
OLR Bill Analysis

HB 5506 (as amended by House "A" and "C")*

AN ACT ADJUSTING THE STATE BUDGET FOR THE BIENNIUM ENDING JUNE 30, 2023, CONCERNING PROVISIONS RELATED TO REVENUE, SCHOOL CONSTRUCTION AND OTHER ITEMS TO IMPLEMENT THE STATE BUDGET AND AUTHORIZING AND ADJUSTING BONDS OF THE STATE.

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SUMMARY

§§ 1-66 — BUDGET PROVISIONS

Please refer to the fiscal note for a summary of these sections

§ 67 — LEGISLATIVE BRANCH CONTRACTING PROCEDURES

Establishes procedural requirements that the Office of Legislative Management must follow when entering into certain goods and services contracts

§ 68 — OFFICE OF AQUATIC INVASIVE SPECIES

Creates an Office of Aquatic Invasive Species within the Connecticut Agricultural Experiment Station; sets out office responsibilities; requires a department head be hired by September 1, 2022

§§ 69-70 — COLLABORATIVE DRUG THERAPY

Makes various changes affecting collaborative drug therapy agreements between certain health care practitioners and pharmacists

§ 71 — PHARMACIST LICENSE RENEWAL

Makes pharmacist licenses renewable annually, rather than biennially; makes the annual fee \$100, rather than \$120 biennially

§§ 72-74 — RESERVED SECTIONS

Reserved sections

§§ 75 & 481 — PAYMENTS TO VOLUNTEER FIRE COMPANIES

Requires the state, within available appropriations, to pay volunteer fire companies \$500 for each call they respond to on designated highways

§ 76 — GAMBLING STUDY

(1) Transfers responsibility for the legalized gambling study from DCP to DMHAS and requires the next study to be completed by August 1, 2023; (2) authorizes the DMHAS commissioner to select a contractor to conduct the study; and (3) expands the study's required components

§ 77 — RESIDENT STATE TROOPER FRINGE FUNDING

Beginning FY 23, increases, from 50% to 100%, the portion of the state employees' retirement system fringe recovery rate attributable to the unfunded liability of the system that the comptroller must annually pay

§ 78 — RURAL SPEED ENFORCEMENT GRANT PROGRAM

Requires DESPP to administer a grant program, within available resources, to provide grants to eligible municipalities for speed enforcement on rural roads

§ 79 — HEALTH CARE PROVIDER LOAN REIMBURSEMENT PROGRAM

Requires OHE, by January 1, 2023, to establish a program to provide loan reimbursement grants to certain health care providers

§ 80 — COMMUNITY GUN VIOLENCE INTERVENTION AND PREVENTION PROGRAM

Requires the Department of Public Health (DPH) to establish a community gun violence intervention and prevention program and annually report to the Public Health Committee, starting by January 1, 2023, on the program's activities

§ 81 — COMMISSION ON COMMUNITY GUN VIOLENCE INTERVENTION AND PREVENTION

Establishes a Commission on Community Gun Violence Intervention and Prevention within DPH for administrative purposes only to advise the commissioner on programs and strategies to reduce the state's community gun violence; requires the commission to annually report its activities to the Public Health Committee starting by January 1, 2023

§§ 82-89 — PROVISION OF FREE MENSTRUAL PRODUCTS

Requires (1) certain government agencies and public and private organizations, starting July 1, 2023 or September 1, 2023, to provide free menstrual products to the individuals they serve and (2) DPH to set guidelines by July 1, 2022, on how to do this

§ 90 — STATE LIBRARY BOARD CONSULTATION REQUIREMENTS

Requires the State Library Board to consult with certain entities before making changes to library services

§ 91 — TRS VALUATIONS

Requires TRS to have an actuarial valuation performed annually, rather than biennially

§ 92 — EQUITY AND THE GOVERNOR'S BUDGET

Requires the governor's budget document to include an explanation of how its provisions further efforts to ensure equity in the state

§§ 93 & 94 — MUNICIPAL REVENUE SHARING ACCOUNT

Modifies the distribution schedule for municipal revenue sharing grants made to municipalities from the Municipal Revenue Sharing Account (MRSA)

§ 95 — NEW HAVEN'S PAYMENT IN LIEU OF TAXES GRANT

Allows New Haven to update the assessed valuations it submitted to the OPM secretary for purposes of calculating its FY 23 PILOT grant

§§ 96-116 & 480 — CONNECTICUT RETIREMENT SECURITY PROGRAM

Eliminates CRSA and makes the Office of the State Comptroller its successor; converts CRSA's board of directors to an advisory board; requires that money spent on the program from the General Fund be reimbursed by October 1, 2023

§ 117 — MILITARY FUNERAL HONORS RIBBONS

Authorizes the adjutant general to issue military funeral honors ribbons

§ 118 — HONOR GUARD PAY INCREASE

Increases, from \$50 to \$60, the daily pay for each member of an honor guard detail at a veteran's funeral

§§ 119 & 120 — EXPANSION OF DEBT-FREE COLLEGE PROGRAM ELIGIBILITY

Expands the debt-free community college program's eligibility to qualifying first-time, part-time Connecticut community-technical college students

§ 121 — SMALL BUSINESS SEMINARS

Requires the Board of Regents (BOR), within available funds, to develop seminars to help small businesses adapt to the post-COVID-19 business environment

§ 122 — DAS JOBS OPENINGS WEBSITE

Requires the DAS website for executive branch job openings to include links to job openings in the judicial and legislative branches and the state higher education system

§ 123 — PROJECT LONGEVITY INITIATIVE

Transfers certain responsibilities for the Project Longevity Initiative from OPM to the Judicial Branch on July 1, 2022

§ 124 — CERTIFICATE OF NEED TASK FORCE

Creates a task force to study and make recommendations on certificates of need for health care facilities

§§ 125-126 — RESERVED SECTIONS

Reserved sections

§ 127 — SERS PENSION COST RECOVERIES

Requires certain pension cost recoveries to be deposited in the SERS pension fund as an additional employer contribution

§ 128 — STATE AGENCY ELECTRIC VEHICLE CHARGING STATIONS

Establishes policies and procedures for the use of electric vehicle (EV) charging stations on state agency property

§ 129 — CANNABIS GENERAL FUND ACCOUNTS AND APPROPRIATED FUND

Allows money from specified cannabis fees and taxes to be used to fund state agencies performing their duties under the cannabis law; requires OPM to consult with the Social Equity Council when allocating these funds

§ 130 — LEGISLATIVE BRANCH GOODS AND SERVICES CONTRACT ADVERTISEMENTS

Eliminates requirement that the Legislative Management Committee advertise certain goods and services bidding opportunities in three newspapers

§§ 131-134 — JUDICIAL COMPENSATION

Increases the salary and other compensation for judges and certain other judicial officials by approximately 5% starting in FY 23

§ 135 — AMBULANCE RATES

Requires the DPH commissioner to proportionally adjust certain ambulance service rates within any increases the DSS commissioner makes to Medicaid ambulance service rates

§ 136 — EMERGENCY MEDICAL SERVICES WORKING GROUP

Requires the DPH commissioner, in collaboration with the DSS commissioner, to establish a working group to examine certain issues related to emergency medical services

§ 137 — MUNICIPAL STORMWATER AUTHORITY FEES

Modifies the current partial fee reduction a stormwater authority must provide to property owners by placing more requirements on its availability and establishes an optional reduction; requires the authorities to adopt a procedure for providing fee reductions; eliminates the requirement that grand list valuation is considered when setting stormwater fees

§ 138 — NONUNION RAISES & LUMP SUM PAYMENTS

Requires most nonunion employees to receive the same pay increases as union employees in FYs 22, 23 & 24; requires legislative employees to receive the same lump sum payments as union employees in FYs 22 & 23

§§ 139 & 140 — SALT APPLICATOR TRAINING AND COMMERCIAL APPLICATOR REGISTRATION PROGRAM

Requires DEEP and DOT to work with UConn to conduct training for roadside salt applicators and report to the legislature on the training program; establishes a registration program within DEEP for commercial salt applicators who take the program

§ 141 — LOCAL HEALTH DISTRICT REPORTING SYSTEM

Requires local health districts to create an electronic reporting system for property owners to report sodium chloride damage and health department to submit the reports to OPM; allows OPM to identify and issue financial assistance to help property owners fix the damage

§ 142 — RESIDENTIAL WATER TREATMENT INFORMATION

Requires residential water treatment system installers to provide customers with certain information about sodium and chloride in their drinking water

§§ 143-144 — PREMIUM PAY PROGRAM

Establishes the Connecticut Premium Pay program to provide \$200 to \$1,000 to certain employees who worked throughout the COVID-19 emergency, depending on their individual income, to recognize and compensate them for their service

§§ 145 & 146 — CLIMATE-SMART AGRICULTURE AND FORESTRY PRACTICES

Expands the farmland restoration program's purposes to include climate-smart agriculture and forestry practices; allows DoAg to (1) pay farmers up to 50% of certain grant funds in advance and (2) pay or reimburse certain entities for services designed to increase the number of farmers using climate-smart agriculture and forestry practices

§ 147 — STROKE REGISTRY

Requires DPH to maintain and operate a stroke registry and establishes a stroke registry data oversight committee within the Legislative Branch to monitor the registry's activities

§ 148 — TECHNICAL CORRECTIONS DURING CODIFICATION

Requires the Legislative Commissioners' Office to make necessary technical, grammatical, and punctuation changes when codifying the bill

§§ 149-153 — LEAD POISONING PREVENTION AND TREATMENT

Generally lowers the threshold for blood lead levels in individuals at which DPH and local health departments must take certain actions; requires primary care providers to conduct annual lead testing for certain high-risk children ages 36 to 72 months; requires DSS to seek federal approval to amend the state Medicaid plan to add services to address the health impacts of high childhood blood lead levels in Medicaid-eligible children; and requires the DPH commissioner to convene a working group to recommend necessary legislative changes on various lead poisoning prevention and treatment issues

§ 154 — SMALL BUSINESS EXPRESS PROGRAM

Allows DECD to contract with nongovernmental entities in carrying out the Small Business Express program

§ 155 — ECONOMIC ACTION PLAN IMPLEMENTATION AND FUNDING

Allows DECD to establish two new programs through which the department may distribute certain funding for projects consistent with the purposes of the state's Economic Action Plan

§ 156 — ALLOWABLE USES OF HISTORIC REHABILITATION TAX CREDIT PROGRAM FEES

Expands the allowable uses of application fees DECD receives through the Historic Rehabilitation Tax Credit program

§ 157 — DECD TECHNICAL CHANGE

Makes a technical change to a DECD reporting requirement

§ 158 — STUDY ON EXTENDING R&D TAX CREDIT TO PASS-THROUGH ENTITIES

Requires the DECD commissioner to study extending the research and development tax credit to pass-through entities

§ 159 — RELEASE-BASED REMEDIATION DRAFT REGULATIONS

Requires the DEEP commissioner to provide to members of an advisory working group specified draft regulations for a release-based remediation program before they are adopted, amended, or repealed

§ 160 — MODEL STUDENT WORK RELEASE POLICY

Requires the Office of Workforce Strategy's chief workforce officer to develop a model student work release policy by July 1, 2023, and all boards of education to adopt it.

§ 161 — CANCELLATION OF UNCOLLECTIBLE CLAIMS

Raises the maximum threshold of an uncollectable claim that a state department or agency head may cancel from \$1,000 to \$5,000

§ 162 — DELETED BY HOUSE "C"

§ 163 — REDEMPTION CENTER GRANTS

Allows beverage container recycling grant program funds to be used for expanding redemption centers and eliminates the \$150,000 cap on awarded grant funds

§§ 164-168 — CLASS II RPS & SUSTAINABLE MATERIALS MANAGEMENT ACCOUNT

Starting in 2023, limits the Class II RPS requirement to only Class II renewable energy sources; requires that the penalties for failing to meet the Class II requirement be used to fund a DEEP-administered sustainable materials management program

§ 169 — RENTSCHLER FIELD ANNUAL BUDGET REPORTING REQUIREMENT

Eliminates current OPM reporting requirements for Rentschler Field's annual budget

§ 170 — PURCHASE OF ENERGY PRODUCTION PLANT

Authorizes the administrative services commissioner to purchase the energy production plant that produces and provides steam and heated and chilled water for the Capitol Area System (CAS)

§§ 171 & 172 — STATE EMPLOYEE HEALTH PLAN DEPENDENT COVERAGE

Requires certain health insurance coverage for children, stepchildren, or other dependent children of state or nonstate public employees to continue until at least the end of the calendar year after the earlier of when they (1) obtained coverage through their own employment or (2) turn age 26

§§ 173-193 — VARIOUS CHANGES TO TEACHERS' RETIREMENT SYSTEM (TRS)

Makes various changes to the TRS statutes including narrowing the definition of teacher; increases the TRS monthly health insurance subsidy to boards of education for retirees and their spouses meeting certain conditions; changes the general TRS subsidy to boards of education

§ 194 — PCA CONTRACT APPROVAL

Approves the memorandum of agreement between the PCA Workforce Council and the New England Health Care Employees Union, District 1199, SEIU

§ 195 — PAID FAMILY MEDICAL LEAVE ANTI-RETALIATION

Prohibits employers from taking certain retaliatory actions against employees under the state's Paid Family and Medical Leave law.

§ 196 — DELETED BY HOUSE "C"

§ 197 — REPRODUCTIVE HEALTH CARE SERVICES DEFINITION

Expands the definition of "reproductive health care services" in a recently passed bill to include gender dysphoria treatments

§§ 198 & 199 — TOBACCO SETTLEMENT FUND AND TOBACCO AND HEALTH TRUST FUND

Annually redirects \$12 million of Tobacco Settlement Fund proceeds from the General Fund to the Tobacco and Health Trust Fund and makes certain changes to the Tobacco and Health Trust Fund's legislative reports

§ 200 — ID CHECKS FOR TOBACCO SALES

Explicitly requires sellers, or their agents or employees, to request that each person intending to purchase cigarettes or tobacco products present a driver's license or identity card to establish that the person is at least 21 years old

§ 201 — DAS REPORT ON STATE AGENCY VACANCIES AND HIRING

Requires DAS to report monthly during FY 23 on the number of vacancies, new hires, and refused employment offers for each state agency

§§ 202-206 — PSYCHEDELIC-ASSISTED THERAPY

Establishes (1) a Psychedelic-Assisted Therapy Pilot Program at the Connecticut Mental Health Center, (2) a fund to administer program grants, and (3) an 11-member advisory board within DMHAS to advise the department on various issues related to this therapy; makes related changes to the potential rescheduling of certain psychedelic substances

§ 207 — ESSENTIAL WORKERS COVID-19 ASSISTANCE PROGRAM

Expands the program to cover a broader range of essential workers and extends the application deadline; makes various changes to how the program's benefits must be determined and administered

§ 208 — CLARIFICATION CONCERNING LOCAL APPROVAL OF OUTDOOR DINING

Specifies that local approval of outdoor dining pursuant to PA 22-1, § 2, does not exempt operators from complying with the Liquor Control Act

§ 209 — DOC REPORT ON PRISON SUBSTANCE USE AND MENTAL HEALTH SERVICES

Requires DOC to annually review, evaluate, and make recommendations on (1) substance use disorder and mental health services for incarcerated individuals and (2) reintegrating these individuals into the community

§§ 210-211 — RESERVED SECTIONS

Reserved sections

§ 212 — PILOT PROGRAM COLLECTING FIRE AND RESCUE SERVICE DATA

Requires DESPP to establish a pilot program implementing a fire and rescue service data collection system

§ 213 — UNEMPLOYMENT TAX CHANGES

For 2023, reduces the unemployment tax rate that certain new employers must pay by 0.2% and lowers the maximum fund balance tax rate from 1.4% to 1.2%

§§ 214-217 — INSURANCE HOLDING SYSTEM GROUP CAPITAL CALCULATIONS AND LIQUIDITY STRESS TESTS

Generally adopts amendments to the National Association of Insurance Commissioners' Insurance Holding Company System Regulatory Act related to group capital calculations and liquidity stress tests.

§ 218 — WORKING GROUP ON CRIMINALIZING COERCION AND INDUCEMENT

Establishes a 10-member working group to develop recommendations for legislation to criminalize coercion and inducement as described under federal law

§§ 219-225 — HEALTH BENCHMARKS

Requires OHS to establish health care cost growth benchmarks, health care quality benchmarks, and primary care spending targets; allows OHS to identify entities that do not meet these benchmarks or targets

§ 226 — HEALTH ENHANCEMENT PROGRAMS

Requires health carriers to develop health enhancement programs, provide incentives for their use, and cover certain associated costs

§§ 227 & 228 — CERTIFICATE OF NEED APPLICATION FEE AND TERMINATION OF SERVICES

Increases the certificate of need application fee based on a project's cost; defines "termination of services" to mean ending services for more than 180 days

§§ 229 & 252 — OHS EXECUTIVE DIRECTOR AS STATUTORY DEPARTMENT HEAD

Retains the Office of Health Strategy executive director as a statutory department head and makes a technical change

§ 230 — OPTICAL STORES REMAINING OPEN WITHOUT OPTICIAN PRESENT

Allows optical stores, in limited circumstances, to remain open for up to four consecutive days without an optician's supervision, and limits the activities that the store's owners or employees may perform during these periods

§ 231 — BUDGET RESERVE FUND SURPLUS

Prescribes, through FY 23, the order in which the state treasurer must transfer excess BRF funds to reduce the state's unfunded pension liability

§ 232 — MINIMUM RATE FOR ICF-IIDS

Requires DSS to increase the minimum per diem, per bed rate for ICF-IIDs to \$501

§ 233 — DPH STUDENT LOAN REPAYMENT PROGRAM

Requires providers participating in DPH's Student Loan Repayment Program to provide behavioral health services and expands the types of clinicians that the program may recruit

§§ 234 & 235 — MEDICAL ASSISTANCE AND IMMIGRATION

Increases eligibility for state-funded medical assistance regardless of immigration status to cover children ages 12 and under, rather than ages 8 and under, and requires children eligible for the benefit to continue receiving it until they are 19 years old

§ 236 — CHCPE CO-PAYMENT REDUCTION

Reduces, from 4.5% to 3%, the required co-payments for participants in the state-funded portion of the Connecticut Homecare Program for the Elderly

§ 237 — COMMUNITY SPOUSE PROTECTED AMOUNT

Increases the minimum amount an institutionalized Medicaid recipient's spouse may keep from \$27,480 (in 2022) to \$50,000 and requires DSS to report on the change to the Aging, Appropriations, and Human Services committees

§§ 238 & 239 — TEMPORARY FAMILY ASSISTANCE STANDARDS

Beginning in FY 23, sets at 55% FPL rather than a regional standard, the income limit for the Temporary Family Assistance program, which also serves as the basis for TFA benefit amounts and HUSKY C income limits

§ 240 — MEDICAID REIMBURSEMENT FOR VENTILATOR BEDS

For FY 23, requires the DSS Commissioner to amend the Medicaid state plan to increase the per diem reimbursement rate provided to chronic disease hospitals by \$500 for beds provided to patients on ventilators

§ 241 — FOHC PAYMENTS

Requires DSS to reimburse FQHCs (1) on an all-inclusive encounter rate per client encounter, based on a prospective payment system under federal law, and (2) according to requirements in existing state regulations; and prohibits FQHCs from providing nonemergency, periodic dental services on different dates of service to enable billing for separate encounters

§§ 242 & 243 — COMMUNITY HEALTH WORKER GRANT PROGRAM

Transfers DPH's Community Health Worker Grant Program to DSS, increases the individual and aggregate caps on program grants, and extends the program by one year

§ 244 — TEMPORARY FINANCIAL RELIEF FOR NURSING HOMES

Eliminates requirements on how DSS must allocate \$10 million in ARPA funds for nursing homes

§ 245 — COMMUNITY OMBUDSMAN PROGRAM

Creates a Community Ombudsman program within the Office of the Long-Term Care Ombudsman to, among other things, respond to complaints about long-term services and supports provided to adults in DSS-administered home and community-based programs

§§ 246 & 247 — BAN ON NON-COMPETE CONTRACTS

Prohibits contracts between a homemaker-companion agency or home health agency and a client from including a "no-hire" clause and deems these clauses void

§ 248 — LONG-ACTING CONTRACEPTIVES AT FEDERALLY QUALIFIED HEALTH CENTERS

Requires the DSS commissioner to allocate \$2 million, from FY 23 federal funds allocated to the department, for the purchase and provision of long-acting reversible contraceptives by federally qualified health centers

§ 249 — MEDICAID COVERAGE OF NATUROPATH SERVICES

Requires the state's Medicaid program to cover services provided by licensed naturopaths

§ 250 — BAN ON RECOVERING FEDERAL FUNDS FROM PROVIDERS

Prohibits state agencies that contract with health and human services providers from trying to recover or otherwise offset federal ARPA funds for home- and community-based services

§ 251 — COLAS FOR PROVIDERS CONTRACTING WITH DDS

Requires OPM to disburse unallocated funds for FYs 22 and 23 to state-contracted providers of DDS services as COLAs

§§ 253 & 254 — COVERED CONNECTICUT

Transfers the administration of the Covered Connecticut program from OHS to DSS; expands coverage to include disabled adult children and certain other dependents; replaces a biannual reporting requirement with an annual one beginning in 2024

§ 255 — YOUTH SERVICE BUREAU GRANTS

Makes FY 22 YSB applicants eligible for a state grant

§ 256 — CAP ON MAGNET SCHOOL TUITION PAYMENTS

Lowers the enrollment threshold that triggers the cap on East Hartford tuition due to magnet schools and applies the same enrollment threshold and tuition cap to Manchester beginning in FY 23; applies the same enrollment threshold and tuition cap to all other Sheff region towns, New Britain, and New London for FY 23 only; requires SDE to be responsible for magnet tuition losses from these caps within available appropriations

§ 257 — ADULT EDUCATION PROGRAM GRANT CAP

Moves up the grant cap's sunset date by one year

§ 258 — CHARTER SCHOOL OPERATING GRANTS

Increases the charter grant adjustment percentage, from 14.76% to 25.42%, in the FY 23 charter school per-student operating grant formula

§§ 259 & 260 — PARAEDUCATOR PROFESSIONAL DEVELOPMENT

Requires boards of education to provide, and paraeducators to participate in, a professional development program beginning in the 2022-23 school year

§ 261 — OEC EMERGENCY STABILIZATION GRANT PROGRAM

For FYs 23 and 24, requires OEC to administer an emergency stabilization grant program for certain school readiness programs and child care centers receiving state financial assistance

§ 262 — BILINGUAL EDUCATION GRANT

Increases funding for the bilingual education grant from \$1.9 million to \$3.8 million a year

§ 263 — THE GILBERT SCHOOL STUDY

Requires SDE to study the funding process for The Gilbert School

§ 264 — MAGNET SCHOOL GRANT CHANGE

Transfers a magnet school operator's grant from one grant provision to another

§ 265 — DELETED BY HOUSE "C"

§ 266 — CLIMATE CHANGE CURRICULUM

Requires, rather than allows, climate change to be taught as part of the science requirement in public schools' program of instruction

§ 267 — SPECIAL EDUCATION EXPENDITURE STUDY

Requires SDE to compile and analyze school district special education expenditure information and report it to the Appropriations and Education committees by July 1, 2023

§ 268 — SPECIAL EDUCATION EXCESS COST GRANT

Creates a three-tiered reimbursement method, based on each town's property wealth per capita, for determining the special education excess cost grant when the appropriation does not fully fund the grant

§ 269 — ALLIANCE DISTRICT PROGRAM RENEWAL

Renews the alliance district program for five years; requires the commissioner to designate 36, rather than 33, alliance districts

§§ 270-272 — EDUCATION COST SHARING (ECS) GRANTS AND PHASE IN SCHEDULE

Changes some of the factors used in the ECS phase in schedule for ECS grant increases and decreases; essentially keeps the yearly changes the same as under current law

§ 273 — OPEN CHOICE HARTFORD REGION GRANT

Creates an additional \$2,000 per student Open Choice grant for Hartford region school districts that accept out-of-district students

§§ 274-294, 300-302 & 481 — TECHNICAL AND CONFORMING CHANGES TO MAKE THE CONNECTICUT TECHNICAL EDUCATION AND CAREER SYSTEM (CTECS) AN INDEPENDENT STATE AGENCY

Makes numerous conforming, minor, and technical changes necessary as part of transitioning CTECS into an independent agency; addresses specific duties of the CTECS executive director and superintendent

§§ 295-298 — CTECS AND THE TEACHERS RETIREMENT SYSTEM (TRS)

Makes conforming changes to maintain CTECS teachers and professional staff as members in TRS

§ 299 — DELETED BY HOUSE “C”

§ 303 — MAGNET SCHOOL SUPPLEMENTAL TRANSPORTATION GRANT

Changes the payment schedule and number of payments for a supplemental transportation grant for Sheff magnet schools

§ 304 — PRIVATE SCHOOL CURRICULUM ACCREDITATION

Requires SBE to allow private school curriculum accreditation by Cognia

§§ 305-309 — FY 22 BUDGET CHANGES

Please refer to the fiscal note for a summary of these sections

§§ 310-324, 362 & 364 — NEW BOND AUTHORIZATIONS FOR STATE AGENCY PROJECTS

Authorizes state GO bonds in FY 23 for various state projects and grant programs

§§ 325-330 — NEW TRANSPORTATION PROJECT AUTHORIZATION

Authorizes up to \$20 million in STO bonds for purchasing and installing advanced wrong-way driving technology

§§ 331-333 — CONNECTICUT BABY BOND TRUST PROGRAM

Delays the (1) trust's establishment to July 1, 2023, and (2) program's bond authorization schedule by two years, from FY 23 to FY 25; limits the program's designated beneficiaries to babies born on or after July 1, 2023, rather than July 1, 2021, whose births were covered under HUSKY

§§ 334-335 & 337-361 — CHANGES TO EXISTING AUTHORIZATIONS

Modifies amounts authorized for specified bond authorizations; makes various language changes to existing authorizations

§ 336 — GRANT PROGRAM FOR PURCHASING ELIGIBLE BODY AND DASHBOARD CAMERAS AND RELATED EQUIPMENT AND SERVICES

Extends, to FY 23, the municipal grant program for purchasing eligible body and dashboard cameras and related equipment and services

§ 363 — DOH HEALTH CARE WORKER HOUSING PROGRAM

Authorizes up to \$20 million in bonds for DOH to develop housing for health care workers

§ 365 — OFFICE OF COMMUNITY ECONOMIC DEVELOPMENT ASSISTANCE

Establishes a new office within DECD to assist eligible community development (CDCs) corporations; authorizes up to \$50 million in state GO bonds to fund its operations and a grant program for projects that certified CDCs undertake in target areas

§ 366 — SCHOOL CONSTRUCTION GRANT COMMITMENTS

Authorizes eight school construction state grant commitments totaling \$137.35 million toward total project costs of \$495.34 million; reauthorizes one technical high school project with an additional state grant commitment of \$59.55 million, which matches the additional estimated project cost

§§ 367, 379 & 381-383 — SCHOOL SAFETY INFRASTRUCTURE COUNCIL

Eliminates the School Safety Infrastructure Council and generally transfers its duties to the School Building Projects Advisory Council; adds a ninth member to the advisory council

§ 368 — MAGNET SCHOOLS AND SCHOOL CONSTRUCTION GRANTS

Eliminates a provision limiting DAS's approval of magnet school construction projects to ones found to reduce racial, ethnic, and economic isolation

§ 369 — CAPITOL REGION EDUCATION COUNCIL (CREC) LONG-RANGE CAPITAL IMPROVEMENT PLAN

Requires CREC to adopt, every five years, a long-range plan of capital improvement and school building project priorities for magnet schools and a rolling three-year capital plan; requires the plans be submitted to DAS, which in turn submits them to the legislature

§ 370 — PENALTY FOR SCHOOL CONSTRUCTION PROJECTS FAILING TO MEET MINORITY BUSINESS ENTERPRISE (MBE) SET-ASIDE GOALS

Withholds 5% of a school construction project's reimbursement grant if the applicant does not meet MBE set-aside goals; reduces the amount of a reimbursement grant held back pending an audit from 11% to 5%

§ 371 — INDOOR AIR QUALITY GRANT PROGRAM

Requires DAS to administer a reimbursement grant program beginning in FY 23 for the cost of indoor air quality improvements, including the installation, replacement, or upgrading of HVAC systems

§ 372 — HVAC SYSTEM PIPELINE TRAINING PILOT PROGRAM

Requires OWS to establish an HVAC system pipeline training program

§ 373 — INDOOR AIR QUALITY IN SCHOOLS

Requires boards of education to conduct a uniform inspection and evaluation of the HVAC system in each school building under its jurisdiction every five years; requires the HVAC inspection report be made public at a board of education meeting and include any corrective actions; requires the existing air quality inspections to take place every three years rather than five

§ 374 — SCHOOL INDOOR AIR QUALITY WORKING GROUP

Creates working group to make recommendations about school air quality to the legislature

§ 375 — SPACE STANDARDS FOR PRE-1959 SCHOOLS

Extends the allowable 25% increase in per-pupil square footage limits in current law for school buildings built before 1950 to include those built before 1959

§ 376 — PRIORITY LIST ADDENDUM

Requires the DAS commissioner to create an addendum to the school construction priority list project report to include grants awarded by DAS for certain school construction projects without legislative approval (“emergency grants”)

§ 377 — EMERGENCY PROJECT APPROVAL

Eliminates the DAS commissioner’s authority to approve emergency school construction reimbursement grants for administrative and service facility and school safety projects; removes the requirement that a superintendent notify the DAS commissioner of the need for an emergency grant and formally apply within a certain timeframe

§ 378 — PROJECT COMPLETION AND CLOSURE

Requires school construction grant recipients to submit a project completion notice to DAS within three years after the certificate of occupancy for the project was issued

§ 380 — BIDDING REQUIREMENTS AND CONSTRUCTION MANAGEMENT SERVICES

Eliminates from current law the (1) newspaper advertising requirement for public invitations to bid on orders and contracts for school construction services; (2) option for a construction manager to self-perform any school construction project element, which takes effect under current law beginning on July 1, 2022; and (3) requires the construction manager to invite bids on project elements on the State Contracting Portal

§§ 384-409 & 483 — PROJECT EXEMPTIONS, WAIVERS, MODIFICATIONS, AND REPEALS

Exempts school construction projects in 16 towns and one regional school district from certain statutory and regulatory requirements to allow them to, among other things, qualify for state reimbursement grants, receive higher reimbursement percentages for these grants, or have their projects reauthorized due to a change in scope; repeals a prior project authorization

§ 410 — CONNECTICUT AIRPORT AUTHORITY BUILDING APPLICATIONS

Eliminates the requirement for duplicate copies of plans and specifications when applying for a building permit for certain CAA largescale projects

§ 411 — CODE VARIANCE PUBLICATIONS

Allows DAS to publish its biennial list of code variances and exemptions on its website rather than sending the list to building officials

§ 412 — PROPERTY TAX CREDIT INCREASE

Beginning with the 2022 tax year, increases the property tax credit from \$200 to \$300 and expands the number of taxpayers who may claim it

§ 413 — EARNED INCOME TAX CREDIT (EITC)

Increases the state EITC from 30.5% to 41.5% of the federal credit starting in the 2023 tax year

§ 414 — EARNED INCOME TAX CREDIT ENHANCEMENT PROGRAM

Establishes a personal income tax exemption for income received through the 2020 and 2021 EITC enhancement program

§ 414 — PENSION AND ANNUITY TAX EXEMPTION ACCELERATION

Accelerates the pension and annuity income tax exemption phase-in by allowing qualifying taxpayers to deduct 100% of this income beginning with the 2022 tax year

§ 415 — CHILD TAX REBATE

Establishes a one-time rebate for qualifying, domiciled taxpayers in Connecticut equal to \$250 for each child, for up to three children

§ 416 — INCOME TAX CREDIT FOR STILLBIRTHS

Establishes a \$2,500 income tax credit for the birth of a stillborn child

§§ 417-418 — MOTOR VEHICLE MILL RATE CAP LOWERED

Beginning with FY 23, reduces the motor vehicle mill rate cap from 45 to 32.46 and modifies the reimbursement grant formula; authorizes municipalities and districts to adjust their motor vehicle mill rate for FY 23

§§ 419-422 — ABANDONED PROPERTY PROGRAM

Expands the range of property the treasurer must publish in his abandoned property notice and changes the notice's required format; establishes conditions under which the treasurer may automatically pay abandoned property amounts of less than \$2,500 to the property's sole owner; requires the treasurer to notify certain abandoned property owners by mail about the process for verifying their ownership of the property and claiming it; eliminates aggregate reporting of abandoned property valued at less than \$50

§ 423 — STUDENT LOAN PAYMENT TAX CREDIT

Expands the loans eligible for the student loan payment tax credit and allows "qualified small businesses" to apply to the DRS commissioner to exchange the credit for a refund

§§ 424-428 — JOBSCT TAX REBATE PROGRAM

Establishes the JobsCT tax rebate program under which companies in specified industries may earn rebates against the insurance premiums, corporation business, and PE taxes for reaching certain job creation targets

§ 429 — EXTENDING THE MANUFACTURING APPRENTICESHIP TAX CREDIT TO PASS-THROUGH ENTITIES

Extends the manufacturing apprenticeship tax credit to the affected business entity tax

§ 430 — BRAINARD AIRPORT PROPERTY STUDY

Requires DECD to have an analysis conducted on the benefits and opportunity costs to Hartford and the state of the current and alternative uses of the Hartford Brainard Airport property and generally prohibits the CAA from further encumbering the property

§§ 431 & 432 — XL CENTER RETAIL SPORTS WAGERING PROCEEDS

Provides CRDA with the proceeds from retail sports wagering at the XL Center to operate the facility; requires CLC to monthly estimate and certify this amount

