days after
2430 the date when due, the commissioner may, in addition to the fees
2431 imposed pursuant to this subsection, impose a civil penalty of up to
2432 one thousand dollars per day for each day past the initial thirty days
2433 that the assessment is not paid. Any civil penalty authorized by this
2434 subsection shall be imposed by the commissioner in accordance with
2435 subsections (b) to (e), inclusive, of section 19a-653, as amended by this
2436 act.

2437 Sec. 551. Subsection (b) of section 19a-653 of the general statutes is
2438 repealed and the following is substituted in lieu thereof (*Effective July*
2439 *1, 2011*):

2440 (b) If the Department of Public Health has reason to believe that a
2441 violation has occurred for which a civil penalty is authorized by
2442 subsection (a) of this section, or subsection (e) of section 19a-632, as
2443 amended by this act, it shall notify the person or health care facility or
2444 institution by first-class mail or personal service. The notice shall
2445 include: (1) A reference to the sections of the statute or regulation
2446 involved; (2) a short and plain statement of the matters asserted or
2447 charged; (3) a statement of the amount of the civil penalty or penalties
2448 to be imposed; (4) the initial date of the imposition of the penalty; and

2449 (5) a statement of the party's right to a hearing.

2450 Sec. 552. Subsection (a) of section 19a-631 of the general statutes is
2451 repealed and the following is substituted in lieu thereof (*Effective July*
2452 *1, 2011*):

2453 (a) As used in this section, [and] section 19a-632, as amended by this
2454 act, and section 553 of this act, "hospital" means each hospital subject to
2455 the provisions of this chapter and licensed as a short-term acute-care
2456 general hospital or a children's hospital or both by the Department of
2457 Public Health.

2458 Sec. 553. (NEW) (*Effective July 1, 2011*) (a) For purposes of this
2459 section, "electronic funds transfer" has the same meaning as provided
2460 in section 12-685 of the general statutes.

2461 (b) The Department of Public Health may require a hospital to pay
2462 an assessment levied pursuant to section 19a-632 of the general
2463 statutes, as amended by this act, by way of an approved method of
2464 electronic funds transfer.

2465 (c) A hospital making an electronic funds transfer pursuant to this
2466 section shall initiate such transfer in a timely fashion to ensure that a
2467 bank account designated by the department is credited by electronic
2468 funds transfer for the amount of the assessment required to be made
2469 by such method on or before the date such assessment is due.

2470 (d) Where an assessment is required to be made by electronic funds
2471 transfer, any payment made by a method other than electronic funds
2472 transfer shall be treated as an assessment not made in a timely manner,
2473 and any payment made by electronic funds transfer, where the bank
2474 account designated by the department is not credited for the amount
2475 of the assessment on or before the date such assessment is due, shall be
2476 treated as an assessment not made in a timely manner. Any assessment
2477 treated under this subsection as an assessment not made in a timely
2478 manner shall be subject to a penalty in accordance with subsection (e)
2479 of this section.

2480 (e) Where any assessment is treated under subsection (d) of this
2481 section as an assessment not made in a timely manner because it is
2482 made by means other than electronic funds transfer, there shall be
2483 imposed a penalty equal to ten per cent of the assessment required to
2484 be made by electronic funds transfer. Where any assessment made by
2485 electronic funds transfer is treated under subsection (d) of this section
2486 as an assessment not made in a timely manner because the bank
2487 account designated by the department is not credited by electronic
2488 funds transfer for the amount of the assessment on or before the date
2489 such assessment is due, there shall be imposed a penalty equal to (1)
2490 two per cent of the assessment required to be made by electronic funds
2491 transfer, if such failure to pay by electronic funds transfer is for not
2492 more than five days; (2) five per cent of the assessment required to be
2493 made by electronic funds transfer, if such failure to pay by electronic
2494 funds transfer is for more than five days but not more than fifteen
2495 days; or (3) ten per cent of the assessment required to be made by
2496 electronic funds transfer, if such failure to pay by electronic funds
2497 transfer is for more than fifteen days.

