



General Assembly

Amendment

February Session, 2024

LCO No. 5682



Offered by:

REP. MCCARTHY VAHEY, 133rd Dist.

SEN. ANWAR, 3rd Dist.

To: Subst. House Bill No. 5290

File No. 404

Cal. No. 260

"AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES."

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. Subsection (c) of section 7-48 of the general statutes is
4 repealed and the following is substituted in lieu thereof (*Effective October*
5 *1, 2024*):

6 (c) (1) When a birth occurs outside an institution, the certificate shall
7 be prepared and filed by the physician or midwife in attendance at or
8 immediately after the birth or, in the absence of such a person, by the
9 [father or mother] parent of the child, pursuant to the provisions of
10 section 19a-41-1 of the regulations of Connecticut state agencies.

11 (2) If the parent is unable to provide the information required to
12 prepare and file the certificate pursuant to the provisions of section 19a-
13 41-1 of the regulations of Connecticut state agencies, such parent may,

14 prior to the child's first birthday, petition the court of probate for the
15 district where the birth is alleged to have occurred for an order requiring
16 the registrar of vital statistics for the town where the birth occurred to
17 create and file the certificate. The petitioner shall include with the
18 petition the affidavits and other documentary evidence submitted to the
19 registrar pursuant to the provisions of section 19a-41-1 of the regulations
20 of Connecticut state agencies. Such court shall schedule a hearing and
21 cause notice of the hearing to be given to the following persons: (A) The
22 petitioner; (B) the parent or legal guardian of the child, if the parent or
23 legal guardian are not the petitioner; (C) the registrar; and (D) any other
24 person as the court may determine has an interest in the hearing. The
25 registrar or the registrar's authorized representative may appear and
26 testify at such hearing. The petitioner shall have the burden of proving
27 the parentage of the child and that the birth occurred on the date and at
28 the place alleged by the petitioner. If the court finds by a preponderance
29 of the evidence the parentage of the child and that the birth occurred on
30 the date and at the place alleged by the petitioner, the court shall issue
31 an order directing the registrar to prepare, register and file the
32 certificate.

33 (3) In any proceeding under subdivision (2) of this subsection, the
34 court, on the motion of any party or on the court's own motion, may
35 order genetic testing, as provided in sections 46b-495 to 46b-500,
36 inclusive, to determine parentage. The petitioner shall be responsible for
37 the cost of any such genetic test required by the court, except the
38 department shall pay such cost for any petitioner who is found by the
39 court to be indigent. If the results of such test indicate a ninety-nine per
40 cent or greater probability that a person is the parent of the child for
41 whom a registration of birth is sought, the results shall constitute a
42 rebuttable presumption that the person is, in fact, the parent of the child
43 for whom a registration of birth is sought.

44 Sec. 2. Subdivision (1) of subsection (a) of section 7-51 of the general
45 statutes is repealed and the following is substituted in lieu thereof
46 (*Effective October 1, 2024*):

47 (a) (1) The department and registrars of vital statistics shall restrict
48 access to and issuance of a certified copy of birth and fetal death records
49 and certificates less than one hundred years old, to the following eligible
50 parties: (A) The person whose birth is recorded, if such person is (i) over
51 eighteen years of age, (ii) a certified homeless youth, as defined in
52 section 7-36, as amended by this act, or (iii) a minor emancipated
53 pursuant to sections 46b-150 to 46b-150e, inclusive; (B) such person's
54 child, grandchild, spouse, parent, legal guardian, legal custodian or
55 grandparent; (C) the chief executive officer of the municipality where
56 the birth or fetal death occurred, or the chief executive officer's
57 authorized agent; (D) the local director of health for the town or city
58 where the birth or fetal death occurred or where the person who gave
59 birth was a resident at the time of the birth or fetal death, or the director's
60 authorized agent; (E) attorneys-at-law representing such person or such
61 person's parent, guardian, child or surviving spouse; (F) a conservator
62 of the person appointed for such person; (G) a member of a genealogical
63 society incorporated or authorized by the Secretary of the State to do
64 business or conduct affairs in this state; (H) an agent of a state or federal
65 agency as approved by the department; and (I) a researcher approved
66 by the department pursuant to section 19a-25.

67 Sec. 3. Section 8-3i of the general statutes is repealed and the
68 following is substituted in lieu thereof (*Effective July 1, 2024*):

69 (a) As used in this section "water company" means a water company,
70 as defined in section 25-32a, and "petition" includes a petition or
71 proposal to change the regulations, boundaries or classifications of
72 zoning districts.

73 (b) When an application, petition, request or plan is filed with the
74 zoning commission, planning and zoning commission or zoning board
75 of appeals of any municipality concerning any [project on any site that]
76 land, all or a portion of which is within the aquifer protection area
77 delineated pursuant to section 22a-354c or the watershed of a water
78 company, the applicant or the person making the filing shall: (1) Provide
79 written notice of the application, petition, request or plan to the water

80 company and the Department of Public Health; and (2) determine if the
81 [project] land is within the watershed of a water company by consulting
82 the maps posted on the department's Internet web site showing the
83 boundaries of the watershed. Such applicant shall send such notice to
84 the water company by certified mail, return receipt requested, and to
85 the department by electronic mail to the electronic mail address
86 designated on its Internet web site for receipt of such notice. Such
87 applicant shall mail such notice not later than seven days after the date
88 of the application. Such water company and the Commissioner of Public
89 Health may, through a representative, appear and be heard at any
90 hearing on any such application, petition, request or plan.

91 (c) Notwithstanding the provisions of subsection (b) of this section,
92 when an agent of the zoning commission, planning and zoning
93 commission or zoning board of appeals is authorized to approve an
94 application, petition, request or plan concerning any [site] land that is
95 within the aquifer protection area delineated pursuant to section 22a-
96 354c or the watershed of a water company without the approval of the
97 zoning commission, planning and zoning commission or zoning board
98 of appeals, and such agent determines that the proposed activity will
99 not adversely affect the public water supply, the applicant or person
100 making the filing shall not be required to notify the water company or
101 the Department of Public Health.

102 Sec. 4. Subsections (a) and (b) of section 19a-6i of the general statutes
103 are repealed and the following is substituted in lieu thereof (*Effective*
104 *from passage*):

105 (a) There is established a school-based health center advisory
106 committee for the purpose of advising the Commissioner of Public
107 Health on matters relating to (1) statutory and regulatory changes to
108 improve health care through access to school-based health centers and
109 expanded school health sites, (2) minimum standards for the provision
110 of services in school-based health centers and expanded school health
111 sites to ensure that high quality health care services are provided in
112 school-based health centers and expanded school health sites, as such

113 terms are defined in section 19a-6r, and (3) other topics of relevance to
114 the school-based health centers and expanded school sites, as requested
115 by the commissioner.

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

117 (1) One appointed by the speaker of the House of Representatives,
118 who shall be a family advocate or a parent whose child utilizes school-
119 based health center services;

120 (2) One appointed by the president pro tempore of the Senate, who
121 shall be a school nurse;

122 (3) One appointed by the majority leader of the House of
123 Representatives, who shall be a representative of a school-based health
124 center that is sponsored by a community health center;

125 (4) One appointed by the majority leader of the Senate, who shall be
126 a representative of a school-based health center that is sponsored by a
127 nonprofit health care agency;

128 (5) One appointed by the minority leader of the House of
129 Representatives, who shall be a representative of a school-based health
130 center that is sponsored by a school or school system;

131 (6) One appointed by the minority leader of the Senate, who shall be
132 a representative of a school-based health center that does not receive
133 state funds;

134 (7) Two appointed by the Governor, one [each] of whom shall be a
135 representative of the Connecticut Chapter of the American Academy of
136 Pediatrics and one of whom shall be a representative of a school-based
137 health center that is sponsored by a hospital, a staff member of a
138 children's hospital or a pediatric health care clinician;

139 (8) Three appointed by the Commissioner of Public Health, one of
140 whom shall be a representative of a school-based health center that is
141 sponsored by a local health department, one of whom shall be from a

142 municipality that has a population of at least fifty thousand but less than
143 one hundred thousand and that operates a school-based health center
144 and one of whom shall be from a municipality that has a population of
145 at least one hundred thousand and that operates a school-based health
146 center;

147 (9) The Commissioner of Public Health, or the commissioner's
148 designee;

149 (10) The Commissioner of Social Services, or the commissioner's
150 designee;

151 (11) The Commissioner of Mental Health and Addiction Services, or
152 the commissioner's designee;

153 (12) The Commissioner of Education, or the commissioner's designee;

154 (13) The Commissioner of Children and Families, or the
155 commissioner's designee;

156 (14) The executive director of the Commission on Women, Children,
157 Seniors, Equity and Opportunity, or the executive director's designee;
158 and

159 (15) Three school-based health center providers, one of whom shall
160 be the executive director of the Connecticut Association of School-Based
161 Health Centers and two of whom shall be appointed by the board of
162 directors of the Connecticut Association of School-Based Health
163 Centers.

164 Sec. 5. Section 19a-36i of the general statutes is repealed and the
165 following is substituted in lieu thereof (*Effective July 1, 2024*):

166 (a) No person, firm or corporation shall operate or maintain any food
167 establishment where food or beverages are served or sold to the public
168 in any town, city or borough without obtaining a valid permit to operate
169 from the director of health of such town, city or borough, in a form and
170 manner prescribed by the director of health. The director of health shall

171 issue a permit to operate a food establishment upon receipt of an
172 application if the food establishment meets the requirements of this
173 section. All food establishments shall comply with the food code.

174 (b) All food establishments shall be inspected by a certified food
175 inspector in a form and manner prescribed by the commissioner. The
176 Commissioner of Public Health may, [in consultation with] after
177 notifying the Commissioner of Consumer Protection, grant a variance
178 for the requirements of the food code if the Commissioner of Public
179 Health determines that such variance would not result in a health
180 hazard or nuisance.

181 [(c) No permit to operate a food establishment shall be issued by a
182 director of health unless the applicant has provided the director of
183 health with proof of registration with the department and a written
184 application for a permit in a form and manner prescribed by the
185 department. Temporary food establishments and certified farmers'
186 markets, as defined in section 22-6r, shall be exempt from registering
187 with the Department of Public Health.]

188 [(d)] (c) Each class 2 food establishment, class 3 food establishment
189 and class 4 food establishment shall employ a certified food protection
190 manager. No person shall serve as a certified food protection manager
191 unless such person has satisfactorily passed a test as part of a food
192 protection manager certification program that is evaluated and
193 approved by an accrediting agency recognized by the Conference for
194 Food Protection as conforming to its standards for accreditation of food
195 protection manager certification programs. A certified food inspector
196 shall verify that the food protection manager is certified upon inspection
197 of the food establishment. The owner or manager of the food service
198 establishment shall designate an alternate person or persons to be in
199 charge at all times when the certified food protection manager cannot
200 be present. The alternate person or persons in charge shall be
201 responsible for ensuring the following: (1) All employees are in
202 compliance with the requirements of this section; (2) foods are safely
203 prepared in accordance with the requirements of the food code; (3)

204 emergencies are managed properly; (4) a food inspector is admitted into
205 the food establishment upon request; and (5) he or she receives and
206 signs inspection reports.

207 [(e)] (d) The commissioner shall collaborate with the directors of
208 health to develop a process that allows for the reciprocal licensing of an
209 itinerant food vending establishment that has obtained a valid permit or
210 license under subsection (a) of this section and seeks to operate as an
211 itinerant food vending establishment in another town, city or borough.
212 Not later than December 1, 2021, the commissioner shall submit a report,
213 in accordance with the provisions of section 11-4a, to the joint standing
214 committee of the General Assembly having cognizance of matters
215 relating to public health, of the process developed pursuant to this
216 subsection. Not later than January 1, 2022, the commissioner and each
217 director of health shall implement such process.

218 Sec. 6. Subdivision (1) of subsection (g) of section 19a-88 of the general
219 statutes is repealed and the following is substituted in lieu thereof
220 (*Effective July 1, 2024*):

221 (g) (1) The Department of Public Health shall administer a secure on-
222 line license renewal system for persons holding a license [to practice
223 medicine or surgery under chapter 370, dentistry under chapter 379,
224 nursing under chapter 378 or nurse-midwifery under chapter 377]
225 under chapters 370 to 373, inclusive, 375 to 378, inclusive, 379 to 381b,
226 inclusive, 382a, 383 to 383d, inclusive, 383f to 388, inclusive, 393a, 395,
227 397a to 399, inclusive, 400a and 400c. The department shall require such
228 persons to renew their licenses using the on-line renewal system and to
229 pay professional services fees on-line by means of a credit card or
230 electronic transfer of funds from a bank or credit union account, except
231 in extenuating circumstances, including, but not limited to,
232 circumstances in which a licensee does not have access to a credit card
233 and submits a notarized affidavit affirming that fact, the department
234 may allow the licensee to renew his or her license using a paper form
235 prescribed by the department and pay professional service fees by check
236 or money order.

237 Sec. 7. Subsections (b) and (c) of section 19a-580h of the general
238 statutes are repealed and the following is substituted in lieu thereof
239 (*Effective from passage*):

240 (b) The Commissioner of Public Health shall establish a state-wide
241 program to implement the use of medical orders for life-sustaining
242 treatment by health care providers. Patient participation in the program
243 shall be voluntary. An agreement to participate in the program shall be
244 documented by the signature of the patient or the patient's legally
245 authorized representative on the medical order for [life sustaining] life-
246 sustaining treatment form, [and verified by the signature of a witness.]