§ 433 — SALES AND USE TAX REFUNDS FOR BEER AND WINE MANUFACTURERS

Extends certain manufacturing-related sales and use tax exemptions to holders of manufacturer permits for a farm winery and wine, cider, and mead; allows these same permittees and manufacturer permittees for beer to receive a sales and use tax refund on these manufacturing-related purchases made from July 1, 2018, through July 1, 2023

§ 434 — SALES AND USE TAX EXEMPTION FOR WATER COMPANIES

Exempts certain water company purchases from sales and use tax

§ 435 — GAS TAX HOLIDAY

Extends through November 30, 2022, the current suspension of the 25-cent-per-gallon motor vehicle fuels tax on gasoline and gasohol

§ 436 — MOTOR VEHICLE FUELS TAX REFUND FOR EMERGENCY MEDICAL SERVICE ORGANIZATIONS

Allows EMS organizations to get a motor vehicle fuels tax refund for fuel used in ambulances the organization owns

§§ 437 & 438 — MUNICIPAL GAS COMPANY GROSS EARNINGS TAX EXEMPTION

Beginning July 1, 2022, exempts municipal gas utilities from the utility companies tax

§ 439 — ADMISSIONS TAX ON MOVIES ELIMINATED

Eliminates the 6% admissions tax on movie tickets beginning in 2023

§§ 440 & 482 — AMBULATORY SURGICAL CENTER TAX REPEAL

Eliminates the ASC tax beginning July 1, 2022

§ 441 — SPONSORED CAPTIVE AND ASSOCIATION CAPTIVE INSURER DEFINITIONS

Changes definitions as they relate to statutes governing captive insurers to, among other things, incorporate sponsored captives

§§ 441 & 443-447 — FOREIGN BRANCH CAPTIVES

Adds "foreign captive insurer" to the definition of "branch captive insurance company," which allows a foreign captive to open a branch in Connecticut; Incorporates foreign captives into the statutes governing other captive branches

§ 442 — TAX AMNESTY PROGRAM

Creates a tax amnesty program for insureds that open a branch captive in, or transfer an alien or foreign captive to, Connecticut by June 30, 2023, that waives the (1) taxes, interest, and penalties related to the independently procured insurance tax for tax periods before July 1, 2019, and (2) penalties for tax periods between July 1, 2019, and July 1, 2022

§ 444 — MINIMUM CAPITAL AND SURPLUS REQUIREMENTS FOR CERTAIN CAPTIVES

Reduces the minimum capital and surplus requirement for certain captive insurers

§ 447 — EXAMINATIONS OF CAPTIVE INSURERS

Requires the insurance commissioner to examine captive insurers at least every five years, and allows him to waive the requirement for pure captives

§§ 448 & 451 — TECHNICAL CHANGES

Makes technical changes

§ 449 — REINSURANCE RISKS

Allows captive insurers to assume all types of reinsurance

§ 450 — CAPTIVE INSURER REGULATIONS

Expands the insurance commissioner's general authority to adopt regulations concerning captive insurers

§ 452 — CERTIFICATE OF DORMANCY FOR CAPTIVE INSURERS

Extends how long a certificate of dormancy is good before it must be renewed and lowers certain capital requirements for dormant captives

§§ 453-460 & 481 — STATE RECOVERY OF PUBLIC ASSISTANCE BENEFITS

Prohibits the state from recovering properly paid cash or medical assistance unless required to do so under federal law and releases liens and claims filed before July 1, 2022, to recover assistance when recoveries are not required under federal law or associated with child support collection

§§ 461-462 — COST OF INCARCERATION

Regarding the state's claim for incarceration costs, (1) exempts up to \$50,000 of an inmate's other assets, except those for inmates incarcerated for certain serious crimes; and (2) makes the state's lien against lawsuit proceeds applicable only to inmates incarcerated for certain serious crimes

§ 463 — OEC START EARLY – EARLY CHILDHOOD DEVELOPMENT INITIATIVE

Requires OEC to establish and administer the Start Early - Early Child Development Initiative; allows OEC to use funds the state received through the American Rescue Plan Act to administer it

§ 464 — DELETED BY HOUSE "C"

§ 465 — TAX INCIDENCE STUDY

Expands the scope of the DRS tax incidence study; advances the deadline for the next study, from February 15, 2024, to December 15, 2023

§ 466 — TOWN AID ROAD REPORTING

Requires each town or district that received TAR funds to annually report to the transportation commissioner on how the funds were used

§ 467 — ADVANCED NOTICE OF ROAD PROJECTS

Requires municipalities, utility companies, and OPM to submit certain reports related to advanced notice of road projects affecting utility infrastructure and inspection procedures upon project completion

§§ 468 & 469 — 30-YEAR MUNICIPAL BONDS

(1) Makes permanent an authorization allowing municipalities to issue bonds with a term of up to 30 years and (2) extends this authorization by five years for refunding bonds

§ 470 — ENTERPRISE ZONE DESIGNATION REMOVAL

Prohibits the DECD commissioner from removing an enterprise zone's designation under specified conditions

§§ 471 & 472 — COMMERCIAL DRIVER'S LICENSE TRAINING PROGRAM

Requires the Office of Workforce Strategy (OWS) to design and implement a program to support individuals pursuing commercial driver's license (CDL) training; establishes a nonlapsing account within OWS to support the program; establishes a Connecticut Career Accelerator Program Advisory Committee

§ 473 — PROPERTY APPRAISAL REQUIREMENT FOR APPEALS UNDER CGS § 12-117A

Requires certain property owners who are aggrieved by a board of assessment appeals' decision and appeal their real property's valuation to the Superior Court to file a property appraisal with the court within 90 days after filing their appeal

§ 474 — DELETED BY HOUSE "C"

§§ 475 & 476 — CRDA'S SOLICITATION OF PRIVATE INVESTMENTS

Authorizes CRDA to solicit private investment funds from companies for projects it undertakes and establishes conditions under which businesses may make these investments if one of their officers, directors, shareholders, or employees is a CRDA board member

§ 477 — REDUCED FY 23 TRANSFER OF AMERICAN RESCUE PLAN ACT FUNDS

Eliminates the FY 22 transfer to the General Fund from designated ARPA funds and reduces the FY 23 transfer from \$1,194.9 million to \$314.9 million

§ 478 — ARPA HOME AND COMMUNITY-BASED SERVICES FUNDS

Requires the comptroller to reserve \$83.2 million of General Fund revenue received under ARPA for home and community-based services and substance use disorders in FY 22 to be used for federal revenue collection in FY 23

§ 479 — REVENUE TRANSFER FROM FY 22 TO FY 23

Requires the comptroller to transfer \$125 million of FY 22 General Fund resources for use in FY 23

§ 484 — STATE CONTRACTING STANDARDS BOARD LAPSE REPEAL

Repeals a provision in the 2021 implementer concerning a lapse of SCSB's FY 23 appropriation

§§ 501-508 HOUSE “A” — REVENUE ESTIMATES

Modifies previously adopted revenue estimates for FY 23

§ 501 HOUSE “C” — DOH RENT BANK PROGRAM

Modifies the eligibility criteria of DOH's rent bank program and increases the maximum amount of rent bank assistance an eligible family may receive under the program

§ 502 HOUSE “C” — SALES TAX REMITTANCE FOR CERTAIN MARKETPLACE FACILITATORS

Exempts marketplace facilitators that facilitate passenger motor vehicle and rental truck rentals on behalf of rental companies from sales tax collection and remittance requirements on behalf of these sellers

§§ 503 – 507 HOUSE “C” — PROTECTIONS FOR REPRODUCTIVE AND GENDER-AFFIRMING HEALTH SERVICES IN THE STATE

Establishes a cause of action for persons against whom there is a state judgment based on reproductive and gender -affirming health care services; it also limits the assistance officers of Connecticut courts, public agencies, and certain health care providers may provide in out-of-state actions related to reproductive or gender-affirming health care services that are legal in this state

§ 508 HOUSE “C” — PROVIDERS AUTHORIZED TO PERFORM ABORTIONS

Allows APRNs, nurse-midwives, and PAs to perform aspiration abortions; explicitly authorizes these providers to perform medication abortions, conforming to a 2001 attorney general opinion; makes related changes

§ 509 HOUSE “C” — ARPA FUNDS FOR SCHOOL-BASED HEALTH CENTERS

Specifies the allocation of ARPA funding for four school-based health centers

§ 510 HOUSE “C” — MBR EXEMPTION

Exempts Stratford's board of education from the MBR in FY 23

§ 511 HOUSE “C” — SCHOOL CONSTRUCTION MINIMUM REIMBURSEMENT RATES FOR CERTAIN TOWNS

Creates a minimum school construction reimbursement grant rate for certain towns

§§ 512-515 HOUSE “C” — CHILDHOOD IMMUNIZATION REGISTRY AND TRACKING SYSTEM

Replaces DPH's childhood immunization registry and tracking system (“CIRTS”) with an immunization information system (“CT WiZ”) that provides access to immunization records to all recipients, instead of only children under age six

§§ 516-528 HOUSE “C” — MOTOR VEHICLE ASSESSMENTS

Changes motor vehicle property tax assessment laws, principally to (1) exempt certain snowmobiles, all-terrain vehicles, and utility trailers from property tax; (2) value motor

vehicles based on the manufacturer's suggested retail price (MSRP) and a 20-year depreciation schedule; (3) increase the frequency with which DMV must provide motor vehicle registration information to municipalities; (4) modify the timeline for supplemental property taxes on vehicles registered after the start of the assessment year; (5) extend the period during which taxpayers may claim a property tax credit for motor vehicles that were stolen, sold, totaled, or moved out of state; and (6) require taxpayers to include on personal property declarations motor vehicles that are included in a schedule of motor vehicle plate classes established by OPM

§§ 529-531 HOUSE "C"— BOWLING ESTABLISHMENT PERMITS

Makes minor, technical, and conforming changes to replace references to obsolete permits that no longer exist (e.g., bowling establishment permits) with references to the newly structured club permit

SUMMARY

A section-by-section analysis follows.

*House Amendment "A" adds the revenue estimate provisions.

*House Amendment "C" adds provisions on:

1. eligibility criteria for DOH's rent bank program (§ 501),
2. marketplace facilitators (§ 502),
3. reproductive health care services and abortion providers (§§ 503-508),
4. the allocation of ARPA funding for four school-based health centers (§ 509),
5. Stratford's MBR exemption for FY 23 (§ 510),
6. minimum school construction reimbursement grant rates for certain towns (§ 511),
7. DPH's childhood immunization registry (§§ 512-515),
8. motor vehicle property tax assessments (§§ 516-528), and
9. liquor permit reference corrections (§§ 529-531).

It eliminates provisions that would have:

1. included the Connecticut Coalition for Sustainable Materials Management's waste reduction strategies with those supported by DEEP's solid waste reduction program (§ 162);
2. required DECD's Office of Small Business Affairs to assist businesses owned and operated by members of the LGBTQ+ community (§ 196);
3. expanded the state's standard wage law to explicitly cover security services (§ 464); and
4. prohibited individuals compensated on a contingency basis from serving as an expert witness or representing taxpayers in certain property tax assessment appeals to Superior Court (§§ 473 & 474).

Among other things, the amendment also:

1. makes various changes to the bill's budget provisions;
2. requires schools to make free menstrual products available in restrooms accessible to students in grades three through 12, not three through six (§ 84);
3. specifies that all of the Office and Policy and Management secretary's powers and duties for the Project Longevity Initiative are transferred to the Chief Court Administrator on July 1, 2022 (§ 123);
4. changes qualifications for one appointee to the CON task force and adds to the topics the group must examine (§ 124);
5. requires the Office of Legislative Management to apply certain SEBAC terms to all employees, not just nonpartisan employees (§ 138);
6. eliminates the requirement that school readiness programs and child care centers have less than \$2 million in annual revenue in order to receive emergency stabilization grants (§ 261);
7. postpones by one year the requirement that climate change be

taught as part of the public school science program of studies (2023-24 school year) (§ 265);

8. modifies the prohibition on the Connecticut Airport Authority further encumbering the Brainard property (§ 430); and
9. modifies the authorization to use American Rescue Plan Act funds for the Start Early - Early Child Development Initiative (§ 463).

§§ 1-66 — BUDGET PROVISIONS

Please refer to the fiscal note for a summary of these sections

§ 67 — LEGISLATIVE BRANCH CONTRACTING PROCEDURES

Establishes procedural requirements that the Office of Legislative Management must follow when entering into certain goods and services contracts

The bill establishes procedural requirements that the Office of Legislative Management (OLM) must follow when entering into goods and services contracts (i.e., those for supplies, materials, equipment, and contractual services) that cost more than \$50,000. It requires OLM to submit the proposed contract to the legislative leaders (i.e., the House speaker, Senate president pro tempore, and the House and Senate majority and minority leaders). It allows OLM to enter into the contract (1) upon written approval by a majority of the leaders, including at least one of the minority leaders, or (2) if there is no action by the leaders, then 60 days after OLM submits the contract to them.

The bill's provisions do not apply to (1) minor nonrecurring and emergency purchases of \$10,000 or less or (2) emergency purchases due to (a) extraordinary conditions or contingencies that could not be reasonably foreseen and guarded against or (b) unusual trade or market conditions.

EFFECTIVE DATE: Upon passage

§ 68 — OFFICE OF AQUATIC INVASIVE SPECIES

Creates an Office of Aquatic Invasive Species within the Connecticut Agricultural Experiment Station; sets out office responsibilities; requires a department head be hired by September 1, 2022

The bill creates an Office of Aquatic Invasive Species within the Connecticut Agricultural Experiment Station (CAES). The CAES board of control must determine the office's staffing and hire a department head by September 1, 2022. The bill enumerates the office's responsibilities (see below), including coordinating research efforts for aquatic invasive species (AIS) control and eradication. However, the bill prohibits the office from issuing permits or fines.

EFFECTIVE DATE: July 1, 2022

Office Responsibilities

Under the bill, the Office of Aquatic Invasive Species must do the following:

1. coordinate research efforts in the state associated with AIS control and eradication to reduce duplication of efforts and costs;
2. be a repository for statewide data on the health of rivers, lakes, and ponds in relation to the presence of AIS;
3. regularly survey the health and ecological viability of the state waterways in relation to the presence and threat of AIS;
4. educate the public about aquatic invasive plants and steps the public can take to reduce their impact;
5. advise municipalities on AIS management; and
6. be a liaison among organizations and state agencies (such as DEEP, Department of Agriculture, U.S. Army Corps of Engineers, Connecticut Federation of Lakes and Ponds Associations, U.S. Fish and Wildlife Service, municipal inland wetlands commissions, Connecticut River Conservancy, and councils of governments) for AIS control and eradication issues.

The bill requires the office to coordinate its efforts and responsibilities with the state's Invasive Plants Council. (By law, the Invasive Plants Council, among other things, publishes a list of invasive or potentially invasive plants; researches the control of invasive plants; and educates

the public on problems with invasive plants (CGS 22a-381a).)

§§ 69-70 — COLLABORATIVE DRUG THERAPY

Makes various changes affecting collaborative drug therapy agreements between certain health care practitioners and pharmacists

This bill makes various changes affecting collaborative drug therapy agreements between certain health care practitioners and pharmacists. Specifically, it:

1. expands the types of practitioners authorized to enter into these agreements to include any prescribing practitioner or caregiving institution (“providers”), instead of only state-licensed physicians and advanced practice registered nurses;
2. expands the types of authorized arrangements between pharmacists and providers to include collaborative drug therapy management policies between pharmacists and caregiving institutions, instead of only collaborative drug therapy agreements between pharmacists and prescribing practitioners;
3. expands pharmacists’ authority under these arrangements to include (a) managing drug therapy for patient populations, instead of only individual patients, (b) managing a therapeutic class of drugs, instead of only specified drugs, and (c) managing prescribed medical devices; and
4. requires the Department of Consumer Protection (DCP) commissioner to amend regulations on pharmacist qualifications and requirements for these arrangements to include competency requirements and requirements for the minimum content of these arrangements.

Under the bill, “prescribing practitioners” are practitioners licensed in Connecticut or another U.S. jurisdiction who have prescriptive authority under their professional scope of practice. “Care-giving institutions” are institutions that provide medical services and are licensed, operated, certified, or approved by the commissioners of public health (DPH), developmental services, or mental health and

addiction services (e.g., hospitals, nursing homes, or assisted living facilities).

“Devices” are instruments, apparatuses, and contrivances, including their components, parts and accessories, (except contact lenses) intended to (1) diagnose, cure, mitigate, treat, or prevent disease or (2) affect the body’s structure or function.

The bill makes technical and conforming changes, including specifying that a nursing home’s medical director may enter into collaborative drug management policies.

EFFECTIVE DATE: July 1, 2022

Permitted Arrangements

The bill authorizes two types of formal arrangements between providers and qualified pharmacists, which must be based on either written protocols or a collaborative drug therapy care plan. These arrangements include:

1. “collaborative drug therapy management agreements” similar to those under current law (i.e., agreements between one or more pharmacists and prescribing practitioners to manage individual patients’, or a patient population’s, drug therapy or prescribed devices); and
2. “collaborative drug therapy management policies” (i.e., written policies adopted by care-giving institutions under which one or more pharmacists manage individual patients’, or a patient population’s, drug therapy or prescribed devices).

Under the bill, a “qualified pharmacist” is a DCP-licensed pharmacist who (1) is deemed competent under department regulations and (2) has reviewed the latest edition of the “Pharmacists’ Patient Care Process,” published by the Joint Commission of Pharmacy Practitioners.

“Collaborative drug therapy care plans” are written documents memorializing an agreed-upon approach to achieve a patient’s desired

health outcome, as determined by one or more pharmacists in collaboration with one or more prescribing practitioners (“care plans”).

Conditions for Entering Into Arrangements

The bill extends current law’s requirements for entering into collaborative drug therapy agreements to the new agreements, care plans, and policies the bill authorizes. So, before entering into an agreement or care plan, or operating under a management policy, a practitioner must establish a provider-patient relationship with the patient or patients who will receive collaborative drug therapy or device management.

By law, this is a relationship in which (1) the patient has made a medical complaint, provided his or her medical history, and received a physical examination and (2) there exists a logical connection between the medical complaint and history, physical examination, and any drug or device prescribed.

The bill also requires that each patient’s collaborative drug therapy or device management be based on (1) a diagnosis made by the patient’s practitioner or (2) a specific test set out in an agreement or policy.

Pharmacists’ Authority

Under the bill, pharmacists providing collaborative drug therapy management under an agreement or policy may, in keeping with the agreement or policy:

1. (A) initiate, modify, continue, discontinue, or deprescribe a patient’s prescribed drug therapy or (B) initiate, continue, discontinue, or deprescribe the use of a device;
2. order associated laboratory tests; and
3. administer drugs.

This scope of authority is generally the same as currently allowed for collaborative drug therapy arrangements, except the bill (1) authorizes pharmacists to initiate, rather than implement, a prescribed drug

therapy and (2) does not require the specification of the drugs to be managed (see below).

As is currently required for collaborative drug therapy arrangements, agreements and policies may specifically address issues that come up during medication reconciliation (i.e., review of all of a patient's current and new medications) or related to polypharmacy (i.e., the simultaneous use of multiple drugs by a patient).

The bill specifies that agreements and policies cannot authorize a pharmacist to establish a port to administer parenteral drugs (e.g., IV infusions).

Agreement or Policy's Contents

Under the bill, any written protocol or care plan developed under to a collaborative drug therapy agreement or policy must have detailed direction on the pharmacist's permitted actions, including the (1) specific drug or drugs, (2) therapeutic class or classes of drugs, and (3) devices that the pharmacist may manage.

As under current law, the written protocol or care plan must also specify:

1. the terms and conditions under which (A) drug therapy may be initiated, modified, continued, discontinued, or deprescribed or (B) the use of a device may be initiated, continued, or discontinued, or deprescribed;
2. when a pharmacist must notify the prescribing practitioner;
3. the laboratory tests that the pharmacist may order; and
4. the patient population it covers.

Under the bill, agreements, policies, protocols, and care plans must be made available to DCP and DPH for inspection, upon request, as current law requires for agreements and written protocols.

Notice to Practitioner and Medical Record Updates

Under the bill, if a pharmacist discontinues or deprescribes a drug, he or she must notify the prescribing practitioner within 24 hours. Any actions the pharmacist takes must be documented in the patient's medical record as specified by any applicable prescribing practitioner's or care-giving institution's policies.

Additionally, any protocol or collaborative drug therapy care plan must be filed in the patient's medical record.

Current law requires pharmacists to (1) report any encounters within the agreement's scope within 30 days or document them in a shared medical record and (2) file protocols in the patient's medical record.

§ 71 — PHARMACIST LICENSE RENEWAL

Makes pharmacist licenses renewable annually, rather than biennially; makes the annual fee \$100, rather than \$120 biennially

The bill (1) requires pharmacists to renew their licenses annually, rather than biennially, and (2) increases the licensure renewal fee, making it \$100 annually, rather than \$120 biennially. By law, pharmacists are licensed by the Department of Consumer Protection.

§§ 72-74 — RESERVED SECTIONS

Reserved sections

§§ 75 & 481 — PAYMENTS TO VOLUNTEER FIRE COMPANIES

Requires the state, within available appropriations, to pay volunteer fire companies \$500 for each call they respond to on designated highways

The bill requires the state to pay volunteer fire companies for responding to calls on designated highways. Under the bill, within available appropriations, the State Fire Administrator must pay \$500 per call to volunteer fire companies responding to calls on:

1. limited access highways (see *Background*);
2. the section of the Berlin Turnpike, which begins at the end of the Wilbur Cross Parkway in Meriden and extends north along Route 15 to the South Meadows Expressway in Wethersfield; and
3. the section of Route 8 in Beacon Falls within the Naugatuck State

Forest.

The bill also eliminates a defunct supplemental grant award remittance program for volunteer fire companies that provide emergency response services on these same highways.

EFFECTIVE DATE: July 1, 2022

Background — Limited Access Highways

The Department of Transportation commissioner, with the governor and attorney general's advice and consent, designates as limited access highways the state highways (or portion of them) that are accessible only at highway intersections or designated points (CGS § 13b-27). The Office of the State Traffic Administration annually publishes a list of these limited access highways (CGS § 14-298).

Background — Limited Access Highway Reimbursement Program

Under prior law, the Limited Access Highway Reimbursement Program paid volunteer fire companies \$100 per call for responding to calls on the same highways described above (CGS § 13a-248). The legislature eliminated the program in 2003, as part of the FY 04-05 budget implementation act. It subsequently enacted the supplemental grant award remittance program in 2005.

§ 76 — GAMBLING STUDY

(1) Transfers responsibility for the legalized gambling study from DCP to DMHAS and requires the next study to be completed by August 1, 2023; (2) authorizes the DMHAS commissioner to select a contractor to conduct the study; and (3) expands the study's required components

The bill (1) transfers responsibility for the mandated study on the effects of legalized gambling on Connecticut residents from the Department of Consumer Protection (DCP) to the Department of Mental Health and Addiction Services (DMHAS) and (2) resets the deadline for subsequent studies.

Current law requires DCP to conduct this study as often as the commissioner deems necessary, but at least every 10 years. The last study was conducted in 2009. The bill instead requires the DMHAS commissioner to conduct the next study by August 1, 2023, every 10

years thereafter, and at other times as she deems necessary. The bill also authorizes the commissioner to select a contractor to conduct the study.

Under current law, the study must look at the types of gambling the public does and the desirability of expanding, maintaining, or reducing the amount of legalized gambling the state allows. The bill additionally requires that each study be informed by the most recently completed study's findings on the effects of legalized gambling. It also requires the DMHAS commissioner or contractor to:

1. consider data from other states to inform recommendations on best practices and proposed regulatory changes;
2. review available data to assess the problem gaming resources available in Connecticut; and
3. consult with stakeholders to inform the study analysis, including elected and appointed government officials, nongovernmental and charitable organizations, municipal officials, businesses, and entities engaged in legalized gambling activities in Connecticut.

The commissioner must submit the study's findings and its cost to the Public Safety and Security Committee.

EFFECTIVE DATE: Upon passage

§ 77 — RESIDENT STATE TROOPER FRINGE FUNDING

Beginning FY 23, increases, from 50% to 100%, the portion of the state employees' retirement system fringe recovery rate attributable to the unfunded liability of the system that the comptroller must annually pay

By law, a town participating in the resident state trooper program pays, among other things, 100% of the overtime costs and the portion of fringe benefits directly associated with these costs. Under current law, the comptroller must pay 50% of the portion of the state employees' retirement system fringe recovery rate attributable to the unfunded liability of the system from the resources appropriated for State Comptroller-State Employees' Retirement System Unfunded Liability. Beginning FY 23, the bill requires her to annually pay 100% of this rate.

EFFECTIVE DATE: July 1, 2022

§ 78 — RURAL SPEED ENFORCEMENT GRANT PROGRAM

Requires DESPP to administer a grant program, within available resources, to provide grants to eligible municipalities for speed enforcement on rural roads

Beginning July 1, 2022, the bill requires DESPP, within available resources, to administer a grant program for speed enforcement activities on rural roads. Municipalities eligible for grants under the bill are those with a population of less than 25,000 and that have a law enforcement unit or resident state trooper. They apply to the program as DESPP prescribes.

The bill caps program grants at \$5,000 but allows eligible municipalities to receive up to 10 grants. DESPP must continue to award grants until all resources dedicated to the program are spent.

EFFECTIVE DATE: Upon passage

§ 79 — HEALTH CARE PROVIDER LOAN REIMBURSEMENT PROGRAM

Requires OHE, by January 1, 2023, to establish a program to provide loan reimbursement grants to certain health care providers

The bill requires the Office of Higher Education (OHE), by January 1, 2023, to establish a health care provider loan reimbursement program to provide loan reimbursement grants to DPH-licensed health care providers employed full-time as a health care provider in the state. Under the bill, individuals may apply to OHE for the grants at the time and in the manner the executive director prescribes.

Eligibility Requirements

It requires the OHE executive director, in consultation with DPH, to develop eligibility requirements for grant recipients, which may include income guidelines. Under the bill, at least 20% of the grants must be awarded to regional community-technical college graduates. The executive director must consider health care workforce shortage areas when developing the eligibility requirements.

Loan Reimbursements

Under the bill, qualified individuals must be reimbursed on an annual basis for qualifying student loan payments in amounts the OHE executive director determines.

The bill limits reimbursement to only the loan payments the health care provider made while employed full-time in the state as a health care provider. (Presumably, these are “qualifying student loan payments” under the bill.)

Gifts, Grants, and Donations

The bill authorizes OHE to accept gifts, grants, and donations, from any public or private source, for the health care provider loan reimbursement program.

EFFECTIVE DATE: Upon passage

§ 80 — COMMUNITY GUN VIOLENCE INTERVENTION AND PREVENTION PROGRAM

Requires the Department of Public Health (DPH) to establish a community gun violence intervention and prevention program and annually report to the Public Health Committee, starting by January 1, 2023, on the program’s activities

The bill requires DPH to establish a community gun violence intervention and prevention program to do the following:

1. fund and support the growth of evidenced-informed, community-centric community violence and gun violence prevention and intervention programs in the state;
2. strengthen partnerships among the community and state and federal agencies involved in community violence prevention and intervention;
3. collect timely data on firearm-involved injuries and deaths and make the data publicly available;
4. evaluate the effectiveness of the violence and prevention strategies the program implements;
5. determine community-level needs by engaging with communities impacted by gun violence; and

6. secure state, federal, and other funds to reduce community gun violence.

The bill requires the DPH commissioner to annually report, starting by January 1, 2023, to the Public Health Committee on the program's activities during the preceding 12 months.

EFFECTIVE DATE: Upon passage

§ 81 — COMMISSION ON COMMUNITY GUN VIOLENCE INTERVENTION AND PREVENTION

Establishes a Commission on Community Gun Violence Intervention and Prevention within DPH for administrative purposes only to advise the commissioner on programs and strategies to reduce the state's community gun violence; requires the commission to annually report its activities to the Public Health Committee starting by January 1, 2023

The bill establishes a 23-member Commission on Community Gun Violence Intervention and Prevention to advise the DPH commissioner on developing evidence-based, evidenced-informed, community-centric gun programs and strategies to reduce community gun violence in the state. The commission is within DPH for administrative purposes only.

Under the bill, the commission must advise DPH on developing criteria for grant opportunities that arise through the department's community gun violence intervention and prevention program established under the bill.

EFFECTIVE DATE: Upon passage

Members

Under the bill, the commission consists of the following 23 members:

1. one representative each from the Connecticut Hospital Association and Compass Youth Collaborative, appointed by the House speaker;
2. one representative each from the Connecticut Violence Intervention Program and Regional Youth Adult Social Action Partnership, appointed by the Senate president pro tempore;

3. one representative each from Hartford Communities That Care, Inc. and CT Against Gun Violence, appointed by the House majority leader;
4. one representative each from Project Longevity and the Saint Francis Hospital and Medical Center, appointed by the Senate majority leader;
5. one representative from Yale New Haven Hospital, appointed by the House minority leader;
6. one representative of Hartford Hospital, appointed by the Senate minority leader;
7. one representative of the Greater Bridgeport Area Prevention Program, appointed by the Public Health Committee House chairperson;
8. one representative of a community gun violence reduction program, appointed by the Public Health Committee Senate chairperson;
9. one representative of the Health Alliance for Violence Intervention, appointed by the Commission on Women, Children, Seniors, Equity and Opportunity's (CWCSEO) executive director;
10. two members appointed by the DPH commissioner;
11. one faculty member at an academic institution with experience in gun violence prevention and one advocate for violent crime survivors, appointed by the Governor;
12. one member employed as the highest-ranking police officer of a Connecticut municipal police department, appointed by the House minority leader;
13. one youth representative of a group that advocates on behalf of justice-involved youth, appointed by the Senate minority leader;

14. the DPH commissioner; and
15. the children and families and social services commissioners and CWCSEO executive director or their designees.

Under the bill, the members of the Gun Violence Intervention and Prevention Advisory Committee established under PA 21-35 (§ 9) serve as the commissions initial appointed members.

The bill requires appointing authorities to appoint individuals to the commission who represent the state's geographic communities that experience gun violence.

Leadership and Meetings

Under the bill, the DPH commissioner must serve as the commission chairperson and schedule the commission's first meeting to be held within 60 days after the bill's passage.

Under the bill, a majority of commission members constitutes a quorum for transacting business. Any decision must be made by a majority of members present at the meeting, except that the commission may establish subcommissions, advisory groups, or other entities it deems necessary to further its purposes.

Commission members serve without compensation but may be reimbursed within available funds for necessary expenses in performing their duties.

Report

The bill requires the commission, starting by January 1, 2023, to annually report to the Public Health Committee on its activities.

§§ 82-89 — PROVISION OF FREE MENSTRUAL PRODUCTS

Requires (1) certain government agencies and public and private organizations, starting July 1, 2023 or September 1, 2023, to provide free menstrual products to the individuals they serve and (2) DPH to set guidelines by July 1, 2022, on how to do this

The bill requires the Department of Public Health (DPH) commissioner, by July 1, 2022, to (1) set guidelines on how free menstrual products (i.e., tampons and sanitary napkins) may be

provided without stigmatizing the individuals requesting or seeking them and (2) post the guidelines on the department's website. (It makes a technical change by replacing the term "feminine hygiene" with the term "menstrual" throughout the statutes.)

The bill also requires certain government agencies and public or private organizations to provide free menstrual products to the individuals they serve without stigmatizing them, in accordance with the published DPH guidelines.

York Correctional Institution

By law, York Correctional Institution must provide free menstrual products to inmates upon request. However, starting July 1, 2023, the bill requires the institution to do so without stigmatizing the individuals requesting the products, in accordance with the DPH guidelines.

Other Agencies and Organizations

Under the bill, starting July 1, 2023, certain other agencies and organizations must start providing free menstrual products without stigmatizing the individuals requesting the products, in accordance with the DPH guidelines, as follows:

1. public higher education institutions, in at least one designated and accessible central location on each campus, and they must post notice of the location on their websites;
2. school districts acting by the Department of Correction (DOC) commissioner, to individuals confined in any DOC institution and attending a school within the district, upon request and as soon as practicable, in a quantity appropriate to the person's health needs;
3. public or private homeless shelters that receive grants from the housing commissioner, in each restroom that is accessible to residents; and
4. domestic violence emergency shelters that receive state funding in each restroom that is accessible to residents.

Additionally, local and regional boards of education must do so starting September 1, 2023, in women's restrooms, all-gender restrooms, and at least one men's restroom, that are accessible to students in grades three through 12 in each school.

Donations, Grants, and Partnerships

The bill allows the Department of Corrections (DOC), local and regional boards of education, public institutions of higher education, and homeless and domestic violence shelters to (1) accept donations of menstrual products and grants from any source to purchase menstrual products and (2) partner with a nonprofit or community-based organization to carry out the bill's requirements.

EFFECTIVE DATE: July 1, 2022, except the provision regarding the DPH guidelines and one technical change are effective upon passage.

§ 90 — STATE LIBRARY BOARD CONSULTATION REQUIREMENTS

Requires the State Library Board to consult with certain entities before making changes to library services

The bill requires the State Library Board to consult with the Department of Aging and Disability Services and the library's advisory committee for blind and physically disabled persons before making changes that could diminish or substantively change library services.

EFFECTIVE DATE: July 1, 2022

§ 91 — TRS VALUATIONS

Requires TRS to have an actuarial valuation performed annually, rather than biennially

The bill requires the Teachers' Retirement Board to have an actuarial valuation of the Teachers' Retirement System (TRS) performed annually, rather than biennially as current law requires. More specifically, the annual valuation must cover the system's assets and liabilities as of June 30 and be completed before December 1.

