



House of Representatives

General Assembly

File No. 154

January Session, 2021

Substitute House Bill No. 6398

House of Representatives, March 29, 2021

The Committee on Public Health reported through REP. STEINBERG of the 136th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING VARIOUS REVISIONS TO STATUTES CONCERNING THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (a) of section 17a-548 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective October*
3 *1, 2021*):

4 (a) Any patient shall be permitted to wear his or her own clothes; to
5 keep and use personal possessions including toilet articles; to be present
6 during any search of his or her personal possessions, except a patient
7 hospitalized in the maximum security service of Whiting Forensic
8 Hospital when such search is conducted by police officers and probable
9 cause exists that contraband or hazardous items are hidden in the
10 patient's living area; to have access to individual storage space for such
11 possessions; and in such manner as determined by the facility to spend
12 a reasonable sum of his or her own money for canteen expenses and
13 small purchases. These rights shall be denied only if the superintendent,

14 director or his or her authorized representative determines that it is
15 medically harmful to the patient to exercise such rights. An explanation
16 of such denial shall be placed in the patient's permanent clinical record.

17 Sec. 2. Section 17a-565 of the general statutes is repealed and the
18 following is substituted in lieu thereof (*Effective October 1, 2021*):

19 There shall be an advisory board for Whiting Forensic Hospital,
20 constituted as follows: The Commissioner of Mental Health and
21 Addiction Services, three physicians licensed to practice in this state,
22 two of whom shall be psychiatrists, two attorneys of this state, at least
23 one of whom shall be in active practice and have at least five years'
24 experience in the trial of criminal cases, one licensed psychologist with
25 experience in clinical psychology, one licensed clinical social worker,
26 [and] one person actively engaged in business who shall have at least
27 ten years' experience in business management, and two persons with
28 psychiatric disabilities, at least one of whom shall have received
29 inpatient services in a psychiatric hospital. Annually, on October first,
30 the Governor shall appoint a member or members to replace those
31 whose terms expire for terms of five years each. The board shall elect a
32 chairman and a secretary, who shall keep full and accurate minutes of
33 its meetings and preserve the same. The board shall meet at the call of
34 the chairman at least quarterly. Members of the board shall receive no
35 compensation for their duties as such but shall be reimbursed for their
36 actual expenses incurred in the course of their duties. Said board shall
37 confer with the staff of the hospital and give general consultative and
38 advisory services on problems and matters relating to its work. On any
39 matter relating to the work of the hospital, the board may also confer
40 with the warden or superintendent of the affected Connecticut
41 correctional institution.

42 Sec. 3. Section 17a-450 of the general statutes is repealed and the
43 following is substituted in lieu thereof (*Effective from passage*):

44 (a) There shall be a Department of Mental Health and Addiction
45 Services headed by a Commissioner of Mental Health and Addiction
46 Services, appointed by the Governor with the advice of the Board of

47 Mental Health and Addiction Services established pursuant to section
48 17a-456.

49 (b) For the purposes of chapter 48, the Department of Mental Health
50 and Addiction Services shall be organized to promote comprehensive,
51 client-based services in the areas of mental health treatment and
52 substance abuse treatment and to ensure the programmatic integrity
53 and clinical identity of services in each area. The department shall
54 perform the functions of: Centralized administration, planning and
55 program development; prevention and treatment programs and
56 facilities, both inpatient and outpatient, for persons with psychiatric
57 disabilities or persons with substance use disorders, or both; community
58 mental health centers and community or regional programs and
59 facilities providing services for persons with psychiatric disabilities or
60 persons with substance use disorders, or both; training and education;
61 and research and evaluation of programs and facilities providing
62 services for persons with psychiatric disabilities or persons with
63 substance use disorders, or both. The department shall include, but not
64 be limited to, the following divisions and facilities or their successor
65 facilities: The office of the Commissioner of Mental Health and
66 Addiction Services; Capitol Region Mental Health Center; Connecticut
67 Valley Hospital, including the Addictions Division and the General
68 Psychiatric Division of Connecticut Valley Hospital; the Whiting
69 Forensic Hospital; the Connecticut Mental Health Center; Ribicoff
70 Research Center; the Southwest Connecticut Mental Health System,
71 including the Franklin S. DuBois Center and the Greater Bridgeport
72 Community Mental Health Center; the Southeastern Mental Health
73 Authority; River Valley Services; the Western Connecticut Mental
74 Health Network; and any other state-operated facility for the treatment
75 of persons with psychiatric disabilities or persons with substance use
76 disorders, or both, but shall not include those portions of such facilities
77 transferred to the Department of Children and Families for the purpose
78 of consolidation of children's services. All department divisions and
79 facilities shall provide their patient records to the electronic health
80 record system established pursuant to subdivision (7) of subsection (c)
81 of this section. Disclosures of patient information from the electronic

82 health record system outside of the department shall be in accordance
83 with applicable federal and state law.