247 (c) Notwithstanding the provisions of sections 19a-495 and 19a-580d
248 and the regulations adopted thereunder, the Commissioner of Public
249 Health shall adopt regulations, in accordance with the provisions of
250 chapter 54, for the program established in accordance with this section
251 to ensure that: (1) Medical orders for life-sustaining treatment are
252 transferrable among, and recognized by, various types of health care
253 institutions subject to any limitations set forth in federal law; (2) any
254 procedures and forms developed for recording medical orders for life-
255 sustaining treatment require the signature of the patient or the patient's
256 legally authorized representative [and a witness] on the medical order
257 for life-sustaining treatment and the patient or the patient's legally
258 authorized representative is given the original order immediately after
259 signing such order and a copy of such order is immediately placed in
260 the patient's medical record; (3) prior to requesting the signature of the
261 patient or the patient's legally authorized representative on such order,
262 the physician, advanced practice registered nurse or physician assistant
263 writing the medical order discusses with the patient or the patient's
264 legally authorized representative the patient's goals for care and
265 treatment and the benefits and risks of various methods for
266 documenting the patient's wishes for end-of-life treatment, including
267 medical orders for life-sustaining treatment; and (4) each physician,
268 advanced practice registered nurse or physician assistant that intends to
269 write a medical order for life-sustaining treatment receives training
270 concerning: (A) The importance of talking with patients about their

271 personal treatment goals; (B) methods for presenting choices for end-of-
272 life care that elicit information concerning patients' preferences and
273 respects those preferences without directing patients toward a
274 particular option for end-of-life care; (C) the importance of fully
275 informing patients about the benefits and risks of an immediately
276 effective medical order for life-sustaining treatment; (D) awareness of
277 factors that may affect the use of medical orders for life-sustaining
278 treatment, including, but not limited to, advanced health care directives,
279 race, ethnicity, age, gender, socioeconomic position, immigrant status,
280 sexual minority status, language, disability, homelessness, mental
281 illness and geographic area of residence; and (E) procedures for
282 properly completing and effectuating medical orders for life-sustaining
283 treatment.

284 Sec. 8. Section 20-123b of the general statutes is repealed and the
285 following is substituted in lieu thereof (*Effective October 1, 2024*):

286 (a) On and after the effective date of the regulations adopted in
287 accordance with subsection [(d)] (e) of this section, no dentist licensed
288 under this chapter shall use moderate sedation, deep sedation or general
289 anesthesia, as these terms are defined in section 20-123a, on any patient
290 unless such dentist has a permit, currently in effect, issued by the
291 commissioner, initially for a period of twelve months and renewable
292 annually thereafter, authorizing the use of such moderate sedation,
293 deep sedation or general anesthesia. A dentist may use minimal
294 sedation, as defined in section 20-123a, without obtaining a permit
295 issued by the commissioner.

296 (b) No applicant shall be issued [a permit initially] an initial permit
297 or reinstatement of a lapsed permit as required in subsection (a) of this
298 section unless (1) the commissioner approves the results of an on-site
299 evaluation of the applicant's facility conducted in consultation with the
300 Connecticut Society of Oral and Maxillo-Facial Surgeons by an
301 individual or individuals selected from a list of site evaluators approved
302 by the commissioner, provided such evaluation is conducted without
303 cost to the state, (2) the commissioner is satisfied that the applicant is in

304 compliance with guidelines in the American Dental Association
305 Guidelines for Teaching and the Comprehensive Control of Pain and
306 Anxiety in Dentistry or successor guidelines, and (3) such initial
307 application includes payment of a fee in the amount of two hundred
308 dollars. An applicant who has obtained an initial permit or
309 reinstatement of a lapsed permit as required by subsection (a) of this
310 section may administer moderate sedation or general anesthesia at an
311 additional facility, provided such facility has had an approved on-site
312 evaluation conducted in consultation with the Connecticut Society of
313 Oral and Maxillo-Facial Surgeons by an individual or individuals
314 selected from a list of site evaluators approved by the commissioner and
315 such evaluation is conducted without cost to the state. The
316 commissioner may waive the on-site evaluation of any additional
317 facility, provided such facility has been evaluated in accordance with
318 subdivision (1) of this subsection in the preceding five years. Any
319 dentist requesting a waiver shall apply in writing to the commissioner
320 in a form and manner prescribed by the commissioner. The
321 commissioner may impose any conditions deemed appropriate on the
322 granting of a waiver or revoke any waiver if the commissioner finds that
323 the health, safety or welfare of any patient has been jeopardized.

324 (c) The commissioner may renew such permit annually, provided (1)
325 application for renewal is received by the commissioner not later than
326 three months after the date of expiration of such permit, (2) payment of
327 a renewal fee of two hundred dollars is received with such application,
328 and (3) an on-site evaluation of the dentist's facility [is] has been
329 conducted in the preceding five years in consultation with The
330 Connecticut Society of Oral and Maxillo-Facial Surgeons by an
331 individual or individuals selected from a list of site evaluators approved
332 by the commissioner, provided such evaluation is conducted without
333 cost to the state on a schedule established in regulations adopted
334 pursuant to this section and the commissioner approves the results of
335 each such evaluation.

336 (d) The commissioner, in consultation with the Anesthesia
337 Committee of the Connecticut Society of Oral and Maxillo-Facial

338 Surgeons, shall post a list of office equipment, personnel and emergency
339 medications that are required to be maintained at a facility that
340 administers moderate sedation, deep sedation or general anesthesia on
341 the department's Internet web site and distribute such list to each
342 permitted dentist in the state. A dentist who has obtained a permit
343 pursuant to the provisions of this section shall maintain such
344 equipment, personnel and emergency medications at each such facility.

345 [(d)] (e) The commissioner, with the advice and assistance of the State
346 Dental Commission, shall adopt regulations in accordance with the
347 provisions of chapter 54 to implement the provisions of this section.

348 [(e)] (f) The commissioner or the State Dental Commission may deny
349 or revoke a permit based on disciplinary action taken against a dentist
350 pursuant to the provisions of section 20-114.

351 Sec. 9. Subsection (n) of section 25-32 of the 2024 supplement to the
352 general statutes is repealed and the following is substituted in lieu
353 thereof (*Effective from passage*):

354 (n) (1) On and after the effective date of regulations adopted under
355 this subsection, no person [may] shall operate any water treatment
356 plant, water distribution system or small water system that treats or
357 supplies water used or intended for use by the public, test any backflow
358 prevention device, [or] perform a cross connection survey without a
359 certificate issued by the commissioner under this subsection or operate
360 any water treatment plant or water distribution system as an operator-
361 in-training unless such person is issued a certificate by the
362 commissioner under this subsection. The commissioner shall adopt
363 regulations, in accordance with chapter 54, to provide: (A) Standards for
364 the operation of such water treatment plants, water distribution systems
365 and small water systems; (B) standards and procedures for the issuance
366 of certificates to operators and operators-in-training of such water
367 treatment plants [,] and water distribution systems and operators of
368 small water systems, including, but not limited to, standards and
369 procedures for the department's approval of third parties to administer

370 certification examinations to such operators and operators-in-training;
371 (C) procedures for the renewal of such certificates to operators every
372 three years; (D) standards for training required for the issuance or
373 renewal of a certificate; (E) standards and procedures for the
374 department's approval of course providers and courses of study as they
375 relate to certified operators and certified operators-in-training of water
376 treatment plants [,] and water distribution systems and certified
377 operators of small water systems and certified persons who test
378 backflow prevention devices or perform cross connection surveys for
379 initial and renewal applications; and (F) standards and procedures for
380 the issuance and renewal of certificates to persons who test backflow
381 prevention devices or perform cross connection surveys. Such
382 regulations shall be consistent with applicable federal law and
383 guidelines for operator certification programs promulgated by the
384 United States Environmental Protection Agency. For purposes of this
385 subsection, "small water system" means a public water system, as
386 defined in section 25-33d, that serves less than one thousand persons
387 and has no treatment or has only treatment that does not require any
388 chemical treatment, process adjustment, backwashing or media
389 regeneration by an operator.

390 (2) The commissioner may take any disciplinary action set forth in
391 section 19a-17, except for the assessment of a civil penalty under
392 subdivision (7) of subsection (a) of section 19a-17, against an operator,
393 an operator-in-training, a person who tests backflow prevention devices
394 or a person who performs cross connection surveys holding a certificate
395 issued under this subsection for any of the following reasons: (A) Fraud
396 or material deception in procuring a certificate, the renewal of a
397 certificate or the reinstatement of a certificate; (B) fraud or material
398 deception in the performance of the certified operator's or certified
399 operator-in-training's professional activities; (C) incompetent, negligent
400 or illegal performance of the certified operator's or certified operator-in-
401 training's professional activities; (D) conviction of the certified operator
402 or certified operator-in-training for a felony; or (E) failure of the certified
403 operator or certified operator-in-training to complete the training

404 required under subdivision (1) of this subsection.

405 (3) The commissioner may issue an initial certificate to perform a
406 function set forth in subdivision (1) of this subsection upon receipt of a
407 completed application, in a form prescribed by the commissioner,
408 together with an application fee as follows: (A) For a water treatment
409 plant, water distribution system or small water system operator
410 certificate, or operator-in-training certificate for a water treatment plant
411 or water distribution system, two hundred twenty-four dollars, except
412 there shall be no such application fee required for a student enrolled in
413 an accredited high school small water system operator certification
414 course; (B) for a backflow prevention device tester certificate, one
415 hundred fifty-four dollars; and (C) for a cross-connection survey
416 inspector certificate, one hundred fifty-four dollars. A certificate issued
417 pursuant to this subdivision shall expire three years from the date of
418 issuance unless renewed by the certificate holder prior to such
419 expiration date, except a certificate issued for an operator-in-training
420 pursuant to this section shall expire six years from the date of issuance
421 and shall not be renewable. The commissioner may renew a certificate,
422 other than a certificate for an operator-in-training, for an additional
423 three years upon receipt of a completed renewal application, in a form
424 prescribed by the commissioner, together with a renewal application fee
425 as follows: (i) For a water treatment plant, water distribution system or
426 small water system operator certificate, ninety-eight dollars; (ii) for a
427 backflow prevention device tester certificate, sixty-nine dollars; and (iii)
428 for a cross-connection survey inspector certificate, sixty-nine dollars.

429 Sec. 10. Section 7-36 of the general statutes is repealed and the
430 following is substituted in lieu thereof (*Effective from passage*):

431 As used in this chapter and sections 19a-40 to 19a-45, inclusive, 19a-
432 320, as amended by this act, 19a-322, as amended by this act, and 19a-
433 323, as amended by this act, unless the context otherwise requires:

434 (1) "Registrar of vital statistics" or "registrar" means the registrar of
435 births, marriages, deaths and fetal deaths or any public official charged

436 with the care of returns relating to vital statistics;

437 (2) "Registration" means the process by which vital records are
438 completed, filed and incorporated into the official records of the
439 department;

440 (3) "Institution" means any public or private facility that provides
441 inpatient medical, surgical or diagnostic care or treatment, or nursing,
442 custodial or domiciliary care, or to which persons are committed by law;

443 (4) "Vital records" means a certificate of birth, death, fetal death or
444 marriage;

445 (5) "Certified copy" means a copy of a birth, death, fetal death or
446 marriage certificate that (A) includes all information on the certificate
447 except such information that is nondisclosable by law, (B) is issued or
448 transmitted by any registrar of vital statistics, (C) includes an attested
449 signature and the raised seal of an authorized person, and (D) if
450 submitted to the department, includes all information required by the
451 commissioner;

452 (6) "Uncertified copy" means a copy of a birth, death, fetal death or
453 marriage certificate that includes all information contained in a certified
454 copy except an original attested signature and a raised seal of an
455 authorized person;

456 (7) "Authenticate" or "authenticated" means to affix to a vital record
457 in paper format the official seal, or to affix to a vital record in electronic
458 format the user identification, password, or other means of electronic
459 identification, as approved by the department, of the creator of the vital
460 record, or the creator's designee, by which affixing the creator of such
461 paper or electronic vital record, or the creator's designee, affirms the
462 integrity of such vital record;

463 (8) "Attest" means to verify a vital record in accordance with the
464 provisions of subdivision (5) of this section;

465 (9) "Correction" means to change or enter new information on a

466 certificate of birth, marriage, death or fetal death, within one year of the
467 date of the vital event recorded in such certificate, in order to accurately
468 reflect the facts existing at the time of the recording of such vital event,
469 where such changes or entries are to correct errors on such certificate
470 due to inaccurate or incomplete information provided by the informant
471 at the time the certificate was prepared, or to correct transcribing,
472 typographical or clerical errors;

473 (10) "Amendment" means to (A) change or enter new information on
474 a certificate of birth, marriage, death or fetal death, more than one year
475 after the date of the vital event recorded in such certificate, in order to
476 accurately reflect the facts existing at the time of the recording of the
477 event, (B) create a replacement certificate of birth for matters pertaining
478 to parentage and gender change, (C) create a replacement certificate of
479 marriage for matters pertaining to gender change, or (D) reflect a legal
480 name change in accordance with section 19a-42 or make a modification
481 to a cause of death;

482 (11) "Acknowledgment of paternity" means to legally acknowledge
483 paternity of a child pursuant to section 46b-570;

484 (12) "Adjudication of paternity" means to legally establish paternity
485 through an order of a court of competent jurisdiction;

486 (13) "Parentage" includes matters relating to adoption, surrogacy
487 agreements, paternity and maternity;

488 (14) "Department" means the Department of Public Health;

489 (15) "Commissioner" means the Commissioner of Public Health or the
490 commissioner's designee;

491 (16) "Surrogacy agreement" means an agreement between one or
492 more intended parents and a person who is not an intended parent in
493 which such person agrees to become pregnant through assisted
494 reproduction and which provides that each intended parent is a parent
495 of a child conceived under the agreement. Unless the context otherwise

496 requires, "surrogacy agreement" includes an agreement with a person
497 acting as a gestational surrogate and an agreement with a person acting
498 as a genetic surrogate;

499 (17) "Intended parent" means a person, married or unmarried, who
500 manifests an intent to be legally bound as a parent of a child conceived
501 by assisted reproduction;

502 (18) "Foundling" means (A) a child of unknown parentage, or (B) an
503 infant voluntarily surrendered pursuant to the provisions of section 17a-
504 58;

505 (19) "Certified homeless youth" means a person who is at least fifteen
506 years of age but less than eighteen years of age, is not in the physical
507 custody of a parent or legal guardian, who is a homeless child or youth,
508 as defined in 42 USC 11434a, as amended from time to time, and who
509 has been certified as homeless by (A) a school district homeless liaison,
510 (B) the director of an emergency shelter program funded by the United
511 States Department of Housing and Urban Development, or the
512 director's designee, (C) the director of a runaway or homeless youth
513 basic center or transitional living program funded by the United States
514 Department of Health and Human Services, or the director's designee,
515 or (D) the director of a program of a nonprofit organization or
516 municipality that is contracted with the homeless youth program
517 established pursuant to section 17a-62a; [and]

518 (20) "Certified homeless young adult" means a person who is at least
519 eighteen years of age but less than twenty-five years of age who has
520 been certified as homeless by (A) a school district homeless liaison, (B)
521 the director of an emergency shelter program funded by the United
522 States Department of Housing and Urban Development, or the
523 director's designee, (C) the director of a runaway or homeless youth
524 basic center or transitional living program funded by the United States
525 Department of Health and Human Services, or the director's designee,
526 or (D) the director of a program of a nonprofit organization or
527 municipality that is contracted with the homeless youth program

528 established pursuant to section 17a-62a;

529 (21) "Cremation" means the disposition of a body through
530 incineration or alkaline hydrolysis; and

531 (22) "Crematory" means an establishment at which human remains
532 are reduced to bone fragments through incineration or alkaline
533 hydrolysis.