EFFECTIVE DATE: July 1, 2022

§ 92 — EQUITY AND THE GOVERNOR'S BUDGET

Requires the governor's budget document to include an explanation of how its provisions further efforts to ensure equity in the state

The bill requires the governor's budget document to include an explanation of how its provisions further the governor's efforts to ensure equity in the state. It defines "equity" as efforts, regulations, policies, programs, standards, processes, and any other government functions or legal principles intended to do the following:

1. identify and remedy past and present patterns of discrimination or inequality against, and outcome disparities for, any protected class under the state's anti-discrimination laws;
2. ensure that these patterns, whether intentional or unintentional, are not reinforced or perpetuated; and
3. prevent the emergence and persistence of these patterns in the foreseeable future.

As under existing law, the budget document must also include the governor's recommendations on the economy, including an analysis of the proposed spending and revenue programs' impact on employment, production, and purchasing power of the state's residents and industries.

EFFECTIVE DATE: October 1, 2022

§§ 93 & 94 — MUNICIPAL REVENUE SHARING ACCOUNT

Modifies the distribution schedule for municipal revenue sharing grants made to municipalities from the Municipal Revenue Sharing Account (MRSA)

By law, OPM must distribute the funds deposited in MRSA for municipal revenue sharing grants. Under current law, OPM must distribute the funds deposited between (1) October 1 and June 30 on the following October 1 and (2) July 1 and September 30 on the following January 31. Beginning in FY 22, the bill instead requires funds deposited to the account during a given fiscal year, or accrued to it for a fiscal year but received afterwards, to be distributed by October 1 after the fiscal year's end.

EFFECTIVE DATE: Upon passage for the provision that applies to

FYs 22 & 23, and July 1, 2022, for the provision that applies beginning FY 24.

§ 95 — NEW HAVEN’S PAYMENT IN LIEU OF TAXES GRANT

Allows New Haven to update the assessed valuations it submitted to the OPM secretary for purposes of calculating its FY 23 PILOT grant

The bill allows New Haven to update the assessed valuations it submitted to the Office of Policy and Management (OPM) secretary for purposes of calculating the PILOT grant due to the city for FY 23. It must update the data by July 1, 2022.

By law, annually by April 1, municipalities must submit claim forms to OPM to report the assessed value of their PILOT-eligible property as of the prior October 1. The actual payments are made by the treasurer by September 30, 18 months after the municipality first requested the reimbursement.

EFFECTIVE DATE: Upon passage

§§ 96-116 & 480 — CONNECTICUT RETIREMENT SECURITY PROGRAM

Eliminates CRSA and makes the Office of the State Comptroller its successor; converts CRSA’s board of directors to an advisory board; requires that money spent on the program from the General Fund be reimbursed by October 1, 2023

Current law requires the Connecticut Retirement Security Authority (CRSA), a quasi-public agency administered by a board of directors, to establish a retirement program with Roth individual retirement accounts (IRAs) for eligible private-sector employees.

The bill (1) eliminates CRSA and makes the Office of the State Comptroller its successor for administering the program, (2) converts CRSA’s board of directors to an advisory board, and (3) renames the program as the Connecticut Retirement Security Program, instead of the Connecticut Retirement Security Exchange.

The bill transfers most of the powers and responsibilities of CRSA’s board of directors to the comptroller and eliminates those that do not apply to a comptroller-administered program. It allows any member appointed and serving on the board of directors on July 1, 2022, to

continue to serve on the advisory board until his or her term expires.

The bill requires that any money spent from the General Fund to administer the program or compensate employees who may participate in the program be reimbursed to the General Fund by October 1, 2023. It also makes numerous minor, conforming, and technical changes.

EFFECTIVE DATE: July 1, 2022, except a conforming provision repealing CRSA's ability to request an advance of up to \$1 million from the General Fund is effective upon passage.

Advisory Board

The bill converts CRSA's board of directors into the Connecticut Retirement Security Advisory Board with the same ex-officio members, appointed members and their appointing authorities, and appointee criteria. However, it makes the comptroller the advisory board's chairperson, rather than a board member selected by the governor.

Under the bill, the advisory board must advise the comptroller on matters including (1) using the program's surplus funds to the extent authorized by law and (2) modifying the program to be consistent with federal tax law and regulations, and prevent it from being regulated by the federal Employment Retirement Income Security Act (ERISA).

In converting the board of directors to an advisory board, the bill removes various powers from the board, including, among other things, its ability to: (1) appoint an executive director, (2) adopt various written procedures for the program, (3) adopt bylaws and an official seal, (4) maintain an office, (5) sue and be sued, and (6) make and enter into certain contracts and agreements.

It also removes (1) a requirement for board members who handle program funds to execute a surety bond and (2) current law's protection from individual liability for any board member, director, or employee, which includes protection from civil liability for the authority's debts, obligations, or liabilities.

Comptroller

The bill eliminates CRSA and makes the Office of the State Comptroller its successor for administering the program. It transfers certain powers from CRSA's board of directors to the comptroller, which generally allows the comptroller, in consultation with the advisory board, to do the following:

1. establish criteria and guidelines for the program;
2. receive and invest moneys in the program;
3. contract with financial institutions or other organizations offering or servicing retirement programs;
4. charge and equitably apportion certain administrative costs among program participants;
5. borrow working capital funds and other funds as may be needed to operate the program;
6. do all things needed to carry out the law's provisions; and
7. establish an administrative process through which participants, potential participants, and employees may submit grievances, complaints, and appeals to have them heard and addressed by the comptroller (current law requires the board of directors to adopt written procedures for this process).

The bill similarly transfers various responsibilities from CRSA's board of directors to the comptroller. These include, among other things, requirements to do the following:

1. prepare certain informational materials about the program;
2. provide quarterly statements to program participants;
3. annually notify participants about fees that may be imposed;
4. provide for establishing and maintaining IRAs for each program participant;

5. minimize the program's total annual fees;
6. act, in conducting the program's business, (a) with the care, skill, prudence, and diligence that a prudent person familiar with such matters would use in a similar situation; (b) solely in the interests of program participants and beneficiaries; and (c) for the exclusive purposes of providing benefits to participants and beneficiaries and defraying reasonable expenses of administering the program; and
7. maintain a website for the program.

Regulations. Current law allows, and in some instances requires, CRSA's board of directors to adopt various policies and procedures for administering the program. The bill instead requires that the comptroller do so by adopting regulations. This allows, and in some instances requires, the comptroller to adopt regulations about, among other things, (1) protecting program participants' personal and confidential information, (2) electronically distributing notices and information to participants, (3) how employers with fewer than five employees and other non-participating individuals may opt-in to the program, and (4) governing funds distribution from the program.

§ 117 — MILITARY FUNERAL HONORS RIBBONS

Authorizes the adjutant general to issue military funeral honors ribbons

The bill authorizes the adjutant general to issue military funeral honors ribbons to military personnel, including Connecticut National Guard and organized militia members, who perform honor guard details.

EFFECTIVE DATE: July 1, 2022

§ 118 — HONOR GUARD PAY INCREASE

Increases, from \$50 to \$60, the daily pay for each member of an honor guard detail at a veteran's funeral

The bill increases, from \$50 to \$60, the daily pay for each member of an honor guard detail at a veteran's funeral. By law, the payment is made from appropriations for National Guard pay and from federal

funds for providing the honor guards. By law, an honor guard detail consists of up to five members, plus a bugler.

EFFECTIVE DATE: October 1, 2022

§§ 119 & 120 — EXPANSION OF DEBT-FREE COLLEGE PROGRAM ELIGIBILITY

Expands the debt-free community college program's eligibility to qualifying first-time, part-time Connecticut community-technical college students

Under the state's debt-free community college program, Connecticut high school graduates who enroll as first-time, full-time regional community-technical college students are eligible to receive awards on a semester basis that (1) cover the unpaid portion of the institutional costs (i.e., tuition and fees minus scholarships; grants; and federal, state, and institutional aid awarded to the student excluding loans) or (2) provide a minimum award of \$250, whichever is greater.

The bill expands the program eligibility to qualifying part-time students (i.e., students enrolled at a regional community-technical college carrying at least six but no more than 11 credit hours in a semester). Part-time students who meet the established eligibility requirements can receive awards that (1) cover the unpaid portion of the institutional costs or (2) provide a minimum award of \$150, whichever is greater.

Under the bill, awards are available to qualifying students in their first 48 months of community college enrollment, rather than 36 months as under current law.

The bill also makes technical and conforming changes.

EFFECTIVE DATE: July 1, 2022

§ 121 — SMALL BUSINESS SEMINARS

Requires the Board of Regents (BOR), within available funds, to develop seminars to help small businesses adapt to the post-COVID-19 business environment

The bill requires the BOR to develop seminar programs to help small businesses (i.e., with 25 or fewer employees) adapt to the business environment after the COVID-19 pandemic through courses in subject

areas including electronic commerce, social media, cybersecurity, and virtual currency. BOR must do so by September 1, 2022, and within available funds.

Under the bill, BOR must prescribe forms and procedures allowing up to two employees per small business, at no cost to the business, to enroll in up to five seminar programs or any courses within these seminar programs at the Northwestern Connecticut Community College Entrepreneurial Center or the Werth Innovation and Entrepreneurial Center at Housatonic Community College.

EFFECTIVE DATE: July 1, 2022

§ 122 — DAS JOBS OPENINGS WEBSITE

Requires the DAS website for executive branch job openings to include links to job openings in the judicial and legislative branches and the state higher education system

The bill requires the DAS commissioner, starting by July 1, 2022, to post individual links to the websites showing job openings in the judicial branch, legislative branch, and the constituent units of the state system of higher education. She must do so in a prominent location on the DAS web site where executive branch job openings are posted. If a link to one of the websites is updated after DAS posts it, the applicable branch agency or unit must notify DAS about it and DAS must update the link on its web site.

EFFECTIVE DATE: Upon passage

§ 123 — PROJECT LONGEVITY INITIATIVE

Transfers certain responsibilities for the Project Longevity Initiative from OPM to the Judicial Branch on July 1, 2022

The bill transfers certain responsibilities for the “Project Longevity Initiative” from OPM to the Judicial Branch on July 1, 2022. Project Longevity is a comprehensive community-based initiative to reduce gun violence in the state’s cities (i.e., New Haven, Hartford, Bridgeport, and Waterbury).

Responsibilities

Beginning July 1, 2022, the bill transfers all of the OPM secretary’s

powers and duties for the initiative to the Chief Court Administrator. It requires the Chief Court Administrator, on this same date, to assume the OPM secretary's responsibilities for the initiative. As under current law for the secretary, the administrator must (1) provide planning and management assistance to municipal officials and (2) do anything necessary to apply for and accept federal funds allotted or available to the state under any federal act or program.

Implementation

Additionally, the administrator must consult with various city stakeholders (e.g., clergy members and community leaders) and state officials (e.g., chief state's attorney) in implementing the initiative in Hartford, Bridgeport, and Waterbury.

Funds

As under current law for the secretary, the bill allows the administrator to:

1. use state and federal funds as appropriated for the initiative's implementation, and
2. accept, receive, and use any bequest, devise, or grant made to the Judicial Branch to further the initiative's objectives.

Plan and Legislative Report

Current law required the OPM secretary to create and submit a plan, by February 1, 2022, to the Public Safety and Security Committee on implementing the initiative statewide. Under the bill, if the secretary did not submit this plan, on and after July 1, 2022, the Chief Court Administrator must create and submit a plan instead. The administrator must submit the plan to the Public Safety and Security and Judiciary committees by January 1, 2023.

EFFECTIVE DATE: Upon passage

§ 124 —CERTIFICATE OF NEED TASK FORCE

Creates a task force to study and make recommendations on certificates of need for health care facilities

The bill establishes a 16-member task force to study and make recommendations on certificates of need (CONs) (see *Background*). The task force must study and make recommendations on the following matters:

1. instituting a price increase cap tied to the cost growth benchmark for consolidations;
2. guaranteed local community representation on hospital boards;
3. changes to the Office of Health Strategy's (OHS) long-term, statewide health plan to include an analysis of services and facilities and their impact on equity and underserved populations;
4. setting standards to measure quality due to a consolidation;
5. enacting higher penalties for noncompliance and increasing the staff needed for enforcement;
6. the attorney general's authority to stop activities as the result of a CON application or complaint;
7. the ability of workforce and community representatives to intervene or appeal decisions;
8. authorizing OHS to require an ongoing investment to address community needs;
9. capturing lost property taxes from hospitals that have converted to nonprofit entities; and
10. the timeliness of decisions or approvals relating to the CON process and relief available through that process.

EFFECTIVE DATE: Upon passage

Membership and Procedure

Under the bill, the task force includes the Insurance and Real Estate Committee chairpersons and ranking members or their designees, as

well as 10 appointed members as shown in the table below.

In addition, the OHS executive director and attorney general, or their designees, serve as nonvoting, ex-officio members.

Table: CON Task Force Appointed Members

<i>Appointing Authority</i>	<i>Appointee Qualifications</i>
House speaker (2)	Health care provider Representative of a Hartford-based hospital
Senate president pro tempore (2)	Person with expertise in community-based health care Representative of a Connecticut-based medical school
House majority leader (1)	Representative of consumers
Senate majority leader (1)	Representative of labor
House minority leader (1)	Representative of a rural hospital
Senate minority leader (1)	Representative of an independent hospital
Governor (2)	Advocate for health care quality or patient safety Advocate for health care access and equity

Under the bill, any of the legislative appointees may be legislators. The appointing authorities must make their initial appointments by 30 days after the bill's passage and fill any vacancy.

The Insurance and Real Estate Committee chairpersons serve as the task force chairpersons. They must schedule the first meeting, which must be held within 60 days after the bill's passage.

The Insurance and Real Estate Committee's administrative staff serves in that capacity for the task force.

Reporting Requirement

The task force must report its findings and recommendations on the above matters to the Insurance and Real Estate Committee by January 15, 2023. The task force terminates when it submits the report or on January 15, 2023, whichever is later.

Background — Certificates of Need

Generally, existing law requires health care facilities to apply for and

receive a CON from OHS's Health Systems Planning Unit when proposing to (1) establish a new facility or provide new services, (2) change ownership, (3) purchase or acquire certain equipment, or (4) terminate certain services (CGS § 19a-638 et seq.).

§§ 125-126 — RESERVED SECTIONS

Reserved sections

§ 127 — SERS PENSION COST RECOVERIES

Requires certain pension cost recoveries to be deposited in the SERS pension fund as an additional employer contribution

Under the bill, if any pension costs recovered from an appropriated or non-appropriated source other than the General Fund or Special Transportation Fund causes the payments to the State Employees Retirement System (SERS) to exceed the actuarially determined employer contribution for any fiscal year, then the recovered costs must be deposited into the State Employees Retirement Fund as an additional employer contribution at the end of that fiscal year.

EFFECTIVE DATE: July 1, 2022

§ 128 — STATE AGENCY ELECTRIC VEHICLE CHARGING STATIONS

Establishes policies and procedures for the use of electric vehicle (EV) charging stations on state agency property

Charging Stations

The bill allows state agencies to designate certain EV charging stations (i.e., owned and operated by the agency on state property) for public use, solely for state-employee use, or in combination. When determining the authorized use for these stations, the agency must consider if visitors conduct business with the agency at the property (e.g., service centers, maintenance facilities, correctional facilities, visitor centers, health care facilities, and recreational facilities). The agency may establish maximum charging time limits per user per charging session based on the parking needs of the property and, if established, must post such limits at each station.

Fees

The bill requires that reasonable fees be established and state agencies

assess and collect these fees for EV charging stations purchased and installed on or after October 1, 2022. For their respective branches, the Department of Administrative Services (DAS), the Joint Committee on Legislative Management, and the Office of the Chief Court Administrator, in consultation with the Department of Energy and Environmental Protection, must establish a per-kilowatt-hour fee to recover, at the maximum extent practicable, the operational, maintenance, and electric costs for such stations. The fee does not apply to any owned or leased state vehicle.

Each branch must update these fees annually or sooner if deemed necessary. The applicable fee must be posted at each station and DAS must post any fees for executive branch stations on its website. Once collected, the fees must be deposited into the state fund which funded the station.

Penalties

The bill makes it an infraction (other than for emergency vehicles) to (1) park in an EV charging spot without charging a plug-in hybrid or battery EV and (2) exceed the maximum charging time limit established by the agency. An infraction carries a fine between \$35-90 (CGS § 51-164m).

EFFECTIVE DATE: October 1, 2022

§ 129 — CANNABIS GENERAL FUND ACCOUNTS AND APPROPRIATED FUND

Allows money from specified cannabis fees and taxes to be used to fund state agencies performing their duties under the cannabis law; requires OPM to consult with the Social Equity Council when allocating these funds

The 2021 cannabis law established two new General Fund accounts (the cannabis regulatory and investment account and social equity and innovation account), directs specified fee and tax revenue to the accounts for FY 22, and requires OPM to allocate the account funds to state agencies for specified purposes. Beginning in FY 23, the law also establishes the Social Equity and Innovation Fund and requires that money in the fund be appropriated for specified purposes.

The bill expands the permitted purposes of the social equity and innovation account and fund to include paying costs incurred to implement activities authorized under the 2021 cannabis law.

The bill also requires the OPM secretary to consult with the Social Equity Council when allocating the money from both accounts or the fund.

Prevention and Recovery Services Fund

The 2021 cannabis law also established the “Prevention and Recovery Services Fund” to appropriate money for (1) substance abuse prevention, treatment, and recovery services and (2) substance abuse data collection and analysis. The bill allows the Social Equity Council to make recommendations about these expenditures to any relevant state agency.

EFFECTIVE DATE: Upon passage

§ 130 — LEGISLATIVE BRANCH GOODS AND SERVICES CONTRACT ADVERTISEMENTS

Eliminates requirement that the Legislative Management Committee advertise certain goods and services bidding opportunities in three newspapers

Existing law generally requires the Legislative Management Committee to publicly advertise bidding opportunities for goods and services contracts (i.e., those for supplies, materials, equipment, and contractual services). For contracts subject to this requirement that are estimated to cost more than \$50,000, the bill eliminates the requirement that the committee advertise bids in at least three daily newspapers in the state at least five days ahead of the bidding deadline. It instead requires that they be posted on the State Contracting Portal within the same timeframe. (The committee already does so in practice.)

Current law also requires that goods and services contracts (in any amount) subject to public bidding also be advertised on a public bulletin board in a building under the committee’s supervision and control. The bill instead allows the committee to post them on a website it designates. As under existing law, the committee must also send notice to prospective suppliers.

EFFECTIVE DATE: July 1, 2022

§§ 131-134 — JUDICIAL COMPENSATION

Increases the salary and other compensation for judges and certain other judicial officials by approximately 5% starting in FY 23

Starting in FY 23, the bill increases the following by approximately 5%: (1) salaries for judges, family support magistrates, family support referees, and judge trial referees; (2) additional amounts that certain judges receive for performing administrative duties; and (3) salaries of certain officials whose compensation, by law, is determined in relation to a Superior Court judge's salary or state referee's per-diem rate.

EFFECTIVE DATE: July 1, 2022

Judicial Salaries

The table below shows the bill's changes to judicial salaries starting in FY 23.

Table: Judicial Salaries

Position	Current Salary	Salary Starting July 1, 2022 (FY 23)
Supreme Court chief justice	\$215,915	\$226,711
Chief court administrator (if a judge)	207,480	217,854
Supreme Court associate judge	199,781	209,770
Appellate Court chief judge	197,571	207,450
Appellate Court judge	187,663	197,046
Deputy chief court administrator (if a Superior Court judge)	184,209	193,420
Superior Court judge	180,460	189,483
Chief family support magistrate	157,078	164,932
Family support magistrate	149,498	156,973
Family support referee	233/day*	245/day*
Judge trial referee	271/day*	285/day*

*Plus expenses, mileage, and retirement pay

Administrative Judges

The law provides judges extra compensation, in addition to their annual salaries, for taking on certain administrative duties. The judges who receive this additional amount are (1) the appellate system's administrative judge; (2) each judicial district's administrative

judge; and (3) each chief administrative judge for (a) facilities, administrative appeals, the judicial marshal service, or judge trial referees, and (b) the Superior Court's family, juvenile, criminal, or civil divisions. The bill increases these additional annual payments from \$1,230 to \$1,292 starting July 1, 2022 (i.e., FY 23).

Related Increases

The bill's provisions also result in salary, rate, or maximum compensation increases for other officials or judges whose compensation is tied to those of Superior Court judges or judge trial referees. Specifically:

1. the salaries of workers' compensation administrative law judges vary depending on experience and are tied to those of Superior Court judges (CGS § 31-277);
2. the salaries of probate court judges vary depending on probate district classification, and range from 45% to 75% of a Superior Court judge's salary (CGS § 45a-95a);
3. senior judges receive the same per-diem rates as judge trial referees (CGS §§ 51-47b(a) & 52-434b);
4. the probate court administrator's salary is the same as that of a Superior Court judge (CGS § 45a-75); and
5. the maximum compensation a retired judge may receive is equal to the highest annual salary during the fiscal year for the judicial office the judge held at retirement (CGS § 51-47b(b)).

§ 135 — AMBULANCE RATES

Requires the DPH commissioner to proportionally adjust certain ambulance service rates within any increases the DSS commissioner makes to Medicaid ambulance service rates

The bill requires the DPH commissioner to proportionally adjust certain ambulance service rates with any increases the Department of Social Services (DSS) commissioner makes to Medicaid ambulance service rates. The DPH commissioner must do this within 30 days after the DSS commissioner makes the increases and apply the proportional

adjustments to rates for (1) transporting and treating patients by licensed ambulance services and invalid coaches and (2) certified ambulance services and paramedic intercept services.

EFFECTIVE DATE: Upon passage

§ 136 — EMERGENCY MEDICAL SERVICES WORKING GROUP

Requires the DPH commissioner, in collaboration with the DSS commissioner, to establish a working group to examine certain issues related to emergency medical services

The bill requires the Department of Public Health (DPH) commissioner, in collaboration with the Department of Social Services (DSS) commissioner, to establish a working group on emergency medical services (EMS). The group must examine (1) Medicaid and private commercial EMS rates; (2) the EMS workforce; and (3) the provision of these services, including the adoption of mobile-integrated health care, and the provision of EMS in other states.

The working group must include the DPH and DSS commissioners or their designees and representatives of (1) volunteer EMS providers, (2) municipal or other nonprofit agencies that provide EMS, (3) hospital-based EMS providers, and (4) for-profit EMS providers. The group may also include emergency physicians, other emergency care providers, and representatives of (1) hospitals, (2) long-term care providers, and (3) health carriers.

The bill requires the DPH commissioner to convene the working group's first meeting by September 1, 2022.

By January 1, 2023, the DPH commissioner, in consultation with the DSS commissioner, must report to the Public Health Committee with recommendations on the group's findings and recommendations for improvements to the provision of EMS in the state and proposed actions to create an effective and sustainable EMS system over a long-term period.

EFFECTIVE DATE: July 1, 2022

§ 137 — MUNICIPAL STORMWATER AUTHORITY FEES

Modifies the current partial fee reduction a stormwater authority must provide to property owners by placing more requirements on its availability and establishes an optional reduction; requires the authorities to adopt a procedure for providing fee reductions; eliminates the requirement that grand list valuation is considered when setting stormwater fees

The bill (1) modifies the current partial fee reduction that municipal stormwater authorities must provide to property owners by placing more requirements on its availability and (2) establishes an optional reduction (see below). Unchanged by the bill, the reductions are in the form of a credit.

The bill (1) requires stormwater authorities to adopt a procedure for providing the fee reductions and (2) allows the DEEP commissioner to provide additional guidance to authorities to implement the fee reductions.

It also eliminates the requirement that stormwater authorities consider a property's grand list valuation when setting stormwater fees. Existing law, unchanged by the bill, requires authorities to consider (1) the amount of impervious surface generating stormwater runoff and (2) land use types that result in higher or lower concentrations of stormwater pollution.

Lastly, the bill makes a minor change to specify that a stormwater authority's stormwater management program must be to control both stormwater construction runoff and stormwater pollution, rather than at least one of the two.

Available Partial Stormwater Fee Reductions

Current law requires stormwater authorities to provide a partial fee reduction for property owners who install, operate, and maintain current authority-approved stormwater best management practices that reduce, retain, or treat stormwater onsite.

Mandatory Reduction. Under the bill, a stormwater authority must provide a partial fee reduction for property owners in its district who:

1. disconnect a percentage of the property's impervious surfaces from the municipal separate storm sewer system, combined

storm sewer system, or surface water and

2. provide documentation to the authority's satisfaction that current authority-approved stormwater best management practices or other control measures that reduce, retain, or treat stormwater onsite are being applied and maintained in compliance with the authority's requirements and any applicable DEEP-issued stormwater discharge permit.

The bill specifies that an area of impervious surface is considered disconnected when the appropriate water quality volume is kept in accordance with the applicable DEEP-issued stormwater discharge permit or as required by the authority.

New Optional Reduction. The bill allows a stormwater authority to provide a partial fee reduction for property owners in its district who install, operate, and maintain infrastructure that reduces, retains, and treats stormwater onsite. For the reduction, the infrastructure must exceed any requirements for infrastructure that may apply to the property under (1) the applicable DEEP-issued stormwater discharge permit (including requirements for water quality impairments), (2) any DEEP regulation, or (3) the local stormwater control ordinance.

EFFECTIVE DATE: July 1, 2022

Background — Stormwater Authorities

PA 21-115, §§ 1-3, authorized all municipalities (rather than just those that participated in a DEEP pilot program) to establish a municipal stormwater authority. The purpose of a local stormwater authority is to, among other things, develop a stormwater management program and recommend fees to levy on real property to fund the program. A municipality's legislative body must approve a stormwater authority's annual budget and the fees it plans to levy, and the total amount of fees the authority plans to collect cannot exceed its projected spending.

§ 138 — NONUNION RAISES & LUMP SUM PAYMENTS

Requires most nonunion employees to receive the same pay increases as union employees in FYs 22, 23 & 24; requires legislative employees to receive the same lump sum payments as union employees in FYs 22 & 23

The bill requires each state agency to apply certain terms from the 2022 agreement between the state and the State Employee Bargaining Agent Coalition (SEBAC) to their employees who are not members of a bargaining unit (i.e., nonunion state employees). More specifically state agencies must apply the agreement's terms for wage increases for:

1. FY22 (generally, a \$2,500 lump sum payment and 2.5% base annual salary increase);
2. FY 23 (generally, a 2.5% increase plus step increases, annual increments, or their equivalents, and a \$1,000 lump sum payment); and
3. FY 24 (generally, a 2.5% increase plus step increases, annual increments, or their equivalents).

The "state agencies" subject to this requirement include any office, department, board, council, commission, institution, constituent unit of the state system of higher education, technical education and career school, or other agency in the executive or judicial branch, but not the legislative branch.

For legislative employees, the bill requires the Office of Legislative Management to apply terms consistent with the 2022 SEBAC agreement's provisions for lump sum payments for FY 22 (\$2,500) and FY 23 (\$1,000).

EFFECTIVE DATE: Upon passage

§§ 139 & 140 — SALT APPLICATOR TRAINING AND COMMERCIAL APPLICATOR REGISTRATION PROGRAM

Requires DEEP and DOT to work with UConn to conduct training for roadside salt applicators and report to the legislature on the training program; establishes a registration program within DEEP for commercial salt applicators who take the program

Roadside Salt Applicator Training

The bill requires the DEEP and DOT commissioners to work with

UConn's Training and Technical Assistance Center (T2 Center) to conduct training for state, municipal, and private roadside applicators that relies on the Connecticut Best Management Practices "Green Snow Pro: Sustainable Winter Operations" guide for municipalities. The program must include (1) instruction on each topic in the guide and (2) additional resources for each topic. Under the bill, either DEEP and DOT personnel or UConn's T2 Center personnel must provide the training. They must hold at least one training session in each county.

The bill also requires DEEP and DOT to provide information about the training to the regional councils of governments. They must submit a report to the Environment and Transportation committees within one year after the program begins on (1) how many applicators received the training, (2) goals for the program's future, and (3) recommendations for proposed legislation to reduce sodium chloride's effects on private wells and public drinking water supplies.

Commercial Applicator Registration Program

The bill establishes a salt applicator registration program within DEEP, which the commissioner must administer and enforce within available resources.

Under the bill, commercial applicators may annually register with DEEP and certify that they (1) received the roadside applicator training conducted by DEEP, DOT, and UConn, and any other training DEEP requires by regulations (see below) and (2) comply with the regulation's policies and goals about applying salt. A "commercial applicator" is anyone who applies, or supervises others applying, salt or salt alternatives on roadways, parking lots, or sidewalks for winter maintenance. It excludes municipal, state, and state political subdivision employees.

Under the bill, a business that employs multiple commercial applicators may make an organization certification for its owner or chief supervisor and applicators employed by the business. A business with an organizational certification must (1) ensure that all applicators operating under it receive the required training and (2) keep records on

behalf of all of its applicators.

Application Form. The bill requires the DEEP commissioner to develop the registration application form, which must include the following information:

1. applicant's full name and address;
2. name and address for a Connecticut-domiciled person who is authorized to accept legal service and notices on the applicant's behalf;
3. type of apparatus used to apply salt or salt alternative, whether liquid or dry; and
4. any other information she deems necessary.

Required Regulations. The bill also requires the DEEP commissioner to adopt implementing regulations, which must, at a minimum, include provisions that do the following:

1. establish policies and goals for applying salt,
2. receive and allocate federal grants and other funds or gifts to carry out the program,
3. provide the types and frequency of training programs required for registration,
4. establish commercial applicator registration procedures, and
5. establish recordkeeping requirements for applicators to maintain registration.

Violations and Registration Revocation. The bill authorizes the commissioner to issue orders, including cease and desist orders, to anyone who violates the bill's salt applicator registration program provisions or regulations. Orders are effective immediately upon issuance. The commissioner may revoke a violator's registration after notice and hearing pursuant to the state's Uniform Administrative

Procedure Act.

EFFECTIVE DATE: October 1, 2022, except the registration program provision is effective upon passage.

§ 141 — LOCAL HEALTH DISTRICT REPORTING SYSTEM

Requires local health districts to create an electronic reporting system for property owners to report sodium chloride damage and health department to submit the reports to OPM; allows OPM to identify and issue financial assistance to help property owners fix the damage

The bill requires each local health district, by January 1, 2023, to establish an electronic reporting system for owners of homes or wells directly damaged by sodium chloride to report the damage to the local health department.

Beginning by January 1, 2024, each local health department must annually submit the reports recorded during the prior calendar year to the Office of Policy and Management (OPM). The OPM secretary may (1) identify available financial resources to help the owners with remediation, mitigation, or repair costs and (2) establish criteria and procedures for issuing the financial assistance.

EFFECTIVE DATE: Upon passage

§ 142 — RESIDENTIAL WATER TREATMENT INFORMATION

Requires residential water treatment system installers to provide customers with certain information about sodium and chloride in their drinking water

The bill requires any person who installs residential water treatment systems to provide customers who want to install an automatic water softener or tank with written information about the (1) importance of testing their drinking water for sodium and chloride and (2) potential consequences of excessive levels of these minerals in drinking water.

EFFECTIVE DATE: Upon passage

§§ 143-144 — PREMIUM PAY PROGRAM

Establishes the Connecticut Premium Pay program to provide \$200 to \$1,000 to certain employees who worked throughout the COVID-19 emergency, depending on their individual income, to recognize and compensate them for their service

The bill establishes the Connecticut Premium Pay program to be

administered by the Office of the Comptroller (OTC) or a third-party administrator under contract with OTC. From October 1, 2022, until June 30, 2024, the program must provide \$200 to \$1,000 to eligible applicants, depending on their individual income and whether the account the bill creates to support the program is sufficiently funded.

The bill establishes a non-lapsing program account along with application and payment processes for the program. It also:

1. allows an essential worker to request a reconsideration of a denied application and prohibits appeals on reconsideration decisions,
2. requires quarterly reports to the Labor and Public Employees Committee, and
3. prohibits employer retaliation against employees for applying to the program.

EFFECTIVE DATE: Upon passage

Eligible Applicants

Under the bill, an “eligible applicant” is anyone who meets all of the following criteria:

1. worked during the entire public health and civil preparedness emergency the governor declared on March 10, 2020, or any declaration extension, until the bill passes;
2. was in a category for which the Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices recommended, as of February 20, 2021, to receive a COVID-19 vaccination in phase 1a or 1b of the COVID-19 vaccination program (e.g., health care personnel, firefighters, police officers, corrections officers, food and agricultural workers, manufacturing workers, grocery store workers, public transit workers, education sector workers, and child care workers);

3. is not a federal, state, or municipal employee;
4. was not employed in a capacity where he or she worked or could have worked from home; and
5. has an individual income less than \$150,000.

Program Administration

Under the bill, the program administrator must begin accepting applications upon the bill’s passage. OTC must administer the program or contract with a third party to administer it. The administrator may: (1) determine whether an eligible applicant meets the eligibility requirements for compensation; (2) summon and examine under oath relevant witnesses; (3) direct the production of, and examine any books, records, letters, contracts, or other documents he or she finds proper; and (4) take affidavits or depositions.

Program Account and Use of Funds

The bill establishes the “Connecticut premium pay account” as a separate, non-lapsing account in the General Fund to contain any money the law requires to be deposited in it. The comptroller must expend moneys in the account at the administrator’s direction for:

1. payments to eligible applicants under the program and
2. program operating expenses, including (a) hiring employees and (b) public outreach and education about the program and account.

Under the bill, no more than 5% of the total amount the account receives can be used for administrative costs, including hiring temporary or durational staff or contracting with a third-party administrator. The administrator must make all reasonable efforts to limit operating costs and expenses without compromising essential workers’ access to the program.

Applications

To apply, the bill requires an eligible applicant to submit a claim to

the administrator by October 1, 2022, in a form and manner that the administrator requires. Claims must include: (1) proof of employment as an eligible applicant from March 10, 2020, until the bill passes, as determined by the applicant's proof of earnings, and (2) any additional information the administrator requires. Proof of employment can include official payroll records or another form of proof including a letter from an employer stating the eligible applicant's dates of work, or a declaration from an individual with personal knowledge of the eligible applicant's employment.

