

MONDAY MARCH 13

Judiciary Public Hearing- 10:00 AM, Room 2C

Bill Number	Bill Title	Introducer(s)	Purpose
S.B. 1195	AN ACT ESTABLISHING SECONDARY TRAFFIC VIOLATIONS.	Rep. Porter	Creates a new classification of motor vehicle infractions and prohibits cops from stopping drivers for violations of these new “secondary violations.” Prohibiting our cops from pulling people over for tail light and headlamp infractions, license plate infractions, registration infractions, is a crucial aspect of policing. Cops often use these violations as a way of establishing probable cause to pull over a vehicle and begin an investigation into a more serious crime that is being committed. If passed, this bill will seriously handicap our cops.
H.B. 6873	AN ACT REQUIRING THE POLICE OFFICER STANDARDS AND TRAINING COUNCIL TO DEVELOP AND PROMULGATE A MODEL POLICY REQUIRING THE USE OF A SEAT SAFETY BELT FOR ANY PERSON WHO IS BEING TRANSPORTED IN A MUNICIPAL POLICE VEHICLE.	JUD Chairs	<p>This bill arises out of the case of Richard “Randy” Cox who was paralyzed when he was sitting in the back of a police van that came to a sudden stop to avoid an accident. Cox, who had been arrested on a weapons charge, went headfirst into the wall of the van. Five New Haven police officers were arrested and charged with reckless endangerment in the second degree and cruelty to persons for their actions and omissions during that incident.</p> <p>This bill would require POST to develop a model policy for the use of a seat belt by a person being transported in a police vehicle.</p>
H.B. 6636	AN ACT CONCERNING THE PROTECTION OF CRIME VICTIMS WHEN STANDING CRIMINAL PROTECTIVE ORDERS ARE IN EFFECT.		<p>Prohibits the Board of Pardons and Paroles (BPP) from accepting an application for a pardon if the applicant has an active standing criminal protective order.</p> <p>Given the recent news stories about the BPP and their commuting of the sentences of many violent felons this is an important bill that if passed will protect victims from their convicted offenders.</p>

H.B. 6682	AN ACT CONCERNING THE SENTENCE FOR MURDER COMMITTED IN THE COURSE OF COMMISSION OF A FAMILY VIOLENCE CRIME.	HRO Caucus Proposal and Rep. Cheeseman	Adds to the list of crimes that are classified as murder with special circumstances, murder committed in the course of a commission of a family violence crime. Murder with Special Circumstances is a crime that disqualifies an individual from the possibility of release from incarceration. 2022 was a difficult year for Connecticut, there were multiple horrific murders that were perpetrated by offenders upon their children and intimate partners. This provision would increase the penalty for these crimes that shock the conscious in an exceptional way.
H.B. 6878	AN ACT CONCERNING APPEALS REGARDING GOVERNMENTAL IMMUNITY OF POLICE OFFICERS, USE OF FORCE BY A PEACE OFFICER, SEARCHES OF MOTOR VEHICLES, PURSUIT OF A SUSPECT POLICIES AND VERIFICATION OF RESIDENCE ADDRESSES OF PERSONS ON THE SEX OFFENSE REGISTRY.	HRO Caucus Proposal	<p>This is our bill proposing to restore 3 provisions that were revoked under the Police Accountability Bill and a clarifying provision for registered sex offenders. These provisions include governmental immunity, use of force standard, consent searches for weapons or contraband, and a new requirement that the residential addresses of sex offenders required to register on the sex offender database.</p> <p>It is no secret that the Police Accountability bill resulted in reduced police activity. Our officers were left confused on the changes, unsure of when they may engage in elevated levels of enforcement and simply unequipped to combat the increased criminal activity that has occurred since the COVID-19 pandemic. This bill seeks to restore confidence and certainty for our officers. These provisions have been vetted and reviewed by law enforcement officers and other interested parties and have their support.</p>

Public Health Public Hearing – 11:00 AM, Room 1E

Bill Number	Bill Title	Introducers	Purpose
S.B. 986	AN ACT PROTECTING MATERNAL HEALTH	Governor Ned Lamont	<p>This is one of the Governor’s bills to implement the part of his budget related to Public Health. It does the following:</p> <ul style="list-style-type: none"> • Defines “birth centers” as a freestanding facility which provides prenatal, labor, delivery, and postpartum care during and immediately