534 Sec. 11. Section 19a-320 of the general statutes is repealed and the
535 following is substituted in lieu thereof (*Effective from passage*):

536 (a) Any resident of this state, or any corporation formed under the
537 law of this state, may erect, maintain and conduct a crematory in this
538 state and provide the necessary appliances and facilities for the disposal
539 by incineration of the bodies of the dead, in accordance with the
540 provisions of this section. The location of such crematory shall be within
541 the confines of an established cemetery containing not less than twenty
542 acres, which cemetery shall have been in existence and operation for at
543 least five years immediately preceding the time of the erection of such
544 crematory, or shall be within the confines of a plot of land approved for
545 the location of a crematory by the selectmen of any town, the mayor and
546 council or board of aldermen of any city and the warden and burgesses
547 of any borough; provided, in any town, city or borough having a zoning
548 commission, such commission shall have the authority to grant such
549 approval. On and after July 1, 2017, no new crematory shall be located
550 within five hundred feet of any residential structure or land for
551 residential purposes not owned by the owner of the crematory.

552 (b) Application for such approval shall be made in writing to the local
553 authority specified in subsection (a) of this section and a hearing shall
554 be held within the town, city or borough in which such location is
555 situated within sixty-five days from the date of receipt of such
556 application. Notice of such hearing shall be given to such applicant by
557 mail, postage paid, to the address given on the application, and to the
558 Commissioner of Public Health, and by publication twice in a
559 newspaper having a substantial circulation in the town, city or borough

560 at intervals of not less than two days, the first being not more than fifteen
561 days or less than ten days, and the second being not less than two days
562 before such hearing. The local authority shall approve or deny such
563 application within sixty-five days after such hearing, provided an
564 extension of time not to exceed a further period of sixty-five days may
565 be had with the consent of the applicant. The grounds for its action shall
566 be stated in the records of the authority. Each applicant shall pay a fee
567 of ten dollars, together with the costs of the publication of such notice
568 and the reasonable expense of such hearing, to the treasurer of such
569 town, city or borough.

570 (c) (1) No such crematory shall be erected until the plans therefor
571 have been filed with and approved by the Department of Public Health;
572 and no such crematory shall be used until it has been inspected and
573 received a certificate of inspection by said department and a fee of one
574 thousand two hundred fifty dollars is paid to the Department of Public
575 Health for its inspection and approval.

576 (2) Each holder of an inspection certificate shall, annually, on or
577 before July first, submit in writing to the Department of Public Health
578 an application for renewal of such certificate together with a fee of three
579 hundred fifteen dollars. If the department issues to such applicant such
580 an inspection certificate, the same shall be valid until July first next
581 following, unless revoked or suspended.

582 (3) Upon receipt of an application for a renewal of such certificate, the
583 Department of Public Health shall make an inspection of each
584 crematory.

585 (4) A crematory shall be open at all times for inspection by the
586 Department of Public Health. The department may make inspections
587 whenever it deems advisable.

588 (5) If, upon inspection by the Department of Public Health, it is found
589 that such crematory is in such condition as to be detrimental to public
590 health, the department shall give to the applicant or operator of the
591 crematory notice and opportunity for hearing as provided in regulations

592 adopted by the Commissioner of Public Health, in accordance with the
593 provisions of chapter 54. The commissioner may, after such hearing,
594 revoke, suspend or refuse to issue or renew any such certificate upon
595 cause found at hearing. Any person aggrieved by the finding of or action
596 taken by the Department of Public Health may appeal therefrom in
597 accordance with the provisions of section 4-183.

598 (6) Any of the inspections provided for in this section may be made
599 by a person designated by the Department of Public Health or by a
600 representative of the Commissioner of Public Health.

601 (d) A crematory that performs alkaline hydrolysis shall be located on
602 the grounds of a funeral home licensed under chapter 385.

603 Sec. 12. Section 19a-322 of the general statutes is repealed and the
604 following is substituted in lieu thereof (*Effective from passage*):

605 The managers of each crematory shall keep books of record, which
606 shall be open at reasonable times for inspection, in which shall be
607 entered the name, age, sex and residence of each person whose body is
608 cremated, together with the authority for such cremation and the
609 disposition of the ashes. The owner or superintendent shall complete
610 the cremation permit required by section 19a-323, as amended by this
611 act, retain a copy for record and immediately forward the original
612 permit to the registrar of the town in which the death occurred. The
613 registrar shall keep the cremation permit on file and record it with other
614 vital statistics. When any body is removed from this state for the
615 purpose of cremation, the person having the legal custody and control
616 of such body shall cause a certificate to be procured from the person in
617 charge of the crematory in which such body is ~~[incinerated]~~ cremated,
618 stating the facts called for in this section, and cause such certificate to be
619 filed for record with the registrar of the town in which the death
620 occurred. Each crematory shall retain on its premises, for not less than
621 three years after final disposition of cremated remains, books of record,
622 copies of cremation permits, cremation authorization documentation
623 and documentation of receipt of cremated remains.

624 Sec. 13. Section 19a-323 of the general statutes is repealed and the
625 following is substituted in lieu thereof (*Effective from passage*):

626 (a) The body of any deceased person may be disposed of by
627 [incineration or] cremation in this state or may be removed from the
628 state for such purpose.

629 (b) If death occurred in this state, the death certificate required by law
630 shall be filed with the registrar of vital statistics for the town in which
631 such person died, if known, or, if not known, for the town in which the
632 body was found. The Chief Medical Examiner, Deputy Chief Medical
633 Examiner, associate medical examiner, an authorized assistant medical
634 examiner or other authorized designee shall complete the cremation
635 certificate, stating that such medical examiner or other authorized
636 designee has made inquiry into the cause and manner of death and is of
637 the opinion that no further examination or judicial inquiry is necessary.
638 The cremation certificate shall be submitted to the registrar of vital
639 statistics of the town in which such person died, if known, or, if not
640 known, of the town in which the body was found, or with the registrar
641 of vital statistics of the town in which the funeral director having charge
642 of the body is located. Upon receipt of the cremation certificate, the
643 registrar shall authorize such certificate, keep such certificate on
644 permanent record, and issue a cremation permit, except that if the
645 cremation certificate is submitted to the registrar of the town where the
646 funeral director is located, such certificate shall be forwarded to the
647 registrar of the town where the person died to be kept on permanent
648 record. If a cremation permit must be obtained during the hours that the
649 office of the local registrar of the town where death occurred is closed,
650 a subregistrar appointed to serve such town may authorize such
651 cremation permit upon receipt and review of a properly completed
652 cremation permit and cremation certificate. A subregistrar who is
653 licensed as a funeral director or embalmer pursuant to chapter 385, or
654 the employee or agent of such funeral director or embalmer shall not
655 issue a cremation permit to himself or herself. A subregistrar shall
656 forward the cremation certificate to the local registrar of the town where
657 death occurred, not later than seven days after receiving such certificate.

658 The estate of the deceased person, if any, shall pay the sum of one
659 hundred fifty dollars for the issuance of the cremation certificate,
660 provided the Office of the Chief Medical Examiner shall not assess any
661 fees for costs that are associated with the cremation of a stillborn fetus
662 or the body of a deceased person under the age of eighteen. Upon
663 request of the Chief Medical Examiner, the Secretary of the Office of
664 Policy and Management may waive payment of such cremation
665 certificate fee. No cremation certificate shall be required for a permit to
666 cremate the remains of bodies pursuant to section 19a-270a. When the
667 cremation certificate is submitted to a town other than that where the
668 person died, the registrar of vital statistics for such other town shall
669 ascertain from the original removal, transit and burial permit that the
670 certificates required by the state statutes have been received and
671 recorded, that the body has been prepared in accordance with the Public
672 Health Code and that the entry regarding the place of disposal is correct.
673 Whenever the registrar finds that the place of disposal is incorrect, the
674 registrar shall issue a corrected removal, transit and burial permit and,
675 after inscribing and recording the original permit in the manner
676 prescribed for sextons' reports under section 7-66, shall then
677 immediately give written notice to the registrar for the town where the
678 death occurred of the change in place of disposal stating the name and
679 place of the crematory and the date of cremation. Such written notice
680 shall be sufficient authorization to correct these items on the original
681 certificate of death. The fee for a cremation permit shall be five dollars
682 and for the written notice one dollar. The Department of Public Health
683 shall provide forms for cremation permits, which shall not be the same
684 as for regular burial permits and shall include space to record
685 information about the intended manner of disposition of the cremated
686 remains, and such blanks and books as may be required by the
687 registrars.

688 (c) If the body of a deceased person is brought into this state for
689 cremation and is accompanied by a permit for final disposition issued
690 by a legally constituted authority of the state from which the body was
691 brought, indicating cremation for the body, such permit shall be

692 sufficient authority to cremate the body and no additional cremation
693 certificate or permit shall be required.

694 (d) No body shall be cremated until at least forty-eight hours after
695 death, unless such death was the result of communicable disease, and
696 no body shall be received by any crematory that performs incineration
697 unless accompanied by the permit provided for in this section. Alkaline
698 hydrolysis shall not be performed without the permit provided for in
699 this section.

700 Sec. 14. Section 20-207 of the general statutes is repealed and the
701 following is substituted in lieu thereof (*Effective from passage*):

702 As used in this chapter, unless the context otherwise requires, the
703 following terms shall have the meanings specified:

704 (1) "Board" means the Connecticut Board of Examiners of Embalmers
705 and Funeral Directors;

706 (2) "Person" means an individual or corporation, but not a
707 partnership;

708 (3) "Funeral directing" means the business, practice or profession, as
709 commonly practiced, of (A) directing or supervising funerals, or
710 providing funeral services; (B) handling or encasing or providing
711 services for handling and encasing dead human bodies, otherwise than
712 by embalming, for burial or disposal; (C) providing embalming services;
713 (D) providing transportation, interment and disinterment of dead
714 human bodies; (E) maintaining an establishment so located, constructed
715 and equipped as to permit the decent and sanitary handling of dead
716 human bodies, with suitable equipment in such establishment for such
717 handling; (F) conducting an establishment from which funerals may be
718 held; (G) engaging in consultations concerning arrangements for the
719 disposition of human remains, including, but not limited to,
720 arrangements for cremation; [or alkaline hydrolysis;] (H) casketing
721 human remains; (I) making cemetery and cremation arrangements; and
722 (J) preparing funeral service contracts, as defined in section 42-200;

723 (4) "Funeral director" means any person engaged or holding himself
724 or herself out as engaged in funeral directing whether or not he or she
725 uses in connection with his or her name or business the words "funeral
726 director," "undertaker" or "mortician" or any other word or title
727 intended to designate him or her as a funeral director or mortician or as
728 one so engaged;

729 (5) "Funeral service business" means the business, practice or
730 profession of funeral directing;

731 (6) "Licensed embalmer" means an embalmer holding a license as
732 provided in this chapter;

733 (7) "Licensed funeral director" means a funeral director holding a
734 license as provided in this chapter;

735 (8) "Registered apprentice embalmer" means a person registered with
736 the Department of Public Health as an apprentice pursuant to the
737 provisions of this chapter;

738 (9) "Registered apprentice funeral director" means a person
739 registered with the Department of Public Health as an apprentice
740 pursuant to the provisions of this chapter;

741 (10) "Full-time employment" means regular and steady work during
742 the normal working hours by any person at the establishment at which
743 he is employed; [and]

744 (11) "Manager" means an individual who (A) is licensed as an
745 embalmer or funeral director pursuant to this chapter and (B) has direct
746 and personal responsibility for the daily operation and management of
747 a funeral service business; and

748 (12) "Cremation" means the disposition of a body through
749 incineration or alkaline hydrolysis.

750 Sec. 15. Section 19a-197a of the 2024 supplement to the general
751 statutes is repealed and the following is substituted in lieu thereof

752 (Effective July 1, 2024):

753 (a) As used in this section, "emergency medical services personnel"
754 means (1) any class of emergency medical technician certified pursuant
755 to sections 20-206ll and 20-206mm, including, but not limited to, any
756 advanced emergency medical technician, (2) any paramedic licensed
757 pursuant to sections 20-206ll and 20-206mm, and (3) any emergency
758 medical responder certified pursuant to sections 20-206ll and 20-
759 206mm.

760 (b) Any emergency medical services personnel who has been trained,
761 in accordance with national standards recognized by the Commissioner
762 of Public Health, in the administration of epinephrine using automatic
763 prefilled cartridge injectors, similar automatic injectable equipment or
764 prefilled vial and syringe and who functions in accordance with written
765 protocols and the standing orders of a licensed physician serving as an
766 emergency [department] medical services medical director [may
767 administer, on or before June 30, 2024, and] shall administer [, on and
768 after July 1, 2024,] epinephrine, if available, using such injectors,
769 equipment or prefilled vial and syringe when the use of epinephrine is
770 deemed necessary by the emergency medical services personnel for the
771 treatment of a patient. All emergency medical services personnel shall
772 receive such training [from an organization designated by the
773 commissioner] in accordance with the national standards recognized by
774 the commissioner, except an emergency medical responder, as defined
775 in section 20-206jj, need only be trained to utilize means of
776 administration of epinephrine that is within such responder's scope of
777 practice, as determined in accordance with section 19a-179a.