Under the bill, the administrator must promptly review and evaluate all applications and determine, based on the information the eligible applicant provided, or additional information provided at the administrator's request, whether or not the application will be approved. The administrator must provide a written determination to each applicant within 60 business days after the application submission date, or, if the administrator requested additional information, within 10 business days after the administrator receives the additional information.

Premium Payments

If a claim is approved, the administrator must direct the comptroller to pay the eligible applicant within 10 business days after approval. The amount of the payment generally depends on the applicant's individual income (the bill does not specify what constitutes "individual income"). The table below shows the payments for full-time eligible applicants (i.e., those who worked at least 30 hours per week).

Table: Full-Time Eligible Applicant Income and Payment Ranges

<i>Individual Income Range</i>	<i>Premium Payment Under the Bill</i>
Under \$100,000	\$1,000
\$100,000 - \$109,999	\$800
\$110,000 - \$119,999	\$600
\$120,000 - \$129,999	\$400
\$130,000 - \$149,999	\$200

For part-time eligible applicants (i.e., those who worked less than 30 hours per week), the bill requires the program to provide a \$500

payment.

Under the bill, if the sum allocated to the program is not enough to fully fund all approved applicants according to the requirements above, then all approved applicants' payments must be reduced proportionally. No payments must be made to any eligible applicants after June 30, 2024.

Appeals

The bill allows an eligible applicant to request that a determination be reconsidered by filing a request with the administrator, on a form the administrator prescribes, within 20 business days after the determination notice is mailed.

Within three business days after receiving the request, the administrator must designate someone to conduct the reconsideration and give him or her all documents related to the applicant's claim. The designee must conduct the reconsideration as a de novo review of all relevant evidence within 20 business days after the request.

The bill requires the designee to issue a written decision affirming, modifying, or reversing the administrator's decision within 20 business days and submit it to the administrator and the applicant. The decision must include a short statement of findings that specifies whether premium pay will be paid to the worker as required by the bill. Regardless of the laws under the Uniform Administrative Procedure Act or administrative appeals, a worker cannot further appeal a case beyond the administrator's designee.

Under the bill, any statement, document, information, or matter may be considered by the administrator or, on reconsideration, by the administrator's designee if, in his or her opinion, it contributes to a determination of the claim, regardless of whether it would be admissible in a court.

Erroneous Payments and Fraud

If a claim is paid to a program applicant erroneously or due to the person's willful misrepresentation, the bill allows the administrator to

seek repayment of benefits from the applicant. In the case of willful misrepresentation, the administrator may also seek payment of a penalty equal to 50% of the benefits paid because of the misrepresentation.

Under the bill any person, including an employer, who intentionally aids, abets, assists, promotes, or facilitates the making of, or attempt to make a payment claim, or the receipt or attempted receipt of payment by another person in violation of the bill is liable for the same financial penalty as the person who made or tried to make the claim or receive the benefits from the program.

Reports

The bill requires certain regular reports to the program administrator and the legislature.

On or before July 31, 2022, and each following month, and any time the administrator requests, the comptroller must submit a report to the administrator on the premium pay account's current value.

Starting by September 1, 2022, the administrator must submit a quarterly report to the Labor and Public Employees Committee on the account's financial condition. The report must include:

1. an estimate of the account value as of the report's date,
2. the effect of scheduled payments on the account value,
3. an estimate of the monthly administrative costs needed to operate the program and the account, and
4. any recommendations for legislation to improve the program's or account's operation or administration.

Anti-Retaliation

The bill prohibits an employer from (1) discharging or causing to be discharged, disciplining, or discriminating against an employee because he or she applied for premium pay under the bill or (2) deliberately misinforming or dissuading an employee from filing an application.

It also authorizes any employee who was discharged, disciplined, discriminated against, or deliberately misinformed or dissuaded from filing a premium pay application, to bring a civil action in the Superior Court in the district where the employer has its principal office. The action can seek reinstatement to the worker's position, payment of back wages, reestablishment of any lost benefits the employee was otherwise entitled to, and any other damages caused by the discrimination or discharge. The bill specifies that an employee who prevails in a civil action must be awarded reasonable attorney's fees and costs. Under the bill, the court can also award punitive damages.

§§ 145 & 146 — CLIMATE-SMART AGRICULTURE AND FORESTRY PRACTICES

Expands the farmland restoration program's purposes to include climate-smart agriculture and forestry practices; allows DoAg to (1) pay farmers up to 50% of certain grant funds in advance and (2) pay or reimburse certain entities for services designed to increase the number of farmers using climate-smart agriculture and forestry practices

The bill generally expands the farmland restoration program's purposes to include climate-smart agriculture and forestry practices in farmland restoration plans. The matching grant program, which the Department of Agriculture (DoAg) administers, encourages farmers to restore farmland that has gone out of production.

Under the program, the DoAg commissioner may partially reimburse a farmer for the cost to:

1. develop, implement, and comply with a farm resources management plan or a farmland restoration plan, which the bill renames the farmland restoration and climate resiliency plan, that the DoAg commissioner has approved or
2. comply with a comprehensive farm nutrient management plan or a farm resources management plan that the Department of Energy and Environmental Protection (DEEP) commissioner has approved.

The bill also allows the DoAg commissioner to partially reimburse a farmer for the cost to comply with a farmland restoration and climate resiliency plan that the DEEP commissioner has approved.

Additionally, the bill allows the DoAg commissioner to pay up to 50% of the above amounts in advance. It also explicitly allows a farmer to seek this advance payment or reimbursement for farm equipment purchases under a farm resources management or farmland restoration and climate resiliency plan.

The bill requires the DoAg commissioner, when making grants to comply with the various plans approved by DEEP, to prioritize capital improvements made under a farmland restoration and climate resiliency plan, in addition to those made under a comprehensive farm nutrient management plan or farm resources management plan as under current law.

Under the bill, a “farmland restoration and climate resiliency plan” is a conservation plan (1) of the U.S. Department of Agriculture’s (USDA) Natural Resources Conservation Service, (2) of a soil and water conservation district, or (3) that the DoAg commissioner approves. It includes agricultural restoration purposes, which the bill expands to include climate-smart agriculture and forestry practices.

Additionally, the bill authorizes the DoAg commissioner to pay or reimburse certain entities (i.e., a municipality, nonprofit organization, soil and water conservation district, or UConn Extension Services) for a variety of services designed to increase the number of farmers implementing climate-smart agriculture and forestry practices developed or prescribed by USDA. In practice, these include activities that store carbon, improve soil health, and reduce greenhouse gas emissions (e.g., cover crops, prescribed grazing, nutrient management, manure management).

EFFECTIVE DATE: October 1, 2022

Agricultural Restoration Purposes

The bill broadens the term “agricultural restoration purposes” to incorporate climate-smart agriculture and forestry practices, including practices in urban areas, and soil health improvements, water source and water runoff pattern improvements, woodlot management, and

farm equipment purchases intended to improve soil health. “Climate-smart agriculture and forestry practices” includes any practices USDA develops or prescribes under its climate-smart agriculture and forestry strategy. By law, “agricultural restoration purposes” already includes the following:

1. reclaiming grown-over pastures and meadows;
2. installing fences to keep livestock out of riparian areas;
3. replanting vegetation on erosion-prone land or along streams;
4. restoring water runoff patterns;
5. improving irrigation efficiency;
6. conducting hedgerow management, including removing invasive plants and timber; and
7. renovating farm ponds through farm pond management.

The “agricultural restoration purposes” definition also applies to the vacant public lands program. The law authorizes the agriculture commissioner to establish this program to encourage the use of vacant state property for gardening, agricultural purposes, or agricultural restoration purposes (CGS § 22-6e). To date, he has not established this program.

Entities’ Services Payable or Reimbursable

The bill authorizes the DoAg commissioner to pay or reimburse a municipality, nonprofit organization, soil and water conservation district, or UConn Extension Services for any of the following services:

1. providing technical assistance,
2. distributing grant funding to producers,
3. coordinating training programs,
4. coordinating projects piloting or demonstrating conservation

- practices,
5. creating tools that help reduce barriers to accessing help for on-farm conservation practices,
 6. establishing equipment sharing programs, or
 7. other activities that increase the number of farmers implementing climate-smart agriculture and forestry practices.

§ 147 — STROKE REGISTRY

Requires DPH to maintain and operate a stroke registry and establishes a stroke registry data oversight committee within the Legislative Branch to monitor the registry's activities

The bill requires the Department of Public Health (DPH) to maintain and operate a statewide stroke registry. Starting July 1, 2023, stroke centers must submit quarterly data to DPH on stroke care that (1) the commissioner deems necessary to include in the registry and (2) at a minimum, aligns with stroke consensus metrics developed and approved by a nationally-recognized stroke certification body.

The bill also requires DPH to apply privacy and security standards for the registry's data that are consistent with the department's policies for patient data use.

Under the bill, "stroke centers" include comprehensive stroke centers, thrombectomy-capable stroke centers, primary stroke centers, and acute stroke-ready hospitals.

Records Access

Additionally, stroke centers must provide DPH access to their records, as the department deems necessary, to perform case findings or other quality improvement audits to ensure the completeness of the reporting and data accuracy. The bill also allows DPH to (1) enter into reciprocal reporting agreements with other states to exchange stroke care data; (2) enter into a contract for receiving, storing, and maintaining data; and (3) adopt regulations to implement the bill's provisions.

Data Oversight Committee

The bill establishes a stroke registry data oversight committee within

the Legislative Branch. The committee must (1) monitor the registry's operation; (2) provide advice on its oversight; and (3) develop a plan to improve the quality of stroke care, address any disparities in providing this care, and develop related short- and long-term goals for improving care.

Under the bill, committee members include one member each appointed by the six top legislative leaders who serve two-year terms. Appointing authorities must make their appointments by July 1, 2023, and may consult with the Connecticut Stroke Advisory Council when selecting appointees.

The bill requires the House speaker and Senate president pro tempore to each appoint a committee co-chairperson from among the members. The co-chairpersons must schedule the committee's first meeting by August 1, 2023.

Under the bill, the Public Health Committee administrative staff serve in this capacity for the oversight committee.

Additionally, the bill requires DPH to assist the committee in its work and provide any data or information the committee deems necessary to fulfill its duties, unless its disclosure is prohibited by state or federal law.

The bill also requires the stroke registry data oversight committee's co-chairpersons to annually report, starting by January 1, 2024, to the Public Health Committee, DPH commissioner, and Connecticut Stroke Advisory Council on the committee's work.

EFFECTIVE DATE: October 1, 2022

§ 148 — TECHNICAL CORRECTIONS DURING CODIFICATION

Requires the Legislative Commissioners' Office to make necessary technical, grammatical, and punctuation changes when codifying the bill

The bill requires the Legislative Commissioners' Office to make technical, grammatical, and punctuation changes as necessary to codify the bill, including internal reference corrections.

EFFECTIVE DATE: Upon passage

§§ 149-153 — LEAD POISONING PREVENTION AND TREATMENT

Generally lowers the threshold for blood lead levels in individuals at which DPH and local health departments must take certain actions; requires primary care providers to conduct annual lead testing for certain high-risk children ages 36 to 72 months; requires DSS to seek federal approval to amend the state Medicaid plan to add services to address the health impacts of high childhood blood lead levels in Medicaid-eligible children; and requires the DPH commissioner to convene a working group to recommend necessary legislative changes on various lead poisoning prevention and treatment issues

The bill generally lowers the threshold for blood lead levels in individuals at which the Department of Public Health (DPH) and local health departments must take certain actions. Principally, it:

1. lowers, from 10 to 3.5 micrograms per deciliter ($\mu\text{g}/\text{dL}$), the threshold at which licensed health care institutions and clinical laboratories must report lead poisoning cases to DPH and local health departments;
2. lowers, from 5 to 3.5 $\mu\text{g}/\text{dL}$, the threshold at which local health directors must inform parents or guardians about (a) a child's potential eligibility for the state's Birth-to-Three program and (b) lead poisoning dangers, ways to reduce risk, and lead abatement laws;
3. incrementally lowers, from 20 to 5 $\mu\text{g}/\text{dL}$, the threshold for local health departments to conduct epidemiological investigations of the source of a person's lead poisoning; and
4. incrementally lowers, from 20 to 5 $\mu\text{g}/\text{dL}$, the threshold at which local health directors must conduct on-site inspections and remediation for children with lead poisoning until December 31, 2024.

Additionally, the bill requires primary care providers to conduct annual lead testing for children ages 36 to 72 months whom DPH determines to be at higher risk of lead exposure based on certain factors.

It also requires the Department of Social Services (DSS) commissioner to seek federal approval to amend the state Medicaid plan to add

services she deems necessary to address the health impacts of high childhood blood lead levels in Medicaid-eligible children.

Lastly, the bill requires the DPH commissioner to convene a working group to recommend necessary legislative changes on various lead poisoning prevention and treatment issues. The commissioner must report the working group's recommendations to the Appropriations, Education, and Public Health committees by December 1, 2022.

The bill also makes technical and conforming changes.

EFFECTIVE DATE: January 1, 2023, except the lead poisoning prevention and treatment working group provision is effective upon passage.

Reporting Blood Lead Levels (§ 149)

By law, licensed health care institutions and clinical laboratories must report to DPH and local health departments within 48 hours after receiving or completing a report of a person with blood lead levels that meet a specified threshold. The bill lowers the threshold amount from 10 to 3.5 µg/dL.

Providing Information to Affected Parents and Guardians (§ 149)

By law, local health directors must inform parents or guardians about (1) a child's potential eligibility for the state's Birth-to-Three program and (2) lead poisoning dangers, ways to reduce risks, and lead abatement laws. Under current law, directors must provide the information:

1. after receiving a report from a clinical laboratory or health care institution that a child has been tested with a blood lead level of at least 10 µg/dL, or any other abnormal body lead level, or
2. when a child is known to have a confirmed venous blood lead level of at least 5 µg/dL.

The bill lowers these threshold amounts to 3.5 µg/dL.

Existing law, unchanged by the bill, requires the local health director

to provide the information to the parent or guardian only once, after the director receives the initial report.

On-Site Inspections and Remediation (§ 149)

Current law requires local health directors to conduct on-site inspections and remediation for children with lead poisoning if:

1. one percent or more of Connecticut children under age six have reported blood levels of at least 10 µg/dL (directors must take these actions for children who meet this threshold in two tests taken at least two months apart) or
2. a child has a confirmed venous blood level of 15 to 20 µg/dL in two tests taken at least three months apart.

The bill eliminates the first requirement and lowers the threshold for the second requirement to between (1) 10 and 15 ug/dL before January 1, 2024, and (2) 5 and 10 ug/dL from January 1, 2024, to December 31, 2024. (It appears that these inspections and remediation stop after this date, but the required epidemiological investigation and related actions continue; see below.)

Epidemiological Investigations (§ 150)

By law, if a local health director receives a report that a person’s blood lead level exceeds a certain threshold, the director must conduct an epidemiological investigation of the lead source. The bill lowers the threshold amount as follows:

1. from 20 to 15 µg/dL from January 1, 2023, to December 31, 2023;
2. from 15 to 10 µg/dL from January 1, 2024, to December 31, 2024;
and
3. from 10 to 5 µg/dL starting January 1, 2025.

Existing law, unchanged by the bill, requires the director to then take action necessary to prevent further lead poisoning, including ordering abatement and trying to find temporary housing for residents when the lead hazard cannot be removed from their dwelling within a reasonable

time.

The bill specifies that the law does not prohibit a local health director from conducting an epidemiological investigation in cases of blood lead levels lower than the minimum amounts listed above.

Primary Care Provider Testing (§ 151)

The bill requires primary care providers who provide pediatric care, other than hospital emergency departments, to conduct annual lead testing for children ages 36 to 72 months whom DPH determines to be at an elevated risk of lead exposure based on their enrollment in HUSKY or residence in a municipality with an elevated risk of lead exposure. Under the bill, DPH makes this determination of higher-risk municipalities based on factors such as the prevalence of (1) housing built before January 1, 1960, or (2) children with blood lead levels greater than 5 ug/dL.

Existing law, unchanged by the bill, already requires primary care providers to perform lead testing on (1) all children ages 9 to 35 months, in accordance with the Advisory Committee on Childhood Lead Poisoning Prevention recommendations, (2) all children ages 36 to 72 months who have never been screened, and (3) any child under 72 months if the provider determines it is clinically indicated under the advisory committee's recommendations.

Medicaid State Plan Amendment (§ 152)

The bill requires the DSS commissioner to seek federal authority to amend the state Medicaid plan to add services she determines are necessary and appropriate to address the health impacts of high childhood blood lead levels in those eligible for Medicaid. She must do this within available appropriations and to the extent federal law allows.

Under the bill, these additional services may include case management, lead remediation, follow-up screenings, referrals to other available services, and other Medicaid-covered services the commissioner deems necessary.

In determining which services to add to the Medicaid program, the

bill requires the commissioner to coordinate them with the services already covered under the program.

Lead Poisoning Prevention and Treatment Working Group (§ 153)

The bill requires the DPH commissioner to convene a working group to recommend necessary legislative changes on the following:

1. lead screening for pregnant women or those planning pregnancy,
2. lead in schools and child care centers,
3. reporting lead test results or lead screening assessments to schools and child care centers in health assessments for new students,
4. reporting additional data from blood lead test laboratories and providers to DPH, and
5. any other lead poisoning prevention and treatment matters.

Working Group Members (§ 153)

Under the bill, the working group's members include the DPH and DSS commissioners and the Office of Policy and Management secretary, or their designees. It also includes the following members appointed by the DPH commissioner:

1. at least four individuals who are (a) medical professionals providing pediatric health care, (b) active in the public health and lead prevention field, or (c) from a community disproportionately impacted by lead;
2. two representatives of an association of health directors in the state;
3. one representative of a conference of municipalities in the state; and
4. one representative of a council of small towns in the state.

The bill requires the DPH commissioner to make her appointments

within 30 days after the bill's passage. When doing so, she must use her best efforts to select members who reflect the racial, gender, and geographic diversity of the state's population.

Working Group Report (§ 153)

The bill requires the DPH commissioner to report to the Appropriations, Education, and Public Health committees on the working group's recommendations by December 1, 2022. The working group terminates on the date the commissioner submits the report.

Background — Centers for Disease Control and Prevention (CDC) Recommendation

In October 2021, the CDC updated its recommendations on children's blood lead levels, defining 3.5 µg/dL, instead of 5 µg/dL, as an elevated blood lead level.

§ 154 — SMALL BUSINESS EXPRESS PROGRAM

Allows DECD to contract with nongovernmental entities in carrying out the Small Business Express program

The bill specifically allows the DECD commissioner to contract with nongovernmental entities in carrying out the Small Business Express program. These entities may include nonprofits, economic and community development organizations, lending institutions, and technical assistance providers.

EFFECTIVE DATE: Upon passage

§ 155 — ECONOMIC ACTION PLAN IMPLEMENTATION AND FUNDING

Allows DECD to establish two new programs through which the department may distribute certain funding for projects consistent with the purposes of the state's Economic Action Plan

Current law allows the DECD commissioner, for FYs 22 to 24 and in coordination with the OPM secretary, to use bond funds, American Rescue Plan Act of 2021 (ARPA) funding, and other available resources to provide the following:

1. up to \$100 million in grants for "major projects" consistent with the state's EAP, which the department may distribute by

developing and issuing requests for proposals (RFPs); and

2. matching grants of up to \$10 million each for these selected major projects, which the department may distribute through a competitive matching grant program (without specifying whether these grants count towards the \$100 million cap).

The bill makes changes to the mechanisms described above by which DECD may allocate funding for major projects. (These changes generally conform to the department's current practices.)

Specifically, the bill allows the department to establish the following:

1. an Innovation Corridor program to provide grants for major projects, which replaces the existing RFP process, and
2. the Connecticut Communities Challenge program to provide community development grants, which replaces the existing matching grant program for selected projects.

The bill requires the department, under both programs, to develop a competitive application process and criteria consistent with the EAP's purposes to evaluate applications and select projects for funding.

The bill caps the new programs' combined funding at \$200 million, including (1) up to \$100 million for grants under the Innovation Corridor program and (2) up to \$100 million for grants under the Connecticut Communities Challenge program. As under current law, these grants may be funded through bonds, ARPA funds, and any other available resources.

EFFECTIVE DATE: Upon passage

§ 156 — ALLOWABLE USES OF HISTORIC REHABILITATION TAX CREDIT PROGRAM FEES

Expands the allowable uses of application fees DECD receives through the Historic Rehabilitation Tax Credit program

The bill expands the allowable uses of application fees DECD receives through the Historic Rehabilitation Tax Credit program to include

funding programs that advance historic preservation in the state. Current law limits the use of these fees solely to program administration costs.

EFFECTIVE DATE: Upon passage

§ 157 — DECD TECHNICAL CHANGE

Makes a technical change to a DECD reporting requirement

The bill makes a technical change to a DECD reporting requirement.

EFFECTIVE DATE: October 1, 2022

§ 158 — STUDY ON EXTENDING R&D TAX CREDIT TO PASS-THROUGH ENTITIES

Requires the DECD commissioner to study extending the research and development tax credit to pass-through entities

The bill requires the DECD commissioner to (1) study, in consultation with the revenue services commissioner, extending the research and development tax credit to pass-through entities and (2) report on the study to the Commerce Committee by January 1, 2023.

EFFECTIVE DATE: Upon passage

§ 159 — RELEASE-BASED REMEDIATION DRAFT REGULATIONS

Requires the DEEP commissioner to provide to members of an advisory working group specified draft regulations for a release-based remediation program before they are adopted, amended, or repealed

The bill requires the DEEP commissioner, at least 60 days before she posts a notice of intent on the eRegulations System to adopt, amend, or repeal regulations to carry out a release-based remediation program, to provide a draft of the regulations to members of an existing advisory working group and allow the group to provide advice and feedback (see *Background*). The group must do so within 30 days after receiving the draft.

The bill also requires the DEEP commissioner to convene at least one monthly meeting of the group at least 15 days before she posts the eRegulations notice and after she provides the draft regulations. Additionally, she must provide a revised draft for the members' review

before posting the notice.

EFFECTIVE DATE: Upon passage

Background — Release-Based Remediation Advisory Group

Existing law transitions the state from its transfer-based approach to property remediation (i.e., the “Transfer Act”) to a release-based approach (CGS § 22a-134pp et seq.). The release-based approach becomes effective when the DEEP commissioner adopts regulations for the program (e.g., establishing release reporting requirements and remediation standards).

By law, a working group within DEEP must provide advice and feedback on the regulations to be adopted. It is co-chaired by the DEEP and economic and community development commissioners, or their designees, and includes (1) the chairpersons and ranking members of the Environment and Commerce committees, (2) representatives of specified professions and groups (e.g., environmental transaction attorneys), and (3) any other members of the public the DEEP commissioner designates.

§ 160 — MODEL STUDENT WORK RELEASE POLICY

Requires the Office of Workforce Strategy’s chief workforce officer to develop a model student work release policy by July 1, 2023, and all boards of education to adopt it.

The bill requires the Office of Workforce Strategy’s chief workforce officer, in consultation with the education commissioner, the Technical Education and Career System’s executive director, and the DOL commissioner, to develop a model student work release policy by July 1, 2023. She must report on the policy by this date to the Commerce, Education, and Labor and Public Employees committees.

The bill allows the chief workforce officer to update the policy as needed and requires her to notify each local and regional board of education about an update. The bill requires boards of education, for the 2024-25 school year and all following school years, to adopt the model student work release policy or the most recently updated version of it.

EFFECTIVE DATE: Upon passage

§ 161 — CANCELLATION OF UNCOLLECTIBLE CLAIMS

Raises the maximum threshold of an uncollectable claim that a state department or agency head may cancel from \$1,000 to \$5,000

The bill raises, from \$1,000 to \$5,000, the maximum uncollectible claim that may be canceled for a state department or agency by the head of the entity. Correspondingly, it raises the minimum threshold for uncollectible claims that may be cancelled by the Office of Policy and Management secretary for any state department or agency.

EFFECTIVE DATE: Upon passage

§ 162 — DELETED BY HOUSE “C”

§ 163 — REDEMPTION CENTER GRANTS

Allows beverage container recycling grant program funds to be used for expanding redemption centers and eliminates the \$150,000 cap on awarded grant funds

The bill expands the availability of grants under the beverage container recycling grant program in two ways.

Specifically, the bill (1) allows grant funds to be used for expanding beverage container redemption centers, instead of only for new centers and (2) eliminates the \$150,000 cap on awarded grant funds. It also removes the requirement that grants are awarded on a rolling basis.

By law, the program provides forgivable grants for beverage container redemption centers in urban centers and environmental justice communities lacking access to redemption locations. The grants may be used for initial operating expenses, infrastructure, technology, and other costs associated with a redemption center.

EFFECTIVE DATE: July 1, 2022

§§ 164-168 — CLASS II RPS & SUSTAINABLE MATERIALS MANAGEMENT ACCOUNT

Starting in 2023, limits the Class II RPS requirement to only Class II renewable energy sources; requires that the penalties for failing to meet the Class II requirement be used to fund a DEEP-administered sustainable materials management program

In general, the state’s Renewable Portfolio Standard (RPS) requires a portion of the power supplied to electric ratepayers to come from certain renewable energy sources. Starting on January 1, 2023, the bill limits the

Class II RPS requirement to only Class II renewable energy sources (i.e., trash to energy facilities). Under current law, both Class I (e.g., wind and solar) and Class II renewables may be used to meet the Class II requirement.

Starting on that same date, the bill also requires that the alternative compliance payments for failing to meet the Class II requirement be deposited into a sustainable materials management account established by the bill, rather than be refunded to ratepayers as current law requires. It requires the Department of Energy and Environmental Protection (DEEP) commissioner to establish and administer a sustainable materials management program to support solid waste reduction in the state using funds from the account.

Lastly, the bill makes a technical change to fix an incorrect statutory reference (§ 167).

EFFECTIVE DATE: October 1, 2022

Class II RPS (§§ 164-166)

Under the state's current RPS law, electric distribution companies (EDCs, i.e., Eversource and United Illuminating) and electric suppliers must get 4% of their energy from either Class I or Class II renewable energy sources. Beginning January 1, 2023, the bill requires the EDCs and suppliers to meet this 4% requirement with only Class II energy sources.

By law, unchanged by the bill, the 4% requirement is in addition to the Class I RPS requirement. The Class I RPS is 24% in 2022 and increases annually until it reaches 40% in 2030.

Alternative Compliance Payments. By law, if an EDC or electric supplier fails to meet the Class II RPS requirement, it must make a 2.5 cent per kilowatt hour alternative compliance payment (ACP) for the shortfall. Current law requires that the ACP be refunded to ratepayers, but starting January 1, 2023, the bill instead requires that it be deposited in the sustainable materials management account created by the bill.

Sustainable Materials Management Account & Program (§ 168)

The bill establishes the sustainable materials management account as separate, nonlapsing account in the General Fund. The account must contain money collected by the Class II ACP, as described above, and the DEEP commissioner must spend it for the Sustainable Materials Management Program's purposes.

Starting January 1, 2023, the bill requires the DEEP commissioner to establish and administer the Sustainable Materials Management Program to support solid waste reduction in the state. It must do so by providing funding from the account for programs and projects that promote affordable, sustainable, and self-sufficient waste management in the state by reducing solid waste generation or diverting it from disposal, consistent with the state's solid waste management plan. The funding may be used for grants, revolving loans, technical assistance, consulting services, and waste characterization studies that support those programs and projects implemented by entities that include municipalities, nonprofits, and regional waste authorities.

The bill requires DEEP, starting by January 1, 2024, to annually submit a report to the Environment and Energy and Technology committees. The report must detail the expenditures of any funds disbursed from the account and the outcomes associated with those expenditures.

§ 169 — RENTSCHLER FIELD ANNUAL BUDGET REPORTING REQUIREMENT

Eliminates current OPM reporting requirements for Rentschler Field's annual budget

Current law requires the OPM secretary to prepare for each fiscal year an annual operating and capital budget for the Rentschler Field facility and submit it to the comptroller at least 90 days before the start of the fiscal year. Additionally, it requires (1) the comptroller to submit comments on this budget to the secretary within 45 days after its submission and (2) the secretary to subsequently submit a copy of the budget to the Appropriations and Finance, Revenue, and Bonding committees. The bill eliminates these reporting requirements.

EFFECTIVE DATE: Upon passage

§ 170 — PURCHASE OF ENERGY PRODUCTION PLANT

Authorizes the administrative services commissioner to purchase the energy production plant that produces and provides steam and heated and chilled water for the Capitol Area System (CAS)

The bill authorizes the administrative services commissioner to purchase the energy production plant that produces and provides steam and heated and chilled water for the Capitol Area System (CAS). The bill makes conforming changes to give the commissioner broad authority to operate the plant, similar to her powers regarding the CAS. These powers include recouping the costs of acquiring and operating the plant from the state and non-state entities the CAS serves, as described below.

Under an agreement that expires September 30, 2022, CAS purchases the steam and heated and chilled water from the Capitol District Energy Center Cogeneration Associates (CDECCA) energy production plant.

Energy Plant Acquisition

The bill authorizes the commissioner to (1) assume all supplier agreements and vendor, customer, and third-party contracts related to CAS, and (2) as necessary to carry out the bill and the purchase and sale agreement (a) perform and undertake any obligation and (b) enter any agreement to accomplish any transaction.

The bill specifies that it does not (1) waive sovereign immunity other than terms specified in the agreement and (2) limit the state from changing how the plant is used if purchased, including its capacity, in the future.

The bill also broadly authorizes the commissioner to construct or acquire energy production plants in Hartford to provide heating and air conditioning through CAS. (But most of the bill's conforming changes to the commissioner's authority specifically address the power plant owned by CDECCA Property Company, LLC, at 490 Capitol Avenue.)

Rate Setting and Expenses

By law, the commissioner must periodically bill and collect CAS costs from state agencies and owners of non-state buildings using the CAS. The bill, if the agreement is finalized, authorizes the commissioner to collect from these entities a pro-rata share of the acquisition, operating, maintenance, and repair costs related to the plant, including the legal and consultant costs for acquiring the plant.

Under existing law, unchanged by the bill, the commissioner must submit her proposed rates and rate-setting methods to the Office of Policy and Management secretary for approval, who must approve or disapprove the method or rate within 45 days.

Except for charges recouping the power plant's acquisition costs, which must be deposited into the General Fund, collected charges are deposited into the public works heating and cooling energy revolving account. The bill, if the agreement is finalized, correspondingly expands the purposes for which the commissioner may use the account to pay for the plant's operational, maintenance, repair, and improvement expenses.

EFFECTIVE DATE: Upon passage

Background — Capitol Area System

The Capitol Area District Heating and Cooling System, referred to as CAS, is a state-owned thermal energy supply system. The system has two closed-loop distribution systems (heated water and chilled water) and a pump house. The loop consists of over three miles of underground piping. CAS supplies heating and cooling services to ten state-owned and five privately owned buildings in the Capitol District.

§§ 171 & 172 — STATE EMPLOYEE HEALTH PLAN DEPENDENT COVERAGE

Requires certain health insurance coverage for children, stepchildren, or other dependent children of state or nonstate public employees to continue until at least the end of the calendar year after the earlier of when they (1) obtained coverage through their own employment or (2) turn age 26

By law, the comptroller provides or procures health insurance for state employees, nonstate public employees (e.g., municipal employees or employees of local boards of educations or public libraries), and

certain other eligible beneficiaries.

The bill requires coverage for children, stepchildren, or other dependent children of covered state employees or nonstate public employees to continue until at least the end of the calendar year after the earlier of when they (1) obtained coverage through their own employment or (2) turn age 26.

Existing law generally requires fully insured health, dental, and vision insurance coverage to extend through the policy year after a dependent turns age 26. (Since health insurance coverage procured or provided through the comptroller is self-insured, in practice the bill applies to the fully insured dental plans the comptroller procures.)

The bill applies to individual and group policies delivered, issued, amended, or renewed on or after July 1, 2022. However, in practice, the comptroller does not issue individual plans to these employees.

EFFECTIVE DATE: July 1, 2022

§§ 173-193 — VARIOUS CHANGES TO TEACHERS' RETIREMENT SYSTEM (TRS)

Makes various changes to the TRS statutes including narrowing the definition of teacher; increases the TRS monthly health insurance subsidy to boards of education for retirees and their spouses meeting certain conditions; changes the general TRS subsidy to boards of education

The bill makes various changes to the statutes governing the Teachers' Retirement System (TRS). They include, among other things, modifying the definition of teacher, addressing the benefit administration, and creating new employer reporting requirements. It also makes numerous changes that codify current practices and make other minor, technical, and conforming changes.

Definition of Teacher (§ 173)

The bill changes the definition of teacher and by doing so narrows who can be a member of the TRS. Under current law, the definition includes: teacher, permanent substitute teacher, principal, assistant principal, supervisor, assistant superintendent, or superintendent who works for a public school and holds a State Board of Education (SBE)

professional certificate. The bill excludes school business administrators who hold a certificate with an administration endorsement.

Under current law, a professional employee of the State Education Resource Center (SERC), a quasi-public agency that was once part of the State Department of Education (SDE), who holds an SBE-issued certificate or permit is included under “teacher.” The bill limits this to only those hired before July 1, 2022.

Under current law, TRS members include professional staff of the SBE, the Office of Early Childhood, and the Board of Regents for Higher Education or any of the constituent units. The bill specifies they must also be employed in an educational role. The bill defines this, as well as “educational capacity,” as having duties and responsibilities that would require a state certification if performed in a public school.

The bill adds Connecticut Technical Education and Career System (CTECS) professional staff and UConn faculty members if they are employed in an educational role. CTECS professional staff can already be in TRS as part of SDE, but CTECS is in the process of becoming an independent state agency.

Under current law, certified staff who provide health and welfare services to children in a nonprofit private school can be members, as long as most of the students at the school are from Connecticut. The bill limits this to only those hired before July 1, 2022.