			<p>after delivery to persons with low-risk pregnancies for a period of less than 24 hours.</p> <ul style="list-style-type: none"> • Requires these birth centers to be licensed by the Department of Public Health and details its standards for licensure. • Allows nurse-midwives to practice within these new birth centers. • States that certificates of need are not required for birth centers. • Establishes a infant mortality review program and committee (membership listed in the bill) within the Department of Public Health which will have the ability to review medical records and relevant data related to infant deaths in the state. • Develops certification standards for doulas in the state. • Requires DPH to establish a midwifery working group to study and make recommendations concerning the advancement of choices in care for community birth and the role of community midwives in addressing maternal and infant health disparities. • Requires the Office of Early Childhood, in collaboration with DSS and OHS, to develop and implement a state-wide program to offer universal newborn nursing home visiting services to all families with newborns. <ul style="list-style-type: none"> ○ "universal newborn nurse home visiting" means an evidence-based nurse home visiting model in which a registered nurse with specialized training provides services in the home to families with newborns. • Eliminates maternity hospitals in the state, to be replaced by these birth centers.
<p>H.B. 6669</p>	<p>AN ACT PROTECTING PATIENTS AND PROHIBITING UNNECESSARY HEALTH CARE COSTS.</p>	<p>Governor Ned Lamont</p>	<p>This is one of the Governor’s bills to implement the part of his budget related to Public Health. It includes the following provisions:</p> <ul style="list-style-type: none"> • Requires the Comptroller to establish a Drug Discount Card Program to be made available to all residents in the state. • Adds legend (a.k.a. prescription only) and nonlegend drugs and devices to the electronic prescription drug monitoring program, which collects information on prescriptions dispensed by pharmacists throughout the state. <ul style="list-style-type: none"> ○ Requires that the electronic drug monitoring program collect transaction

information on all prescriptions in the state that have been deprescribed.

- Requires DCP, in consultation with UConn School of Pharmacy, to submit a report on establishing an academic detailing program for physicians, APRNs, and pharmacists in the state.
 - “academic detailing” is the process of identifying the best evidence-based practices for a particular medical condition and appropriate treatments, and providing said information to prescribers.
- Requires all pharmaceutical representatives in the state to be licensed by DCP and sets standards for such licensure.
- Requires pharmaceutical representatives engaged in legend drug marketing to disclose a prescriber the wholesale acquisition cost of said drug, the names of at least three legend drugs from the same class, and information on variation efficacy of the legend drug marketed to different racial and ethnic groups, if available.
- Prohibits pharmaceutical representatives to:
 - engage in deceptive marketing practices of a legend drug,
 - use a title or designation that could reasonably mislead a prescriber, or
 - transport or provide samples of a legend drug to prescriber or their employees.
- Requires OHS in consultation with the Insurance Department to prepare and submit a report on an analysis of pharmacy benefits managers’ practices of prescription drug distribution.
- Requires OHS to make available for public comment a preliminary list of the ten outpatient prescription drugs that the Executive Director determines are provided at substantial cost to the state and critical to public health.
- Prohibits health care providers from charging, billing for, or collecting a facility fee (only for outpatient services) unless services are provided on a hospital’s campus, at a facility that includes a hospital emergency department, or a freestanding emergency department.