778 (c) All licensed or certified ambulances shall be equipped with
779 epinephrine in such injectors, equipment or prefilled vials and syringes
780 to be administered as described in subsection (b) of this section and in
781 accordance with written protocols and standing orders of a licensed
782 physician serving as an emergency [department] medical services
783 medical director.

784 Sec. 16. Section 19a-37 of the general statutes is repealed and the
785 following is substituted in lieu thereof (*Effective from passage*):

786 (a) As used in this section:

787 (1) "Laboratory or firm" means an environmental laboratory
788 registered by the Department of Public Health pursuant to section 19a-
789 29a;

790 (2) "Domestic purposes" means drinking, bathing, washing of clothes
791 and dishes, cooking and other common household chores;

792 (3) "First draw sample" means a one-liter sample of tap water that has
793 been standing in plumbing pipes for not less than six hours that is
794 collected without flushing the tap;

795 ~~[(2)]~~ (4) "Private well" means a water supply well that meets all of the
796 following criteria: (A) Is not a public well; (B) supplies a residential
797 population of less than twenty-five persons per day; and (C) is owned
798 or controlled through an easement or by the same entity that owns or
799 controls the building or parcel that is served by the water supply well;

800 ~~[(3)]~~ (5) "Public well" means a water supply well that supplies a public
801 water system;

802 ~~[(4)]~~ (6) "Semipublic well" means a water supply well that (A) does
803 not meet the definition of a private well or public well, and (B) provides
804 water for drinking and other domestic purposes; and

805 ~~[(5)]~~ (7) "Water supply well" means an artificial excavation
806 constructed by any method for the purpose of obtaining or providing
807 water for drinking or other domestic, industrial, commercial,
808 agricultural, recreational or irrigation use, or other outdoor water use.

809 (b) (1) The Commissioner of Public Health may adopt regulations, in
810 accordance with the provisions of chapter 54, for the preservation of the
811 public health pertaining to (A) protection and location of new water
812 supply wells or springs for residential or nonresidential construction or

813 for public or semipublic use, and (B) inspection for compliance with the
814 provisions of municipal regulations adopted pursuant to section 22a-
815 354p.

816 (2) The Commissioner of Public Health shall adopt regulations, in
817 accordance with the provisions of chapter 54, for the testing of water
818 quality in private wells and semipublic wells.

819 (3) The Commissioner of Public Health shall adopt regulations, in
820 accordance with the provisions of chapter 54, to clarify the criteria under
821 which the commissioner may issue a well permit exception and to
822 describe the terms and conditions that shall be imposed when a well is
823 allowed at a premises that is connected to a public water supply system
824 or whose boundary is located within two hundred feet of an approved
825 community water supply system, measured along a street, alley or
826 easement. Such regulations shall (A) provide for notification of the
827 permit to the public water supplier, (B) address the (i) quality of the
828 water supplied from the well, (ii) means and extent to which the well
829 shall not be interconnected with the public water supply, (iii) need for a
830 physical separation and the installation of a reduced pressure device for
831 backflow prevention, and (iv) inspection and testing requirements of
832 any such reduced pressure device, and (C) identify the extent and
833 frequency of water quality testing required for the well supply.

834 (c) (1) Any laboratory or firm which conducts a water quality test on
835 a private well serving a residential property or semipublic well in the
836 state shall, not later than thirty days after the completion of such test,
837 report the results of such test to [(A)] the [public] local health authority
838 of the municipality where the property is located [,] and [(B)] the
839 Department of Public Health in a format specified by the department.
840 Results submitted to the Department of Public Health or the local health
841 authority pursuant to this subsection, information obtained from any
842 Department of Public Health or local health authority investigation
843 regarding those results and any Department of Public Health or local
844 health authority study of morbidity and mortality regarding the results
845 shall be confidential pursuant to section 19a-25, except the local health

846 authority and the department may, if approved by the commissioner,
847 disclose the results or information obtained from an investigation of the
848 results to (A) the owner of the property on which the well is located, (B)
849 a prospective buyer of such property who has signed a contract to
850 purchase such property, (C) other persons or entities, when such
851 disclosure is necessary to carry out a statutory or regulatory
852 responsibility of the local health authority or department, or (D) an
853 agent of a state agency.

854 (2) On and after October 1, 2022, the owner of each newly constructed
855 private well or semipublic well shall test the water quality of such well.
856 Such test shall be performed by a laboratory and include, but need not
857 be limited to, testing for coliform, nitrate, nitrite, sodium, chloride, iron,
858 [lead,] manganese, hardness, turbidity, pH, sulfate, apparent color,
859 odor, arsenic and uranium. If such a well is constructed for an existing
860 structure, a first draw sample collected from the existing plumbing
861 system shall also be tested for lead. The owner shall submit test results
862 to the [Department of Public Health] local health authority where the
863 well is located in a form and manner prescribed by the Commissioner
864 of Public Health. Such local health authority shall determine whether
865 the test results comply with the maximum contaminant levels, as
866 prescribed by sections 19-13-B101 and 19-13-B102 of the regulations of
867 Connecticut state agencies. A newly constructed private well or
868 semipublic well shall not be used for domestic purposes until the local
869 health authority determines that the test results comply with such
870 maximum contaminant levels.

871 (d) Prior to the sale, exchange, purchase, transfer or rental of real
872 property on which a private or semipublic well is located, the owner
873 shall provide the buyer or tenant notice that educational material
874 concerning private well testing is available on the Department of Public
875 Health web site. If the prospective buyer or tenant has hired a real estate
876 licensee to facilitate the property transaction, such real estate licensee,
877 or, if the prospective buyer or tenant has not hired a real estate licensee,
878 the owner, landlord or closing attorney shall provide to the buyer or
879 tenant an electronic or hard copy of educational material prepared by

880 the Department of Public Health that recommends testing for the
881 contaminants listed in subsection (c) of this section and any other
882 recommendation concerning well testing that the Department of Public
883 Health deems necessary. Failure to provide such notice or educational
884 material shall not invalidate any sale, exchange, purchase, transfer or
885 rental of real property. If the seller or landlord provides such notice or
886 educational material in writing, the seller or landlord and any real estate
887 licensee shall be deemed to have fully satisfied any duty to notify the
888 buyer or tenant.

889 (e) [No regulation may require that a] A certificate of occupancy for
890 a dwelling unit on [such] a residential property shall not be withheld or
891 revoked on the basis of a water quality test performed on a private well
892 pursuant to this section, unless such test results indicate that any
893 maximum contaminant level applicable to public water supply systems
894 for any contaminant listed in the regulations of Connecticut state
895 agencies has been exceeded. No municipality, administrative agency []
896 or local health [district or municipal health officer may] authority shall
897 establish regulations or ordinances that withhold, [or] cause to be
898 withheld or revoke such a certificate of occupancy on the basis of a water
899 quality test performed on a well pursuant to this section, except as
900 provided in this section.

901 (f) (1) The local director of health may require a private well or
902 semipublic well to be tested for arsenic, radium, uranium, radon or
903 gross alpha emitters, when there are reasonable grounds to suspect that
904 such contaminants are present in the groundwater. For purposes of this
905 subsection, "reasonable grounds" means (A) the existence of a geological
906 area known to have naturally occurring arsenic, radium, uranium,
907 radon or gross alpha emitter deposits in the bedrock; or (B) the well is
908 located in an area in which it is known that arsenic, radium, uranium,
909 radon or gross alpha emitters are present in the groundwater.

910 (2) The local director of health may require a private well or
911 semipublic well to be tested for pesticides, herbicides or organic
912 chemicals when there are reasonable grounds to suspect that any such

913 contaminants might be present in the groundwater. For purposes of this
914 subsection, "reasonable grounds" means (A) the presence of nitrate-
915 nitrogen in the groundwater at a concentration greater than ten
916 milligrams per liter, or (B) that the private well or semipublic well is
917 located on land, or in proximity to land, associated with the past or
918 present production, storage, use or disposal of organic chemicals as
919 identified in any public record.

920 (g) Except as provided in subsection (h) of this section, the collection
921 of samples for determining the water quality of private wells and
922 semipublic wells may be made only by (1) employees of a laboratory or
923 firm certified or approved by the Department of Public Health to test
924 drinking water, if such employees have been trained in sample
925 collection techniques, (2) certified water operators, (3) local health
926 departments and state employees trained in sample collection
927 techniques, or (4) individuals with training and experience that the
928 Department of Public Health deems sufficient.

929 (h) Any owner of a residential construction, including, but not limited
930 to, a homeowner, on which a private well is located or any general
931 contractor of a new residential construction on which a private well is
932 located may collect samples of well water for submission to a laboratory
933 or firm for the purposes of testing water quality pursuant to this section,
934 provided (1) such laboratory or firm has provided instructions to said
935 owner or general contractor on how to collect such samples, and (2) such
936 owner or general contractor is identified to the subsequent owner on a
937 form to be prescribed by the Department of Public Health. No
938 regulation may prohibit or impede such collection or analysis.

939 (i) Any water transported in bulk by any means to a premises
940 currently supplied by a private well or semipublic well where the water
941 is to be used for purposes of drinking or domestic use shall be provided
942 by a bulk water hauler licensed pursuant to section 20-278h. No bulk
943 water hauler shall deliver water without first notifying the owner of the
944 premises of such delivery. Bulk water hauling to a premises currently
945 supplied by a private well or semipublic well shall be permitted only as

946 a temporary measure to alleviate a water supply shortage.

947 Sec. 17. Section 19a-332 of the general statutes is repealed and the
948 following is substituted in lieu thereof (*Effective from passage*):

949 As used in subsection (c) of section 19a-14, as amended by this act,
950 and sections 19a-332 to 19a-332e, inclusive, as amended by this act,
951 20-435 to 20-442, inclusive, as amended by this act, and 52-577a:

952 (1) "Asbestos" means the asbestiform varieties of actinolite, amosite,
953 anthophyllite, chrysotile, crocidolite and tremolite;

954 (2) "Asbestos abatement" means the removal, encapsulation,
955 enclosure, renovation, repair, demolition or other disturbance of
956 asbestos-containing materials or suspect asbestos-containing materials,
957 but does not include activities which are related to (A) the removal or
958 repair of asbestos cement pipe and are performed by employees of a
959 water company as defined in section 25-32a, or (B) the removal of
960 nonfriable asbestos-containing material found exterior to a building or
961 structure other than material defined as regulated asbestos-containing
962 material in 40 CFR 61, the National Emission Standards for Hazardous
963 Air Pollutants, as amended from time to time;

964 (3) "Asbestos abatement worker" means any employee of a licensed
965 asbestos contractor who engages in asbestos abatement, has completed
966 a training program approved by the department and has been issued a
967 certificate by the department;

968 (4) "Asbestos abatement site supervisor" means any asbestos
969 abatement worker employed by a licensed asbestos contractor who has
970 been specifically trained as a supervisor in a training program approved
971 by the department and who has been issued a certificate by the
972 department;

973 (5) "Asbestos-containing material" means material composed of
974 asbestos of any type and in an amount equal to or greater than one per
975 cent by weight, either alone or mixed with other fibrous or nonfibrous

976 material;

977 (6) "Asbestos contractor" means any person or entity engaged in
978 asbestos abatement whose employees actually perform the asbestos
979 abatement work and who has been issued a license by the
980 commissioner;

981 (7) "Asbestos consultant" means any person who engages in any
982 activity directly involved with asbestos consultation services and who
983 has been issued a certificate by the commissioner and a license by the
984 department;

985 (8) "Asbestos consultation services" means the inspection or
986 evaluation of a building for asbestos hazards, including, but not limited
987 to, the development of asbestos abatement plans, site inspections, air
988 monitoring and provisions of industrial hygiene services related to
989 asbestos abatement;

990 (9) "Authorized agent" means an officer or employee duly designated
991 by the commissioner;

992 (10) "Commissioner" means the Commissioner of Public Health;
993 [and]

994 (11) "Department" means the Department of Public Health; and

995 (12) "Suspect asbestos-containing materials" means interior and
996 exterior materials that have a reasonable likelihood of containing
997 asbestos based on their appearance, composition and use.

998 Sec. 18. Subdivision (4) of subsection (c) of section 19a-14 of the
999 general statutes is repealed and the following is substituted in lieu
1000 thereof (*Effective July 1, 2024*):

1001 (4) [Sanitarian] Environmental health specialist;

1002 Sec. 19. Section 19a-35a of the general statutes is repealed and the
1003 following is substituted in lieu thereof (*Effective July 1, 2024*):

1004 (a) Notwithstanding the provisions of chapter 439 and sections 22a-
1005 430, as amended by this act, and 22a-430b, the Commissioner of Public
1006 Health shall, within available appropriations, pursuant to section 19a-
1007 36, establish and define categories of discharge that constitute
1008 alternative on-site sewage treatment systems with capacities of five
1009 thousand gallons or less per day. After the establishment of such
1010 categories, said commissioner shall have jurisdiction, within available
1011 appropriations, to issue or deny permits and approvals for such systems
1012 and for all discharges of domestic sewage to the groundwaters of the
1013 state from such systems. Said commissioner shall, pursuant to section
1014 19a-36, and within available appropriations, establish minimum
1015 requirements for alternative on-site sewage treatment systems under
1016 said commissioner's jurisdiction, including, but not limited to: (1)
1017 Requirements related to activities that may occur on the property; (2)
1018 changes that may occur to the property or to buildings on the property
1019 that may affect the installation or operation of such systems; and (3)
1020 procedures for the issuance of permits or approvals by said
1021 commissioner, a local director of health [.] or [a sanitarian] an
1022 environmental health specialist licensed pursuant to chapter 395. A
1023 permit or approval granted by said commissioner, such local director of
1024 health or such [sanitarian] environmental health specialist for an
1025 alternative on-site sewage treatment system pursuant to this section
1026 shall: (A) Not be inconsistent with the requirements of the federal Water
1027 Pollution Control Act, 33 USC 1251 et seq., the federal Safe Drinking
1028 Water Act, 42 USC 300f et seq., and the standards of water quality
1029 adopted pursuant to section 22a-426, as such laws and standards may
1030 be amended from time to time, (B) not be construed or deemed to be an
1031 approval for any other purpose, including, but not limited to, any
1032 planning and zoning or municipal inland wetlands and watercourses
1033 requirement, and (C) be in lieu of a permit issued under section 22a-430,
1034 as amended by this act, or 22a-430b. For purposes of this section,
1035 "alternative on-site sewage treatment system" means a sewage
1036 treatment system serving one or more buildings on a single parcel of
1037 property that utilizes a method of treatment other than a subsurface
1038 sewage disposal system and that involves a discharge of domestic

1039 sewage to the groundwaters of the state.