84 (c) The Department of Mental Health and Addiction Services may:

85 (1) Solicit and accept for use any gift of money or property made by
86 will or otherwise, and any grant of money, services or property from the
87 federal government, the state or any political subdivision thereof or any
88 private source, and do all things necessary to cooperate with the federal
89 government or any of its agencies in making an application for any
90 grant;

91 (2) Keep records and engage in research and the gathering of relevant
92 statistics;

93 (3) Work with public or private agencies, organizations, facilities or
94 individuals to ensure the operation of the programs set forth in
95 accordance with sections 17a-75 to 17a-83, inclusive, 17a-450 to [17a-484]
96 17a-488a, inclusive, as amended by this act, 17a-495 to 17a-528,
97 inclusive, 17a-540 to 17a-550, inclusive, 17a-560 to 17a-575, inclusive,
98 17a-580 to 17a-603, inclusive, and 17a-615 to 17a-618, inclusive;

99 (4) Hold hearings, issue subpoenas, administer oaths, compel
100 testimony and order production of books, papers and records in the
101 performance of its duties;

102 (5) Operate trustee accounts, in accordance with procedures
103 prescribed by the Comptroller, on behalf of inpatient and outpatient
104 department clients;

105 (6) Notwithstanding [any] the provisions of sections 4-101 and 17b-
106 239₂ [to the contrary,] establish medical reimbursement rates for
107 behavioral health services including, but not limited to, inpatient,
108 outpatient and residential services purchased by the department; [and]

109 (7) Establish and utilize an electronic health record system that allows
110 authorized department personnel to have access to patient health
111 information, including psychiatric records from any of the department's

112 divisions and facilities set forth in subsection (b) of this section for
113 purposes of (A) providing diagnosis and treatment, and (B) improving
114 the department's health care operations, as defined in 45 CFR 164.501;
115 and

116 [(7)] (8) Perform such other acts and functions as may be necessary or
117 convenient to execute the authority expressly granted to it.

118 (d) The Department of Mental Health and Addiction Services is
119 designated as the lead state agency for substance abuse prevention and
120 treatment in this state, and as such is designated as the state methadone
121 authority. As the designated state methadone authority, the department
122 is authorized by the federal Center for Substance Abuse Treatment of
123 the Substance Abuse and Mental Health Services Administration within
124 the United States Department of Health and Human Services to exercise
125 responsibility and authority for the treatment of opiate addiction with
126 an opioid medication, and specifically for: (1) Approval of exceptions to
127 federal opioid treatment protocols in accordance with the Center for
128 Substance Abuse Treatment, (2) monitoring all opioid treatment
129 programs in the state, and (3) approval of Center for Substance Abuse
130 Treatment certification of all opioid treatment programs in the state. The
131 Commissioner of Mental Health and Addiction Services may adopt
132 regulations in accordance with chapter 54 to carry out the provisions of
133 this subsection.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2021	17a-548(a)
Sec. 2	October 1, 2021	17a-565
Sec. 3	from passage	17a-450

PH Joint Favorable Subst.

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note**State Impact:** None**Municipal Impact:** None**Explanation**

The bill has no fiscal impact as it allows but does not require the Department of Mental Health and Addiction Services to establish and utilize an electronic health record system. The bill makes other changes related to certain protocols at Whiting Forensic Hospital and the membership of its advisory board, which have no fiscal impact.

The Out Years**State Impact:** None**Municipal Impact:** None

OLR Bill Analysis

sHB 6398

AN ACT CONCERNING VARIOUS REVISIONS TO STATUTES CONCERNING THE DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES.

SUMMARY

This bill principally makes three unrelated changes to statutes concerning the Department of Mental Health and Addiction Services (DMHAS).

Current law prohibits Whiting Forensic Hospital patients in the hospital's maximum-security service from being present during a search of their personal belongings. The bill limits this prohibition to only when police officers conduct the search and have probable cause that contraband or hazardous items are hidden in the patient's living area.

The bill also allows DMHAS to establish and use a single electronic health record (EHR) system for authorized personnel to access patient health records from any of DMHAS's divisions and facilities for purposes of diagnosing and treating patients and improving operations. Under the bill, all DMHAS divisions and facilities must provide their patient records to the EHR system. Any disclosure of the system's patient information made outside of DMHAS must be done in accordance with state and federal law.

Additionally, the bill increases, from nine to 11, the membership of the Whiting Forensic Hospital advisory board. It does this by adding two members with psychiatric disabilities, at least one of whom must have received inpatient psychiatric hospital services. The advisory board develops policies and sets standards related to the hospital's patients.

Lastly, the bill makes several technical changes.

EFFECTIVE DATE: October 1, 2021, except the provision establishing a single EHR system takes effect upon passage.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 33 Nay 0 (03/12/2021)