



General Assembly

February Session, 2022

***Raised Bill No. 449***

LCO No. 3389



Referred to Committee on PUBLIC HEALTH

Introduced by:  
(PH)

***AN ACT CONCERNING THE RECRUITMENT AND RETENTION OF PHYSICIANS IN THE STATE.***

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

1 Section 1. (NEW) (*Effective July 1, 2022*) (a) For the fiscal year ending  
2 June 30, 2023, and each fiscal year thereafter, the Office of Higher  
3 Education, in collaboration with the Department of Public Health, shall  
4 administer, within available appropriations, a physician loan  
5 reimbursement grant program to persons who meet the eligibility  
6 requirements described in subsection (b) of this section.

7 (b) The program shall provide student loan reimbursement grants to  
8 any physician licensed pursuant to chapter 370 of the general statutes  
9 who (1) graduated from a medical school in the state or completed his  
10 or her medical residency program at a hospital licensed under chapter  
11 368v of the general statutes, and (2) is employed as a physician in the  
12 state.

13 (c) Any physician who satisfies the eligibility requirements  
14 prescribed in subsection (b) of this section shall receive a grant for  
15 reimbursement of all federal and state educational loans in an amount

16 equal to twenty per cent of the balance of such loans per year for each  
17 year the physician is employed as a physician in the state. A physician  
18 qualifying under subsection (b) of this section shall only be reimbursed  
19 for loan payments made while such physician continues to satisfy such  
20 eligibility requirements.

21 (d) Physicians may apply to the Office of Higher Education for grants  
22 under this section at such time and in such manner as the executive  
23 director of the Office of Higher Education prescribes.

24 (e) Any unexpended funds appropriated for purposes of this section  
25 shall not lapse at the end of the fiscal year but shall be available for  
26 expenditure during the next fiscal year.

27 Sec. 2. Section 20-14p of the general statutes is repealed and the  
28 following is substituted in lieu thereof (*Effective July 1, 2022*):

29 (a) For purposes of this section: (1) "Covenant not to compete" means  
30 any provision of an employment or other contract or agreement that  
31 creates or establishes a professional relationship with a physician,  
32 including, but not limited to, a partnership or employment relationship,  
33 and restricts the right of a physician to practice medicine in any  
34 geographic area of the state for any period of time after the termination  
35 or cessation of such [partnership, employment or other] professional  
36 relationship; (2) "physician" means an individual licensed to practice  
37 medicine under this chapter; and (3) "primary site where such physician  
38 practices" means (A) the office, facility or location where a majority of  
39 the revenue derived from such physician's services is generated, or (B)  
40 any other office, facility or location where such physician practices and  
41 mutually agreed to by the parties and identified in the covenant not to  
42 compete.

43 (b) (1) A covenant not to compete is valid and enforceable only if it is:  
44 (A) Necessary to protect a legitimate business interest; (B) reasonably  
45 limited in time, geographic scope and practice restrictions as necessary  
46 to protect such business interest; and (C) otherwise consistent with the  
47 law and public policy. The party seeking to enforce a covenant not to

48 compete shall have the burden of proof in any proceeding.

49 (2) A covenant not to compete in an employment contract, other  
50 contract or agreement that is entered into, amended, extended or  
51 renewed on or after July 1, 2016, shall not: (A) Restrict the physician's  
52 competitive activities (i) for a period of more than one year, and (ii) in a  
53 geographic region of more than fifteen miles from the primary site  
54 where such physician practices; or (B) be enforceable against a physician  
55 if (i) such employment contract, other contract or agreement was not  
56 made in anticipation of, or as part of, a partnership or ownership  
57 agreement and such contract or agreement expires and is not renewed,  
58 unless, prior to such expiration, the [employer] party seeking to enforce  
59 the covenant not to compete makes a bona fide offer to renew the  
60 contract or agreement on the same or similar terms and conditions, or  
61 (ii) the employment [or contractual relationship] contract, other contract  
62 or agreement is terminated by the [employer] party seeking to enforce  
63 the covenant not to compete, unless such employment [or contractual  
64 relationship] contract, other contract or agreement is terminated for  
65 cause.

66 (3) Each covenant not to compete in an employment contract, other  
67 contract or agreement entered into, amended or renewed on and after  
68 July 1, 2016, shall be separately and individually signed by the  
69 physician.

70 (4) A covenant not to compete that is entered into, amended,  
71 extended or renewed on or after July 1, 2022, shall not be enforceable  
72 against a physician if the other party to such employment contract, other  
73 contract or agreement that contains the covenant not to compete is a  
74 medical practice comprised of sixteen or more physicians.