The bill changes the definition of “permanent substitute teacher” from someone who serves for at least 10 months during any school year to someone who has the same assignment for an entire school year.

Lump Sum and Annuity Payments (§ 176)

By law, TRS retirees are entitled to certain lump sum payments in addition to their monthly pension payment. Under current law, the lump sum equals the member’s accumulated 1% contributions withheld before July 1, 1989, plus interest. The bill also makes the lump sum include any voluntary contributions the retiree made, plus interest. As under existing law, a member may choose to have an actuarially

equivalent annuity for life rather than a lump sum.

Under the bill, the lump sum must be paid within three months after (1) the effective date of retirement or (2) the date of the first payment for a TRS disability allowance. However, the bill also allows the board to delay paying the lump sum in extenuating circumstances. In the case of a delay due to extenuating circumstances, the board must provide written notice to the member explaining the extenuating circumstances causing the delay and an estimated time when the board expects to make the payment.

Employer and Member Responsibilities (§ 180)

Under existing law, a member's employer must deduct the member's required contributions toward his or her retirement and forward them to the TRS. Under the bill, if an employer does not deduct the monthly amount from the member's salary for the contribution, the member must remit the amount to the TRS board. A member who fails to remit the amount to the board will not receive the annual salary rate credit for the amount of the missed payment.

Retiree Health Insurance Subsidy Program Quarterly Reports (§ 182)

The bill creates a new reporting requirement related to the health insurance subsidy program for retirees. Under the bill, by the first business day of February, May, August, and November of each year, each employer must submit to the TRS board, in a format the board requires, any information the board determines to be necessary concerning additions, deletions, and premium changes for the health insurance subsidy program. The program provides a subsidy for retired teachers who choose to stay on their former employer's health care plan.

Any report the board receives after the due date must be processed in the following quarterly cycle. An employer's failure to submit a quarterly report on time must delay the subsidy for that quarter and the board must pay it retroactively.

The bill limits retroactive subsidy payments to six months before the first day of the month in which the board receives the late report that

includes newly eligible retired members or dependents.

In the case of a disability, the board must pay the subsidy retroactively to the effective date of the disability, as long as (1) any eligible members or dependents are added to the report by the first quarter after the board approved the disability and (2) the member's disability allowance starts within four months after the board's approval. Also the bill requires the employer to hold any member or dependents harmless for any costs associated with, arising from or out of, losing the subsidy benefit due to the employer's untimely or inaccurate filing of the quarterly report.

EFFECTIVE DATE: July 1, 2022

TRS Subsidy to Local Retiree Health Plans (§ 183)

The bill increases, from \$220 to \$440 per person, the monthly health insurance subsidy under the Teachers' Retirement System (TRS) for certain retired teachers, and their spouses or surviving spouses or disabled dependents, who receive health insurance coverage from the retiree's last employing board of education. The TRS pays the subsidy on behalf of the covered individual to the board of education.

The bill similarly increases, from \$220 to \$440, the amount that the covered individual must contribute toward his or her medical and prescription drug plan provided by the board of education to qualify for the subsidy. As under existing law, he or she must also (1) be normal age to participate in Medicare (currently, age 65); (2) not be eligible for Part A of Medicare without cost; and (3) pay the difference between the subsidy and the premium cost.

The bill also changes the general subsidy that the TRS pays to local boards of education (or the state, if applicable) on behalf of retirees, spouses or surviving spouses, or disabled dependents who receive health coverage from the board or the state but who do not meet the above criteria. It requires TRS to pay a subsidy of \$220 per covered individual (the bill does not indicate how often the subsidy is paid, but presumably it is monthly). Under current law, the TRS must pay a

subsidy equal to the subsidy amount paid in FY 00 (in practice, \$110 per month per covered individual).

EFFECTIVE DATE: July 1, 2022

§ 194 — PCA CONTRACT APPROVAL

Approves the memorandum of agreement between the PCA Workforce Council and the New England Health Care Employees Union, District 1199, SEIU

The bill legislatively approves the memorandum of agreement between the PCA Workforce Council and the New England Health Care Employees Union, District 1199, SEIU. It also approves any attachments or appendices to the agreement, and any provisions that supersede a state law or regulation. The agreement was submitted to the legislature for approval on April 20, 2022, as required by the law that allows personal care attendants (PCAs) working through certain state-funded programs to collectively bargain with the state.

EFFECTIVE DATE: Upon passage

§ 195 — PAID FAMILY MEDICAL LEAVE ANTI-RETALIATION

Prohibits employers from taking certain retaliatory actions against employees under the state's Paid Family and Medical Leave law.

The bill makes it a violation of the state's paid family and medical leave law (PFML) for an employer to:

1. interfere with, restrain, or deny the exercise of, or the attempt to exercise, any right provided by the PFML or
2. discharge or cause to be discharged, or in any other way discriminate against someone for (a) opposing any practice made unlawful by the PFML or (b) exercising the rights afforded to an employee under the PFML.

It similarly makes it a violation of the PFML for any person to discharge or cause to be discharged, or in any other way discriminate against any individual because the individual:

1. filed a charge, or instituted or caused to be instituted any proceeding, under or related to the PFML;

2. gave, or is about to give, any information in connection with any inquiry or proceeding relating to any right provided under the PFML; or
3. testified, or is about to testify, in any such inquiry or proceeding.

Existing law, unchanged by the bill, similarly makes these same actions violations of the state’s Family and Medical Leave Act and the family and medical leave law for state employees. As with these other violations, an employee aggrieved by a violation of these provisions involving the PFML may file a complaint with the labor commissioner under the same procedures. An employee may also sue the employer without first having to file an administrative complaint.

EFFECTIVE DATE: July 1, 2022

§ 196 — DELETED BY HOUSE “C”

§ 197 — REPRODUCTIVE HEALTH CARE SERVICES DEFINITION

Expands the definition of “reproductive health care services” in a recently passed bill to include gender dysphoria treatments

The bill expands the definition of “reproductive health care services” in HB 5414, as amended by House “A” and passed in concurrence by both chambers, to include medical care relating to gender dysphoria treatments. In doing so, it extends to gender dysphoria treatments that bill’s protections for reproductive health care services, including (1) a cause of action for persons against whom there is an out-of-state judgement based on them and (2) limitations on the assistance officers of Connecticut courts, public agencies, and certain health care providers may provide in out-of-state judicial actions related to them.

HB 5414, as amended, currently defines “reproductive health care services” to include all medical, surgical, counseling, or referral services related to the human reproductive system, such as pregnancy, contraception, or pregnancy termination.

EFFECTIVE DATE: July 1, 2022

§§ 198 & 199 — TOBACCO SETTLEMENT FUND AND TOBACCO AND HEALTH TRUST FUND

Annually redirects \$12 million of Tobacco Settlement Fund proceeds from the General Fund to the Tobacco and Health Trust Fund and makes certain changes to the Tobacco and Health Trust Fund's legislative reports

Starting in FY 23, the bill annually redirects \$12 million of Tobacco Settlement Fund proceeds from the General Fund to the Tobacco and Health Trust Fund. Under current law, the entire annual disbursement from the Tobacco Settlement Fund goes to the General Fund.

The bill requires that the Tobacco and Health Trust Fund's board recommend disbursements to programs for the fund's statutory purposes (i.e., tobacco use prevention, education, and cessation; substance abuse reduction; and unmet physical and mental health needs of the state). Under the bill, these disbursements must be the full amount of any money received from the Tobacco Settlement Fund for that year (i.e., \$12 million). Under current law, the disbursements are discretionary, and could be up to \$12 million.

Current law requires the Tobacco and Health Trust Fund's board of trustees to report to the legislature on certain matters in any year in which the fund receives deposits from the Tobacco Settlement fund. The bill (1) instead requires the board to report every two years to the Public Health and Appropriations committees and (2) adds to the report's required topics an accounting of any unexpended amount in the fund. Under existing law, the report must include (1) the fund's disbursements and other expenditures, (2) an evaluation of the programs being funded, and (3) the criteria and application process used to select programs for funding.

The bill also makes related technical and conforming changes, including eliminating obsolete language related to certain tobacco grants.

EFFECTIVE DATE: July 1, 2022

§ 200 — ID CHECKS FOR TOBACCO SALES

Explicitly requires sellers, or their agents or employees, to request that each person intending to purchase cigarettes or tobacco products present a driver's license or identity card to establish that the person is at least 21 years old

Existing law (1) prohibits the sale of cigarettes or tobacco products to

people under age 21 and (2) allows sellers, or their agents or employees, to perform a transaction scan to check the validity of a prospective purchaser's driver's license or identity card as a condition of sale.

The bill explicitly requires sellers, or their agents or employees, to request that each person intending to purchase cigarettes or tobacco products present a driver's license or identity card to verify they are at least 21 years old.

EFFECTIVE DATE: July 1, 2022

§ 201 — DAS REPORT ON STATE AGENCY VACANCIES AND HIRING

Requires DAS to report monthly during FY 23 on the number of vacancies, new hires, and refused employment offers for each state agency

The bill requires DAS, by the 15th day of each month during FY 23, to report to the Appropriations Committee on the number of (1) vacant positions in each state agency, (2) people each agency hired during the previous month, and (3) people who refused an employment offer by each agency in the previous month.

EFFECTIVE DATE: Upon passage

§§ 202-206 — PSYCHEDELIC-ASSISTED THERAPY

Establishes (1) a Psychedelic-Assisted Therapy Pilot Program at the Connecticut Mental Health Center, (2) a fund to administer program grants, and (3) an 11-member advisory board within DMHAS to advise the department on various issues related to this therapy; makes related changes to the potential rescheduling of certain psychedelic substances

The bill establishes a Psychedelic-Assisted Therapy Pilot Program at the Connecticut Mental Health Center (CMHC), within available appropriations, to provide qualified patients with funding needed to receive MDMA (i.e., "Molly" or "ecstasy") -assisted or psilocybin-assisted therapy (hereinafter "psychedelic-assisted therapy") as part of a U.S. Food and Drug Administration (FDA)-approved expanded access program. The pilot program ends when the U.S. Drug Enforcement Administration (DEA) approves MDMA and psilocybin for medical use. (MDMA is a synthetic psychoactive drug and psilocybin occurs naturally in some mushrooms. Both act as serotonin receptor agonists and MDMA also acts as a reuptake inhibitor of serotonin and

dopamine.)

Under the bill, “qualified patients” include Connecticut residents who are veterans, retired first responders, or direct health care workers.

Additionally, the bill:

1. establishes, within available appropriations, a Qualified Patients for Approved Treatment Sites Fund (PAT Fund) administered by CMHC to give grants to certain qualified providers to provide psychedelic-assisted therapy under the pilot program;
2. establishes an 11-member Connecticut Psychedelic Treatment Advisory Board within DMHAS to advise the department on various issues related to psychedelic-assisted therapy;
3. requires the Department of Consumer Protection (DCP) to adopt DEA’s controlled substances schedule for MDMA and psilocybin if DEA approves them for medical use and either reclassifies or un-schedules them; and
4. requires DCP to consider adopting nonbinding federal guidelines on psychedelic-assisted therapy and allow for written comments from the advisory board and the public.

The bill also makes technical and conforming changes.

EFFECTIVE DATE: July 1, 2022

PAT Fund

Starting in FY 23, the bill permits (1) any federal block grant funds allocated to CMHC to be deposited in the PAT Fund and (2) CMHC to accept public or private contributions to the fund.

The bill requires CMHC to use PAT funds to provide grants to qualified applicants to provide psychedelic-assisted therapy to qualified patients under the pilot program.

Under the bill, “qualified applicants” are mental or behavioral health

services providers approved by the FDA as an approved treatment site with an expanded access protocol that allows the provider to access an investigational drug for treatment use, including emergency use.

Advisory Board Duties

The bill establishes an 11-member Connecticut Psychedelic Treatment Advisory Board to advise DMHAS on the design and development of the necessary regulations and infrastructure to safely allow for therapeutic access to psychedelic-assisted therapy if MDMA, psilocybin, and any other psychedelic compounds are legalized.

Specifically, the advisory board must:

1. review and consider data from the psychedelic-assisted therapy pilot program to inform the development of the regulations;
2. advise DMHAS on necessary education, training, licensing, and credentialing of therapists and facilitators; patient safety and harm reduction; establishing equity measures in clinical and therapeutic settings; cost and insurance reimbursement considerations; and treatment facility standards;
3. advise DMHAS on using group therapy and other therapy options to reduce cost and maximize public health benefits from psychedelic treatments;
4. monitor updated federal regulations and guidelines for referral and consideration by the state agencies of cognizance for implementing them;
5. develop a long-term strategic plan to improve mental health care through psychedelic treatment;
6. recommend equity measures for clinical subject recruitment and facilitator training recruitment; and
7. help develop public awareness and education campaigns.

Advisory Board Membership

Under the bill, advisory board members include:

1. two members each appointed by the Senate president pro tempore and House speaker;
2. one member each appointed by the House and Senate minority leaders;
3. two members appointed by the governor; and
4. one member each appointed by the consumer protection, mental health and addiction services, and public health commissioners.

The bill requires the advisory board to include members with experience or expertise in psychedelic research, psychedelic-assisted therapy, public health, access to mental and behavioral health care in underserved communities, veterans' mental and behavioral health care, harm reduction, and sacramental use of psychedelics.

Advisory Board Leadership and Administrative Staff

The bill requires the Senate president pro tempore and House speaker to select the advisory board chairpersons from among its members. The chairpersons must oversee establishing and making recommendations on the board's voting procedures.

The bill allows the board to have committees and subcommittees if they are needed for its operation.

Under the bill, the General Law Committee administrative staff serve as the advisory board's administrative staff, with assistance from the Office of Legislative Research and Office of Fiscal Analysis, if needed.

Federal Guidelines on Psychedelic-Assisted Therapy

The bill requires DCP to consider adopting any nonbinding U.S. Department of Health and Human Services guidelines on the practice of psychedelic-assisted therapy.

It permits the Connecticut Psychedelic Treatment Advisory Board and the public to submit written comments to DCP during a notice and

comment period the department establishes on (1) adopting the guidelines and (2) any suggested changes to them to better meet state residents' needs.

The bill requires DCP to post the procedures and deadline to submit written comments during the notice and comment period on its website.

§ 207 — ESSENTIAL WORKERS COVID-19 ASSISTANCE PROGRAM

Expands the program to cover a broader range of essential workers and extends the application deadline; makes various changes to how the program's benefits must be determined and administered

The bill expands the Essential Workers COVID-19 Assistance Program to cover a broader range of essential employees and extends the deadline to apply for the program's benefits from July 20, 2022, to December 31, 2022. By law, the program provides benefits for uncompensated leave, out-of-pocket medical expenses, and burial expenses to certain essential employees who could not work between March 10, 2020, and July 20, 2021, due to contracting COVID-19, or symptoms that were later diagnosed as COVID-19.

The bill also changes how the program's benefits must be determined and administered by generally (1) requiring a claimant's benefits for uncompensated leave to be reduced by the amount of any employer-provided paid leave the claimant received for the same time; (2) allowing the program to pay a claimant benefits for one type of claim (e.g., uncompensated leave) while a claim for a different type of benefits (e.g., medical expenses) is pending; and (3) requiring the program administrator, once the bill passes, to review any previously denied, or currently pending, claim for assistance from the program and make a new eligibility determination.

Under the bill, a claimant's disability or unemployment claim must not prevent the program administrator from approving a claim for the program's current benefits or the bill's new leave benefits, as long as the current benefits are offset by any disability or unemployment benefits already paid to the claimant for his or her uncompensated leave, including payments made without prejudice. The bill also specifies that

it does not require a claimant who has received unemployment benefits to be currently employed with a previous employer in order to qualify for the program's current benefits or the bill's new leave benefits.

EFFECTIVE DATE: Upon passage

Essential Employees

Under current law, the "essential employees" covered by the program are those employed in a category that the CDC's Advisory Committee on Immunization Practices, as of February 20, 2021, recommended to receive a COVID-19 vaccination in phase 1a or 1b of the COVID-19 vaccination program. These include health care personnel, firefighters, police officers, corrections officers, food and agricultural workers, manufacturing workers, grocery store workers, public transit workers, education sector workers, and child care workers.

The bill expands the essential employees covered by the program to include those who the CDC recommended for a COVID-19 vaccination in phase 1c of the program. These include, among others, certain employees in the following workforce categories: transportation and logistics, food service, energy, shelter and housing, IT and communication, news media, public safety, public health workers, finance, and legal.

Benefit Offset for Partial Paid Leave

Under current law, the program provides partial wage replacement benefits for a claimant's uncompensated leave, which does not include any leave for which the claimant received any paid leave through an employer-provided paid leave plan, or under a state or federal law. The bill instead requires that a claimant's benefit from the program be reduced by any amounts that he or she received through an employer-provided paid leave plan, or under a state or federal law. In effect, this allows a claimant who received a partial paid leave benefit to also receive a correspondingly reduced benefit from the program, instead of being disqualified.

Partial Claims

The program provides eligible claimants with benefits for uncompensated leave, out-of-pocket medical costs, and burial expenses. If the program administrator has asked a claimant for additional information to process a claim, the bill allows the administrator to pay the claimant for the completed parts of his or her claim while the remaining part of the claim is pending (e.g., a claimant may receive payments for uncompensated leave while the claim for medical costs is pending).

§ 208 — CLARIFICATION CONCERNING LOCAL APPROVAL OF OUTDOOR DINING

Specifies that local approval of outdoor dining pursuant to PA 22-1, § 2, does not exempt operators from complying with the Liquor Control Act

The bill specifies that while municipalities must allow outdoor dining operations as-of-right (see *Background*), if their operators are liquor licensees or permittees, then they must comply with applicable provisions of title 30 (i.e., the Liquor Control Act). This requirement applies to operations approved pursuant to PA 22-1, § 2, which takes effect May 1, 2023.

EFFECTIVE DATE: May 1, 2023

Background — PA 22-1

PA 22-1 extends by 13 months, until April 30, 2023, the law that broadly permits the continuation of as-of-right outdoor dining and retail activities authorized by the governor's executive orders during the COVID-19 pandemic (§ 1).

It also correspondingly delays, from April 1, 2022, to May 1, 2023, the effective date of provisions requiring municipalities to allow, in perpetuity, outdoor dining as an as-of-right accessory use to a food establishment (§ 2).

§ 209 — DOC REPORT ON PRISON SUBSTANCE USE AND MENTAL HEALTH SERVICES

Requires DOC to annually review, evaluate, and make recommendations on (1) substance use disorder and mental health services for incarcerated individuals and (2) reintegrating these individuals into the community

The bill requires the Department of Correction (DOC) commissioner to annually review, evaluate, and make recommendations on (1) substance use disorder and mental health screening, diagnostic, and treatment services available to individuals who are incarcerated, throughout their entire incarceration and (2) reintegrating these individuals into the community. In doing so, the commissioner must consult with the Department of Mental Health and Addiction Services and the judicial branch.

The bill requires the DOC commissioner, starting by January 1, 2023, to annually report on this review to the Judiciary, Public Health, and Appropriations committees.

It also repeals an obsolete reporting provision.

EFFECTIVE DATE: Upon passage

§§ 210-211 — RESERVED SECTIONS

Reserved sections

§ 212 — PILOT PROGRAM COLLECTING FIRE AND RESCUE SERVICE DATA

Requires DESPP to establish a pilot program implementing a fire and rescue service data collection system

The bill requires the DESPP commissioner, in consultation with the DAS commissioner, the state fire marshal, OPM secretary, and the Commission on Fire Prevention and Control chairman, to establish and administer a pilot program, until July 1, 2025, to collect fire and rescue service data. The pilot program must be established within available appropriations and either:

1. use the National Fire Operations Reporting System or
2. develop a system capable of real-time tracking information relevant to fire and rescue responses, including call processing time, alarm handling, and turnout time.

Any local or regional fire department or district may apply to participate if it is currently challenged or in crisis regarding the delivery of fire and rescue services. Additionally, the bill specifies that the Tolland County Mutual Aid Emergency Communications Center, the

Quinebaug Valley Emergency Communications Center, the Litchfield County Dispatch, the Valley Shore Emergency Communications Center, and the Northwest Connecticut Public Safety Communications Center may participate.

If the DESPP commissioner approves a department or district's application, he must admit it to the data collection program within 60 days. The commissioner must give departments and districts participating in the program monthly reports on their collected response data.

Before July 1, 2023, and annually thereafter, the commissioner must evaluate the pilot program, including the overall effectiveness of the pilot program in collecting the relevant data. The commissioner must report on the evaluation and any recommendations to the Public Safety and Planning and Development committees.

EFFECTIVE DATE: July 1, 2022

§ 213 — UNEMPLOYMENT TAX CHANGES

For 2023, reduces the unemployment tax rate that certain new employers must pay by 0.2% and lowers the maximum fund balance tax rate from 1.4% to 1.2%

New Employer Experience Rates

By law, new employers that have not been chargeable with unemployment benefits for a long enough time to have their own unemployment tax experience rate calculated must pay either 1% or the state's five-year benefit cost rate, whichever is higher. For tax years starting on or after January 1, 2022, the law requires that the five-year benefit cost rate be calculated without the benefit payments and taxable wages for calendar years 2020 and 2021, when applicable. For 2023, the bill requires that the state's five-year benefit cost rate be calculated this same way, but then reduced by 0.2%.

The benefit cost rate is determined by dividing the total benefits paid to claimants over the previous five years by the five-year payroll over that period.

Fund Balance Tax Rate

By law, an employer's overall unemployment tax rate includes a fund balance rate calculated to ensure that the unemployment trust fund has a statutorily determined amount of funding. Current law caps this rate at 1.4%, with a decrease to 1.0% scheduled for the start of 2024. The bill lowers the cap to 1.2% for 2023. As under current law, the fund balance rate cannot be calculated to result in the trust fund having more than the statutorily determined amount of funding.

EFFECTIVE DATE: July 1, 2022

§§ 214-217 — INSURANCE HOLDING SYSTEM GROUP CAPITAL CALCULATIONS AND LIQUIDITY STRESS TESTS

Generally adopts amendments to the National Association of Insurance Commissioners' Insurance Holding Company System Regulatory Act related to group capital calculations and liquidity stress tests.

Existing law allows the insurance commissioner to supervise and review insurers doing business in Connecticut that are affiliated with an insurance holding company system. By law, an "insurance holding company system" is two or more affiliated people or companies, one of which is an insurance company. In practice, this allows the insurance commissioner to require that a holding company system take actions to reduce "enterprise risk," which is a risk to an insurer or its affiliates that is likely to impact the insurer's or holding company's financial condition or liquidity.

This bill generally adopts the National Association of Insurance Commissioners (NAIC) amendments to the Model Insurance Holding Company System Regulatory Act on group capital calculations and liquidity stress tests for insurers affiliated with an insurance holding company. These calculations and test results give regulators insight on insurance holding company systems' financial health.

In practice, these amendments are necessary to conform to international agreements on "worldwide supervisors," which are states and jurisdictions that supervise insurers with affiliates in certain international reciprocal jurisdictions (e.g., insurance groups domiciled in Connecticut with affiliates in the European Union or the United Kingdom). Under these agreements, Connecticut must adopt certain

standards together with other states.

The bill also incorporates NAIC amendments that ensure a domestic insurance company in receivership that is associated with an insurance company holding system continues to receive essential services from an affiliate that it has contracted with. It:

1. requires insurers that are in hazardous financial condition and are part of an insurance holding company to secure money or a bond that covers certain existing obligations and
2. subjects companies affiliated with, and that have certain contractual obligations to, an insurer in receivership to the receiver's authority in certain circumstances.

With respect to insurers that are part of an insurance holding company system, the bill, in line with NAIC model language, also requires agreements within an insurance company holding system to (1) keep an insurer's data accessible, identifiable, and segregated and (2) maintain as the insurer's exclusive property any of its premiums or funds held by an affiliate.

In line with NAIC amendments, the bill integrates third party consultants into certain provisions of existing law that govern how, and with whom, NAIC can share certain confidential information.

The bill also expands the definition of "internationally active insurance group" for the purposes of insurance holding company regulation. Current law defines an "internationally active insurance group" as an insurance group that, among other things, writes (1) premiums in at least three countries and (2) at least 10% of its gross premiums outside the United States. The bill includes in "gross premiums" for the purpose of this calculation, administrative service fees, associated expenses, and claim payments.

Finally, the bill makes technical and conforming changes.

EFFECTIVE DATE: July 1, 2022

Group Capital Calculations

By law, insurers doing business in Connecticut as part of an insurance holding company system must register with the Connecticut insurance commissioner.

The bill requires the ultimate controlling person of these insurers to file an annual group capital calculation by June 1 annually, and concurrently with their registration. The group capital calculation must be filed with the lead state commissioner, as determined by certain NAIC procedures (e.g., the commissioner of the state in which the holding company is domiciled). (The group capital calculation requirement is a financial tool that assists state insurance regulators in identifying risks that may come from a holding company system.)

The report must be completed using the NAIC Group Capital Calculation Instructions and Reporting Template.

Exemptions

The bill exempts from these group capital calculation filing requirements an insurance company holding system that:

1. (a) has only one insurer in its company structure, (b) only writes business and is only licensed in its domestic state, and (c) assumes no business from any other insurer;
2. is subject to the group capital requirements applicable to an insurance group that owns a, presumably, Federal Reserve Board-supervised depository institution (in which case the bill requires the lead state commissioner to request the applicable capital requirements from the Board; and the insurer loses the exemption if information sharing agreements prevent the Board from disclosing them);
3. has a non-U.S. group-wide supervisor from a reciprocal jurisdiction that recognizes the U.S. regulatory approach; or
4. (a) provides information to the lead state commissioner, through the group-wide supervisor, that meets certain NAIC financial

standards and accreditation requirements and that the supervisor deems satisfactory to allow the lead state commissioner to comply with a specified NAIC group supervision approach and (b) whose non-U.S. group-wide supervisor that is not in a reciprocal jurisdiction recognizes and accepts, as the lead state commissioner specifies in regulation, the group capital calculation as the world-wide group capital assessment for U.S. insurance groups that operate in that jurisdiction.

The bill requires the lead state commissioner to require the group capital calculation for the U.S. operation of any non-U.S. based insurance holding company system if, after consultation with other supervisors or officials, the lead state commissioner determines it is appropriate for prudent oversight, solvency monitoring, or ensuring market competitiveness. The lead state commissioner may require these regardless of the two exemptions for insurance holding company systems with non-U.S. group-wide supervisors listed above (items 3 and 4 above).

The bill also gives the lead state commissioner the discretion to exempt the ultimate controlling person from filing the annual group calculation, or to accept a limited group capital filing report in accordance with criteria the commissioner specifies in regulation.

If the commissioner determines an insurance holding company system no longer meets one of the exemptions above, it must file the group capital calculation at the next annual filing, unless the lead state commissioner gives an extension based on reasonable grounds.

Liquidity Stress Tests

Under the bill, the ultimate controlling person of every insurer subject to registration (i.e., insurers affiliated with insurance holding companies) that is also scoped into the NAIC liquidity stress test framework for that year must file the results of the specified year's liquidity stress test with the lead state commissioner. (The liquidity stress test provides state insurance regulators with information on key

macro prudential risk.)

The NAIC liquidity stress test framework includes scope criteria applicable to a specific data year. The bill specifies that these scope criteria are reviewed at least annually by the NAIC Financial Stability Task Force (“task force”), and any changes to the framework or to the data year take effect on January 1 of the following year.

The bill requires insurers meeting at least one threshold of the scope criteria to be scoped into the NAIC liquidity stress test framework, unless the lead state commissioner, in consultation with the task force, determines otherwise. Correspondingly, insurers that do not trigger at least one scope criteria threshold are scoped out, unless the lead state commissioner, in consultation with the task force, determines otherwise.

The performance of, and filing of the results from, a specific year’s liquidity stress test must comply with (1) the applicable NAIC liquidity stress test framework instructions and reporting guidelines and (2) any lead state commissioner determinations made in consultation with the task force.

Group Capital Calculation and Liquidity Stress Test Confidentiality

The bill makes confidential the information reported and provided to the lead state commissioner by an insurance holding company system (including one supervised by the Federal Reserve Board) for group capital calculations and liquidity stress tests. Specifically, the information is:

1. confidential and privileged;
2. not subject to disclosure under the state’s Freedom of Information Act; and
3. not subject to subpoena, discovery, or admissible in any civil action.

The bill specifies these group capital calculations and the resulting group capital ratios, and the liquidity stress tests and its results and

supporting disclosures, are only regulatory tools for assessing group risks and capital adequacy and are not intended to rank insurers or insurance holding company systems generally.

Insurance Companies in Hazardous Financial Condition

The bill adds provisions related to insurance companies that have to register as part of an insurance holding company system that the commissioner determines are in hazardous financial condition or in a condition that would otherwise be grounds for supervision, conservation, or delinquency, under applicable existing law or regulations.

Under the bill, the commissioner may require these companies to secure and maintain a (1) deposit, to be held by the commissioner, or (2) bond, as the company determines. The deposit or bond must protect the insurance company for the duration of the contracts, agreements, or conditions that are causing the hazardous financial condition.

In determining whether the bond or deposit is required, the commissioner must consider whether the company's affiliates are able to fulfill its contracts or agreements if the company were liquidated. The commissioner sets the bond or deposit amount, which cannot exceed the value of the contracts or agreements in any one year. He may also specify which contracts or agreements the bond or deposit must cover.

Data, Record, and Premium Ownership and Control

The bill specifies that all of an insurance company's records and data held by an affiliate remain property of the insurance company and are subject to the company's control. The records must be identifiable and segregated (or readily capable of segregation) from all other persons' records and all of the affiliate's data. Under the bill, an insurer should not pay to segregate commingled records and data.

At the insurer's request, the affiliate must allow the receiver to have:

1. a complete set of any records about the insurer's business,
2. access to the operating systems where the data is maintained, and

3. software that runs the systems (either by assuming the licensing agreements or otherwise).

The bill also restricts the affiliate's use of this data if it is not operating the insurer's business.

Under the bill, the affiliate must provide a waiver of any landlord lien or other encumbrance to give the insurer access to all records and data in the event the affiliate defaults on a lease or other agreement.

Additionally, premiums or other funds that belong to the insurer that are collected or held by an affiliate are the insurer's exclusive property, and subject to its control. The bill specifies that any rights to offsets of amounts due to or from an insurer or affiliate are governed by existing insurer receivership laws if the insurer goes into receivership.

Rehabilitator or Liquidator's Authority Over an Affiliate

By law, an insurer that intends to contract with an affiliate for certain purposes must notify the commissioner first. Under the bill, an affiliate that is party to a management agreement, service contract, tax allocation agreement, or cost-sharing arrangement for which the insurer must give prior notice to the commissioner is also subject to the:

1. jurisdiction of any rehabilitation or liquidation order against the insurer and
2. authority of any rehabilitator or liquidator appointed under existing law to interpret, enforce, and oversee the affiliate's contractual obligations.

The commissioner can require an agreement or contract to specify that the affiliate consents to this authority. These provisions apply to contracts or agreements under which the affiliate performs services for the insurer that:

1. are an integral part of the insurer's operations, including management, administration, accounting, data processing, marketing, underwriting, claims handling, investment, or similar

functions, or

2. are essential to the insurer's ability to fulfill its obligations under insurance policies.

Sharing Information With Third-Party Consultants

Existing law allows the Connecticut insurance commissioner to acquire from and share with certain parties confidential information related to regulatory reports and insurer oversight, under certain conditions. Among others, current law allows him to acquire and share this information with NAIC and its affiliates or subsidiaries. The bill instead allows this sharing with NAIC and any third-party consultants the commissioner designates.

Existing law requires the Connecticut insurance commissioner, prior to acquiring or sharing information, to enter into agreements that specify procedures for maintaining the information's confidentiality. The bill also requires these written agreements to:

1. require the recipient to agree in writing to maintain the confidentiality and privileged status of the documents, materials, or other information and verify in writing their legal authority to do so (existing law already requires this to be affirmed in writing before the commissioner shares information);
2. prohibit NAIC or third-party consultants the commissioner designates from storing information on a permanent database after the underlying analysis is completed, excluding certain documents related to the liquidity stress tests; and
3. for certain documents related to the liquidity stress tests and only in the case of an agreement with a third-party consultant, provide for notice of the consultant's identity to the applicable insurer.

§ 218 — WORKING GROUP ON CRIMINALIZING COERCION AND INDUCEMENT

Establishes a 10-member working group to develop recommendations for legislation to criminalize coercion and inducement as described under federal law

Purpose

The bill establishes a 10-member working group to examine and develop recommendations on potential legislation to criminalize acts of coercion and inducement as described under federal law (see *Background*).

Composition

The working group includes the chief public defender or her designee; the chief state's attorney or his or her designee; and eight individuals, appointed one each by the Senate president pro tempore, House speaker, House and Senate minority leaders, and the Judiciary Committee chairpersons and ranking members.

The appointed members may be legislators.

Timeline

The appointing authorities must (1) make their appointments within 60 days after the bill's passage and (2) provide a copy of the appointment to the Judiciary Committee administrator within seven days after the appointment.

The Senate president pro tempore's appointee must serve as chairperson and schedule and hold the working group's first meeting within 90 days after the bill passes.

Reporting and Termination

The working group must (1) report its recommendations to the Judiciary Committee by January 15, 2023, and (2) terminate on the later of the date it submits the report or January 15, 2023.

EFFECTIVE DATE: Upon passage

Background — Coercion and Enticement Under Federal Law

Under federal law anyone who knowingly persuades, induces, entices, or coerces another individual to travel in interstate or foreign commerce, or in any United States territory or possession, to engage in prostitution, or in any sexual activity for which anyone can be charged with a criminal offense, or attempts to do so, must be fined, or imprisoned up to 20 years, or both.