1040 (b) In establishing and defining categories of discharge that constitute
1041 alternative on-site sewage treatment systems pursuant to subsection (a)
1042 of this section, and in establishing minimum requirements for such
1043 systems pursuant to section 19a-36, said commissioner shall consider all
1044 relevant factors, including, but not limited to: (1) The impact that such
1045 systems or discharges may have individually or cumulatively on public
1046 health and the environment, (2) the impact that such systems and
1047 discharges may have individually or cumulatively on land use patterns,
1048 and (3) recommendations regarding responsible growth made to said
1049 commissioner by the Secretary of the Office of Policy and Management
1050 through the Office of Responsible Growth established by Executive
1051 Order No. 15 of Governor M. Jodi Rell.

1052 (c) The Commissioner of Energy and Environmental Protection shall
1053 retain jurisdiction over any alternative on-site sewage treatment system
1054 not under the jurisdiction of the Commissioner of Public Health. The
1055 provisions of title 22a shall apply to any such system not under the
1056 jurisdiction of the Commissioner of Public Health. The provisions of this
1057 section shall not affect any permit issued by the Commissioner of
1058 Energy and Environmental Protection prior to July 1, 2007, and the
1059 provisions of title 22a shall continue to apply to any such permit until
1060 such permit expires.

1061 (d) A permit or approval denied by the Commissioner of Public
1062 Health, a local director of health or [a sanitarian] an environmental
1063 health specialist pursuant to subsection (a) of this section shall be subject
1064 to an appeal in the manner provided in section 19a-229.

1065 Sec. 20. Subdivision (14) of section 19a-36g of the general statutes is
1066 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1067 *2024*):

1068 (14) "Food inspector" means a director of health, or his or her
1069 authorized agent, or a registered [sanitarian] environmental health
1070 specialist who has been certified as a food inspector by the

1071 commissioner;

1072 Sec. 21. Subsections (l) and (m) of section 19a-200 of the general
1073 statutes are repealed and the following is substituted in lieu thereof
1074 (*Effective July 1, 2024*):

1075 (l) On and after July 1, 1988, each city, town and borough shall
1076 provide for the services of [a sanitarian] an environmental health
1077 specialist licensed under chapter 395 to work under the direction of the
1078 local director of health. Where practical, the local director of health may
1079 act as the [sanitarian] environmental health specialist.

1080 (m) As used in this chapter, "authorized agent" means [a sanitarian]
1081 an environmental health specialist licensed under chapter 395 and any
1082 individual certified for a specific program of environmental health by
1083 the Commissioner of Public Health in accordance with the general
1084 statutes and regulations of Connecticut state agencies.

1085 Sec. 22. Subsection (a) of section 19a-206 of the general statutes is
1086 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1087 *2024*):

1088 (a) Town, city and borough directors of health or their authorized
1089 agents shall, within their respective jurisdictions, examine all nuisances
1090 and sources of filth injurious to the public health, cause such nuisances
1091 to be abated or remediated and cause to be removed all filth which in
1092 their judgment may endanger the health of the inhabitants. Any owner
1093 or occupant of any property who maintains such property, whether real
1094 or personal, or any part thereof, in a manner which violates the
1095 provisions of the Public Health Code enacted pursuant to the authority
1096 of sections 19a-36 and 19a-37, as amended by this act, shall be deemed
1097 to be maintaining a nuisance or source of filth injurious to the public
1098 health. Any local director of health or [his] a local director of health's
1099 authorized agent or [a sanitarian] an environmental health specialist
1100 authorized by such director may enter all places within [his] such
1101 director's jurisdiction where there is just cause to suspect any nuisance
1102 or source of filth exists, and abate or remediate or cause to be abated or

1103 remediated such nuisance and remove or cause to be removed such filth.

1104 Sec. 23. Subsections (c) and (d) of section 19a-242 of the general
1105 statutes are repealed and the following is substituted in lieu thereof
1106 (*Effective July 1, 2024*):

1107 (c) On and after July 1, 1988, each district health department shall
1108 provide for the services of [a sanitarian] an environmental health
1109 specialist licensed under chapter 395 to work under the direction of the
1110 district director of health. Where practical, the district director of health
1111 may act as the [sanitarian] environmental health specialist.

1112 (d) As used in this chapter, "authorized agent" means [a sanitarian]
1113 an environmental health specialist licensed under chapter 395 and any
1114 individual certified for a specific program of environmental health by
1115 the Commissioner of Public Health in accordance with the general
1116 statutes and regulations of Connecticut state agencies.

1117 Sec. 24. Subdivision (2) of section 20-358 of the general statutes is
1118 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1119 *2024*):

1120 (2) ["Sanitarian"] "Environmental health specialist" means a person
1121 trained in environmental health who is qualified to carry out
1122 educational and investigational duties in the fields of environmental
1123 health such as investigation of air, water, sewage, foodstuffs, housing
1124 and refuse by observing, sampling, testing and reporting and who is
1125 licensed pursuant to section 20-361, as amended by this act; and

1126 Sec. 25. Section 20-360 of the general statutes is repealed and the
1127 following is substituted in lieu thereof (*Effective July 1, 2024*):

1128 Applications for licensure shall be on forms prescribed by the
1129 commissioner. The licensure fee for [a sanitarian] an environmental
1130 health specialist shall be eighty dollars for initial licensure. Each license
1131 shall be renewed annually in accordance with the provisions of section
1132 19a-88, as amended by this act. The fee for license renewal shall be forty

1133 dollars.

1134 Sec. 26. Subsection (a) of section 20-361 of the general statutes is
1135 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1136 *2024*):

1137 (a) Except as provided in section 20-365, as amended by this act, no
1138 person shall be licensed as [a sanitarian] an environmental health
1139 specialist who does not prove to the satisfaction of the commissioner
1140 that such person holds a degree from an accredited college or university
1141 following four years of study and has two years of full-time experience,
1142 or the equivalent, in the field of environmental health acceptable to the
1143 commissioner. An applicant who successfully completes a special
1144 training course in environmental health approved by the commissioner
1145 may substitute such course for six months of such required experience
1146 in the field of environmental health. The applicant shall also be required
1147 to pass a written or oral examination in the science of environmental
1148 health as determined by the commissioner. An applicant for licensure
1149 shall not be required to be licensed while completing the work
1150 experience requirements of this section, provided, on and after January
1151 1, 1998, such experience shall be completed under the supervision of [a
1152 sanitarian] an environmental health specialist licensed pursuant to this
1153 chapter or licensed, certified or registered in the jurisdiction in which
1154 such experience was completed.

1155 Sec. 27. Section 20-362 of the general statutes is repealed and the
1156 following is substituted in lieu thereof (*Effective July 1, 2024*):

1157 (a) No person shall engage in, practice [,] or offer to perform the work
1158 of [a sanitarian] an environmental health specialist, as defined in section
1159 20-358, as amended by this act, unless [he] such person is licensed
1160 pursuant to section 20-361, as amended by this act.

1161 (b) No person shall use the title of licensed [sanitarian] environmental
1162 health specialist unless [he] such person is the holder of a current license
1163 issued by the commissioner under the provisions of this chapter. A
1164 holder of a current license may append to his or her name the letters

1165 ["R.S."] "R.E.H.S.". Any certificate granted by the commissioner prior to
1166 October 1, 1995, shall be deemed a valid license permitting continuance
1167 of practice subject to the provisions of chapter 395.

1168 Sec. 28. Section 20-365 of the general statutes is repealed and the
1169 following is substituted in lieu thereof (*Effective July 1, 2024*):

1170 (a) The commissioner may, upon receipt of an application and the
1171 payment of a fee of forty dollars, issue a license to any person who holds
1172 a license or certificate of registration issued to [him] such person by
1173 proper authority of any state, territory or possession of the United
1174 States, provided the requirements for the license, registration or
1175 certification of [sanitarians] environmental health specialists under
1176 which such license or certificate of registration was issued shall not
1177 conflict with the provisions of this chapter and shall be of a standard
1178 equal to or higher than that specified in section 20-361, as amended by
1179 this act.

1180 (b) Nothing in section 19a-200, as amended by this act, subsection (a)
1181 of section 19a-206, as amended by this act, or sections 19a-207, 19a-242,
1182 as amended by this act, 20-358, as amended by this act, or 20-360 to 20-
1183 365, inclusive, as amended by this act, shall prevent any of the following
1184 persons from engaging in the performance of their duties: (1) Any
1185 person certified by the Department of Public Health as a food or sewage
1186 inspector in accordance with regulations adopted pursuant to section
1187 19a-36, (2) any person employed by a local health department
1188 performing the duties of a lead inspector who complies with training
1189 standards established pursuant to section 20-479, (3) a director of health
1190 acting pursuant to section 19a-200, as amended by this act, or section
1191 19a-244, (4) any employee of a water utility or federal or state agency
1192 performing [his] such employee's duties in accordance with applicable
1193 statutes and regulations, (5) any person employed by a local health
1194 department working under the direct supervision of a licensed
1195 [sanitarian] environmental health specialist, (6) any person licensed or
1196 certified by the Department of Public Health in a specific program
1197 performing certain duties that are included within the duties of [a

1198 sanitarian] an environmental health specialist, or (7) a student enrolled
1199 in an accredited academic program leading to a degree in environmental
1200 health or completing a special training course in environmental health
1201 approved by the commissioner, provided such student is clearly
1202 identified by a title [which] that indicates such student's status as a
1203 student.

1204 Sec. 29. Subsection (g) of section 22a-430 of the 2024 supplement to
1205 the general statutes is repealed and the following is substituted in lieu
1206 thereof (*Effective July 1, 2024*):

1207 (g) The commissioner shall, by regulation adopted prior to October 1,
1208 1977, establish and define categories of discharges that constitute
1209 household and small commercial subsurface sewage disposal systems
1210 for which the commissioner shall delegate to the Commissioner of
1211 Public Health the authority to issue permits or approvals and to hold
1212 public hearings in accordance with this section, on and after said date.
1213 Not later than July 1, 2025, the commissioner shall amend such
1214 regulations to establish and define categories of discharges that
1215 constitute small community sewerage systems and household and small
1216 commercial subsurface sewage disposal systems. The Commissioner of
1217 Public Health shall, pursuant to section 19a-36, establish minimum
1218 requirements for small community sewerage systems and household
1219 and small commercial subsurface sewage disposal systems and
1220 procedures for the issuance of such permits or approvals by the local
1221 director of health or [a sanitarian] an environmental health specialist
1222 registered pursuant to chapter 395. As used in this subsection, small
1223 community sewerage systems and household and small commercial
1224 disposal systems shall include those subsurface sewage disposal
1225 systems with a capacity of ten thousand gallons per day or less.
1226 Notwithstanding any provision of the general statutes (1) the
1227 regulations adopted by the commissioner pursuant to this subsection
1228 that are in effect as of July 1, 2017, shall apply to household and small
1229 commercial subsurface sewage disposal systems with a capacity of
1230 seven thousand five hundred gallons per day or less, and (2) the
1231 regulations adopted by the commissioner pursuant to this subsection

1232 that are in effect as of July 1, 2025, shall apply to small community
1233 sewerage systems, household systems and small commercial subsurface
1234 sewerage disposal systems with a capacity of ten thousand gallons per
1235 day or less. Any permit denied by the Commissioner of Public Health,
1236 or a director of health or registered [sanitarian] environmental health
1237 specialist shall be subject to hearing and appeal in the manner provided
1238 in section 19a-229. Any permit granted by the Commissioner of Public
1239 Health, or a director of health or registered [sanitarian] environmental
1240 health specialist on or after October 1, 1977, shall be deemed equivalent
1241 to a permit issued under subsection (b) of this section.

1242 Sec. 30. Section 20-435 of the general statutes is repealed and the
1243 following is substituted in lieu thereof (*Effective October 1, 2024*):

1244 On and after one year following the effective date of regulations
1245 adopted pursuant to section 20-440, no person shall provide services as
1246 an asbestos contractor in this state without a license issued by the
1247 [commissioner] Commissioner of Public Health. Applications for such
1248 license shall be made to the [department] Department of Public Health
1249 on forms provided by it, shall be accompanied by a fee of six hundred
1250 twenty-five dollars and shall contain such information regarding the
1251 applicant's qualifications as the department may require in regulations
1252 adopted pursuant to section 20-440, including, but not limited to,
1253 demonstrating that all employees have passed a training course
1254 approved by the department and have been issued a certificate by the
1255 department. The department shall approve the technical, equipment
1256 and personnel resources of each applicant. No person shall be issued a
1257 license to act as an asbestos contractor unless he obtains such approval.
1258 The commissioner may issue a license under this section to any person
1259 who is licensed in another state under a law which provides standards
1260 which are equal to or higher than those of Connecticut and is not subject
1261 to any unresolved complaints or pending disciplinary actions. Licenses
1262 issued pursuant to this section shall be renewed annually in accordance
1263 with the provisions of section 19a-88, as amended by this act, upon
1264 payment of a fee of six hundred twenty-five dollars.