2498 (f) The department shall deposit all payments received pursuant to
2499 this section with the State Treasurer. The moneys so deposited shall be
2500 credited to the General Fund and shall be accounted for as expenses
2501 recovered from hospitals.

2502 Sec. 554. (NEW) (*Effective January 1, 2012*) (a) As used in this section:

2503 (1) "Criminal history and patient abuse background search" or
2504 "background search" means (A) a review of the registry of nurse's
2505 aides maintained by the Department of Public Health pursuant to
2506 section 20-102bb of the general statutes, (B) checks of state and national
2507 criminal history records conducted in accordance with section 29-17a
2508 of the general statutes, and (C) a review of any other registry specified
2509 by the Department of Public Health which the department deems
2510 necessary for the administration of a background search program.

2511 (2) "Direct access" means physical access to a patient or resident of a

2512 long-term care facility that affords an individual with the opportunity
2513 to commit abuse or neglect against or misappropriate the property of a
2514 patient or resident.

2515 (3) "Disqualifying offense" means a conviction of any crime
2516 described in 42 USC 1320a-7(a)(1), (2), (3) or (4) or a substantiated
2517 finding of neglect, abuse or misappropriation of property by a state or
2518 federal agency pursuant to an investigation conducted in accordance
2519 with 42 USC 1395i-3(g)(1)(C) or 42 USC 1396r(g)(1)(C).

2520 (4) "Long-term care facility" means any facility, agency or provider
2521 that is a nursing home, as defined in section 19a-521 of the general
2522 statutes, a home health agency, as defined in section 19a-490 of the
2523 general statutes, an assisted living services agency, as defined in
2524 section 19a-490 of the general statutes, an intermediate care facility for
2525 the mentally retarded, as defined in 42 USC 1396d(d), a chronic disease
2526 hospital, as defined in section 19a-550 of the general statutes, or an
2527 agency providing hospice care which is licensed to provide such care
2528 by the Department of Public Health or certified to provide such care
2529 pursuant to 42 USC 1395x.

2530 (b) (1) On or before July 1, 2012, the Department of Public Health
2531 shall create and implement a criminal history and patient abuse
2532 background search program, within available appropriations, in order
2533 to facilitate the performance, processing and analysis of the criminal
2534 history and patient abuse background search of individuals who have
2535 direct access.

2536 (2) The Department of Public Health shall develop a plan to
2537 implement the criminal history and patient abuse background search
2538 program, in accordance with this section. In developing such plan, the
2539 department shall (A) consult with the Commissioners of Emergency
2540 Services and Public Protection, Developmental Services, Mental Health
2541 and Addiction Services, Social Services and Consumer Protection, or
2542 their designees, the State Long-Term Care Ombudsman, or a designee,
2543 the chairperson for the Board of Pardons and Paroles, or a designee, a

2544 representative of each category of long-term care facility and
2545 representatives from any other agency or organization the
2546 Commissioner of Public Health deems appropriate, (B) evaluate factors
2547 including, but not limited to, the administrative and fiscal impact of
2548 components of the program on state agencies and long-term care
2549 facilities, background check procedures currently used by long-term
2550 care facilities, federal requirements pursuant to Section 6201 of the
2551 Patient Protection and Affordable Care Act, P.L. 111-148, as amended
2552 from time to time, and the effect of full and provisional pardons on
2553 employment, and (C) outline (i) an integrated process with the
2554 Department of Public Safety to cross-check and periodically update
2555 criminal information collected in criminal databases, (ii) a process by
2556 which individuals with disqualifying offenses can apply for a waiver,
2557 and (iii) the structure of an Internet-based portal to streamline the
2558 criminal history and patient abuse background search program. The
2559 Department of Public Health shall submit such plan, including a
2560 recommendation as to whether homemaker-companion agencies
2561 should be included in the scope of the background search program, to
2562 the joint standing committees of the General Assembly having
2563 cognizance of matters relating to aging, appropriations and the
2564 budgets of state agencies, and public health, in accordance with the
2565 provisions of section 11-4a of the general statutes, not later than
2566 February 1, 2012.