Anyone who, using the mail or any facility or means of interstate or foreign commerce, or within the special maritime and territorial jurisdiction of the United States knowingly persuades, induces, entices, or coerces a minor (i.e., under age 18) to engage in prostitution or any sexual activity for which anyone can be charged with a criminal offense, or attempts to do so, must be fined and imprisoned 10 years or for life (18 U.S.C. § 2422).

§§ 219-225 — HEALTH BENCHMARKS

Requires OHS to establish health care cost growth benchmarks, health care quality benchmarks, and primary care spending targets; allows OHS to identify entities that do not meet these benchmarks or targets

This bill expands the Office of Health Strategy's (OHS) duties to include, among other things, setting annual health care cost growth benchmarks, health care quality benchmarks, and primary care spending targets. (In doing so, it codifies several provisions of Executive Order 5.) When developing these benchmarks and spending targets, the executive director may hold informational public hearings and consider certain specified information.

Under the bill, the executive director must publish annual reports on the total health care expenditures in Connecticut and the health care quality benchmarks, including how payers (e.g., insurers) and provider entities (e.g., physician groups) meet or exceed these metrics. The bill correspondingly requires payers and provider entities to provide the executive director with specified health care cost and quality data. She must annually report on these issues to the Insurance and Public Health committees.

Additionally, the bill requires the executive director to identify (1) payers and provider entities who exceed the health care cost growth and quality benchmarks or fail to meet the primary care spending target and (2) any other entities (e.g., drug manufacturers) that significantly contribute to health care cost growth. The bill allows the executive director to require these payers, providers, and entities to participate in a public hearing and discuss, among other topics, ways to reduce their contribution to future health costs.

The bill also allows the executive director to adopt implementing regulations to carry out the bill's provisions and OHS's existing statutory obligations. Finally, it makes minor and conforming changes.

EFFECTIVE DATE: Upon passage

Definitions (§ 220)

Under the bill, "total medical expense" is the total cost of care for a payer or provider entity's patient population in a calendar year, calculated as the sum of (1) all claims-based spending paid to providers by public and private payers, net of pharmacy rebates; (2) all nonclaims payments, including incentive and care coordination payments; and (3) all per-capita patient cost-sharing amounts.

A "provider entity" is an organized group of clinicians that (1) come together for contracting purposes or (2) is an established billing unit with enough attributed lives (i.e., patients), collectively, to participate in total cost of care contracts during any given calendar year, even if it is not participating in these contracts. At a minimum, a provider entity must include primary care providers. (The specific number of attributed lives required to participate in a total cost of care contract is unclear under the bill.)

A "payer" is a government (e.g., Medicaid and Medicare) or non-government health plan, and any of their affiliates, subsidiaries, or businesses acting as a payer that, during any calendar year, pays (1) health care providers for health care services or (2) pharmacies or private entities for prescription drugs that the OHS executive director designates.

"Total healthcare expenditures" are the sum of all health care expenditures in Connecticut from public and private sources for a given calendar year, including all claims-based spending paid to providers, net of pharmacy rebates; all patient cost-sharing amounts; and the net cost of private health insurance.

"Net cost of private health insurance" is the difference between premiums earned and benefits incurred, including the insurers' cost of

paying bills; advertising; sales commissions and other administrative costs; net additions or subtractions from reserves; rate credits and dividends; premium taxes; and profits or losses.

OHS Duties (§ 219)

The bill adds the following to OHS’s duties:

1. setting an annual health care cost growth benchmark and primary care spending target, as described below;
2. developing and adopting health care quality benchmarks, as described below;
3. developing strategies, in consultation with stakeholders, to meet these benchmarks and targets;
4. enhancing the transparency of provider entities; and
5. monitoring the (a) development of accountable care organizations and patient-centered medical homes and (b) adoption of alternative payment methodologies in Connecticut.

Annual Health Care Benchmarks and Spending Targets (§ 221)

By July 1, 2022, the OHS executive director must publish on the office’s website the following:

1. health care cost growth benchmarks and annual primary care spending targets as a percentage of total medical expenses for calendar years 2021 through 2025, and
2. annual health care quality benchmarks for calendar years 2022 through 2025.

She must also publish on the website each adopted health care cost growth benchmark and annual primary care spending target.

The director must develop, adopt, and post on the office’s website by July 1, 2025, and every five years after, the following:

1. annual health care cost growth benchmarks and annual primary

care spending targets for the next five calendar years for provider entities and payers and

2. annual health care quality benchmarks for the next five calendar years.

Developing Health Care Benchmarks and Spending Targets. In developing the health care cost growth benchmarks and primary care spending targets, the bill requires the executive director to consider (1) any historical and forecasted changes in median income for residents and the potential gross state product growth rate; (2) the inflation rate; and (3) the most recent annual health care expenditure report required under the bill.

For health care quality benchmarks, the executive director must consider the following:

1. quality measures endorsed by nationally recognized organizations, including the National Quality Forum, the National Committee for Quality Assurance, the federal Centers for Medicare and Medicaid Services and Centers for Disease Control and Prevention, the Joint Commission, and other expert organizations that develop health quality measures;
2. measures about health outcomes, overutilization, underutilization, patient safety, and community or population health; and
3. measures that meet standards of patient-centeredness and ensure consideration of differences in preferences and clinical characteristics within patient subpopulations.

Public Hearings and Modifying Benchmarks or Targets. The bill requires the executive director to hold at least one informational public hearing before adopting the health care benchmarks and spending targets. It also authorizes her to hold additional informational hearings on (1) health care cost growth benchmarks and primary care spending targets after they have been set and (2) the quality measures she

proposes as health care quality benchmarks. The hearings must be held at a time and place she designates, and a notice must be prominently posted on the OHS website and in a form and manner she prescribes.

Under the bill, the executive director may modify any benchmark or spending target if she determines, after a hearing, that doing so is reasonably warranted.

The bill requires the executive director to annually review the current and projected inflation rates and post her findings on OHS's website, including her reasons for changing or maintaining a benchmark. For modifications to health care cost growth benchmarks, an additional hearing is not required if the modifications are due to inflation rates.

The executive director must post a summary of any informational public hearing she holds on these benchmarks and targets on OHS's website, including her decision to modify them if applicable.

Legislative Approval for Certain Cost Benchmarks. The OHS executive director must submit proposed cost growth benchmarks to the Insurance and Real Estate Committee for review and approval if the average annual benchmark is higher by more than 0.5% compared to the average annual benchmark for the prior five-years (presumably she will not have prior benchmarks to compare to until at least 2030).

The benchmarks are deemed approved unless the committee votes to reject them, at a meeting called for this purpose, within 30 days. If rejected, the executive director can resubmit modified benchmarks for review and approval, and she is not required to hold additional public hearings on them. Until new benchmarks are approved (or, presumably, until she proposes benchmarks below the threshold requiring approval), the annual benchmarks are equal to the average annual health care cost growth benchmark for the prior five calendar years.

Authority to Contract. The bill allows the executive director to enter into necessary contractual agreements with actuarial, economic, and other experts and consultants to develop, adopt, and publish these health care benchmarks and spending targets.

Annual Reporting Requirements (§ 222)

Payer Reports. Beginning by August 15, 2022, the bill requires each payer to report aggregated data annually to the OHS executive director, including aggregated, self-funded data necessary for her to calculate (1) total health care expenditures; (2) primary care spending as a percentage of total medical expenses; and (3) net cost of private health insurance. Payers must also disclose, upon request, payer data required for OHS to adjust total medical expense calculations to reflect patient population changes.

Additionally, the bill requires payers and provider entities, starting by August 15, 2023, to report annually to the executive director on the health care quality benchmarks she adopts.

Payers and provider entities must report the data described above in a form and manner the executive director prescribes for the preceding or prior years, upon her request, based on material changes to data previously submitted.

Annual OHS Health Care Expenditure Report. Beginning by March 31, 2023, the OHS executive director must annually prepare and post on the office website a report on total health care expenditures. The report must use the total aggregate medical expenses that payers report, including a breakdown of population-adjusted total medical expenses by payer and provider entities. It may also include information on the following:

1. trends in major service category spending;
2. primary care spending as a percentage of total medical expenses;
3. the net cost of health insurance by payer by market segment, including individual, small group, large group, self-insured, student, and Medicare Advantage markets; and
4. any other factors the executive director deems relevant to providing context, which must include the impact of inflation and medical inflation, the impacts on access to care, and

responses to public health crises or similar emergencies.

The bill also requires the executive director to annually request the unadjusted total medical expenses for Connecticut residents from the federal Centers for Medicare and Medicaid Services.

Annual OHS Health Care Quality Benchmark Report. The bill requires the executive director, by March 31, 2024, to annually prepare and post on the office's website a report about health care quality benchmarks reported by payers and provider entities.

Authority to Contract. The bill allows the executive director to enter into contractual agreements necessary to prepare the annual health care expenditure and quality benchmark reports, including contracts with actuarial, economic, and other experts and consultants.

Failure to Meet Health Care Benchmarks and Spending Targets (§§ 223 & 224)

Payers and Provider Entities. Beginning in 2023, the bill requires the OHS executive director to identify each payer or provider entity that exceeded the health care cost growth benchmark or failed to meet the primary care spending target for the performance year (i.e., the most recent year for which certain data are available). She must do so annually by May 1. However, before identifying any payer or provider entity, she must meet with it upon its request to review and validate the total medical expense data collected. She must review any information the payer or provider entity provides and, if necessary, amend her findings before identifying it as exceeding the health care cost growth benchmark or failing to meet the spending targets.

Beginning in 2024, she must also identify, annually by May 1, each payer or provider entity that exceeded the health care quality benchmark for the performance year. She must similarly meet with any payer or provider entity upon its request to review and validate the quality data she collected and, if necessary, amend her findings before making a determination.

Within 30 days of making these identifications, the bill requires the

executive director to notify the payer or provider entity, in a form and manner she prescribes, that (1) she identified its failure to meet a health care benchmark or spending target and (2) the factual basis for her identification.

Other Contributing Entities. Beginning in 2023, if the executive director determines that the annual percentage change in total health care expenditures for the performance year exceeded the health care cost growth benchmark, then the bill requires her to identify any entity that significantly contributed to exceeding the benchmark. Under the bill, an “other entity” is a pharmacy benefit manager (PBM), provider that is not a provider entity, or a drug manufacturer. She must do this for each calendar year by May 1, based on:

1. the OHS total health care expenditure annual report required under the bill;
2. annual reports that existing law requires PBMs to submit to the insurance commissioner on prescription drug rebates;
3. OHS’s annual list of up to 10 outpatient prescription drugs that are either provided at substantial cost to the state or critical to public health, required under existing law;
4. information from the state’s all-payer claims database; and
5. any other information the executive director, in her discretion, deems relevant.

The bill requires the executive director to also account for costs, net of rebates and discounts, when identifying these entities.

Annual Informational Public Hearings. The bill requires the executive director to annually hold informational public hearings as follows:

1. starting by June 30, 2023, a hearing to compare the growth in total health care expenditures in the performance year to the associated health care cost growth benchmark and

2. starting by June 30, 2024, a hearing to compare the performance of payers and provider entities in the performance year to the associated health care quality benchmark.

Hearings on Total Health Care Expenditures. The bill requires annual informational public hearings on health care expenditures to examine the following:

1. OHS's most recent annual total health care expenditure report required under the bill;
2. payer and provider entity expenditures, including health care cost trends, primary care spending as a percentage of total medical expenses, and the factors contributing to them; and
3. any other matters the executive director deems relevant.

The bill allows the executive director to require hearing participation from any payer or provider entity that she determines is a significant contributor to the state's health care cost growth or has failed to meet the primary care spending target for that year. These entities must testify on the issues the executive director identifies and provide additional information on actions they have taken to (1) reduce their contribution to future state health care costs and expenditures and (2) increase their primary care spending as a percentage of total medical expenses.

Similarly, the executive director may also require participation in the hearing by any other entity she determines is a significant contributor to the state's health care cost growth during the performance year. These entities must also provide testimony and additional information in the same manner as payers and provider entities described above. If the other entity is a drug manufacturer whose participation is required with respect to a specific drug or drug class, then the bill permits the hearing, to the extent possible, to include representatives from at least one brand-name manufacturer; one generic manufacturer; and one innovator company that is less than 10 years old.

Hearings on Quality Performance Benchmarks. The bill requires the annual informational public hearing on provider entity quality performance to examine the most recent OHS annual report on health care quality benchmarks (see § 4) and any other matters that the executive director deems relevant.

Under the bill, the executive director may require hearing participation from any payer or provider entity that she determines failed to meet the health care quality benchmarks during the performance year. Payers or provider entities required to participate must provide testimony on issues the executive director identifies and additional information on actions they have taken to improve their quality benchmark performance.

Annual Legislative Reports on Public Hearing Information. The bill requires OHS, starting by October 15, 2023, to report annually to the Insurance and Public Health committees on her analysis of the information submitted during the most recent informational public hearing on total health care expenditures. The report must:

1. describe health care spending trends in the state, including trends in primary care spending as a percentage of total medical expenses, and the factors underlying these trends;
2. include any findings from the total health care expenditure report;
3. describe how to monitor any unintended adverse consequences from the cost growth benchmarks and primary care spending targets, as well as any findings from doing so; and
4. disclose the office's recommendations, if any, on strategies to increase the efficiency of the state's health care system, including any recommended legislative changes.

Additionally, the bill requires the executive director, starting by October 15, 2024, to report annually to the Insurance and Public Health committees on her analysis of the information submitted during the

most recent informational public hearing on health care quality benchmarks. In the report, the executive director must do the following:

1. describe health care quality trends in the state and their underlying factors,
2. include the findings from the health care quality benchmark report
3. disclose the office's recommendations, if any, on strategies to improve the quality of the state's health care system, including any recommended legislative changes.

§ 226 — HEALTH ENHANCEMENT PROGRAMS

Requires health carriers to develop health enhancement programs, provide incentives for their use, and cover certain associated costs

Under the bill, a health enhancement program (HEP) is a health benefit program that ensures access and removes barriers to essential, high-value clinical services.

The bill requires health carriers to develop at least two HEPs by January 1, 2024. Each HEP must (1) be available to each insured under the health insurance policy and (2) provide incentives to each insured directly related to providing health insurance coverage for insureds choosing to complete certain preventive examinations and screenings the U.S. Preventive Services Task Force recommends with an "A" or "B" rating.

The bill prohibits an HEP from imposing any penalty or negative incentive on an insured. It also specifies that an insured cannot be required to participate in an HEP.

The bill also requires certain individual and group health insurance policies to cover the HEPs. (However, it is unclear if this means they must cover HEP administration costs or the examinations and screenings insureds receive through the HEP.)

The bill authorizes the insurance commissioner to adopt related implementing regulations.

The bill's HEP provisions apply to individual and group health insurance policies delivered, issued, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses; (2) basic medical-surgical expenses; (3) major medical expenses; or (4) hospital or medical services, including those provided under an HMO plan.

EFFECTIVE DATE: January 1, 2023

§§ 227 & 228 — CERTIFICATE OF NEED APPLICATION FEE AND TERMINATION OF SERVICES

Increases the certificate of need application fee based on a project's cost; defines "termination of services" to mean ending services for more than 180 days

Under the certificate of need (CON) law, health care institutions (e.g., hospitals, freestanding emergency departments, outpatient surgical facilities) must generally receive state approval when establishing new facilities or services, changing ownership, acquiring certain equipment, or terminating services.

The bill increases the nonrefundable CON application fee from \$500 to a range of \$1,000 to \$10,000 depending on the proposed project's cost, as shown in the Table below.

Table: CON Application Fees Under the Bill

<i>Application Fee</i>	<i>Project Cost</i>
\$1,000	Up to \$50,000
\$2,000	>\$50,000 and up to \$100,000
\$3,000	>\$100,000 and up to \$500,000
\$4,000	>\$500,000 and up to \$1 million
\$5,000	>\$1 million and up to \$5 million
\$8,000	>\$5 million and up to \$10 million
\$10,000	>\$10 million

Also, for purposes of applying the CON requirements, the bill defines "termination of services" to mean ending services for more than 180 days.

EFFECTIVE DATE: Upon passage

§§ 229 & 252 — OHS EXECUTIVE DIRECTOR AS STATUTORY DEPARTMENT HEAD

Retains the Office of Health Strategy executive director as a statutory department head and makes a technical change

Under current law, the Office of Health Strategy (OHS) executive director is included among the list of statutory department heads, but is scheduled to be removed from the list as of July 1, 2022. The bill reverses this scheduled removal and retains the executive director as a department head on and after that date.

The bill also makes a technical change, to reflect that the former Department of Rehabilitation Services has been renamed as the Department of Aging and Disability Services (§ 252).

EFFECTIVE DATE: July 1, 2022

§ 230 — OPTICAL STORES REMAINING OPEN WITHOUT OPTICIAN PRESENT

Allows optical stores, in limited circumstances, to remain open for up to four consecutive days without an optician's supervision, and limits the activities that the store's owners or employees may perform during these periods

Current law generally prohibits the retail sale of prescription eyeglasses, contact lenses, and related products (including non-corrective cosmetic contact lens) except (1) under a licensed optician's supervision and (2) in a registered optical establishment, office, or store ("establishment") that has a Department of Public Health (DPH) optical selling permit. (There is an exception for licensed optometrists and ophthalmologists dispensing items to their patients.)

The bill generally specifies that an optician must provide direct supervision over the sale of these products. But it allows optical establishments to remain open during regular business hours without an optician's supervision, under limited circumstances, for up to four consecutive business days.

During these periods, the bill prohibits these establishments' owners or employees from taking various actions, such as selling these products or taking someone's related measurements. It makes a violation of this prohibition an unfair trade practice.

EFFECTIVE DATE: October 1, 2022

Optical Establishments Remaining Open In Absence of Optician

Under the bill, a DPH-registered optical establishment may remain open to the public during regular business hours, without an optician's supervision, for up to four consecutive business days under the following conditions:

1. there are reasonably unanticipated circumstances (see below);
2. the establishment took reasonable action to have another optician present; and
3. the establishment posts a clear and conspicuous sign that an optician is not on site (see below).

Under the bill, reasonably unanticipated circumstances for these purposes include at least the following: the optician's illness, injury, family emergency, or termination or resignation from the establishment.

The required sign must state the following:

NO LICENSED OPTICIAN ON PREMISES:
CONNECTICUT LAW PROHIBITS ACTIVITIES BY EMPLOYEES
RELATED TO PRESCRIPTION EYEGLASSES OR CONTACT
LENSES, INCLUDING MEASURING, SELLING, OR ORDERING IN
ANY MANNER, FITTING, DELIVERING OR DISPENSING
PRESCRIPTION EYEWEAR UNTIL THE OPTICIAN RETURNS.

During these periods when an optical establishment is open without an optician's supervision, the bill prohibits the establishment's owners or employees from doing the following:

1. selling or ordering prescription eyeglasses, contact lenses, and related products (including non-corrective contact lenses);
2. performing measurements on any individual for these products, including determining interpupillary distance, vertical fit heights, and using frame size, bridge size, and temple length to

- recommend the fit of a frame;
3. making medically relevant recommendations for these products, including frame type, lens style or material, lens tint, or multifocal type, or any recommendations for any specific type of contact lenses or disinfection system for them;
 4. fitting, adjusting, or otherwise altering or manipulate these products;
 5. delivering these products; or
 6. transacting an online sale for these products.

§ 231 — BUDGET RESERVE FUND SURPLUS

Prescribes, through FY 23, the order in which the state treasurer must transfer excess BRF funds to reduce the state's unfunded pension liability

The law establishes the Budget Reserve Fund (BRF) and authorizes it to hold up to 15% of net general fund appropriations for the current fiscal year. Once the BRF reaches this limit, the law requires the state treasurer to transfer any remaining General Fund surplus, as he determines to be in the state's best interests, for reducing either the State Employees Retirement Fund's or Teachers' Retirement Fund's unfunded liability by up to 5%. Any amounts that remain after this transfer may be used to make additional payments to either retirement system, as the treasurer determines to be in the state's best interests, or to pay off other forms of outstanding state debt (CGS § 4-30a(c)).

The bill requires the treasurer, from the bill's effective date through the end of FY 23, to determine that it is in the state's best interest to appropriate the excess funds as follows:

1. first to reduce the State Employees Retirement Fund's unfunded liability by up to 5%,
2. next to reduce the Teachers' Retirement Fund's unfunded liability by up to 5%, and
3. third to make additional payments toward the State Employees

Retirement System.

EFFECTIVE DATE: Upon passage

§ 232 — MINIMUM RATE FOR ICF-IIDS

Requires DSS to increase the minimum per diem, per bed rate for ICF-IIDs to \$501

The bill requires DSS to increase the minimum per diem, per bed rate to \$501 for intermediate care facilities for individuals with intellectual disability (ICF-IIDs).

EFFECTIVE DATE: July 1, 2022

§ 233 — DPH STUDENT LOAN REPAYMENT PROGRAM

Requires providers participating in DPH's Student Loan Repayment Program to provide behavioral health services and expands the types of clinicians that the program may recruit

The bill broadens DPH's Student Loan Repayment Program to (1) require community-based providers to provide, or arrange access to, behavioral health services, in addition to other services currently required (e.g., primary and preventative health services) and (2) expand the types of primary care clinicians that may be recruited through the program to include psychiatrists, psychologists, licensed clinical social workers, licensed marriage and family therapists, and licensed professional counselors.

By law, the program provides three-year grants to community-based primary care providers to expand health care access to the uninsured by (1) funding direct services, (2) recruiting and retaining primary care clinicians and registered nurses by subsidizing salaries or loan repayment programs, and (3) funding capital expenditures. In practice, the program has been inactive since 2012, but generally repays education loans in exchange for a specified period of employment in federally designated health professional shortage areas.

EFFECTIVE DATE: Upon passage

§§ 234 & 235 — MEDICAL ASSISTANCE AND IMMIGRATION

Increases eligibility for state-funded medical assistance regardless of immigration status to cover children ages 12 and under, rather than ages 8 and under, and requires children eligible for the benefit to continue receiving it until they are 19 years old

By January 1, 2023, existing law requires the DSS commissioner to provide state-funded medical assistance, within available appropriations, to children, regardless of their immigration status, who are not eligible for Medicaid, the Children’s Health Insurance Program (CHIP), or affordable employer-sponsored insurance, and have household incomes:

1. up to 201% of the federal poverty limit (FPL) without an asset limit (aligning with HUSKY A limits under Medicaid) or
2. over 201% and up to 323% of FPL (generally aligning with HUSKY B limits under CHIP).

The bill expands this requirement by applying it to children ages 12 and under, rather than ages 8 and under as current law requires. Under the bill, a child who is eligible for assistance under these provisions must continue to receive it until he or she is 19 years old, as long as he or she continues to (1) meet income requirements and (2) be ineligible for Medicaid, CHIP, and affordable, employer-sponsored insurance.

Existing law requires the Office of Health Strategy, in consultation with DSS and others, to study the feasibility of offering health care coverage for income-eligible children ages 9 to 18, regardless of immigration status, who are not otherwise eligible for other programs. The study is due to the Appropriations, Human Services, and Real Estate committees by July 1, 2022 (CGS § 19a-754e).

EFFECTIVE DATE: Upon passage

§ 236 — CHCPE CO-PAYMENT REDUCTION

Reduces, from 4.5% to 3%, the required co-payments for participants in the state-funded portion of the Connecticut Homecare Program for the Elderly

The bill reduces, from 4.5% to 3%, the required co-payments for participants in the state-funded portion of the Connecticut Homecare Program for the Elderly (CHCPE) as shown in the table below.

Table: CHCPE Participant Copayments Under Current Law and the Bill

Participant Category	Copayments Under Current Law	Copayments Under the Bill
Participants with income at or below 200% FPL* and Medicaid-ineligible	4.5% of care costs/month	3% of care costs/month
Participants with income greater than 200% FPL	4.5% of care costs/month and an applied income amount (calculated by subtracting certain personal needs allowances from their gross income)	3% of care costs/month and the applied income amount
Participants living in government-subsidized affordable housing programs	An applied income copay if income is greater than 200% FPL	No change
*In 2022, 200% of the FPL is \$27,180 for an individual and \$36,620 for a family of two		

CHCPE is a Medicaid-waiver and state-funded program that provides a range of home- and community-based services for eligible people age 65 or older who are at risk of inappropriate institutionalization (e.g., nursing home placement). In comparison to the Medicaid-waiver component, the program's state-funded portion has no income limit and has higher asset limits. The state has authority to limit program enrollment or make wait lists based on available resources.

EFFECTIVE DATE: July 1, 2022

§ 237 — COMMUNITY SPOUSE PROTECTED AMOUNT

Increases the minimum amount an institutionalized Medicaid recipient's spouse may keep from \$27,480 (in 2022) to \$50,000 and requires DSS to report on the change to the Aging, Appropriations, and Human Services committees

The bill requires DSS to increase the amount of allowable assets kept by the spouse of someone in a medical institution or nursing facility (e.g., a nursing home) who remains in the community. Under current state law, the spouse may keep the greater of (1) the federal minimum (\$27,480 in 2022) or (2) half the couple's combined assets, up to the federal maximum (\$137,400 in 2022). The bill raises the state minimum community spouse protected amount to \$50,000.

The bill also requires the DSS commissioner to report by July 1, 2023,

to the Aging, Appropriations, and Human Services committees on (1) how many community spouses were able to keep additional assets due to the raised minimum and (2) the cost to the state for raising the minimum.

The bill allows the DSS commissioner to adopt regulations to implement the bill's provisions.

EFFECTIVE DATE: July 1, 2022

Background — Community Spouse Protected Amount

Federal Medicaid law allows the spouse of someone living in a nursing home to keep some of the couple's assets to ensure the spouse living in the community does not become impoverished. The amount retained by the non-institutionalized spouse is referred to as the community spouse protected amount. States set community spouse protected amounts within federal minimum and maximum limits.

§§ 238 & 239 — TEMPORARY FAMILY ASSISTANCE STANDARDS

Beginning in FY 23, sets at 55% FPL rather than a regional standard, the income limit for the Temporary Family Assistance program, which also serves as the basis for TFA benefit amounts and HUSKY C income limits

To be eligible for Temporary Family Assistance (TFA), Connecticut's cash assistance program, a family must (1) have a dependent child (or pregnancy) and (2) meet income and asset limits. The monthly income limit for TFA applicants is known as the standard of need (SON), which represents the amount deemed necessary for a family's normal, recurring, basic needs. Under current law, the DSS commissioner is required to set the SON based on the cost of living in the state. As a result, the SON currently depends on the (1) applicant's family size and (2) region of residence. Beginning in FY 23, the bill eliminates the requirement for the commissioner to set the SON, and instead sets the standard at 55% of the federal poverty level (FPL). (In 2022, 55% of the FPL is \$10,071 for a family of two and \$12,667 for a family of three). It also appears to similarly eliminate an obsolete requirement for the commissioner to set a SON for the state-administered general assistance program.

In doing so, the bill replaces regional variability in TFA program standards with one consistent statewide standard that will be adjusted annually based on the U.S. Department of Health and Human Services' annual calculation of the FPL. It also makes conforming changes to eliminate references to regional standards under HUSKY C, which provides Medicaid coverage for people who are at least age 65, blind, or living with a disability. Under current law and the bill, HUSKY C income limits are 143% of TFA benefit levels.

The current TFA benefit amount is based on a payment standard (i.e., 73% of the standards of need in effect on June 30, 1995 under its predecessor program, Aid to Families with Dependent Children) that also depends on family size and region. Except for certain exempted fiscal years, current law generally requires the DSS commissioner to annually increase these payment standards by the average percentage increase in the consumer price index for urban consumers (CPI-U), but caps it at 5%. The bill eliminates this annual increase requirement for the TFA program and instead, beginning in FY 23, sets the payment standard at 73% of the new TFA standard of need, or approximately 40% of the FPL (see above).

EFFECTIVE DATE: July 1, 2022

§ 240 — MEDICAID REIMBURSEMENT FOR VENTILATOR BEDS

For FY 23, requires the DSS Commissioner to amend the Medicaid state plan to increase the per diem reimbursement rate provided to chronic disease hospitals by \$500 for beds provided to patients on ventilators

For FY 23, the bill requires the DSS Commissioner to amend the Medicaid state plan to increase the per diem reimbursement rate provided to chronic disease hospitals by \$500 for beds provided to patients on ventilators.

EFFECTIVE DATE: July 1, 2022

§ 241 — FQHC PAYMENTS

Requires DSS to reimburse FQHCs (1) on an all-inclusive encounter rate per client encounter, based on a prospective payment system under federal law, and (2) according to requirements in existing state regulations; and prohibits FQHCs from providing nonemergency, periodic dental services on different dates of service to enable billing for separate encounters

The bill sets several requirements related to DSS's payments to federally qualified health centers (FQHCs) for services provided under medical assistance programs (e.g., Medicaid). These requirements include, among other things, limitations on payments for nonemergency dental visits at FQHCs.

Current law authorizes, but does not require, DSS to reimburse FQHCs for multiple services provided in a day, regardless of what type of services the center provides. Generally, the bill instead requires DSS to reimburse FQHCs (1) on an all-inclusive encounter rate per client encounter, based on a prospective payment system under federal law and state existing regulations, and (2) according to requirements in existing state regulations (see *Background*). For reimbursement purposes, the bill considers the following types of patient encounters single encounters: (1) an encounter with more than one health professional for the same type of service and (2) multiple interactions with the same health professional that occur on the same day, unless a patient suffers illness or injury after the first encounter and requires additional diagnosis and treatment.

The bill prohibits FQHCs from providing nonemergency, periodic dental services on different dates of service to enable billing for separate encounters. It requires FQHCs to complete these services in one visit (e.g., exams, prophylaxis, and radiographs such as bitewings, complete series, and periapical imaging). The bill makes second visits to complete any service normally included during a nonemergency periodic dental visit ineligible for reimbursement unless the visit is medically necessary and clearly documented that way in the patient's dental record.

The bill also eliminates an obsolete reporting requirement.

EFFECTIVE DATE: July 1, 2022

Background — Prospective Payment System

Federal law allows states to pay FQHCs an amount calculated on a per visit basis and based on their costs for providing service in a previous year, adjusted by the Medicare Economic Index (MEI,

generally a measurement of inflation in health care) and any changes to the FQHC's scope of services. The law also allows states to use an alternative payment methodology if (1) the state and the FQHC agree and (2) it results in a payment at least equal to the above (42 U.S.C. § 1396a(bb)).

Background — State Regulations for FQHCs

State regulations limit FQHC claims to one all-inclusive encounter per day, including all services received by a client on the same day, unless (1) the client suffers an illness or injury after the first encounter that requires additional diagnosis or treatment or (2) the client has different types of visits on the same day (e.g., medical and dental or medical and behavioral health). Under the regulations, Medicaid pays for one medical, one dental, and one behavioral health encounter per day (Conn. Agencies Regs. § 17b-262-1002).

§§ 242 & 243 — COMMUNITY HEALTH WORKER GRANT PROGRAM

Transfers DPH's Community Health Worker Grant Program to DSS, increases the individual and aggregate caps on program grants, and extends the program by one year

The bill transfers the Community Health Worker Grant Program established in last year's budget act from DPH to DSS (PA 21-2, June Special Session, §§ 36 & 37). In doing so, it requires DSS to review program applications and allows the department to enter into agreements with people, firms, corporations, or other entities to operate the program. The program gives grants to community action agencies (CAAs) that employ community health workers serving people adversely affected by the COVID-19 pandemic. Under the bill, CAAs that seek to employ these workers are also eligible.

Current law caps the amount of any grant issued under the program at \$30,000 annually. The bill increases this to \$40,000 and specifies that this is the amount of funding that a CAA may receive per year for each community health worker it employs. The bill increases, from \$6 million to \$7 million, the cap on the total amount of grants issued under the program. The bill requires DPH to transfer to DSS \$3 million allocated for the program for each year in FYs 22 and 23 in last year's budget act

(PA 21-2, June Special Session, § 306).

The bill expands the information that CAAs must include in a grant application to include strategies for integrating community health workers into a person's care delivery team, including the capacity to address health care and social services needs. Under the bill, the application must include both the number of health workers the CAA employs and the number it seeks to employ, rather than one or the other as under current law.

Current law prohibits the department from issuing grants after June 30, 2023. The bill delays this deadline by one year to June 30, 2024, and correspondingly extends the period for grant availability as posted on the department's website.

The bill eliminates a requirement that the DPH commissioner report to the Human Services and Public Health committees on the program's progress and any legislative proposals. The bill retains a second reporting requirement for the program, due January 1, 2024, and makes a conforming change to require DSS to make the report instead of DPH.

EFFECTIVE DATE: Upon passage

§ 244 — TEMPORARY FINANCIAL RELIEF FOR NURSING HOMES

Eliminates requirements on how DSS must allocate \$10 million in ARPA funds for nursing homes

By law, DSS must provide temporary financial relief for nursing homes from the \$10 million in federal funds allocated to DSS under the American Rescue Plan Act of 2021 (P.L. 117-2). The bill eliminates provisions requiring DSS to (1) allocate grants based on the difference between the issued and calculated medical assistance reimbursement rate and (2) issue one-time grants adjusted proportionally based on available funding.

EFFECTIVE DATE: Upon passage

§ 245 — COMMUNITY OMBUDSMAN PROGRAM

Creates a Community Ombudsman program within the Office of the Long-Term Care Ombudsman to, among other things, respond to complaints about long-term services and supports provided to adults in DSS-administered home and community-based programs

The bill creates a Community Ombudsman program within the Office of the Long-Term Care (LTC) Ombudsman (see *Background* below). It charges the program with, among other things, responding to complaints about long-term services and supports provided to adults in home and community-based programs administered by the Department of Social Services.

By October 1, 2022, the LTC Ombudsman must (1) appoint a community ombudsman program supervisor and up to 12 regional community ombudsmen and (2) hire up to two administrative staff, all of whom report to the LTC Ombudsman. Among other things, the bill requires the LTC Ombudsman, program supervisor, and regional community ombudsmen to ensure that any home care recipient's health data obtained by the program is protected according to the Health Insurance Portability and Accountability Act (HIPAA).