1265 Sec. 31. Subsection (b) of section 19a-566 of the 2024 supplement to
1266 the general statutes is repealed and the following is substituted in lieu
1267 thereof (*Effective from passage*):

1268 (b) Each birth center [shall be accredited by the Commission for the
1269 Accreditation of Birth Centers on or before the effective date of its
1270 licensure and maintain such accreditation during the time it is licensed]
1271 seeking initial licensure pursuant to the provisions of this section shall
1272 submit a complete application for accreditation to the Commission for
1273 the Accreditation of Birth Centers before the date on which the birth
1274 center submits an application for initial licensure to the Commissioner
1275 of Public Health. The commissioner shall issue an initial license to a
1276 birth center if the commissioner determines that such birth center
1277 complies with the requirements established pursuant to the provisions
1278 of this section. Such initial license shall be valid for one year, except the
1279 commissioner may, in the commissioner's discretion, extend an initial
1280 licensure period for not more than one year while a birth center is
1281 completing accreditation. Each birth center shall be accredited by the
1282 Commission for the Accreditation of Birth Centers on or before the date
1283 on which the birth center renews its license and maintain such
1284 accreditation thereafter. After the conclusion of the initial licensure
1285 period, each birth center license shall be renewable biennially (1) after
1286 an unscheduled inspection of the birth center is conducted by the
1287 Department of Public Health, (2) upon the filing of a report regarding
1288 the birth center's operations by the birth center, in a form and manner
1289 prescribed by the commissioner, and approval of such report by the
1290 commissioner, and (3) if there is satisfactory evidence of continuing
1291 compliance with the provisions of this section, as determined by the
1292 commissioner. If a birth center is denied accreditation prior to the
1293 renewal of its license or loses its accreditation after renewal of its license,
1294 the birth center shall immediately notify the [Commissioner of Public
1295 Health] commissioner, in a form and manner prescribed by the
1296 commissioner, and cease providing birth center services to patients until
1297 authorized by the commissioner to reinstate such services. Failure of a
1298 birth center to cease the provision of services and provide notice to the

1299 commissioner pursuant to the provisions of this subsection shall be
1300 grounds for summary suspension of the birth center's license and the
1301 imposition of disciplinary action in accordance with the provisions of
1302 section 19a-494, as amended by this act.

1303 Sec. 32. Subsection (a) of section 19a-494 of the general statutes is
1304 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1305 *2024*):

1306 (a) The Commissioner of Public Health, after a hearing held in
1307 accordance with the provisions of chapter 54, may take any of the
1308 following actions, singly or in combination, in any case in which the
1309 commissioner finds that there has been a substantial failure to comply
1310 with the requirements established under this chapter, the Public Health
1311 Code or licensing regulations:

1312 (1) Revoke a license or certificate;

1313 (2) Suspend a license or certificate;

1314 (3) Censure a licensee or certificate holder;

1315 (4) Issue a letter of reprimand to a licensee or certificate holder;

1316 (5) Place a licensee or certificate holder on probationary status and
1317 require [him] such licensee or certificate holder to report regularly to the
1318 department on the matters which are the basis of the probation;

1319 (6) Restrict the acquisition of other facilities for a period of time set
1320 by the commissioner;

1321 (7) Issue an order compelling compliance with applicable statutes or
1322 regulations of the department; [or]

1323 (8) Impose a directed plan of correction; or

1324 (9) Assess a civil penalty not to exceed twenty-five thousand dollars,
1325 provided no such penalty shall be assessed for violations arising from
1326 the investigation of a complaint filed with the Department of Public

1327 Health before July 1, 2024, except for violations of regulatory
1328 requirements relating to abuse or neglect of patients, as such terms are
1329 defined in 42 CFR 483.5.

1330 Sec. 33. Subsection (a) of section 19a-17 of the general statutes is
1331 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1332 *2024*):

1333 (a) Each board or commission established under chapters 369 to 376,
1334 inclusive, 378 to 381, inclusive, and 383 to 388, inclusive, and the
1335 Department of Public Health with respect to professions under its
1336 jurisdiction that have no board or commission may take any of the
1337 following actions, singly or in combination, based on conduct that
1338 occurred prior or subsequent to the issuance of a permit or a license
1339 upon finding the existence of good cause:

1340 (1) Revoke a practitioner's license or permit;

1341 (2) Suspend a practitioner's license or permit;

1342 (3) Censure a practitioner or permittee;

1343 (4) Issue a letter of reprimand to a practitioner or permittee;

1344 (5) Restrict or otherwise limit practice to those areas prescribed by the
1345 board, commission or department;

1346 (6) Place a practitioner or permittee on probationary status and
1347 require the practitioner or permittee to:

1348 (A) Report regularly to such board, commission or department upon
1349 the matters which are the basis of probation;

1350 (B) Limit practice to those areas prescribed by such board,
1351 commission or department; and

1352 (C) Continue or renew professional education until a satisfactory
1353 degree of skill has been attained in those areas which are the basis for
1354 the probation;

1355 (7) Assess a civil penalty of up to [twenty-five] ten thousand dollars;

1356 (8) In those cases involving persons or entities licensed or certified
1357 pursuant to sections 20-341d, 20-435, 20-436, 20-437, 20-438, 20-475 and
1358 20-476, require that restitution be made to an injured property owner;
1359 or

1360 (9) Summarily take any action specified in this subsection against a
1361 practitioner's license or permit upon receipt of proof that such
1362 practitioner has been:

1363 (A) Found guilty or convicted as a result of an act which constitutes
1364 a felony under (i) the laws of this state, (ii) federal law, or (iii) the laws
1365 of another jurisdiction and which, if committed within this state, would
1366 have constituted a felony under the laws of this state, except for a
1367 practitioner who is a social worker under chapter 383b, an art therapist
1368 under chapter 383g, a dietitian-nutritionist under chapter 384b, an
1369 embalmer or funeral director under chapter 385, a barber under chapter
1370 386, a hairdresser, cosmetician, esthetician, eyelash technician or nail
1371 technician under chapter 387; or

1372 (B) Subject to disciplinary action similar to that specified in this
1373 subsection by a duly authorized professional agency of any state, the
1374 federal government, the District of Columbia, a United States possession
1375 or territory or a foreign jurisdiction. The applicable board or
1376 commission, or the department shall promptly notify the practitioner or
1377 permittee that his license or permit has been summarily acted upon
1378 pursuant to this subsection and shall institute formal proceedings for
1379 revocation within ninety days after such notification.

1380 Sec. 34. Section 19a-14d of the general statutes is repealed and the
1381 following is substituted in lieu thereof (*Effective from passage*):

1382 (a) An occupational or professional license, permit, certification or
1383 registration issued by the Department of Public Health pursuant to
1384 chapter 368v, 370, 372, 373, 375, 375a, 376, 376a, 376b, 376c, 377, 378,
1385 378a, 379, 379a, 380, 381, 381a, 381b, 382a, 382b, 382c, 383, 383a, 383b,

1386 383c, 383d, 383e, 383f, 383g, 383h, 384, 384a, 384b, 384c, 384d, 385, 386,
1387 387, 387a, 388, 388a, 393a, 395, 397a, 398, 399, 400a, 400c or 474 shall be
1388 issued, in the occupation or profession applied for and at a practice level
1389 determined by the department, to a person, including, but not limited
1390 to, an active duty member of the armed forces of the United States or
1391 such person's spouse, if:

1392 (1) The person holds a valid license, permit, certification or
1393 registration in at least one other jurisdiction in the United States in the
1394 occupation or profession applied for;

1395 (2) The person has practiced under such license, permit, certification
1396 or registration for not less than four years;

1397 (3) The person is in good standing in all jurisdictions in the United
1398 States in which he or she holds a license, permit, certification or
1399 registration and has not had a license, permit, certification or
1400 registration revoked or discipline imposed by any jurisdiction in the
1401 United States, does not have a complaint, allegation or investigation
1402 related to unprofessional conduct pending in any jurisdiction, and has
1403 not voluntarily surrendered a license, permit, certification or
1404 registration while under investigation for unprofessional conduct in any
1405 jurisdiction;

1406 (4) The person satisfies any background check or character and fitness
1407 check required of other applicants for the license, permit, certification or
1408 registration; and

1409 (5) The person pays all fees required of other applicants for the
1410 license, permit, certification or registration.

1411 (b) In addition to the requirements set forth in subsection (a) of this
1412 section, the [Department of Public Health] department may require a
1413 person applying for a license, permit, certification or registration under
1414 this section to take and pass all, or a portion of, any examination
1415 required of other persons applying for such license, permit, certification
1416 or registration.

1417 (c) Any person issued a license, permit, certification or registration
1418 pursuant to this section shall be subject to the laws of this state and the
1419 jurisdiction of the [Department of Public Health] department.

1420 (d) Notwithstanding the provisions of this section and pursuant to
1421 section 19a-14, the Commissioner of Public Health may deny an
1422 occupational or professional license, permit, certification or registration
1423 if he or she finds such denial is in the best interest of the state.

1424 (e) Not later than July 1, 2024, the commissioner shall publish, in a
1425 form and manner prescribed by the commissioner, an application for
1426 each occupational or professional license, permit, certification and
1427 registration issued by the department that collects the applicant
1428 information necessary for the department to recognize a covered license,
1429 as defined in 50 USC 4025a, as amended from time to time. The
1430 department shall not charge a fee to any covered license holder that
1431 submits such an application to the department. After determining that
1432 an applicant is eligible for license recognition pursuant to 50 USC 4025a,
1433 as amended from time to time, the department shall issue to the
1434 applicant a specially designated license, permit, certification,
1435 registration or similar credential for the occupation or profession for
1436 which the covered licensed is considered valid that shall (1) be recorded
1437 by the department in the department's registry of the occupational or
1438 professional license, permit, certification, registration or other similar
1439 credential relevant to the scope of practice and discipline, (2) be subject
1440 to the provisions of section 19a-17, as amended by this act, and (3) expire
1441 when the covered license holder's residency in the state is no longer
1442 required by military orders for military service, except when the
1443 covered license holder has submitted a complete application to the
1444 department for an appropriate license, registration or permit to practice
1445 the occupation and profession of the covered license in which case said
1446 expiration will occur upon the final determination of said application by
1447 the department.

1448 Sec. 35. Subsection (g) of section 19a-17 of the general statutes is
1449 repealed and the following is substituted in lieu thereof (*Effective July 1,*

1450 2024):

1451 (g) As used in this section, the term "license" shall be deemed to
1452 include the following authorizations relative to the practice of any
1453 profession listed in subsection (a) of this section: (1) Licensure by the
1454 Department of Public Health; (2) certification by the Department of
1455 Public Health; [and] (3) certification by a national certification body; and
1456 (4) a covered license, as defined in 50 USC 4025a, as amended from time
1457 to time, that is considered valid by the Department of Public Health.

1458 Sec. 36. Section 11 of public act 23-48 is repealed and the following is
1459 substituted in lieu thereof (*Effective from passage*):

1460 The Secretary of the Office of Policy and Management, in
1461 consultation with the Commissioners of Consumer Protection and
1462 Public Health, shall develop a plan to transfer the responsibility for
1463 registration and oversight of homemaker-companion agencies, as
1464 defined in section 20-670 of the general statutes from the Department of
1465 Consumer Protection to the Department of Public Health. Such plan
1466 shall (1) provide a timeline for the proposed transition, and (2) include
1467 recommendations on appropriate training standards that (A) exemplify
1468 best practices for providing homemaker and companion services, as
1469 defined in section 20-670 of the general statutes, (B) provide instruction
1470 and specialized training benchmarks for the care of clients with
1471 Alzheimer's disease, dementia and other related conditions, and (C)
1472 ensure a high quality of care for homemaker-companion agency clients
1473 and may evaluate and make recommendations on the appropriate use
1474 of the term "care" in describing the services provided by homemaker-
1475 companion agencies and any limitations on the use of such term to
1476 ensure consumer clarity. Not later than [August] December 1, 2024, the
1477 secretary shall report, in accordance with section 11-4a of the general
1478 statutes, on such plan to the joint standing committees of the General
1479 Assembly having cognizance of matters relating to aging, general law
1480 and public health.

1481 Sec. 37. Section 19a-6s of the general statutes is repealed and the

1482 following is substituted in lieu thereof (*Effective from passage*):

1483 (a) For purposes of this section, "clinical medical assistant" means a
1484 person who (1) (A) is certified by the American Association of Medical
1485 Assistants, the National Healthcareer Association, the National Center
1486 for Competency Testing, ~~or~~ the American Medical Technologists or the
1487 American Medical Certification Association, and (B) has graduated
1488 from a postsecondary medical assisting program (i) that is accredited by
1489 the Commission on Accreditation of Allied Health Education Programs,
1490 the Accrediting Bureau of Health Education Schools or another
1491 accrediting organization recognized by the United States Department of
1492 Education, or (ii) offered by an institution of higher education
1493 accredited by an accrediting organization recognized by the United
1494 States Department of Education and that includes a total of seven
1495 hundred twenty hours, including one hundred sixty hours of clinical
1496 practice skills, including, but not limited to, administering injections, or
1497 (2) has completed relevant medical assistant training provided by any
1498 branch of the armed forces of the United States.

1499 (b) A clinical medical assistant may administer a vaccine under the
1500 supervision, control and responsibility of a physician licensed pursuant
1501 to chapter 370, a physician assistant licensed pursuant to chapter 370 or
1502 an advanced practice registered nurse licensed pursuant to chapter 378
1503 to any person in any setting other than a hospital setting. Prior to
1504 administering a vaccine, a clinical medical assistant shall complete not
1505 less than twenty-four hours of classroom training and not less than eight
1506 hours of training in a clinical setting regarding the administration of
1507 vaccines. Nothing in this section shall be construed to permit an
1508 employer of a physician, a physician assistant or an advanced practice
1509 registered nurse to require the physician, physician assistant or
1510 advanced practice registered nurse to oversee a clinical medical
1511 assistant in the administration of a vaccine without the consent of the
1512 physician, physician assistant or advanced practice registered nurse.

1513 (c) On or before January first annually, the Commissioner of Public
1514 Health shall obtain from the American Association of Medical

1515 Assistants, the National Healthcareer Association, the National Center
1516 for Competency Testing, [and] the American Medical Technologists and
1517 the American Medical Certification Association a listing of all state
1518 residents maintained on said organizations' registries of certified
1519 medical assistants. The commissioner shall make such listings available
1520 for public inspection.