2567 (c) (1) Except as provided in subdivision (2) of this subsection, each
2568 long-term care facility, prior to extending an offer of employment to or
2569 entering into a contract for the provision of long-term care services
2570 with any individual who will have direct access, or prior to allowing
2571 any individual to have direct access while volunteering at such long-
2572 term care facility, shall require that such individual submit to a
2573 background search. The Department of Public Health shall prescribe
2574 the manner by which (A) long-term care facilities perform the review
2575 of (i) the registry of nurse's aides maintained by the department
2576 pursuant to section 20-102bb of the general statutes, and (ii) any other
2577 registry specified by the department, including requiring long-term

2578 care facilities to report the results of such review to the department,
2579 and (B) individuals submit to state and national criminal history
2580 records checks, including requiring the Department of Public Safety to
2581 report the results of such checks to the Department of Public Health.

2582 (2) No long-term care facility shall be required to comply with the
2583 provisions of this subsection if the individual provides evidence to the
2584 long-term care facility that such individual submitted to a background
2585 search conducted pursuant to subdivision (1) of this subsection not
2586 more than three years immediately preceding the date such individual
2587 applies for employment, seeks to enter into a contract or begins
2588 volunteering with the long-term care facility and that the prior
2589 background search confirmed that the individual did not have a
2590 disqualifying offense.

2591 (d) (1) The Department of Public Health shall review all reports
2592 provided to the department pursuant to subsection (c) of this section. If
2593 any such report contains evidence indicating that an individual has a
2594 disqualifying offense, the department shall provide notice to the
2595 individual and the long-term care facility indicating the disqualifying
2596 offense and providing the individual with the opportunity to file a
2597 request for a waiver pursuant to subdivisions (2) and (3) of this
2598 subsection.

2599 (2) An individual may file a written request for a waiver with the
2600 department not later than thirty days after the date the department
2601 mails notice to the individual pursuant to subdivision (1) of this
2602 subsection. The department shall mail a written determination
2603 indicating whether the department shall grant a waiver pursuant to
2604 subdivision (3) of this subsection not later than fifteen business days
2605 after the department receives the written request from the individual,
2606 except that said time period shall not apply to any request for a waiver
2607 in which an individual challenges the accuracy of the information
2608 obtained from the background search.

2609 (3) The department may grant a waiver from the provisions of

2610 subsection (e) of this section to an individual who identifies mitigating
2611 circumstances surrounding the disqualifying offense, including (A)
2612 inaccuracy in the information obtained from the background search,
2613 (B) lack of a relationship between the disqualifying offense and the
2614 position for which the individual has applied, (C) evidence that the
2615 individual has pursued or achieved rehabilitation with regard to the
2616 disqualifying offense, or (D) that substantial time has elapsed since
2617 committing the disqualifying offense. The department and its
2618 employees shall be immune from liability, civil or criminal, that might
2619 otherwise be incurred or imposed, for good faith conduct in granting
2620 waivers pursuant to this subdivision.

2621 (4) After completing a review pursuant to subdivision (1) of this
2622 subsection, the department shall notify in writing the long-term care
2623 facility to which the individual has applied for employment or with
2624 which the individual seeks to enter into a contract or volunteer (A) of
2625 any disqualifying offense and any information the individual provided
2626 to the department regarding mitigating circumstances surrounding
2627 such offense, or of the lack of a disqualifying offense, and (B) whether
2628 the department granted a waiver pursuant to subdivision (3) of this
2629 subsection.

2630 (e) Notwithstanding the provisions of section 46a-80 of the general
2631 statutes, no long-term care facility shall employ an individual required
2632 to submit to a background search, contract with any such individual to
2633 provide long-term care services or allow such individual to volunteer
2634 if the long-term care facility receives notice from the department that
2635 the individual has a disqualifying offense in the individual's
2636 background search and the department has not granted a waiver
2637 pursuant to subdivision (3) of subsection (d) of this section. A long-
2638 term care facility may, but is not obligated to, employ, enter into a
2639 contract with or allow to volunteer an individual who was granted a
2640 waiver pursuant to said subdivision (3).