Under the bill, a "home care provider" is a person or organization, including a home health agency, hospice agency, or homemaker-companion agency. "Long-term services and supports" are (1) health, health-related, personal care, and social services for people with physical, cognitive, or mental health conditions or disabilities to help with optimal functioning and quality of life or (2) hospice care for people nearing the end of their lives.

EFFECTIVE DATE: July 1, 2022

Community Ombudsmen Duties

The bill requires the program supervisor and regional community ombudsmen to:

1. have access to data on long-term services and supports provided by a home care provider to a client, if the client or his or her authorized representative generally consents in writing (see below);

2. identify, investigate, refer, and resolve complaints about home care services;
3. raise public awareness about home care and the program;
4. advocate for LTC options and promote access to home care services;
5. coach people in self-advocacy; and
6. provide referrals to home care clients.

The bill grants the ombudsmen access to data without a client's written consent if he or she cannot provide it due to (1) a physical, cognitive, or mental health condition or disability and (2) lack of an authorized representative. In this case, the program supervisor must determine that the data is necessary to investigate a complaint about the client's care.

LTC Ombudsman Oversight

The bill requires the LTC Ombudsman's office to oversee the community ombudsman program and provide administrative and organizational support by:

1. developing and implementing a public awareness strategy;
2. applying for, or collaborating with other state agencies to apply for, available federal funding;
3. collaborating with administrators of other state programs and services to design and carry out an agenda promoting the rights of elderly people and people with disabilities;
4. providing information to public and private agencies, elected and appointed officials, and the media on home care recipients' problems and concerns;
5. advocating for improvements in the home and community-based long-term services and supports system; and

6. recommending changes in federal, state, and local laws, regulations, policies, and actions pertaining to the health, safety, welfare, and rights of home care recipients.

Starting by December 1, 2023, the LTC Ombudsman must annually report to the Aging, Human Services, and Public Health committees on (1) the program's public awareness strategy implementation, (2) the number of people served, (3) the number of home care complaints filed, (4) the disposition of these complaints, and (5) any gaps in services and resources needed to address them.

Background — LTC Ombudsman Program

This state program represents the interests of residents in nursing and residential care homes and helps them resolve complaints about these facilities. One state and eight regional ombudsmen carry out these duties, assisted by 11 volunteers. The office also provides help and education to residents in assisted living facilities. People in state-subsidized assisted living programs have priority for these services, but the office will also help those in private assisted living facilities as funding is available.

§§ 246 & 247 — BAN ON NON-COMPETE CONTRACTS

Prohibits contracts between a homemaker-companion agency or home health agency and a client from including a "no-hire" clause and deems these clauses void

This bill prohibits contracts between a homemaker-companion agency or home health agency and a client from including a "no-hire" clause that, should the client directly hire an agency employee, (1) imposes a financial penalty; (2) assesses any charges or fees, including legal fees; or (3) contains any language that can create grounds for a breach of contract assertion or a claim for damages or injunctive relief. It expressly deems these clauses against public policy and void.

By law, employment contracts for providing homemaker, companion, or home health services may not include a provision that restricts a person's right to provide these services (1) in any geographic area of the state for any time period or (2) to a specific person (i.e., a "covenant not to compete"). These covenants are deemed against public

policy, void, and unenforceable (CGS § 20-681).

EFFECTIVE DATE: Upon passage

§ 248 — LONG-ACTING CONTRACEPTIVES AT FEDERALLY QUALIFIED HEALTH CENTERS

Requires the DSS commissioner to allocate \$2 million, from FY 23 federal funds allocated to the department, for the purchase and provision of long-acting reversible contraceptives by federally qualified health centers

Requires the DSS commissioner to allocate \$2 million for the purchase and provision of long-acting reversible contraceptives by federally qualified health centers (FQHCs) from the federal funds allocated to the department for FY 23, according to relevant provisions of the American Rescue Plan Act of 2021.

EFFECTIVE DATE: July 1, 2022

§ 249 — MEDICAID COVERAGE OF NATUROPATH SERVICES

Requires the state's Medicaid program to cover services provided by licensed naturopaths

The bill requires the DSS commissioner to amend the Medicaid state plan by October 1, 2022, to provide Medicaid coverage for services provided by a licensed naturopath.

By law, the practice of naturopathy means the science, art, and practice of healing by natural methods as recognized by the Council of Naturopathic Medical Education. It includes disease diagnosis, prevention, and treatment and health optimization by stimulating and supporting the body's natural healing processes, as approved by the State Board of Naturopathic Examiners with the consent of the Department of Public Health commissioner (CGS § 20-34).

EFFECTIVE DATE: Upon passage

§ 250 — BAN ON RECOVERING FEDERAL FUNDS FROM PROVIDERS

Prohibits state agencies that contract with health and human services providers from trying to recover or otherwise offset federal ARPA funds for home- and community-based services

The bill prohibits state agencies that contract with health and human services providers from trying to recover or otherwise offset federal

funds obtained or retained by the provider. The prohibition applies to home- and community-based services provider payments disbursed by state agencies that received funding for the payments under the American Rescue Plan Act of 2021 (P.L. 117-2, § 9817). The bill prohibits state agencies from (1) reducing contracted amounts for the same or similar services from one contract period to the next contract period or (2) demanding reimbursement in the amount of any home- and community-based services provider payments.

EFFECTIVE DATE: Upon passage

§ 251 — COLAS FOR PROVIDERS CONTRACTING WITH DDS

Requires OPM to disburse unallocated funds for FYs 22 and 23 to state-contracted providers of DDS services as COLAs

PA 21-2, June Special Session, § 341, requires OPM to allocate available funds for FYs 22 and 23 to increase rates to state-contracted providers for wage enhancements and related payroll taxes, workers compensation, and unemployment insurance expenses for employees providing services to people with intellectual disabilities who receive supports and services through DDS. Under the bill, if the OPM secretary allocates funds for these purposes and available funds remain unallocated for FYs 22 and 23, the bill requires that OPM disburse the funds as a cost-of-living adjustment (COLA) to state-contracted providers delivering services and supports through DDS.

EFFECTIVE DATE: Upon passage

§§ 253 & 254 — COVERED CONNECTICUT

Transfers the administration of the Covered Connecticut program from OHS to DSS; expands coverage to include disabled adult children and certain other dependents; replaces a biannual reporting requirement with an annual one beginning in 2024

The bill transfers administration of the Covered Connecticut program from OHS to DSS and expands program eligibility to include disabled adult children and certain other dependents. By law, the Covered Connecticut is a two-phase program that provides eligible people health insurance at no out-of-pocket cost to them.

EFFECTIVE DATE: Upon passage

Program Transfer From OHS to DSS

The bill transfers the program's administration from OHS to DSS. In doing so, it makes several conforming changes, generally requiring DSS to administer the program under the same conditions and requirements that current law imposes on OHS. For example, it requires DSS, instead of OHS, to make certain reports and consult with the Insurance Department and the Connecticut Health Insurance Exchange about the program. Under the bill, DSS must also consult with OHS.

However, the bill does not transfer OHS's existing authority to seek a Section 1332 waiver to advance the Covered Connecticut program's purposes. Under existing law, if approved by the federal government, OHS must implement the waiver. (A 1332 waiver is named after an authorizing section of the federal Affordable Care Act (ACA) and allows a state to waive certain ACA requirements that might otherwise prohibit it from implementing certain programs, such as essential health benefits or marketplace functions.)

Expanded Eligibility and New Eligibility Requirements

Under current law (i.e., Phase 1), the program must provide enough premium and cost-sharing subsidies to ensure fully subsidized coverage to parents and needy caretaker relatives, and their tax dependents that are 26 or younger, if the parents or needy caretaker relatives:

1. are eligible for premium and cost-sharing subsidies for a qualified health plan (QHP), but over-income for Medicaid;
2. have household income up to 175% of the federal poverty level (FPL); and
3. are covered by a silver-level health plan offered on the exchange.

The bill limits eligibility to people who, in addition to meeting the criteria described above, use the full amount of their premium subsidies on their QHP.

By law, Covered Connecticut eligibility expands beginning July 1, 2022 (i.e., Phase 2). Under the bill, it expands to all low-income adults

between ages 19 and 64, instead of only nonpregnant low-income adults between ages 18 and 64 as under current law. These people must meet all eligibility requirements in existing law, as described above, including the bill's additional requirement that they must use the full amount of their premium subsidies on their QHP. Under current law and the bill, parents and needy caretaker relatives who meet the above requirements remain eligible.

The bill also expands program eligibility to include certain family members of otherwise eligible parents and caretaker relatives. Beginning July 1, 2021, for people eligible for Phase 1 coverage, and July 1, 2022, for people eligible for Phase 2 coverage, Covered Connecticut must also provide subsidized coverage for:

1. permanently and totally disabled children over age 26;
2. children older than age 26 who are incapable of self-sustaining employment due to a mental or physical handicap and who are dependent upon the parent or caretaker relative for support and maintenance; or
3. a child or stepchild covered by the QHP (beginning July 1, 2022, coverage extends to children or stepchildren, without specifying they must be covered by the QHP).

Under current law, OHS must provide, beginning no earlier than July 1, 2022, dental benefits and nonemergency medical transportation services, as those services are provided under Medicaid, to people eligible for Covered Connecticut. In addition to requiring that DSS, not OHS, provide these services, the bill extends these dental benefits and nonemergency transportation to the newly eligible people as well.

Reporting Requirements

Under current law, every six months OHS must report a description of Covered Connecticut's operations, finances, and progress made for the preceding six months to the Appropriations, Human Services, and Insurance and Real Estate committees. In addition to requiring the DSS commissioner, instead of OHS, to make this report, the bill makes this

biannual report an annual one beginning in 2024. It correspondingly requires the report to contain information from the preceding year, instead of the preceding six months.

§ 255 — YOUTH SERVICE BUREAU GRANTS

Makes FY 22 YSB applicants eligible for a state grant

By law, the Department of Children and Families commissioner must establish a youth service bureau (YSB) grant program that, within available appropriations, awards \$14,000 grants to eligible bureaus that applied for grants during specific fiscal years. Towns must contribute an amount equal to the state grant amount.

The act allows YSBs that applied for a grant during FY 22 to be eligible for one through the program. Prior law limited eligibility to applicants who applied for the grant during specified periods, most recently FY 21.

By law, YSBs coordinate community-based services that provide prevention and intervention programs for delinquent, pre-delinquent, pregnant, parenting, and troubled youths referred to them by schools, police, and juvenile courts, among others (CGS § 10-19m).

EFFECTIVE DATE: July 1, 2022

§ 256 — CAP ON MAGNET SCHOOL TUITION PAYMENTS

Lowers the enrollment threshold that triggers the cap on East Hartford tuition due to magnet schools and applies the same enrollment threshold and tuition cap to Manchester beginning in FY 23; applies the same enrollment threshold and tuition cap to all other Sheff region towns, New Britain, and New London for FY 23 only; requires SDE to be responsible for magnet tuition losses from these caps within available appropriations

East Hartford Magnet School Tuition Payments

Beginning in FY 23, the bill lowers the magnet school enrollment threshold in current law that triggers the cap on the tuition amount the East Hartford school district must pay to magnet schools. Under current law, if more than 7% of the district's student population attends magnet schools, then the district is not responsible for the first \$4,400 of tuition for any number of students beyond the 7% threshold. The bill lowers this threshold to 4% of the district's student population.

Manchester Magnet School Tuition Payments

Beginning in FY 23, the bill caps the amount of tuition the Manchester school district must pay to magnet schools if more than 4% of the district's student population attends magnet schools. For any number of students beyond the 4% threshold, the district is not responsible for the first \$4,400 of tuition.

Sheff Region Towns, New Britain, and New London

For FY 23 only, the bill caps the amount of tuition that the following school districts must pay to magnet schools if more than 4% of their district's student population attends magnet schools: (1) the board of education of any town located in the *Sheff* region (see *Background* below) other than East Hartford and Manchester, (2) New Britain, and (3) New London. For any number of students beyond the 4% threshold, school districts in these towns are not responsible for the first \$4,400 of tuition.

SDE Responsibility for Magnet School Tuition Losses

Under the bill, SDE, within available appropriations, is financially responsible for any tuition loss to the magnet schools billing East Hartford and Manchester beginning in FY 23. If SDE's tuition recovery payment amount to the magnet schools is greater than the appropriated amount, then SDE must reduce the grant amounts awarded to both towns proportionally.

Similarly, SDE, within available appropriations, is financially responsible under the bill for any tuition loss to the magnet schools billing (1) other *Sheff* region towns, (2) New Britain, and (3) New London. However, the bill limits this responsibility to FY 23 only. Also, if SDE's tuition recovery payment amount to the magnet schools for FY 23 is greater than the amount allocated for that fiscal year from the federal American Rescue Plan Act funds designated for the state (P.L. 117-2), then SDE must proportionally reduce the grant amounts awarded to these towns.

EFFECTIVE DATE: July 1, 2022

Background — Sheff Region Towns

This region includes the school districts of Avon, Bloomfield, Canton, East Granby, East Hartford, East Windsor, Ellington, Farmington, Glastonbury, Granby, Hartford, Manchester, Newington, Rocky Hill, Simsbury, South Windsor, Suffield, Vernon, West Hartford, Wethersfield, Windsor, and Windsor Locks.

§ 257 — ADULT EDUCATION PROGRAM GRANT CAP

Moves up the grant cap's sunset date by one year

The bill moves up the sunset date for the cap on the state's adult education program grant for towns, regional boards of education, or regional education service centers to the end of FY 22, therefore, lifting the cap for FY 23. (The cap sunsets starting in FY 24 under current law.) The cap requires that the grant be proportionately reduced if the state budget appropriations do not fund the full amounts required by the respective statutory formulas.

EFFECTIVE DATE: July 1, 2022

§ 258 — CHARTER SCHOOL OPERATING GRANTS

Increases the charter grant adjustment percentage, from 14.76% to 25.42%, in the FY 23 charter school per-student operating grant formula

By law, state charter school operating grants are calculated using a weighted per-student formula based on student need. The weighted grant is based on the existing Education Cost Sharing (ECS) grant foundation.

Under current law, in FY 23 a state charter school's fiscal authority must receive a per-student grant calculated using the following formula: the ECS foundation grant (\$11,525) plus 14.76% of its charter grant adjustment (see *Background*, below). The bill increases the FY 23 charter grant adjustment percentage to 25.42%, moving the schools closer to a fully funded grant based on student need.

EFFECTIVE DATE: July 1, 2022

Background — "Charter Grant Adjustment" Formula Component

By law, "charter grant adjustment" means the absolute value of the difference between the (1) ECS foundation (i.e., \$11,525) and (2) product

of the total charter need students and the foundation, divided by the number of enrolled students under the governing authority's control for the school year.

“Total charter need students” is the sum of the following:

1. enrolled students at the state charter schools controlled by the governing authority for the school year, plus
2. the following value:
 - a. 25% of enrolled students who are English language learners; plus
 - b. 30% of enrolled students eligible for free or reduced-price meals or free milk; plus, for a school where this number exceeds 60% of the student population, 15% of that excess (CGS § 10-66ee(d), as amended by PA 21-2, June Special Session, § 352).

§§ 259 & 260 — PARAEDUCATOR PROFESSIONAL DEVELOPMENT

Requires boards of education to provide, and paraeducators to participate in, a professional development program beginning in the 2022-23 school year

The bill makes the following changes in the education laws relating to paraeducators:

1. requires school districts' professional development and evaluation committees to develop, evaluate, and annually update a comprehensive local professional development plan for district paraeducators beginning in the 2022-23 school year and
2. requires paraeducators employed by a local or regional board of education to annually participate in professional development beginning in the 2022-23 school year.

As defined by the State Department of Education (SDE), a paraeducator (i.e., “paraprofessional”) is an employee who helps teachers or other professional educators or therapists deliver

instructional and related services to students.

EFFECTIVE DATE: July 1, 2022

Requirements for Paraeducator Professional Development

Under the bill, boards must make available to paraeducators a free professional development program at least 18 hours long that is delivered mostly as small group or individual instruction. The program must meet the following criteria:

1. be a comprehensive, sustained, and intensive approach to improving paraeducator effectiveness and increasing student knowledge achievement;
2. focus on refining and improving effective instruction methods shared among and between paraeducators;
3. foster collective responsibility for improved student performance; and
4. include training in culturally responsive pedagogy and practice.

Furthermore, the program must also be comprised of professional learning that does the following:

1. is aligned with rigorous state student academic achievement standards;
2. is conducted among paraeducators at the school and facilitated by principals, coaches, mentors, distinguished educators, or other appropriate teachers;
3. occurs often on an individual basis or among groups of paraeducators in a job-embedded process of continuous improvement; and
4. includes a paraeducator-developed repository of instructional method best practices within each school that is continuously available for comment and updating.

The principles and practices of social-emotional learning and restorative practices must be integrated throughout the program's components.

The bill also requires boards to offer professional development activities to paraeducators as part of an individual paraeducator's professional development plan. These professional development activities may be made available directly by a board, through a regional educational service center or cooperative arrangement with another board, or through arrangements with any SDE-approved professional development provider. The activities must be consistent with any goals the paraeducators and boards identified.

§ 261 — OEC EMERGENCY STABILIZATION GRANT PROGRAM

For FYs 23 and 24, requires OEC to administer an emergency stabilization grant program for certain school readiness programs and child care centers receiving state financial assistance

For FYs 23 and 24, the bill requires the Office of Early Childhood (OEC) to administer an emergency stabilization grant program for school readiness programs and child care centers receiving state financial assistance. By law, a "school readiness program" is a nonsectarian program that (1) meets OEC's standards and requirements under law and (2) provides a developmentally appropriate learning experience for at least 450 hours and 180 days a year, for eligible children, except if the office approves a waiver. A "child care center" is one that offers or provides supplementary care to more than 12 children outside their own homes on a regular basis.

Under the bill, OEC must provide grants-in-aid to school readiness programs and child care centers that apply on a form and as the office prescribes and who meet the eligibility criteria in the office's guidelines (see below).

The school readiness program or child care center may spend grant funds for programmatic or administrative needs, according to the office's guidelines (see below).

The bill requires OEC to develop (1) criteria for school readiness

programs and child care centers to be eligible to receive an emergency stabilization grant and (2) guidelines for spending grant funds.

EFFECTIVE DATE: July 1, 2022

§ 262 — BILINGUAL EDUCATION GRANT

Increases funding for the bilingual education grant from \$1.9 million to \$3.8 million a year

Beginning in FY 23, the bill increases the annual state bilingual education grant from \$1,916,130 to \$3,832,260, within available appropriations. By law, grant funds are distributed proportionally to school districts that must provide bilingual education. Existing law requires school districts to do this when there are at least 20 students in a public school who are classified as dominant in a language other than English and are not proficient in English (see *Background*).

Under existing law, each district receiving the grant must annually submit a progress report to the State Board of Education that includes, among other things, a program evaluation and measures of educational effectiveness.

The bill also makes a conforming change.

EFFECTIVE DATE: July 1, 2022

Background — Bilingual Education

The law defines bilingual education as instruction in both English and the student's native language with a continuously increasing use of English and the goal of reaching English proficiency. Generally, students are in bilingual education for 30 months (three school years), but the law also allows districts to ask for a 30-month extension (CGS §§ 10-17e & 10-17f(d)).

§ 263 — THE GILBERT SCHOOL STUDY

Requires SDE to study the funding process for The Gilbert School

The bill requires the State Department of Education (SDE) to study the funding process for The Gilbert School and allows the department to consult with the school while conducting the study. Existing law allows the State Board of Education to approve any incorporated or

endowed school or academy such as The Gilbert School to receive students from any town that does not operate its own high school. The sending town may pay the entire tuition fees for the students it sends unless the school is under ecclesiastical (i.e., church) control (CGS § 10-34).

Under the bill, the department must report the study results and any recommendations about the funding process for the school to the Education Committee by January 1, 2023.

EFFECTIVE DATE: July 1, 2022

§ 264 — MAGNET SCHOOL GRANT CHANGE

Transfers a magnet school operator's grant from one grant provision to another

Existing law contains a number of magnet school grants that are based on whether the school is operated by a school district or a regional education service center (RESC) and other considerations such as the percentage of its students it draws from the host town or sending towns.

Under current law, a RESC-operated magnet that began operations in the 2001-2002 school year and for the 2008-2009 school year enrolled 55% to 80% of its students from a single town receives grants of \$8,344 for each student, except it receives smaller grants for any students enrolled who exceed the enrollment number as of October 1, 2013. For those students, the grants are (1) \$3,060 if from the host town and (2) \$7,227 if not from the host town. The provision appears to only apply to the Thomas Edison Magnet School in Meriden.

Under the bill, for FY 22, any magnet operator under this existing law, or any successor operator, instead receives for all students enrolled for the 2021-2022 school year a grant of \$8,058. The bill does this by applying another magnet school grant to this magnet school. It applies the existing provision for RESC magnets that are not within the Hartford region and have less than 55% enrollment from one town.

EFFECTIVE DATE: Upon passage

§ 265 — DELETED BY HOUSE "C"

§ 266 — CLIMATE CHANGE CURRICULUM

Requires, rather than allows, climate change to be taught as part of the science requirement in public schools' program of instruction

The bill requires, rather than allows, climate change to be taught as part of the science requirement in public schools' program of instruction. As under existing law, the curriculum must follow the Next Generation Science Standards (NGSS) adopted by the State Board of Education (SBE).

EFFECTIVE DATE: July 1, 2023

Background — Next Generation Science Standards

The NGSS are research-based science content standards for grades kindergarten to 12 adopted by SBE in 2015. The standards' foundational document provides that climate changes are significant and persistent changes in the average or extreme weather conditions of an area (National Research Council. 2012. A Framework for K-12 Science Education: Practices, Crosscutting Concepts, and Core Ideas. Washington, DC: The National Academies Press).

§ 267 — SPECIAL EDUCATION EXPENDITURE STUDY

Requires SDE to compile and analyze school district special education expenditure information and report it to the Appropriations and Education committees by July 1, 2023

By law, the state reimburses, at a prorated amount, boards of education for special education expenditures that are more than four and a half times the given school district's net current expenditures per student (see the section below). The bill requires SDE to compile and analyze information from local and regional boards of education on the costs of special education. The department must identify boards of education with expenditures on special education that are:

1. two and a half times the district's net current expenditures per student for education,
2. three times the expenditures,
3. three and a half times the expenditures, and
4. four and a half times the expenditures.

The analysis must also include the cost to reimburse boards of education for their special education costs at each level of expenditure.

SDE must submit the report to the Appropriations and Education committees by July 1, 2023.

EFFECTIVE DATE: Upon passage

§ 268 — SPECIAL EDUCATION EXCESS COST GRANT

Creates a three-tiered reimbursement method, based on each town's property wealth per capita, for determining the special education excess cost grant when the appropriation does not fully fund the grant

Under law, the SBE reimburses school districts for special education costs that are more than four and a half times the school district's net current expenditures per student (also referred to as the "excess cost grant"). But current law also states that the grant amount for each district is reduced proportionately when the annual appropriation does not meet the necessary amount to fully fund the grant.

The bill modifies this reimbursement method, beginning with FY 23, when the appropriation is not sufficient to fully fund the grant to instead create three tiers of reimbursement based on each town's adjusted equalized net grand list per capita (AENGLPC). The bill requires SBE to rank the towns in descending order from one to 169 according to each town's AENGLPC. Then the SBE will pay the grant as follows for towns ranked:

1. 115 to 169: 76.25% of the amount of the town's eligible excess costs;
2. 59 to 114: 73% of the amount of the town's eligible excess costs; and
3. one to 58: 70% of the amount of the town's eligible excess costs.

The bill specifies how regional boards of education must be ranked for this system. Their ranking is determined by (1) multiplying the total population of each town in the regional district by the town's ranking, as determined under the bill; (2) adding together the figures determined

for the towns in the district; and (3) dividing the total by the total population of all towns in the district. The ranking of each regional board of education must be rounded to the next higher whole number.

EFFECTIVE DATE: July 1, 2022

§ 269 — ALLIANCE DISTRICT PROGRAM RENEWAL

Renews the alliance district program for five years; requires the commissioner to designate 36, rather than 33, alliance districts

Under current law, the five-year designation for the 33 alliance districts will expire on July 1, 2022. The bill requires the education commissioner to designate 36 alliance districts for five more years, beginning with FY 23. Under the bill, the new designation applies to (1) the 33 school districts with the lowest accountability index (AI) scores and (2) districts that were previously designated, but may not be among the 33 with the lowest scores (see *Background* below).

As under the program's prior authorization, the bill requires the comptroller to withhold from an alliance district town any increase in Education Cost Sharing (ECS) funds that are over the amount the town received in 2012. The comptroller transfers the money to the education commissioner to withhold until she approves the district's alliance district application and plan to improve academic performance.

Existing law requires the alliance districts to expend their alliance funds (1) according to the plan submitted with the application; (2) the minority candidate certification, retention, and residency program; (3) ECS spending requirements; and (4) any other SDE guidelines.

Background — Accountability Index Scores

The "accountability index score" for a school district or an individual school means the score resulting from multiple weighted measures that (1) include the mastery test scores (i.e., the performance index score) and high school graduation rates and (2) may include academic growth over time, attendance and chronic absenteeism, postsecondary education and career readiness, enrollment in and graduation from higher education institutions and postsecondary education programs, civics and arts education, and physical fitness (CGS § 10-223e(a)).

EFFECTIVE DATE: July 1, 2022

§§ 270-272 — EDUCATION COST SHARING (ECS) GRANTS AND PHASE IN SCHEDULE

Changes some of the factors used in the ECS phase in schedule for ECS grant increases and decreases; essentially keeps the yearly changes the same as under current law

The ECS grant program is the state's largest aid program for towns. The bill changes some of the factors used in the ECS phase in schedule for ECS grant increases and decreases, but essentially keeps the yearly changes the same as under current law. It also modifies the method for determining the ECS grant for alliance districts.

Under the bill and current law, towns that are underfunded for their ECS grant will be fully funded by FY 28. Towns that are overfunded gradually receive reductions, from FY 24 to FY 29, until they are at their fully funded level.

With respect to overfunded towns, current law uses the FY 17 ECS aid amount as a starting point every year to determine how much an overfunded town should have its funding reduced. Under the bill, the ECS reductions for overfunded towns are essentially kept the same, but the factors used to do so are different (e.g., rather than the FY 17 ECS amount, the bill uses the ECS amount for the most recent fiscal year).

Some towns are overfunded due primarily to the years when the state froze the level of funding for all towns, even if some towns' student enrollment dropped. A town with declining enrollment generally receives less funding when the formula is updated with new enrollment figures.

EFFECTIVE DATE: July 1, 2022

Changing Terms Used to Categorize Towns (§ 270)

The bill changes two of the terms, "underfunded" and "overfunded," used to determine the first step in ECS grant funding.

Under current law, an underfunded town is one whose fully funded grant amount, as determined by the formula, is greater than its base grant amount. In that case, the town is entitled to an increase in its ECS

grant. A town's base grant amount is the ECS grant amount the town was entitled to for FY 17, minus authorized cuts implemented during FY 17. Under the bill, beginning with FY 23, the phase in compares the fully funded grant amount to a town's ECS grant for the previous fiscal year, rather than the base grant amount. Therefore, any town whose fully funded grant amount is greater than the town's ECS grant amount for the previous fiscal year, is entitled to an ECS grant increase.

The bill also uses the ECS grant amount for the previous fiscal year, rather than the base grant, to determine if a town is overfunded. Under current law, an overfunded town is one whose fully funded grant is less than its base grant. In that case, the town is entitled to either the amount the town received in FY 21 or, starting in FY 24, a decreased grant amount each year. The bill instead compares the fully funded amount to the town's ECS grant for the previous fiscal year.

Grant Adjustment (§ 272)

When determining ECS grant increases or decreases, current law uses a town's "grant adjustment," which is the absolute value of the difference between a town's base grant amount and its fully funded grant amount. The bill changes this definition to the absolute value of the difference between a town's ECS grant entitlement for the previous year and its fully funded grant amount. For underfunded towns, the grant adjustment is the amount needed to be fully funded; for overfunded towns, it is the amount the town is funded above its fully funded grant.

ECS Phase-In Adjustments (§ 270)

The table below shows how the bill changes the phase in for FYs 23-25 ECS grants.

Table: ECS Phase-In Adjustments for ECS Grants (FYs 23-25)

<i>Town Type</i>	<i>FY 23</i>		<i>FY 24</i>		<i>FY 25</i>	
	<i>Current Law</i>	<i>Bill</i>	<i>Current Law</i>	<i>Bill</i>	<i>Current Law</i>	<i>Bill</i>
Under-funded	Previous FY amount plus	Previous FY amount plus	Previous FY amount plus	Previous FY amount plus 20% of	Previous FY amount plus	Previous FY amount plus 25% of

Town Type	FY 23		FY 24		FY 25	
	Current Law	Bill	Current Law	Bill	Current Law	Bill
	10.66% of grant adjustment	16.67% of grant adjustment*	10.66% of grant adjustment	grant adjustment*	10.66% of grant adjustment	grant adjustment*
Over-funded	No reduction (held harmless) to FY 21 amount	No reduction (held harmless) to FY 22 amount (no actual change from current law)	Previous FY amount minus 8.33% of grant adjustment	Previous FY amount minus 14.29% of grant adjustment* (excludes alliance districts, see below)	Previous FY amount minus 8.33% of grant adjustment	Previous FY amount minus 16.67% of grant adjustment* (excludes alliance districts, see below)
*Under the bill, "grant adjustment" means the absolute value of the difference between a town's ECS grant amount for the previous year and its fully funded grant amount. Generally under the bill, the grant adjustment figure (before applying the percentage) will be smaller than under current law.						

Under current law, for FYs 26 and 27, an underfunded town is entitled to an ECS grant for each year equal to the town's previous fiscal year's grant plus 10.66% of its grant adjustment. Under the bill for each of these years, underfunded towns are entitled to their ECS grant amount for the previous year plus 33.33% of their grant adjustment for FY 26 and 50% of their grant adjustment for FY 27.

For the same years, current law provides an overfunded town with a grant equal to its grant for the previous fiscal year minus 8.33% of its grant adjustment. The bill changes the reduction for overfunded towns based on the ECS grant amount for the previous year and the revised definition of the grant adjustment (i.e., minus 20% of grant adjustment for FY 26 and minus 25% of grant adjustment for FY 27). Using the same method, the bill changes the reduction for overfunded towns as follows:

1. for FY 28, from current law's reduction of 8.33% of the grant adjustment to a reduction of 33.33% of the grant adjustment, and
2. for FY 29, from current law's reduction of 8.33% of the grant adjustment to a reduction of 50%.

For FYs 28 and 29, under current law and the bill, underfunded towns will be fully funded.

Alliance Districts (§ 270)

Under current law, for FYs 24-29, any overfunded town that is an alliance district is entitled to an ECS grant equal to its FY 17 amount after reductions in FY 17 (i.e., base grant amount). Under the bill beginning in FY 24, an alliance district, regardless of whether it is overfunded or underfunded, receives an amount that is the greater of (1) the amount the bill determines for either overfunded or underfunded towns, depending on what applies for the alliance district, for that year, (2) its base grant amount, or (3) its ECS grant for the previous fiscal year.

Base Aid Ratio (§ 271)

Under current law, the base aid ratio is a measure of town property wealth (measured by property wealth and income level) used in the ECS formula and there is a minimum of 10% base aid ratio for alliance districts. The bill gives priority school districts the same minimum base aid ratio of 10%.

By law, priority school districts are those whose students receive low standardized test scores and have high levels of poverty (CGS § 10-266p(a)).

§ 273 — OPEN CHOICE HARTFORD REGION GRANT

Creates an additional \$2,000 per student Open Choice grant for Hartford region school districts that accept out-of-district students

The bill creates an additional \$2,000 per student grant for Hartford region school districts that accept public-school students through the Open Choice program. Open Choice is a voluntary inter-district attendance program that allows students from urban school districts to attend suburban school districts, and vice versa, on a space-available basis. SDE provides a per-student grant for school districts that receive Open Choice students.

Under existing law, the grants range from \$3,000 to \$8,000 per student, with higher grant amounts going to districts where the Open Choice students make up a higher percentage of the school district's

enrollment. For example, a district receives \$3,000 per student if Open Choice students are less than 2% of the district's student population. The grant amount increases incrementally until, at the highest amount, a district receives \$8,000 per student if Open Choice students are at least 4% of the student population. Under the bill, the \$2,000 per student grant is in addition to these amounts.

The additional grants will be given to receiving school districts for each out-of-district student who resides in the Hartford region (i.e., the *Sheff* region) and attends school in a receiving district under the program (see *Background* below). The annual additional grants begin in FY 23, within available appropriations, and are paid to assist the state in meeting its obligations under the Comprehensive School Choice Plan, which is part of the most recent renewal of the *Sheff v. O'Neill* court decision and agreements (see *Background* below).

EFFECTIVE DATE: July 1, 2022

Background — Sheff v. O'Neill Decision

In 1996, the Connecticut Supreme Court ruled in *Sheff* that the racial, ethnic, and economic isolation of Hartford public school students violated their right to a “substantially equal educational opportunity” under the state constitution (238 Conn. 1 (1996)). It ordered the state and the plaintiff's representatives to make an agreement, which since has been renewed several times, for the voluntary desegregation of Hartford students.

Background — Sheff Region

This region includes the school districts of Avon, Bloomfield, Canton, East Granby, East Hartford, East Windsor, Ellington, Farmington, Glastonbury, Granby, Hartford, Manchester, Newington, Rocky Hill, Simsbury, South Windsor, Suffield, Vernon, West Hartford, Wethersfield, Windsor, and Windsor Locks.