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| | | <ul style="list-style-type: none">• Requires units applying for a certificate of need to provide three weeks' (instead of the current two weeks) advance notice in writing and two weeks' advance notice on the applicant's web site. Allows for these units to retain an independent consultant with expertise in the specific area of health care that is subject to the pending application.• Allows for the Executive Director of OHS to issue notices to these units of violating the provisions requiring public hearings for certificates of need. If they do not comply and do not make a timely request for a hearing, they shall be given a cease and desist order.• Prohibits pharmacy benefits managers from imposing requirements, conditions, or exclusions which could:<ul style="list-style-type: none">○ Discriminate against a 340B covered entity, or○ Prevent a 340B covered entity from retaining the benefit of discounted pricing for the purchase of covered drugs.• Prohibits drug manufacturers from imposing preconditions, limitations, delays, or other barriers to the purchase of 340B covered drugs.• Allows for the covered entity or Attorney General to seek a temporary or permanent injunction to prohibit drug manufacturers and pharmacy benefits managers from continuing to enforce contract provisions which violate the 340B sections of this bill.• Requires each hospital that participates in the federal 340B drug pricing program to annually file information regarding:<ul style="list-style-type: none">○ Manufacturers from whom the hospital purchased covered outpatient drugs in the preceding year as a part of 340B,○ Covered outpatient drugs purchased from each manufacturer,○ The reimbursement amount by each payer for covered outpatient drugs,○ The difference in cost for each covered outpatient drug between the ceiling price and the actual price paid by any patient or payer, and |
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			<ul style="list-style-type: none"> ○ A summary of how the difference in cost was applied for the benefit of the community.
H.B. 6733	AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.	Department of Public Health	<p>This bill includes various technical and substantive changes regarding the Department of Public Health's statutes. Some of the highlights include:</p> <ul style="list-style-type: none"> • Makes changes to continuing education requirements for social workers. • Allows for a larger grandfathering window for nail technicians and estheticians who were unlicensed before the licensing requirement came into effect. <ul style="list-style-type: none"> ○ Exempts eyebrow threading from the esthetician licensing requirements. • Requires primary care providers to offer Hepatitis C screening to anyone over eighteen years of age and all pregnant women, rather than just people born between 1945 and 1965, inclusive. • Adds the Commissioner of Education to the Commission on Community Gun Violence Intervention and Prevention. • Requires DPH to rescind any discipline against a physician in another state as required by the Interstate Medical Licensure Compact, if such discipline was based solely on the termination of a pregnancy under conditions which would not violate CT state law. • Allows DPH to set rates for certified ambulances to provide non-emergency transport.
H.B. 6835	AN ACT CONCERNING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.	PH Committee	<p>This is the Public Health committee's bill to make various revisions to the public health statutes. It includes the following provisions:</p> <ul style="list-style-type: none"> • Prohibits health care facilities from employing or retaining persons who perform surgical technology services unless such person: <ul style="list-style-type: none"> ○ Holds and maintains certification as a surgical technologist, and ○ Has successfully completed a nationally accredited surgical technology program. • Increases the maximum amount of continuing education units (50-60 minutes) via the internet or distance learning to be completed for massage therapists from six to eighteen. • Requires licensed psychologists to apply and pay a fee to be able to retire in good standing. • Replaces the word "town" with "municipality" in multiple public health statutes.

		<ul style="list-style-type: none"> Requires a prescribing practitioner to establish a treatment agreement or care plan with a patient who is prescribed opioids for longer than twelve weeks. Makes technical changes to the language in some statutes. <p>For the most part, this legislation is harmless or completely technical, however, we have serious concerns with requiring licensed psychologists to apply and pay a fee to retire from the profession in good standing. This creates a barrier for psychologists that does not make sense and is not required for any other licensed profession in the state.</p>
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TUESDAY MARCH 14

Human Services Public Hearing – 10:00 AM, Room 2D

Bill Number	Bill Title	Introducers	Purpose
S.B. 1202	AN ACT CONCERNING PRESCRIPTION DRUG AFFORDABILITY	HS Committee	<p>This legislation includes multiple provisions dealing with prescription drug affordability, including:</p> <ul style="list-style-type: none"> Prohibiting drug purchasers from purchasing and seeking reimbursement for referenced drugs if they are to be dispensed, delivered, or administered to an insured person in the state for a cost that exceeds the maximum fair price. Prohibiting drug purchasers from withdrawing such referenced drugs to attempt to avoid any loss of revenue resulting from the maximum fair price requirement. Establishes a Prescription Drug Payment Evaluation Committee to recommend upper payment limits on not fewer than eight prescription drugs to the executive director of the Office of Health Strategy. Requiring Office of Health Strategy (OHS) to make public the list of ten outpatient prescription drugs that are determined to be critical to public health and are provided at substantial cost to the state and allow for public comment on such list. <p>While the idea of prescription drug affordability is important to most citizens in Connecticut, this is not</p>