2641 (f) (1) Except as provided in subdivision (2) of this subsection, a
2642 long-term care facility shall not employ, enter into a contract with or

2643 allow to volunteer any individual required to submit to a background
2644 search until the long-term care facility receives notice from the
2645 Department of Public Health pursuant to subdivision (4) of subsection
2646 (d) of this section.

2647 (2) A long-term care facility may employ, enter into a contract with
2648 or allow to volunteer an individual required to submit to a background
2649 search on a conditional basis before the long-term care facility receives
2650 notice from the department that such individual does not have a
2651 disqualifying offense, provided: (A) The employment or contractual or
2652 volunteer period on a conditional basis shall last not more than sixty
2653 days, (B) the long-term care facility has begun the review required
2654 under subsection (c) of this section and the individual has submitted to
2655 checks pursuant to subsection (c) of this section, (C) the individual is
2656 subject to direct, on-site supervision during the course of such
2657 conditional employment or contractual or volunteer period, and
2658 (D) the individual, in a signed statement (i) affirms that the individual
2659 has not committed a disqualifying offense, and (ii) acknowledges that
2660 a disqualifying offense reported in the background search required by
2661 subsection (c) of this section shall constitute good cause for termination
2662 and a long-term care facility may terminate the individual if a
2663 disqualifying offense is reported in said background search.

2664 (g) Notwithstanding the provisions of subsection (b) of this section,
2665 the department may phase in implementation of the criminal history
2666 and patient abuse background search program by category of long-
2667 term care facility. No long-term care facility shall be required to
2668 comply with the provisions of subsections (c), (e) and (f) of this section
2669 until the date notice is published by the Commissioner of Public
2670 Health in the Connecticut Law Journal indicating that the
2671 commissioner is implementing the criminal history and patient abuse
2672 background search program for the category of such long-term care
2673 facility.

2674 (h) The department shall adopt regulations, in accordance with the
2675 provisions of chapter 54 of the general statutes, to implement the

2676 provisions of this section. The department may implement policies and
2677 procedures consistent with the provisions of this section while in the
2678 process of adopting such policies and procedures as regulation,
2679 provided notice of intention to adopt regulations is printed in the
2680 Connecticut Law Journal not later than twenty days after the date of
2681 implementation. Such policies and procedures shall be valid until the
2682 time final regulations are effective.

2683 Sec. 555. Section 20-670 of the general statutes is repealed and the
2684 following is substituted in lieu thereof (*Effective January 1, 2012*):

2685 As used in sections 20-670 to 20-680, inclusive, as amended by this
2686 act:

2687 (1) "Certificate" means a certificate of registration issued under
2688 section 20-672, as amended by this act.

2689 (2) "Commissioner" means the Commissioner of Consumer
2690 Protection or any person designated by the commissioner to
2691 administer and enforce the provisions of sections 20-670 to 20-680,
2692 inclusive, as amended by this act.

2693 (3) "Companion services" means nonmedical, basic supervision
2694 services to ensure the well-being and safety of a person in such
2695 person's home.

2696 (4) "Employee" means any person employed by, or who enters into a
2697 contract to perform services for, a homemaker-companion agency,
2698 including, but not limited to, temporary employees, pool employees
2699 and persons treated by such agency as independent contractors.

2700 (5) "Comprehensive background check" means a background
2701 investigation of a prospective employee performed by a homemaker-
2702 companion agency, that includes: (A) A review of any application
2703 materials prepared or requested by the agency and completed by the
2704 prospective employee; (B) an in-person interview of the prospective
2705 employee; (C) verification of the prospective employee's Social

2706 Security number; (D) if the position applied for within the agency
2707 requires licensure on the part of the prospective employee, verification
2708 that the required license is in good standing; (E) a check of the registry
2709 established and maintained pursuant to section 54-257; (F) a review of
2710 criminal conviction information obtained through a search of current
2711 criminal matters of public record in this state based on the prospective
2712 employee's name and date of birth; (G) if the prospective employee has
2713 resided in this state less than three years prior to the date of the
2714 application with the agency, a review of criminal conviction
2715 information from the state or states where such prospective employee
2716 resided during such three-year period; and (H) a review of any other
2717 information that the agency deems necessary in order to evaluate the
2718 suitability of the prospective employee for the position.