1521 Sec. 38. Subsection (a) of section 20-195c of the 2024 supplement to
1522 the general statutes is repealed and the following is substituted in lieu
1523 thereof (*Effective July 1, 2024*):

1524 (a) Each applicant for licensure as a marital and family therapist shall
1525 present to the department satisfactory evidence that such applicant has:
1526 (1) Completed a graduate degree program specializing in marital and
1527 family therapy offered by a regionally accredited college or university
1528 or an accredited postgraduate clinical training program accredited by
1529 the Commission on Accreditation for Marriage and Family Therapy
1530 Education offered by a regionally accredited institution of higher
1531 education; (2) completed a supervised practicum or internship with
1532 emphasis in marital and family therapy supervised by the program
1533 granting the requisite degree or by an accredited postgraduate clinical
1534 training program accredited by the Commission on Accreditation for
1535 Marriage and Family Therapy Education and offered by a regionally
1536 accredited institution of higher education; (3) completed [twelve]
1537 twenty-four months of relevant postgraduate experience, including (A)
1538 a minimum of one thousand hours of direct client contact offering
1539 marital and family therapy services subsequent to being awarded a
1540 master's degree or doctorate or subsequent to the training year specified
1541 in subdivision (2) of this subsection, and (B) one hundred hours of
1542 postgraduate clinical supervision provided by a licensed marital and
1543 family therapist; and (4) passed an examination prescribed by the
1544 department. The fee shall be two hundred dollars for each initial
1545 application.

1546 Sec. 39. (NEW) (*Effective from passage*) (a) Upon the request of the
1547 Mashantucket Pequot Tribal Nation or the Mohegan Tribe of Indians of

1548 Connecticut, the Department of Public Health shall grant said
1549 requesting tribe access to the state's birth and death registries in the
1550 department's electronic vital records system. Such access shall allow
1551 said tribe to register in the state's electronic birth and death registries all
1552 births and deaths that occur on land held in trust by the United States
1553 for said tribe in lieu of a town or municipality registering such births
1554 and deaths. Any birth or death certificate issued by said tribe for
1555 registration in the state's electronic birth and death registries shall be
1556 recognized as valid in the state, provided such certificate meets the
1557 requirements for registering, indexing, maintaining, issuing, correcting
1558 and amending such certificate set forth in sections 7-36 to 7-78, inclusive,
1559 19a-40 to 19a-45, inclusive, 19a-322, 19a-323 and 46b-450 to 46b-480,
1560 inclusive, of the general statutes and in the regulations of Connecticut
1561 state agencies adopted pursuant to said sections. Any entity or official
1562 responsible for filing a birth or death certificate pursuant to the general
1563 statutes with a town or municipality shall cooperate and fulfill its filing
1564 obligations with a requesting tribe in the same manner that it would
1565 cooperate and fulfill its filing obligations with a town or municipality.
1566 Such entities and officials shall be subject to the same terms of
1567 enforcement for failure to cooperate or fulfill their filing obligations with
1568 a requesting tribe as they would for failure to cooperate or fulfill their
1569 filing obligations with a town or municipality.

1570 (b) If the department determines that a tribe granted access to such
1571 birth and death registries has failed to comply with any of the
1572 requirements of any provision of subsection (a) of this section or has
1573 submitted filings to the system that do not conform with such
1574 requirements, the department may give notice by certified mail, return
1575 receipt requested, to said tribe of the facts or conduct that contributed
1576 to such determination and the specific provisions of the general statutes
1577 or regulations of Connecticut state agencies that are alleged to have been
1578 violated. The department shall provide said tribe an opportunity to
1579 demonstrate compliance with such provisions and submit a plan of
1580 correction to achieve compliance with such provisions. If said tribe does
1581 not demonstrate compliance or fully implement a department approved

1582 plan of correction on or before thirty days after receiving notice from the
1583 department under this subsection, the department may terminate the
1584 tribe's access to the state's electronic birth and death registries in the
1585 department's electronic vital records system or remove any
1586 nonconforming filings from such registries.

1587 (c) Nothing in this section shall be construed to (1) grant the
1588 department jurisdiction over a requesting tribe or its tribal office
1589 responsible for the issuance and maintenance of birth or death
1590 certificates, or (2) limit the department's authority to (A) grant or restrict
1591 a requesting tribe's access to the state's electronic birth and death
1592 registries consistent with the provisions of this section, or (B) remove
1593 any nonconforming filings from such registries.

1594 Sec. 40. Subsection (b) of section 20-195n of the 2024 supplement to
1595 the general statutes is repealed and the following is substituted in lieu
1596 thereof (*Effective from passage*):

1597 (b) An applicant for licensure as a master social worker shall: (1) (A)
1598 Hold a master's degree from a social work program (i) accredited by the
1599 Council on Social Work Education, or (ii) that is in candidate status for
1600 accreditation by said council and offered by an institution of higher
1601 education in the state during or after the spring semester of 2024, and
1602 prior to the spring semester of 2028, or [.] (B) if educated outside the
1603 United States or its territories, have completed an educational program
1604 deemed equivalent by the council; and (2) pass the masters level
1605 examination of the Association of Social Work Boards or any other
1606 examination prescribed by the commissioner.

1607 Sec. 41. Section 20-252 of the general statutes is repealed and the
1608 following is substituted in lieu thereof (*Effective October 1, 2024*):

1609 (a) No person shall engage in the occupation of registered hairdresser
1610 and cosmetician without having obtained a license from the
1611 department. Persons desiring such licenses shall apply in writing on
1612 forms furnished by the department. No license shall be issued, except a
1613 renewal of a license, to a registered hairdresser and cosmetician unless

1614 the applicant has shown to the satisfaction of the department that the
1615 applicant has complied with the laws and the regulations administered
1616 or adopted by the department. No applicant shall be licensed as a
1617 registered hairdresser and cosmetician, except by renewal of a license,
1618 until the applicant has made written application to the department,
1619 setting forth by affidavit that the applicant has (1) (A) successfully
1620 completed the ninth grade, (B) completed a course of not less than
1621 fifteen hundred hours of study in a school approved in accordance with
1622 the provisions of this chapter or in a school teaching hairdressing and
1623 cosmetology under the supervision of the State Board of Education, or,
1624 if trained outside of Connecticut, in a school teaching hairdressing and
1625 cosmetology whose requirements are equivalent to those of a
1626 Connecticut school, and (C) passed a written examination satisfactory
1627 to the department, or (2) if the applicant is an apprentice, (A)
1628 successfully completed the eighth grade, (B) completed an
1629 apprenticeship approved by the Labor Department and conducted in
1630 accordance with sections 31-22m to 31-22u, inclusive, and (C) passed a
1631 written examination satisfactory to the Department of Public Health.
1632 Examinations required for licensure under this chapter shall be
1633 prescribed by the department with the advice and assistance of the
1634 board. The department shall establish a passing score for examinations
1635 with the advice and assistance of the board which shall be the same as
1636 the passing score established in section 20-236.

1637 (b) No person applying for licensure as a hairdresser and cosmetician
1638 under this chapter shall be required to submit to a state or national
1639 criminal history records check as a prerequisite to licensure.

1640 (c) The commissioner shall notify each applicant who is approved to
1641 take a written examination required under subsection (a) of this section
1642 that such applicant may be eligible for testing accommodations
1643 pursuant to the federal Americans with Disabilities Act, 42 USC 12101
1644 et seq., as amended from time to time, or other accommodations, as
1645 determined by the board, which may include the use of a dictionary
1646 while taking such examination and additional time within which to take
1647 such examination.

1648 Sec. 42. Section 20-12i of the general statutes is repealed and the
1649 following is substituted in lieu thereof (*Effective October 1, 2024*):

1650 (a) [On and after October 1, 2011, prior] Prior to engaging in the use
1651 of fluoroscopy for guidance of diagnostic and therapeutic procedures, a
1652 physician assistant or advanced practice registered nurse shall: (1)
1653 Successfully complete a course that includes forty hours of didactic
1654 instruction relevant to fluoroscopy which includes, but is not limited to,
1655 radiation biology and physics, exposure reduction, equipment
1656 operation, image evaluation, quality control and patient considerations;
1657 (2) successfully complete a minimum of forty hours of supervised
1658 clinical experience that includes a demonstration of patient dose
1659 reduction, occupational dose reduction, image recording and quality
1660 control of fluoroscopy equipment; and (3) pass an examination
1661 prescribed by the Commissioner of Public Health. Documentation that
1662 the physician assistant or advanced practice registered nurse has met
1663 the requirements prescribed in this subsection shall be maintained at the
1664 employment site of the physician assistant or advanced practice
1665 registered nurse and made available to the Department of Public Health
1666 upon request.

1667 (b) An advanced practice registered nurse shall only engage in the
1668 use of fluoroscopy for guidance of diagnostic and therapeutic
1669 procedures in collaboration with a physician licensed pursuant to
1670 chapter 370 who is trained in radiation protection. An advanced practice
1671 registered nurse who engages in the use of fluoroscopy shall wear a
1672 radiation safety badge during the procedure. As used in this subsection,
1673 (1) "collaboration" means (A) a mutually agreed upon relationship
1674 between the advanced practice registered nurse and a physician who is
1675 educated, trained or has relevant experience that is related to the work
1676 of such advanced practice registered nurse, and (B) the continuous
1677 availability of in-person communication between the advanced practice
1678 registered nurse and the physician, and (2) "radiation safety badge"
1679 means a badge typically worn on the front of a person's body that
1680 monitors the person's exposure to radiation and displays the level of
1681 such exposure.

1682 [(b)] (c) Notwithstanding the provisions of this section or sections 20-
1683 74bb and 20-74ee, nothing shall prohibit a physician assistant who is
1684 engaging in the use of fluoroscopy for guidance of diagnostic and
1685 therapeutic procedures or positioning and utilizing a mini C-arm in
1686 conjunction with fluoroscopic procedures prior to October 1, 2011, from
1687 continuing to engage in such procedures, or require the physician
1688 assistant to complete the course or supervised clinical experience
1689 described in subsection (a) of this section, provided such physician
1690 assistant shall pass the examination prescribed by the commissioner on
1691 or before September 1, 2012. If a physician assistant does not pass the
1692 required examination on or before September 1, 2012, such physician
1693 assistant shall not engage in the use of fluoroscopy for guidance of
1694 diagnostic and therapeutic procedures or position and utilize a mini C-
1695 arm in conjunction with fluoroscopic procedures until such time as such
1696 physician assistant meets the requirements of subsection (a) of this
1697 section.

1698 Sec. 43. Subsection (d) of section 17a-673c of the 2024 supplement to
1699 the general statutes is repealed and the following is substituted in lieu
1700 thereof (*Effective from passage*):

1701 (d) The Commissioner of Mental Health and Addiction Services may
1702 request a disbursement of funds from the Opioid Settlement Fund
1703 established pursuant to section 17a-674c, in whole or in part, for the
1704 establishment and administration of the pilot program.

1705 Sec. 44. Subsection (c) of section 17a-674h of the 2024 supplement to
1706 the general statutes is repealed and the following is substituted in lieu
1707 thereof (*Effective from passage*):

1708 (c) Not later than January 1, 2024, the Department of Mental Health
1709 and Addiction Services, in collaboration with the Department of Public
1710 Health, shall use the Opioid Antagonist Bulk Purchase Fund for the
1711 provision of opioid antagonists to eligible entities and by emergency
1712 medical services personnel to certain members of the public. Emergency
1713 medical services personnel shall distribute an opioid antagonist kit

1714 containing a personal supply of opioid antagonists and the one-page
1715 fact sheet developed by the Connecticut Alcohol and Drug Policy
1716 Council pursuant to section 17a-667a regarding the risks of taking an
1717 opioid drug, symptoms of opioid use disorder and services available in
1718 the state for persons who experience symptoms of or are otherwise
1719 affected by opioid use disorder to a patient who (1) is treated by such
1720 personnel for an overdose of an opioid drug, (2) displays symptoms to
1721 such personnel of opioid use disorder, or (3) is treated at a location
1722 where such personnel observes evidence of illicit use of an opioid drug,
1723 or to such patient's family member, caregiver or friend who is present
1724 at the location. Emergency medical services personnel shall refer the
1725 patient or such patient's family member, caregiver or friend to the
1726 written instructions regarding the administration of such opioid
1727 antagonist, as deemed appropriate by such personnel.

1728 Sec. 45. Subdivision (5) of subsection (a) of section 19a-77 of the 2024
1729 supplement to the general statutes is repealed and the following is
1730 substituted in lieu thereof (*Effective from passage*):

1731 (5) ["Year-round" program] "Year-round program" means a program
1732 open at least fifty weeks per year.

1733 Sec. 46. Subsection (q) of section 19a-89e of the 2024 supplement to
1734 the general statutes is repealed and the following is substituted in lieu
1735 thereof (*Effective from passage*):

1736 (q) The Commissioner of Public Health may order an audit of the
1737 nurse staffing assignments of each hospital to determine compliance
1738 with the nurse staffing assignments for each hospital unit set forth in the
1739 nurse staffing plan developed pursuant to subsections (d) and (e) of this
1740 section. Such audit may include an assessment of the hospital's
1741 compliance with the requirements of this section for the content of such
1742 plan, accuracy of reports submitted to the department and the
1743 membership of the hospital staffing committee. In determining whether
1744 to order an audit, the commissioner shall consider whether there has
1745 been consistent noncompliance by the hospital with the nurse staffing

1746 plan, fear of false reporting by the hospital [] or any other health care
1747 quality safety concerns. The hospital that is subject to the audit shall pay
1748 the cost of the audit. The audit shall not affect the conduct by the
1749 hospital of peer review as defined in section 19a-17b.

1750 Sec. 47. Subsection (a) of section 19a-133c of the 2024 supplement to
1751 the general statutes is repealed and the following is substituted in lieu
1752 thereof (*Effective from passage*):

1753 (a) As used in this section, "structural racism" means a system that
1754 structures opportunity and assigns value in a way that
1755 disproportionately and negatively impacts Black, Indigenous, Latino or
1756 Asian people or other people of color, and "state agency" has the same
1757 meaning as provided in section 1-79. The Commission on Racial Equity
1758 in Public Health, established under section 19a-133a, shall recommend
1759 best practices for state agencies to (1) evaluate structural racism within
1760 their own policies, practices [] and operations, and (2) create and
1761 implement a plan, which includes the establishment of benchmarks for
1762 improvement, to ultimately eliminate any such structural racism within
1763 the agency.