75 (c) The remaining provisions of any contract or agreement that  
76 includes a covenant not to compete that is rendered void and  
77 unenforceable, in whole or in part, under the provisions of this section  
78 shall remain in full force and effect, including provisions that require  
79 the payment of damages resulting from any injury suffered by reason of

80 termination of such contract or agreement.

81       Sec. 3. (*Effective July 1, 2022*) From July 1, 2022, until June 30, 2025, the  
82 Department of Public Health shall waive the payment of the fees for a  
83 license renewal described in subsection (b) of section 19a-88 of the  
84 general statutes for each physician licensed under chapter 370 of the  
85 general statutes.

86       Sec. 4. (*Effective from passage*) (a) There is established a task force to  
87 study the ways in which medical malpractice policies and certain  
88 insurance industry practices result in an increased workload for  
89 physicians and limit a physician's ability to provide basic care to the  
90 physician's patients. Such study shall include, but need not be limited  
91 to, an examination of opportunities for reforming such policies and  
92 practices, including, but not limited to, establishing homestead  
93 protections.

94       (b) The task force shall consist of the following members:

95       (1) Two appointed by the speaker of the House of Representatives;

96       (2) Two appointed by the president pro tempore of the Senate;

97       (3) One appointed by the majority leader of the House of  
98 Representatives;

99       (4) One appointed by the majority leader of the Senate;

100       (5) One appointed by the minority leader of the House of  
101 Representatives;

102       (6) One appointed by the minority leader of the Senate;

103       (7) The Insurance Commissioner, or the commissioner's designee;  
104 and

105       (8) The Commissioner of Public Health, or the commissioner's  
106 designee.

107 (c) Any member of the task force appointed under subdivision (1),  
108 (2), (3), (4), (5) or (6) of subsection (b) of this section may be a member  
109 of the General Assembly.

110 (d) All initial appointments to the task force shall be made not later  
111 than thirty days after the effective date of this section. Any vacancy shall  
112 be filled by the appointing authority.

113 (e) The speaker of the House of Representatives and the president pro  
114 tempore of the Senate shall select the chairpersons of the task force from  
115 among the members of the task force. Such chairpersons shall schedule  
116 the first meeting of the task force, which shall be held not later than sixty  
117 days after the effective date of this section.

118 (f) The administrative staff of the joint standing committee of the  
119 General Assembly having cognizance of matters relating to insurance  
120 shall serve as administrative staff of the task force.

121 (g) Not later than January 1, 2023, the task force shall submit a report  
122 on its findings and recommendations to the joint standing committees  
123 of the General Assembly having cognizance of matters relating to  
124 insurance and public health, in accordance with the provisions of  
125 section 11-4a of the general statutes. The task force shall terminate on  
126 the date that it submits such report or January 1, 2023, whichever is later.

127 Sec. 5. (NEW) (*Effective July 1, 2022*) (a) Not later than January 1, 2023,  
128 the Commissioner of Public Health shall establish a Physician  
129 Recruitment grant program. The program shall provide an incentive  
130 grant in the amount of twenty thousand dollars for physicians who  
131 relocate to this state and practice full-time as a physician in this state for  
132 not less than two years after relocating. The commissioner shall define  
133 the nature, description and systems designed for grant proposals.

134 (b) The commissioner may adopt regulations, in accordance with the  
135 provisions of chapter 54 of the general statutes, to carry out the  
136 provisions of this section.

137       Sec. 6. (*Effective from passage*) The Department of Public Health shall  
138 study, in consultation with medical schools and teaching hospitals  
139 affiliated with a medical school in the state, methods for supporting and  
140 increasing medical residency programs in the fields of internal  
141 medicine, family practice, pediatrics, psychiatry, obstetrics and  
142 gynecology and rural health care. Not later than January 1, 2023, the  
143 Commissioner of Public Health shall report, in accordance with the  
144 provisions of section 11-4a of the general statutes to the joint standing  
145 committee of the General Assembly having cognizance of matters  
146 relating to public health regarding the results of such study.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2022</i>	New section
Sec. 2	<i>July 1, 2022</i>	20-14p
Sec. 3	<i>July 1, 2022</i>	New section
Sec. 4	<i>from passage</i>	New section
Sec. 5	<i>July 1, 2022</i>	New section
Sec. 6	<i>from passage</i>	New section

**Statement of Purpose:**

To recruit and retain physicians in the state.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*