2719 [(5)] (6) "Homemaker services" means nonmedical, supportive
2720 services that ensure a safe and healthy environment for a person in
2721 such person's home, such services to include assistance with personal
2722 hygiene, cooking, household cleaning, laundry and other household
2723 chores.

2724 [(6)] (7) "Homemaker-companion agency" means (A) any public or
2725 private organization [, employing] that employs one or more persons
2726 [that] and is engaged in the business of providing companion services
2727 or homemaker services, or (B) any registry. Homemaker-companion
2728 agency shall not include a home health care agency, as defined in
2729 subsection (d) of section 19a-490, or a homemaker-home health aide
2730 agency, as defined in subsection (e) of section 19a-490.

2731 (8) "Registry" means any person or entity engaged in the business of
2732 supplying or referring an individual to or placing an individual with a
2733 consumer to provide homemaker or companion services provided by
2734 such individual, when the individual providing such services is either
2735 (A) directly compensated, in whole or in part, by the consumer, or (B)
2736 treated, referred to or considered by such person or entity as an
2737 independent contractor.

2738 [(7)] (9) "Service plan" means a written document provided by a
2739 homemaker-companion agency to a person utilizing services provided
2740 by such agency, that specifies the anticipated scope, type, frequency
2741 and duration of homemaker or companion services that are to be
2742 provided by such agency for the benefit of the person.

2743 Sec. 556. Subsection (a) of section 20-672 of the general statutes is
2744 repealed and the following is substituted in lieu thereof (*Effective*
2745 *January 1, 2012*):

2746 (a) Any person seeking a certificate of registration as a homemaker-
2747 companion agency shall apply to the Commissioner of Consumer
2748 Protection, in writing, on a form provided by the commissioner. The
2749 application shall include the applicant's name, residence address,
2750 business address, business telephone number and such other
2751 information as the commissioner may require. An applicant shall also
2752 be required to submit to state and national criminal history records
2753 checks in accordance with section 29-17a and to certify under oath to
2754 the commissioner that: (1) Such agency complies with the
2755 requirements of section 20-678, as amended by this act, concerning
2756 employee comprehensive background checks, (2) such agency
2757 provides all persons receiving homemaker or companion services with
2758 a written individualized contract or service plan that specifically
2759 identifies the anticipated scope, type, frequency and duration of
2760 homemaker or companion services provided by the agency to the
2761 person, (3) such agency maintains a surety bond, and (4) all records
2762 maintained by such agency shall be open, at all reasonable hours, for
2763 inspection, copying or audit by the commissioner.

2764 Sec. 557. Subsection (a) of section 20-675 of the general statutes is
2765 repealed and the following is substituted in lieu thereof (*Effective*
2766 *January 1, 2012*):

2767 (a) The Commissioner of Consumer Protection may revoke, suspend
2768 or refuse to issue or renew any certificate of registration as a
2769 homemaker-companion agency or place an agency on probation or

2770 issue a letter of reprimand for: (1) Conduct by the agency, or by an
2771 employee of the agency while in the course of employment, of a
2772 character likely to mislead, deceive or defraud the public or the
2773 commissioner; [or] (2) engaging in any untruthful or misleading
2774 advertising; or (3) failing to perform a comprehensive background
2775 check of a prospective employee or maintain a copy of materials
2776 obtained during a comprehensive background check, as required by
2777 section 20-678, as amended by this act.