1764 Sec. 48. Subdivision (1) of subsection (k) of section 19a-508c of the
1765 2024 supplement to the general statutes is repealed and the following is
1766 substituted in lieu thereof (*Effective from passage*):

1767 (k) (1) If any transaction described in subsection (c) of section 19a-
1768 486i [] results in the establishment of a hospital-based facility at which
1769 facility fees may be billed, the hospital or health system, that is the
1770 purchaser in such transaction shall, not later than thirty days after such
1771 transaction, provide written notice, by first class mail, of the transaction
1772 to each patient served within the three years preceding the date of the
1773 transaction by the health care facility that has been purchased as part of
1774 such transaction.

1775 Sec. 49. Subdivision (21) of section 20-73e of the 2024 supplement to
1776 the general statutes is repealed and the following is substituted in lieu
1777 thereof (*Effective from passage*):

1778 (21) "Rule" means a regulation, principle [,] or directive promulgated
1779 by the commission that has the force of law; and

1780 Sec. 50. Subparagraph (B) of subdivision (2) of subsection (b) of
1781 section 20-87a of the 2024 supplement to the general statutes is repealed
1782 and the following is substituted in lieu thereof (*Effective from passage*):

1783 (B) An advanced practice registered nurse having been issued a
1784 license pursuant to subsection (d) of section 20-94a who collaborated,
1785 prior to the issuance of such license, with a physician licensed to practice
1786 medicine in another state may count the time of such collaboration
1787 toward the three-year requirement set forth in subparagraph (A) of this
1788 [subsection] subdivision, provided such collaboration otherwise
1789 satisfies the requirements set forth in said subparagraph.

1790 Sec. 51. Subsection (d) of section 20-185aa of the 2024 supplement to
1791 the general statutes is repealed and the following is substituted in lieu
1792 thereof (*Effective from passage*):

1793 (d) Any health care facility that employs or retains a surgical
1794 technologist shall submit to the Department of Public Health, upon
1795 request of the department, documentation [demonstration]
1796 demonstrating that the surgical technologist is in compliance with the
1797 requirements set forth in this section.

1798 Sec. 52. Subsection (b) of section 38a-479jjj of the 2024 supplement to
1799 the general statutes is repealed and the following is substituted in lieu
1800 thereof (*Effective from passage*):

1801 (b) On and after January 1, 2024, a contract entered into between a
1802 pharmacy [benefit] benefits manager and a 340B covered entity shall not
1803 contain any of the following provisions:

1804 (1) A reimbursement rate for a prescription drug that is less than the
1805 reimbursement rate paid to pharmacies that are not 340B covered
1806 entities;

1807 (2) A fee or adjustment that is not imposed on providers or

1808 pharmacies that are not 340B covered entities;

1809 (3) A fee or adjustment amount that exceeds the fee or adjustment
1810 amount imposed on providers or pharmacies that are not 340B covered
1811 entities;

1812 (4) Any provision that prevents or interferes with a patient's choice
1813 to receive a prescription drug from a 340B covered entity, including the
1814 administration of the drug; and

1815 (5) Any provision that excludes a 340B covered entity from pharmacy
1816 [benefit] benefits manager networks based on the 340B covered entity's
1817 participation in the federal 340B Drug Pricing Program.

1818 Sec. 53. Subsection (d) of section 38a-518v of the 2024 supplement to
1819 the general statutes is repealed and the following is substituted in lieu
1820 thereof (*Effective from passage*):

1821 (d) Nothing in this section shall prohibit or limit a health insurer,
1822 health care center, hospital service corporation, medical service
1823 corporation or other entity from conducting utilization review for an in-
1824 home hospice [services] service, provided such utilization review is
1825 conducted in the same manner and uses the same clinical review criteria
1826 as a utilization review for the same hospice services provided in a
1827 hospital.

1828 Sec. 54. Subsection (c) of section 10-532 of the 2024 supplement to the
1829 general statutes is repealed and the following is substituted in lieu
1830 thereof (*Effective October 1, 2024*):

1831 (c) When developing the program, said commissioners and executive
1832 director [.] shall (1) consult with insurers that offer health benefit plans
1833 in the state, hospitals, local public health authorities, existing early
1834 childhood home visiting programs, community-based organizations
1835 and social service providers; and (2) maximize the use of available
1836 federal funding.

1837 Sec. 55. Subsection (g) of section 19a-59j of the 2024 supplement to the

1838 general statutes is repealed and the following is substituted in lieu
1839 thereof (*Effective October 1, 2024*):

1840 (g) Notwithstanding any provision of the general statutes, the
1841 commissioner, or the commissioner's designee, may provide the infant
1842 mortality review committee, established pursuant to section 19a-59k,
1843 with information as is necessary, in the commissioner's discretion, for
1844 the committee to make recommendations regarding the prevention of
1845 infant deaths.

1846 Sec. 56. Subdivision (3) of section 19a-111b of the 2024 supplement to
1847 the general statutes is repealed and the following is substituted in lieu
1848 thereof (*Effective October 1, 2024*):

1849 (3) The commissioner shall establish a program for the detection of
1850 sources of lead poisoning. Within available appropriations, such
1851 program shall include the identification of dwellings in which paint,
1852 plaster or other accessible substances contain toxic levels of lead and the
1853 inspection of areas surrounding such dwellings for lead-containing
1854 materials. Any person who detects a toxic level of lead, as defined by
1855 the commissioner, shall report such findings to the commissioner. The
1856 commissioner shall inform all interested parties, including, but not
1857 limited to, the owner of the building, the occupants of the building,
1858 enforcement officials and other necessary parties.

1859 Sec. 57. Subsection (l) of section 19a-490 of the 2024 supplement to the
1860 general statutes is repealed and the following is substituted in lieu
1861 thereof (*Effective October 1, 2024*):

1862 (l) "Assisted living services agency" means an agency that provides
1863 chronic and stable individuals with services that include, but need not
1864 be limited to, nursing services and assistance with activities of daily
1865 living and may have a dementia special care unit or program as defined
1866 in section 19a-562;

1867 Sec. 58. Subdivisions (2) and (3) of subsection (b) of section 19a-181 of
1868 the 2024 supplement to the general statutes are repealed and the

1869 following is substituted in lieu thereof (*Effective October 1, 2024*):

1870 (2) Each authorized emergency medical [service] services vehicle
1871 shall be equipped with the equipment required for its specific vehicle
1872 classification as specified in the 2022 Connecticut EMS Minimum
1873 Equipment Checklist, as amended from time to time; and

1874 (3) Each authorized emergency medical [service] services vehicle
1875 shall comply with all state and federal safety, design and equipment
1876 requirements.

1877 Sec. 59. Subdivision (9) of subsection (c) of section 19a-493 of the 2024
1878 supplement to the general statutes is repealed and the following is
1879 substituted in lieu thereof (*Effective October 1, 2024*):

1880 (9) The provisions of this subsection shall not apply in the event of a
1881 change of ownership or beneficial ownership of ten per cent or less of
1882 the ownership of a licensed outpatient surgical facility, as defined in
1883 section 19a-493b, resulting in a transfer to a physician licensed under
1884 chapter 370 if such facility provides information, in a form and manner
1885 prescribed by the commissioner, to update such facility's licensing
1886 information.

1887 Sec. 60. Subdivision (2) of subsection (c) of section 19a-566 of the 2024
1888 supplement to the general statutes is repealed and the following is
1889 substituted in lieu thereof (*Effective October 1, 2024*):

1890 (2) If a patient receiving birth center services no longer presents with
1891 a low-risk pregnancy, as defined in section 19a-490, as amended by this
1892 act, or otherwise fails to meet the patient eligibility criteria described in
1893 subparagraph (A) of subdivision (1) of this subsection, the birth center
1894 providing such services shall ensure the patient's care is transferred to a
1895 licensed health care provider capable of providing the appropriate level
1896 of obstetrical care for the patient.

1897 Sec. 61. (*Effective from passage*) The Commissioner of Public Health
1898 shall conduct a scope of practice review pursuant to sections 19a-16d to

1899 19a-16f, inclusive, of the general statutes, to determine whether
1900 naturopathic physicians licensed pursuant to chapter 373 of the general
1901 statutes should be permitted to prescribe, dispense and administer
1902 prescription medication and, if so, whether the Department of Public
1903 Health should (1) establish educational and examination requirements
1904 or other qualifications to permit a naturopathic physician to prescribe,
1905 dispense and administer prescription medication, or (2) develop a
1906 naturopathic formulary of prescription medication that a naturopathic
1907 physician who meets such educational and examination requirements
1908 or other qualifications may use. Not later than January 1, 2025, the
1909 commissioner shall report, in accordance with the provisions of section
1910 11-4a of the general statutes, the findings of such review and any
1911 recommendations to the joint standing committee of the General
1912 Assembly having cognizance of matters relating to public health.

1913 Sec. 62. Subsection (g) of section 44 of public act 23-97 is repealed and
1914 the following is substituted in lieu thereof (*Effective from passage*):

1915 (g) Not later than January 1, [2024] 2025, the task force shall submit a
1916 report on its findings and recommendations to the joint standing
1917 committee of the General Assembly having cognizance of matters
1918 relating to public health, in accordance with the provisions of section 11-
1919 4a of the general statutes. The task force shall terminate on the date that
1920 it submits such report or January 1, [2024] 2025, whichever is later.

1921 Sec. 63. Subsection (a) of section 23 of senate bill 1 of the current
1922 session, as amended by Senate Amendment Schedules "A" and "B", is
1923 repealed and the following is substituted in lieu thereof (*Effective from*
1924 *passage*):

1925 (a) Not later than September 1, [2025] 2024, the executive director of
1926 the Office of Health Strategy shall establish a working group to make
1927 recommendations to the office regarding the parameters of the
1928 regulations to be adopted by, and any policies and procedures to be
1929 implemented by, the office pursuant to subsection (f) of section 17b-59e
1930 of the general statutes, as amended by [this act] senate bill 1 of the

1931 current session, as amended by Senate Amendment Schedules "A" and
 1932 "B". Such recommendations shall include, but need not be limited to (1)
 1933 privacy of protected health care information, (2) cybersecurity, (3)
 1934 health care provider liability, (4) any contract required of health care
 1935 providers to participate in the State-wide Health Information Exchange,
 1936 and (5) any statutory changes that may be necessary to address any
 1937 concerns raised by the working group."

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2024</i>	7-48(c)
Sec. 2	<i>October 1, 2024</i>	7-51(a)(1)
Sec. 3	<i>July 1, 2024</i>	8-3i
Sec. 4	<i>from passage</i>	19a-6i(a) and (b)
Sec. 5	<i>July 1, 2024</i>	19a-36i
Sec. 6	<i>July 1, 2024</i>	19a-88(g)(1)
Sec. 7	<i>from passage</i>	19a-580h(b) and (c)
Sec. 8	<i>October 1, 2024</i>	20-123b
Sec. 9	<i>from passage</i>	25-32(n)
Sec. 10	<i>from passage</i>	7-36
Sec. 11	<i>from passage</i>	19a-320
Sec. 12	<i>from passage</i>	19a-322
Sec. 13	<i>from passage</i>	19a-323
Sec. 14	<i>from passage</i>	20-207
Sec. 15	<i>July 1, 2024</i>	19a-197a
Sec. 16	<i>from passage</i>	19a-37
Sec. 17	<i>from passage</i>	19a-332
Sec. 18	<i>July 1, 2024</i>	19a-14(c)(4)
Sec. 19	<i>July 1, 2024</i>	19a-35a
Sec. 20	<i>July 1, 2024</i>	19a-36g(14)
Sec. 21	<i>July 1, 2024</i>	19a-200(l) and (m)
Sec. 22	<i>July 1, 2024</i>	19a-206(a)
Sec. 23	<i>July 1, 2024</i>	19a-242(c) and (d)
Sec. 24	<i>July 1, 2024</i>	20-358(2)
Sec. 25	<i>July 1, 2024</i>	20-360
Sec. 26	<i>July 1, 2024</i>	20-361(a)
Sec. 27	<i>July 1, 2024</i>	20-362
Sec. 28	<i>July 1, 2024</i>	20-365
Sec. 29	<i>July 1, 2024</i>	22a-430(g)

Sec. 30	October 1, 2024	20-435
Sec. 31	from passage	19a-566(b)
Sec. 32	July 1, 2024	19a-494(a)
Sec. 33	July 1, 2024	19a-17(a)
Sec. 34	from passage	19a-14d
Sec. 35	July 1, 2024	19a-17(g)
Sec. 36	from passage	PA 23-48, Sec. 11
Sec. 37	from passage	19a-6s
Sec. 38	July 1, 2024	20-195c(a)
Sec. 39	from passage	New section
Sec. 40	from passage	20-195n(b)
Sec. 41	October 1, 2024	20-252
Sec. 42	October 1, 2024	20-12i
Sec. 43	from passage	17a-673c(d)
Sec. 44	from passage	17a-674h(c)
Sec. 45	from passage	19a-77(a)(5)
Sec. 46	from passage	19a-89e(q)
Sec. 47	from passage	19a-133c(a)
Sec. 48	from passage	19a-508c(k)(1)
Sec. 49	from passage	20-73e(21)
Sec. 50	from passage	20-87a(b)(2)(B)
Sec. 51	from passage	20-185aa(d)
Sec. 52	from passage	38a-479jjj(b)
Sec. 53	from passage	38a-518v(d)
Sec. 54	October 1, 2024	10-532(c)
Sec. 55	October 1, 2024	19a-59j(g)
Sec. 56	October 1, 2024	19a-111b(3)
Sec. 57	October 1, 2024	19a-490(l)
Sec. 58	October 1, 2024	19a-181(b)(2) and (3)
Sec. 59	October 1, 2024	19a-493(c)(9)
Sec. 60	October 1, 2024	19a-566(c)(2)
Sec. 61	from passage	New section
Sec. 62	from passage	PA 23-97, Sec. 44(g)
Sec. 63	from passage	SB 1 (current session), Sec. 23(a)