			<p>the way to do achieve that goal. Setting floor ceilings on drugs interferes with the market and hurts the companies that spend millions of dollars every year on research and development on new, more effective drugs.</p> <p>This is also in S.B. 10 the Senate Democratic Caucus proposal in Human Services, which was heard on March 9th.</p>
<p>S.B. 1203</p>	<p>AN ACT CONCERNING MEDICAL DEBT</p>	<p>HS Committee</p>	<p>This bill does a couple of things including:</p> <ul style="list-style-type: none"> • Adds a definition for “underinsured patient” which is anyone who is liable for any hospital charges that exceed two percent of the annual household income after coverage was provided by a health insurance policy carrier. • Requires each hospital to provide hospital financial assistance, defined as covering all services and supplies that are medically necessary, to any patient, regardless of immigration status, who is enrolled in SNAP or Special Supplemental Food Program for Women, Infants, and Children whose income does not exceed 250% of the federal poverty level, without an asset limit. <ul style="list-style-type: none"> ○ No hospital can require the patient to apply for any government-funded coverage or insurance through the Connecticut Health Insurance Exchange • Requires the Office of Health Strategy, in consultation with the Connecticut Hospital Association, to develop a uniform application for financial assistance. • Requires hospitals to report data on financial assistance provided, including, but not limited to, the number of patients who have applied and who are participating in the program, and the demographics of said patients. • Requires hospitals to train their staff concerning the specifics of this financial assistance program. • Prohibits any covered entity under the federal 340B drug pricing program from attempting to collect as medical debt any payment for a prescription drug obtained with a rebate or at a discounted price through the 340B program by such entity but charged to a patient of such entity at a higher price. • Requires hospitals to provide a payment plan to anyone deemed ineligible for this financial

			<p>assistance to not more than two percent of the applicant’s annual household income per year.</p> <ul style="list-style-type: none"> Prohibits any hospital from seeking to recover as medical debt from any patient the cost of an item or service that the hospital has failed to publicly disclose in accordance with federal regulations. <p>We are firmly against this legislation as written because it would force hospitals to cover the costs of low-income people who are provided services in said hospitals. While many of these services are covered under Medicaid and the Connecticut medical assistance program, this would put the onus on hospitals to front huge amounts of money instead of the government or private insurance. Instead of hospitals focusing on putting their funds to good use like hiring, capital improvements, and new devices, they would have to use those funds to cover people who can’t pay and, in some cases, are not even citizens or residents of the state. It is unknown what the cost of this requirement would be on the hospitals, but during the hearing the associations responsible for hospital administrations will most likely report an enormous, unfunded cost.</p> <p>A near identical version of this bill (H.B. 6740) was heard on March 6th in the Public Health Committee.</p>
<p>H.B. 6885</p>	<p>AN ACT CONCERNING MEDICAID PAYMENT RATES.</p>	<p>HS Committee</p>	<p>This legislation is the Medicaid payment rates aircraft carrier that the committee put together. It is likely that this language will change before being voted out of committee. The bill requires the Commissioner of Social Services to:</p> <ul style="list-style-type: none"> Increase Medicaid rates, within available appropriations, provided by individual fee-for-service to the following percent of Medicare rates for the same services: <ul style="list-style-type: none"> 70% for FY24, 75% for FY25, 85% for FY26, 95% for FY27, 100% for FY28 and each fiscal year after. Provide Medicaid reimbursement, for school-based health services, including: <ul style="list-style-type: none"> educational services considered psycho-educational and informational, weight-reduction programs or preventative counseling,

			<ul style="list-style-type: none"> ○ all screenings for social determinants of health, ○ preventative counseling for students who screen positive for mental health needs but are not currently receiving services from a mental health counselor, and ○ dental screenings. ● Increase the Medicaid rates for emergency medical transportation services and costs by 10% for FY24 and provide annual rate increases for such services and costs to the same extent as Medicare. ● Study and file a report (by Oct. 1, 2023) on Medicaid rates for long-term acute care hospitals and providers of methadone maintenance treatment to determine if rates provided by such hospitals and providers are sufficient. <p>We, as Republicans, are not against providing medical assistance for the most vulnerable, but there are serious concerns with this specific legislation. While the Federal government may match some of these rate increases, it would still be a massive increase in overall costs to the state, when we do not have the funds to cover it.</p>
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WEDNESDAY MARCH 15

Judiciary Public Hearing – 10:00 AM, Room 2C

Bill Number	Bill Title	Introducer(s)	Purpose
<u>H.B. 6888</u>	AN ACT CONCERNING JUVENILE JUSTICE.	JJPOC	Reconstitutes JJPOC with 43 members and expands the scope of their duties. Also requires the creation of an automatic pretrial diversionary program for minors convicted of trespassing, larceny 5 th , breach of peace 2 nd , and disorderly conduct and requires LEA's to refer minors who are arrested on these crimes to the Judicial Branch for inclusion in this program. Also requires the Branch to begin the full and final transition of all children from the care and custody of the DOC into the care and custody of the Judicial Branch. Relaxes the definition of "racial profiling" to make it more encompassing. Finally appropriates an unstated