2778 Sec. 558. Section 20-678 of the general statutes is repealed and the
2779 following is substituted in lieu thereof (*Effective January 1, 2012*):

2780 [Each homemaker-companion agency shall require that any
2781 employee of such agency hired on or after October 1, 2006,] On or after
2782 January 1, 2012, each homemaker-companion agency, prior to
2783 extending an offer of employment or entering into a contract with a
2784 prospective employee, shall require such prospective employee to
2785 submit to a comprehensive background check. In addition, each
2786 homemaker-companion agency shall require that [any employee of
2787 such agency hired on or after October 1, 2006,] such prospective
2788 employee complete and sign a form which contains questions as to
2789 whether the [current or] prospective employee was convicted of a
2790 crime involving violence or dishonesty in a state court or federal court
2791 in any state; or was subject to any decision imposing disciplinary
2792 action by a licensing agency in any state, the District of Columbia, a
2793 United States possession or territory or a foreign jurisdiction. Any
2794 [employee of a homemaker-companion agency hired on or after
2795 October 1, 2006,] prospective employee who makes a false written
2796 statement regarding such prior criminal convictions or disciplinary
2797 action shall be guilty of a class A misdemeanor. Each homemaker-
2798 companion agency shall maintain a paper or electronic copy of any
2799 materials obtained during the comprehensive background check and
2800 shall make such records available for inspection upon request of the
2801 Department of Consumer Protection.

2802 Sec. 559. (NEW) (*Effective January 1, 2012*) (a) As used in this section,

2803 "comprehensive background check" means a background investigation
2804 performed by a home health agency, as defined in subsection (k) of
2805 section 19a-490 of the general statutes, of an applicant for employment
2806 that includes, but is not limited to: (1) A review of any application
2807 materials prepared or requested by the agency and completed by the
2808 applicant; (2) an in-person interview of the applicant; (3) verification of
2809 the applicant's Social Security number; (4) if the position applied for
2810 within the agency requires licensure on the part of the applicant,
2811 verification that the required license is in good standing; (5) a check of
2812 the registry established and maintained pursuant to section 54-257 of
2813 the general statutes; (6) a review of criminal conviction information
2814 obtained through a search of current criminal matters of public record
2815 in this state based on the applicant's name and date of birth; (7) if the
2816 applicant has resided in this state less than three years prior to the date
2817 of the application for employment, a review of criminal conviction
2818 information from the state or states where such applicant resided
2819 during such three-year period; and (8) a review of any other
2820 information that the agency deems necessary in order to evaluate the
2821 suitability of the applicant for the position.

2822 (b) On or after January 1, 2012, each home health agency, prior to
2823 extending an offer of employment to an applicant for employment
2824 with the agency, shall require such applicant to submit to a
2825 comprehensive background check. In addition, each home health
2826 agency shall require that any such applicant complete and sign a form
2827 disclosing whether the applicant was subject to any decision imposing
2828 disciplinary action by a licensing agency in any state, the District of
2829 Columbia, a United States possession or territory or a foreign
2830 jurisdiction. Any applicant who makes a false statement regarding
2831 such prior disciplinary action with intent to mislead the home health
2832 agency shall be guilty of a class A misdemeanor.

2833 (c) The provisions of this section shall cease to be effective on the
2834 date the Commissioner of Public Health publishes notice in the
2835 Connecticut Law Journal of the department's implementation of the
2836 criminal history and patient abuse background search program for

2837 home health agencies in accordance with the provisions of section 554
2838 of this act.

2839 Sec. 560. Subsection (a) of section 20-32 of the general statutes is
2840 repealed and the following is substituted in lieu thereof (*Effective July*
2841 *1, 2011*):

2842 (a) No licensee under the provisions of this chapter shall use the title
2843 "Doctor" or any abbreviation or synonym thereof unless he or she
2844 holds the degree of doctor of chiropractic from a chartered chiropractic
2845 school or college, in which event the title shall be such as will
2846 designate the licensee as a practitioner of chiropractic. [No person shall
2847 practice as a chiropractor under any name other than the name of the
2848 chiropractor actually owning the practice or a corporate name
2849 containing the name or names of such chiropractors.] Each licensed
2850 chiropractor shall exhibit his or her name at the entrance of his or her
2851 place of business or on his or her office door. The Department of Public
2852 Health shall not initiate a disciplinary action against a licensed
2853 chiropractor who, prior to the effective date of this section, is alleged to
2854 have been practicing as a chiropractor under any name other than the
2855 name of the chiropractor actually owning the practice or a corporate
2856 name containing the name of such chiropractor.

2857 Sec. 561. Section 51 of public act 06-195 is repealed. (*Effective from*
2858 *passage*)"