			<p>amount of money to OPM to pay JJPOC members for childcare and gas money.</p> <p>This bill is a perpetuation of the democrat's failed juvenile justice policies. It's more of the catch-and-release for young offenders. It does nothing to enact retribution on offenders and concentrates solely on reformation. This results in offenders reoffending when they realize there is no punishment for their actions.</p>
H.B. 6889	AN ACT CONCERNING JUVENILE MATTERS.	HRO Caucus Proposal	<p>This is the HRO Caucus bill that addresses the out-of-control reoffenders that have been terrorizing our communities with repeated car thefts and violent crimes due to the democrat's catch-and-release policies. Highlights: include:</p> <ul style="list-style-type: none"> • expanding the circumstances in which a juvenile is automatically transferred to the regular criminal docket, including commission of a serious juvenile offense; • requiring mandatory fingerprinting of a juvenile arrested for a felony, class A misdemeanor or any charge resulting from loss of life or serious physical injury, sexual assault or an offense involving the use of a firearm; • allowing courts to find that releasing a juvenile offender to a parent or guardian who has no control over the juvenile to not be "reasonably likely to be effective to prevent the child from reoffending. • allowing judges to order the Department of Children and Families to investigate the family circumstances of a juvenile charged with an offense resulting from loss of life or serious physical injury, a sexual assault, a serious juvenile offense or an offense involving the use of a firearm; • reestablishing the family with service needs program to provide diversion services for children who are beyond control, runaways or truant from school.

Bill Number	Bill Title	Introducer(s)	Purpose
6890	AAC Qualifying Transit-Oriented Communities	P&D	<ul style="list-style-type: none"> • Creates a position of State Responsible Growth Coordinator that can prioritize state “discretionary infrastructure funding” to go to towns that the Coordinator determines that further the purposes of building dense housing near transit stations. • Establishes minimum density of housing that must be built in such districts based on the type of transit station and the town’s population. • Establishes the percentage of such homes that must be “affordable housing” which depends on what market type (as determined by the CHFA Housing Needs Assessment) the town is located in. • This bill has the appearance of an incentive, but is really a punitive measure for those towns that don’t comply – those towns could lose state discretionary funding if complying towns are “prioritized.” • The concern is that this is the first step toward tying state funding to a town complying with state-directed mandates. • Rep. O’Dea had an incentive-based bill that is much simpler and would incentivize rather than punish towns that established TODs. (HB 6394)

Education Public Hearing – 12:00 PM, Room 1E

Bill Number	Bill Title	Introducer(s)	Purpose
HB 6882	AN ACT CONCERNING MANDATE RELIEF	Education	Amongst other points, this bill would remove the 1 credit mastery-based diploma assessment starting with the graduating class of 2023. This Bill also creates a task force that would review General statues, regulations, and federal laws for duplicates or obsolete, burdensome and limiting to students and instructors
HB 6880	AN ACT CONCERNING ASSORTED REVISIONS TO THE EDUCATION STATUTUES	Education	Along with other revisions, this bill states that each local and regional board of ed shall post on it’s website all curriculum and material approved by the committee and allow for public comments. Similar bills:

			HB 5270-Republican caucus
SB 1198	AN ACT IMPLEMENTING THE RECCOMENDATIONS OF THE SCHOOL INDOOR AIR QUALITY WORKING GROUP	Education	Requires DPH to develop comfortable temperature settings for schools. It is unclear what happens to schools that cannot meet those conditions during excessive heat or cold days. Provides \$300 million more in bonding for HVAC
HB 6884	AN ACT CONCERNING THE RECRUTMENT, RETENTION AND ENHANCEMENT OF THE TEACHING PROFESSION	Education	<ul style="list-style-type: none"> • Enhances the multiplier for teacher retirement benefits to teachers who taught during the pandemic. • Establishes a minimum salary for teachers that is at least four times the federal poverty level for one person as of 7/1/23 which equals \$55,000/ yr. (4 x federal poverty level) • Study the funding of teacher retirement system of what towns will pay and what towns will be exempt. • Creates a bill of rights for teachers