§§ 274-294, 300-302 & 481 — TECHNICAL AND CONFORMING CHANGES TO MAKE THE CONNECTICUT TECHNICAL EDUCATION AND CAREER SYSTEM (CTECS) AN INDEPENDENT STATE AGENCY

Makes numerous conforming, minor, and technical changes necessary as part of transitioning CTECS into an independent agency; addresses specific duties of the CTECS executive director and superintendent

By law, the Connecticut Technical Education and Career System (CTECS) (formerly known as the technical high school system) becomes an independent state agency, separate from SDE, by July 1, 2022 (i.e., the 2022-23 school year). The bill makes numerous minor and technical changes necessary as part of CTECS' transition to an independent agency. This analysis highlights the more significant of these changes.

The bill makes changes to the statutes to reflect that CTECS has its own board and leadership that is not subject to SBE governance. Under the bill:

1. SDE may no longer receive any money or property given or bequeathed to CTECS (§ 274);
2. CTECS, rather than SBE, must provide the professional services necessary to identify children enrolled at a technical high school who require special education and appropriately educate these students (§ 277);
3. the CTECS executive director assumes responsibility of the Vocational Education Extension Fund (including the apprenticeship account), which helps pay for needed apprenticeship program materials and equipment (§ 279); and
4. the CTECS executive director replaces SBE in the process for temporarily closing a technical high school and moves authority to close a school for more than six months from SBE to the executive director (the bill allows the director to do so upon the CTECS board's recommendation) (§ 283).

The bill also repeals three obsolete laws on an expired reporting requirement (CGS § 10-4r), obsolete appointment (CGS § 10-13), and expired study requirement (CGS § 10-95m).

EFFECTIVE DATE: July 1, 2022

CTECS Superintendent (§ 284)

Hiring the Superintendent. Under existing law, the CTECS executive director, who is appointed by the governor, is the system's chief executive and the superintendent is the school leader in charge of education reporting to the executive director. The CTECS board is the policy making body.

Under current law, the board recommends superintendent candidates to the education commissioner and, beginning July 1, 2023, must begin making recommendations instead to the CTECS executive director. The bill moves up this change by a year, to July 1, 2022. As under existing law, the bill gives the executive director discretion to hire or reject any superintendent candidate the board recommends. The bill specifies that when the executive director rejects a candidate the board must recommend another candidate, until the executive director hires one.

Existing law allows the superintendent's three-year term to be extended for up to three years at a time. The bill specifies that (1) the executive director is the official who may extend the term and (2) requires him to consult with the board before doing so.

Under the bill, a candidate cannot be hired or assume superintendent duties until the executive director receives written confirmation from the education commissioner that the candidate is properly certified as a superintendent or has received a certification waiver from the commissioner, as permitted by law.

Acting Superintendent. The bill allows the executive director to hire an uncertified candidate as an acting superintendent for a one-year probationary period, if the education commissioner approves. An acting superintendent assumes all duties of the superintendent and must successfully complete an SBE-approved school leadership program at a higher education institution in the state.

When the probationary period ends, the executive director may request that the commissioner grant a (1) certification waiver for the

acting superintendent, as allowed under state law, or (2) one-time probationary period extension of up to a year. To grant the extension, the commissioner must determine that the executive director showed a significant need or hardship for it.

Administrative Policies. The bill requires the superintendent, in consultation with the executive director, to develop and revise, as necessary, administrative policies for operating the technical education and career schools and programs offered in the system. It specifies that these administrative policies must not be considered state regulations.

Under existing law, the superintendent is responsible for the operation and administration of the technical education and career schools and other CTECS education matters. The bill additionally makes the superintendent responsible for supervision of the schools and educational matters.

Evaluation. The bill requires the executive director, in consultation with the board, to evaluate the superintendent's performance at least annually according to guidelines and criteria the executive director and the board set.

Master Schedule (§ 286)

The bill requires the superintendent, rather than the executive director as under current law, to establish a master schedule for CTECS. The executive director must ensure the superintendent does this.

CTECS Board (§ 287)

Membership. The bill gives the governor the authority to remove a CTECS board member for inefficiency, neglect of duty, or misconduct in office. Under current law, the board's appointed members serve at the pleasure of the governor (CGS § 4-1a). The bill also prohibits any CTECS employee from being a member of the board.

By law, the CTECS board consists of 11 members, seven appointed by the governor and confirmed by the General Assembly and four executive branch officials serving ex-officio. Among other things, the board advises the superintendent and executive director on specified

matters.

Achievement Goals. By law, the CTECS board must establish achievement goals for its students and use quantifiable measures for the performance of each technical high school. One required measure under current law is student performance on state mastery exams, as defined in law, in grade 10 or 11. The bill changes this to performance on standardized academic assessments without the statutory reference, which could include standardized tests that are not part of the state mastery test law.

§§ 295-298 — CTECS AND THE TEACHERS RETIREMENT SYSTEM (TRS)

Makes conforming changes to maintain CTECS teachers and professional staff as members in TRS

Existing law allows CTECS teachers and other professional staff to choose between TRS or the State Employee Retirement System when they are hired. The bill makes several conforming changes to maintain membership in TRS for CTECS teachers and other professional staff. (TRS membership consists primarily of local board of education teachers and other professionals.)

Specifically, the bill adds CTECS to TRS's list of employers and definition of public school (§§ 295 & 296). It similarly adds CTECS professional staff to TRS's definition of teacher (existing law includes SBE's professional staff in this definition) (§ 297).

EFFECTIVE DATE: July 1, 2022

§ 299 — DELETED BY HOUSE "C"

§ 303 — MAGNET SCHOOL SUPPLEMENTAL TRANSPORTATION GRANT

Changes the payment schedule and number of payments for a supplemental transportation grant for Sheff magnet schools

The bill changes the payment schedule and frequency for supplemental transportation grants to magnet schools that help the state meet its obligations under the *Sheff v. O'Neill* desegregation court decision.

Under current law the education commissioner must pay these grants as follows: 70% of the grant on or before the end of the fiscal year and the balance on or before September 1 of the following fiscal year upon completion of the comprehensive financial review, provided:

1. any unpaid balance of documented, eligible transportation costs (including vendor bills) incurred on or before December 31 is paid on or before February 1; and
2. any unpaid balance of documented, eligible transportation costs incurred on or before March 31 is paid on or before May 1.

The bill replaces this with a new payment schedule. For FY 22, it requires that (1) up to 100% of the grant is paid on or before June 30, 2022, and (2) any remaining balance is paid on or before September 1, 2022, upon completion of the comprehensive financial review. If the commissioner determines after the review that there was an overpayment in FY 22, then the overpayment must be refunded to SDE.

For FY 23 and each following year, it requires that (1) up to 95% of the grant is paid by June 30 of that fiscal year based on documentation provided before May 31 and (2) the balance is paid by September 1 of the following fiscal year after the comprehensive financial review is completed. The same provisions for overpayments above apply.

EFFECTIVE DATE: Upon passage

§ 304 — PRIVATE SCHOOL CURRICULUM ACCREDITATION

Requires SBE to allow private school curriculum accreditation by Cognia

Beginning July 1, 2023, the bill requires the State Board of Education to allow a private school's supervisory agent to accept curriculum accreditation from Cognia, a nonprofit accreditation and certification agency.

EFFECTIVE DATE: July 1, 2022

§§ 305-309 — FY 22 BUDGET CHANGES

Please refer to the fiscal note for a summary of these sections

§§ 310-324, 362 & 364 — NEW BOND AUTHORIZATIONS FOR STATE AGENCY PROJECTS

Authorizes state GO bonds in FY 23 for various state projects and grant programs

The bill authorizes state general obligation (GO) bonds in FY 23 for the state projects and grant programs listed in the table below. The bonds are subject to standard issuance procedures and have a maximum term of 20 years.

The bill includes a standard provision requiring, as a condition of bond authorizations for grants to private entities, each granting agency to include repayment provisions in its grant contract if the facility for which the grant is made ceases to be used for the grant purposes within 10 years of receipt. The required repayment is reduced by 10% for each full year that the facility is used for the grant purpose.

Table: GO Bond Authorizations for State Projects and Grant Programs (FY 23)

§	Agency	Purpose	Amount
STATE PROJECTS			
311(a)	Office of Legislative Management	Alterations, renovations, improvements, and technology upgrades at the State Capitol Complex	\$2,000,000
311(b)	Office of Policy and Management (OPM)	State matching funds for projects and programs allowed under the federal Infrastructure Investment and Jobs Act	75,000,000
311(c)	Agricultural Experiment Station	Renovations and improvements to Jenkins Laboratory greenhouses	800,000
		Construction and equipment for Valley Laboratory additions and renovations	8,000,000
311(d)	UConn Health Center	Deferred maintenance, code compliance, and infrastructure improvements	40,000,000
362	Connecticut State Colleges and Universities	Constructing, improving, or equipping child care centers on or near college and university campuses, including paying associated architectural, engineering, or demolition service costs	10,000,000
364	Department of Administrative Services (DAS)	Grants for school air quality improvements including upgrading, replacing, or installing heating, ventilation, and air conditioning equipment; authorizes up to \$50 million to be used to reimburse improvements completed from March 1, 2020, to July 1, 2022	75,000,000

§	Agency	Purpose	Amount
GRANTS			
318(a)	OPM	Grants for long-term acute care hospitals accredited by the Commission on Accreditation of Rehabilitation Facilities for electronic medical record systems	4,500,000
		Grants for state-licensed acute care hospitals for facility construction for adult, inpatient psychiatric beds	5,000,000
318(b)	Department of Emergency Services and Public Protection	Grant to North Branford Police Department	4,500,000
318(c)	Department of Agriculture	Grants for farmland restoration and climate resiliency	7,000,000
		Grants for food resource organization capital improvements	10,000,000
318(d)	DEEP	Grants for matching funds necessary for municipalities, school districts, and school bus operators to maximize federal funding for purchasing or leasing zero-emission school buses and electric vehicle charging or fueling infrastructure	20,000,000
		Grants for landfills, including the Hartford landfill	5,000,000
318(e)	DECD	Grants to nonprofit organizations sponsoring cultural and historic sites, including for the Naugatuck Railroad to design and construct a handicap-accessible platform at the Naugatuck rail line's Waterbury stop	100,000
318(f)	SDE	Grants to regional educational service centers for interdistrict magnet school capital expenses; earmarks up to \$10 million for grants to the Capital Region Education Council	20,000,000
318(g)	Office of Early Childhood	Grants for constructing, improving, or equipping child care centers, including paying associated costs for the infant and toddler pilot program's architectural, engineering, or demolition services	5,000,000
318(h)	Capital Region Development Authority (CRDA)	Grants to encourage development pursuant to CRDA's statutory purposes	50,000,000

EFFECTIVE DATE: July 1, 2022

§§ 325-330 — NEW TRANSPORTATION PROJECT AUTHORIZATION

Authorizes up to \$20 million in STO bonds for purchasing and installing advanced wrong-way driving technology

The bill authorizes up to \$20 million in special tax obligation (STO) bonds for the Department of Transportation (DOT) to purchase and install advanced wrong-way driving technology.

EFFECTIVE DATE: July 1, 2022

§§ 331-333 — CONNECTICUT BABY BOND TRUST PROGRAM

Delays the (1) trust's establishment to July 1, 2023, and (2) program's bond authorization schedule by two years, from FY 23 to FY 25; limits the program's designated beneficiaries to babies born on or after July 1, 2023, rather than July 1, 2021, whose births were covered under HUSKY

The Connecticut Baby Bond Trust program, administered by the state treasurer, authorizes up to \$600 million in bonds to provide designated beneficiaries up to \$3,200 in a state trust. Once they reach age 18, beneficiaries that meet the program's eligibility requirements may receive the funds, including any investment earnings, to be used for an eligible expenditure (e.g., education, buying a home or investing in a business in Connecticut, and personal financial investments).

The bill delays the trust's establishment to July 1, 2023, and limits the program's designated beneficiaries to babies born on or after that date, rather than July 1, 2021, whose births were covered under HUSKY. It also makes a conforming change to the provision requiring the Department of Social Services to inform the treasurer of the number of designated beneficiaries born each year.

Current law authorizes the treasurer to issue up to \$50 million in state general obligation bonds per year for the program from FYs 23-34. The bill delays this authorization schedule by two years, to FY 25, and correspondingly extends it to FY 36.

EFFECTIVE DATE: Upon passage

§§ 334-335 & 337-361 — CHANGES TO EXISTING AUTHORIZATIONS

Modifies amounts authorized for specified bond authorizations; makes various language changes to existing authorizations

Increased Authorizations

The bill increases the amounts authorized for the existing bond authorizations shown in the table below.

Table: Increases to Existing Authorizations

§	Agency	Purpose/Fund	Current Authorization	Bill's Authorization	Increase
334	OPM	Urban Act; earmarks up to \$20 million for the homeownership initiative described below	\$40,000,000	\$160,000,000	\$120,000,000
335	OPM	Capital Equipment Purchase Fund	10,000,000	25,000,000	15,000,000
339	DEEP	Connecticut bikeway, pedestrian walkway, recreational trail, and greenway grant program	3,000,000	6,000,000	3,000,000
341	DECD	Grant to the Connecticut Science Center	10,500,000	21,200,000	10,700,000
355	Connecticut Port Authority	Grants for deep water port improvements, including dredging	70,000,000	90,000,000	20,000,000
357	DEEP	Alterations, renovations, and new construction at state parks and other recreation facilities, including Americans with Disabilities Act improvements	15,000,000	30,000,000	15,000,000
358	Department of Correction	Alterations, renovations, and improvements to existing state-	10,000,000	70,000,000	60,000,000

§	Agency	Purpose/Fund	Current Authorization	Bill's Authorization	Increase
		owned buildings for inmate housing, programming and staff training space, additional inmate capacity, support facilities, and off-site improvements			
361	DEEP	Grants to municipalities for open space acquisition and development for conservation or recreational purposes	10,000,000	15,000,000	5,000,000

Homeownership Initiative. The bill earmarks up to \$20 million in Urban Act bonds for a Department of Housing (DOH) homeownership initiative for certain housing construction and redevelopment activities. This initiative must be in collaboration with one or more local community development financial institutions in qualified census tracts as defined under the federal Low-Income Housing Tax Credit program (i.e., federally designated tracts in which (1) at least 50% of households have incomes below 60% of the area median gross income or (2) the federal poverty rate is at least 25%).

Under the initiative, construction and redevelopment activities (1) must be completed by developers or nonprofits residing in the municipality where the work occurs and (2) result in new homeownership opportunities for residents of the qualified census tracts.

Cancellations and Reductions

The bill cancels or reduces the authorizations shown in the table below.

Table: Bond Cancellations and Reductions

§	Agency	Purpose/Fund	Current Authorization	Amount Cancelled
338	DAS	School construction projects	\$550,000,000	\$100,000,000
344	DOT	Construction, repair, or maintenance of highways, roads, bridges, or bus and rail facilities and equipment	200,000,000	200,000,000
346, 352	OPM	Grants to private, nonprofit, tax-exempt health and human service organizations that receive state funds to provide direct services to state agency clients: alterations, renovations, improvements, additions, and new construction, including (1) health, safety, ADA compliance, and energy conservation improvements; (2) information technology systems; (3) technology for independence; (4) vehicle purchases; and (5) property acquisition (repeal of FY 22 authorization effective upon passage)	35,000,000	15,000,000
348	DOT	Construction, repair, or maintenance of highways, roads, bridges, or bus and rail facilities and equipment (see below for language change)	200,000,000	20,000,000
350	Department of Motor Vehicles	Development of a master plan for department facilities	500,000	500,000
353	OPM	Grant for a Sandy Hook memorial (effective upon passage)	2,600,000	2,600,000
360	OPM	Grants for regional and local improvements and development to various enumerated projects	35,000,000	35,000,000

Language Changes

The bill changes the purposes of existing bond authorizations, as indicated in the following table.

Table: Language Changes for Existing Authorizations

§	Amount Authorized	Current	Proposed Change
337	\$30,000,000	Forgivable loans and grants to landlords (1) participating in a rapid rehousing program (e.g., waiving security deposits or abating rent for a designated period) and (2) abating rent for scattered supportive housing units by, among other things, capitalizing operating and replacement reserves for them	Limits the fund's purposes to providing grants to capitalize operating and replacement reserves in supportive housing units
342	28,000,000	Norwalk Community College: phase III master plan implementation	Gateway Community College: acquire, design, and construct facilities for workforce development programs, including for transportation, alternative energy, advanced manufacturing, and health sectors
348	200,000,000 (reduced to 180,000,000 under the bill)	Construction, repair, or maintenance of highways, roads, bridges, or bus and rail facilities and equipment (see above for cancellation)	Allows the bonds to be used for noise barriers; requires up to \$75 million of the authorization to be used for a matching grant program to help municipalities modernize existing traffic signal equipment and operations
354	20,000,000	CareerConneCT workforce training programs (effective upon passage)	Allows up to \$5 million of the authorization to be used to capitalize the Connecticut Career Accelerator Program Account

EFFECTIVE DATE: July 1, 2022, except the provisions noted above and a corresponding supertotal provision are effective upon passage.

§ 336 — GRANT PROGRAM FOR PURCHASING ELIGIBLE BODY AND DASHBOARD CAMERAS AND RELATED EQUIPMENT AND SERVICES

Extends, to FY 23, the municipal grant program for purchasing eligible body and dashboard cameras and related equipment and services

The bill extends, to FY 23, the OPM-administered municipal grant program for costs associated with purchasing eligible police body cameras, digital data storage devices or services, and certain dashboard cameras. By law, the grants are for up to 50% of the associated costs for

distressed municipalities and up to 30% for all other municipalities.

EFFECTIVE DATE: July 1, 2022

§ 363 — DOH HEALTH CARE WORKER HOUSING PROGRAM

Authorizes up to \$20 million in bonds for DOH to develop housing for health care workers

The bill authorizes up to \$20 million in state GO bonds for DOH to (1) develop housing for health care workers and (2) fund the costs associated with the partnership described below. Under the bill, DOH must develop this housing together with the Chief Workforce Officer. It may use the bond funds for land acquisition, project design, and construction costs, among other things.

Under the bill, the DOH commissioner and the Connecticut Housing Finance Authority executive director must seek to partner with one or more hospitals in the state to increase workforce housing options. By January 1, 2023, they must report to the Housing Committee on the partnership's status and recommendations on other ways to increase these housing options.

EFFECTIVE DATE: July 1, 2022

§ 365 — OFFICE OF COMMUNITY ECONOMIC DEVELOPMENT ASSISTANCE

Establishes a new office within DECD to assist eligible community development (CDCs) corporations; authorizes up to \$50 million in state GO bonds to fund its operations and a grant program for projects that certified CDCs undertake in target areas

The bill establishes a new Office of Community Economic Development Assistance (OCEDA) within DECD to provide technical, investment, and grant assistance to eligible community development corporations (CDCs). The new office must do the following, among other things:

1. identify target areas in the state based on specified economic indicators,
2. certify new and existing CDCs that serve these areas and meet certain other criteria,

3. provide various types of assistance to these CDCs,
4. administer a grant program for projects that certified CDCs undertake in target areas, and
5. annually report to the legislature on its activities and outcomes during the prior fiscal year.

The bill authorizes up to \$50 million in state general obligation bonds for DECD to fund OCEDA's operations and the grant program.

CDC Certification Process

The bill allows organizations meeting certain requirements to become certified CDCs in the state by applying to OCEDA in the form and manner it determines. OCEDA must certify both (1) existing CDCs operating in the state, or seeking to do so, that meet these requirements and (2) any new CDCs established under this application process. The bill also requires OCEDA to maintain a current list of certified CDCs and post it on DECD's website.

Under the bill, a "certified CDC" is a 501(c)(3) federally tax-exempt organization that meets the following requirements:

1. focuses a substantial majority of its efforts on serving one or more "target areas" as described below,
2. has the purpose of engaging and working with local residents and businesses on community development efforts to sustainably develop and improve urban communities in a manner that creates and expands economic opportunities for low- and moderate-income people,
3. shows OCEDA that its constituency is meaningfully represented on its board as described below; and
4. is certified by OCEDA (existing CDCs seeking certification need not meet this requirement).

Target Areas

Under the bill, a “target area” is a contiguous geographic area in which the (1) current unemployment rate exceeds the state’s by at least 25% or (2) mean household income is 80% or less of the state’s as determined by the most recent decennial census. OCEDA must identify the eligible target areas and post them on DECD’s website.

Community Representation on the Board of Directors

The bill establishes the following four measures and ways for a CDC to show to OCEDA that its constituency is meaningfully represented on its board:

1. percentage of board members who are residents of a target area or community that the CDC serves or seeks to serve,
2. percentage of members who are low- or moderate-income,
3. board’s racial and ethnic composition compared to the community’s, or
4. use of committees or membership meetings to ensure that its constituency has a meaningful role in the CDC’s governance and direction.

OCEDA Duties

Within available appropriations, OCEDA must do the following:

1. assist organizations seeking to establish themselves, or be certified, as a CDC;
2. provide grants to certified CDCs for projects in target areas as described below;
3. assist CDCs in soliciting investment funding and serve as the liaison between CDCs and investors; and
4. try to ensure coordinated, efficient, and timely responses to these organizations, CDCs, and investors.

Certified CDC Grant Program

OCEDA must establish a grant program for projects that certified CDCs seek to undertake in target areas, including infrastructure improvements, housing rehabilitation, and streetscape and business façade improvements. It must establish the program's (1) application process and form; (2) eligibility criteria; and (3) caps or limitations, if any, on grant awards. It must also post program information on DECD's website.

Reporting Requirement

Beginning by July 1, 2023, OCEDA must annually submit a report to the Commerce, Planning and Development, and Finance, Revenue and Bonding committees. At a minimum, the report must provide the following information for the prior fiscal year: (1) a description of the office's activities, (2) the number of CDCs established and certified, (3) the number and amounts of grants awarded to certified CDCs, and (4) a description of the projects (including their locations) certified CDCs undertook.

EFFECTIVE DATE: July 1, 2022

§ 366 — SCHOOL CONSTRUCTION GRANT COMMITMENTS

Authorizes eight school construction state grant commitments totaling \$137.35 million toward total project costs of \$495.34 million; reauthorizes one technical high school project with an additional state grant commitment of \$59.55 million, which matches the additional estimated project cost

The bill authorizes eight school construction state grant commitments totaling \$137.35 million toward total estimated project costs of \$495.34 million. It also reauthorizes one technical high school renovation project that has changed substantially in scope and cost with an additional state grant commitment of \$59.55 million that matches the additional estimated project cost.

Under the state school construction grant program, the state reimburses towns and local districts a percentage of eligible school construction costs through state bonds (with less wealthy municipalities receiving a higher reimbursement). The municipalities pay the remaining costs.

For the state-operated Connecticut Technical Education and Career System, (i.e., technical high schools), the state pays 100% of the project costs.

For each project authorized by the bill, the table below shows the district, school, project type, total cost and state grant commitment estimates, and state reimbursement rate.

Table: 2022 School Construction Grant Commitments

<i>District</i>	<i>School</i>	<i>Project Type</i>	<i>Estimated Project Costs</i>	<i>Estimated Grant</i>	<i>Reimbursement Rate</i>
Farmington	Farmington High School	New	\$131,666,047	\$24,924,383	18.93%
Stamford	Westhill High School	New	257,938,824	51,587,765	20%
Granby	Granby Memorial High School	Alteration	3,486,378	1,319,943	37.86%
Hamden	Hamden Middle School	Extension/ alteration; diversity school	17,100,000	13,680,000	80%
Manchester	Keeney Elementary School	Renovation	33,200,000	27,811,640	66.43%
Milford	Pumpkin Delight Elementary School	Extension/ alteration	15,060,750	5,593,563	37.14%
Simsbury	Latimer Lane School	Renovation	36,792,406	12,351,211	33.57%
Regional District 7	Regional School District No. 7, Agricultural Education Center	Vo-ag equipment	100,000	80,000	80%
Totals			\$495,344,405	\$137,348,505	

Reauthorized Project

The bill also reauthorizes, with a change in cost and scope, the proposal for Bullard-Havens Technical High School in Bridgeport. The

reauthorization changes it from an extension and alteration project with an estimated total project cost of \$139,447,195 to a new construction project with an estimated cost of \$199,000,000. This is a \$59.55 million increase that the state pays in full.

The Bullard-Havens proposal was originally authorized by PA 05-6, June Special Session (JSS), as an extension and alteration project with an estimated total project cost of \$27,331,000. PA 15-3, JSS, then reauthorized the project with a new estimated cost of \$60,383,000. Last year, Bullard-Havens was reauthorized again by PA 21-111, § 113, with a new estimated cost of \$139,447,195.

EFFECTIVE DATE: Upon passage

§§ 367, 379 & 381-383 — SCHOOL SAFETY INFRASTRUCTURE COUNCIL

Eliminates the School Safety Infrastructure Council and generally transfers its duties to the School Building Projects Advisory Council; adds a ninth member to the advisory council

The bill eliminates the School Safety Infrastructure Council (SSIC) and generally transfers its duties to the School Building Projects Advisory Council. SSIC is 10-member council of agency heads and gubernatorial and legislative appointees, chaired by the DAS commissioner. It is tasked under current law with developing the school safety infrastructure criteria for projects that are awarded state school building project reimbursement grants and school security infrastructure competitive grants.

Under current law, the School Building Projects Advisory Council is an eight-member council of agency heads and executive branch appointees, also chaired by the DAS commissioner, that conducts studies, research, and analyses and makes recommendations to the governor and legislature on improvements to the school building projects processes. The bill adds to the council's membership one person, appointed by the governor, with experience and expertise in construction for students with disabilities and the federal Americans with Disabilities Act accessibility provisions.

The bill eliminates provisions in current law requiring SSIC to develop the grants' criteria, meet at least annually to review and update the criteria, and make them available to boards of education. It instead requires the advisory council to periodically review and update the criteria as necessary and submit any updates to the education and emergency services and public protection commissioners, along with the Public Safety and Security and Education committees. The advisory council must also periodically review and update as necessary the school safety infrastructure criteria.

The bill also makes various conforming changes.

EFFECTIVE DATE: July 1, 2022

§ 368 — MAGNET SCHOOLS AND SCHOOL CONSTRUCTION GRANTS

Eliminates a provision limiting DAS's approval of magnet school construction projects to ones found to reduce racial, ethnic, and economic isolation

The bill eliminates a provision requiring the DAS commissioner to only approve school construction grant applications for interdistrict magnet school projects if the State Department of Education (SDE) commissioner finds the school will reduce racial, ethnic, and economic isolation. Under existing law, unchanged by the bill, SDE only approves magnet school funding if the school will reduce racial, ethnic, and economic isolation (CGS § 10-264l).

The bill also makes conforming and technical changes, including (1) deleting an obsolete moratorium provision on grant applications for the construction of new magnet schools and (2) referencing DAS, rather than SDE, in provisions on the application process.

EFFECTIVE DATE: July 1, 2022

§ 369 — CAPITOL REGION EDUCATION COUNCIL (CREC) LONG-RANGE CAPITAL IMPROVEMENT PLAN

Requires CREC to adopt, every five years, a long-range plan of capital improvement and school building project priorities for magnet schools and a rolling three-year capital plan; requires the plans be submitted to DAS, which in turn submits them to the legislature

Long-Range Plan

The bill requires CREC to adopt, by January 1, 2023, and every five years after, a long-range plan of capital improvement and school building project priorities and goals for magnet school facilities that will help the state address its obligations under the *Sheff* court decision and related stipulations and orders. The plan must include a summary of activities related to school building projects, capital improvements, and capital equipment included in a rolling three-year school building plan that is required by the bill.

Upon adoption of the long-range plan, CREC must submit it to DAS, and the department must file it directly with the Appropriations, Education, and Finance, Revenue and Bonding committees.

Rolling Three-Year Plan

The bill requires CREC to maintain a rolling three-year school building project, capital improvement, and equipment plan that identifies the (1) expected school building projects, capital improvements, and capital equipment for each CREC magnet school facility and their anticipated cost and (2) specific equipment each magnet school is expected to need and the estimated cost, based on the useful life of existing equipment and changing technology projections.

It also requires CREC to annually submit the plan to DAS, and the department must file it directly with the Appropriations, Education, and Finance, Revenue, and Bonding committees.

EFFECTIVE DATE: July 1, 2022

§ 370 — PENALTY FOR SCHOOL CONSTRUCTION PROJECTS FAILING TO MEET MINORITY BUSINESS ENTERPRISE (MBE) SET-ASIDE GOALS

Withholds 5% of a school construction project's reimbursement grant if the applicant does not meet MBE set-aside goals; reduces the amount of a reimbursement grant held back pending an audit from 11% to 5%

Penalty for Not Reaching MBE Goals

Under the state set-aside program, state agencies (municipal projects are addressed through the contractors, see below) must set aside at least 25% of the total value of all contracts they let for construction, goods,

and services each fiscal year for exclusive bidding by certified small contractors. The agencies must further reserve at least 25% of the set-aside value (i.e., at least 6.25% of the total) for exclusive bidding by certified MBEs. Contractors awarded municipal public works contracts, which include school construction projects, must comply with these requirements if the (1) contract includes state financial assistance and (2) total contract value exceeds \$50,000.

By law, a “small contractor” is a business that maintains its principal place of business in Connecticut and is (1) registered as a small business with the federal government or (2) if a nonprofit, had gross revenues of \$20 million or less during its most recent fiscal year and is independent. MBEs are small contractors owned by women, minorities, or people with disabilities. The owner must have managerial and technical competence and experience directly related to his or her principal business activities. In addition to set-aside requirements, the existing law requires nondiscrimination and affirmative action provisions be included in municipal public works contracts (as well as state contracts) (CGS §4a-60g).

The bill requires, starting with projects authorized on or after July 1, 2024, DAS to withhold 5% of a school construction reimbursement grant if the DAS commissioner determines that the applicant has failed to comply with the provisions of state set-aside law for MBEs. (The bill places the burden to meet the MBE requirement on the town applying for school construction funds, but existing law places the MBE requirement on the project contractor, not the town.)

Reduction of Audit Holdback Amount

Under current law, DAS must hold back 11% of a school construction applicant’s reimbursement grant pending the completion of an audit on the project. The bill reduces this amount to 5%.

Existing law, unchanged by the bill, requires DAS to complete the audit within six months of a request for the final payment or the applicant may have an independent audit performed and include the audit cost in the eligible project cost.

EFFECTIVE DATE: Upon passage

§ 371 — INDOOR AIR QUALITY GRANT PROGRAM

Requires DAS to administer a reimbursement grant program beginning in FY 23 for the cost of indoor air quality improvements, including the installation, replacement, or upgrading of HVAC systems

Beginning in FY 23, the bill requires DAS to administer a reimbursement grant program for costs related to indoor air quality improvements in school buildings. It allows local or regional boards of education or regional education service centers (RESCs) to apply for the grants to reimburse costs associated with projects to install, replace, or upgrade HVAC systems or other improvements. The bill requires boards and RESCs to apply with the DAS commissioner when and in a manner she determines. It prohibits boards of education and RESCs from using these grant funds to replace local matching requirements for other federal or state funding received for indoor air quality improvement or HVAC projects. Boards may submit an application for a project that (1) began on or after March 1, 2020, and was completed before this act's effective date or (2) began on or after this act's effective date.

Under the bill, if there are insufficient funds to give grants to all applicants, then the commissioner must prioritize applicants with schools that have the greatest need for HVAC systems or other indoor air quality improvements. She must use the eligibility criteria described below when determining priority among applicants.

Eligibility Criteria

The bill requires the DAS commissioner to develop eligibility criteria to use when determining whether to award a grant for air quality improvements to a school. These criteria must include the following:

1. the age and condition of the school's current HVAC system,
2. current air quality issues at the school,
3. the overall school building's age and condition,
4. the school district's master plan,

5. maintenance records availability,
6. a contract or plans for the HVAC system's routine maintenance cleaning, and
7. the board's or RESC's ability to finance the project's remainder cost after receiving a program grant.

Additionally, the bill prohibits the DAS commissioner from awarding a grant to any applicant that, beginning July 1, 2024, has not certified compliance with the uniform inspection and evaluation of an existing HVAC system under existing law.

Grant Amount Calculations

The bill establishes different grant award calculations for local boards of education, regional boards of education, and RESCs.

Local Boards of Education. Under the bill, a local board may receive a reimbursement grant for 20-80% of its eligible expenses, based on its town ranking. The bill establishes the following formula for DAS to use to determine the ranking:

1. Rank each town in descending order (from 1 to 169) using its adjusted equalized net grant list per capita (AENGL) (a measure of town wealth as defined in the education cost sharing (ECS) grant statutes (see *Background* below)) from two, three, and four years prior to the fiscal year of the grant application.
2. Assign a reimbursement rate from 20-80% for each town on a continuous scale, with the first-ranked town receiving a 20% rate and the last-ranked town receiving an 80% rate.

Regional Boards of Education and RESCs. Under the bill, a regional board or RESC may receive a reimbursement grant for a percentage of its eligible expenses under the following ranking formula, which is based on the local boards' formula and the regional district's or RESC's member towns' populations:

1. Multiply each member town's total population by its AENGL

ranking calculated above.

2. Add together the above products for each member town.
3. Divide the total sum by the total population of all member towns.
4. Round each regional board's or RESC's ranking to the next higher whole number.
5. Assign to each regional board or RESC the same reimbursement percentage as a town with the same rank (presumably, under the AENGL-based formula for local boards of education).
6. For regional boards only, add 10% to this amount, up to a maximum reimbursement of 85%.

Ineligible Costs

The bill makes the following costs ineligible for grant reimbursement: (1) routine HVAC system maintenance and cleaning, (2) work that is otherwise eligible for a state school construction reimbursement grant, and (3) work on a public school administrative or service facility that is located outside of a public school building.

Project Completion and Maintenance

Under the bill, any project that receives an indoor air quality improvement grant award must be completed by the end of the next calendar year. However, the DAS commissioner may extend the project duration if the recipient board or RESC shows good cause.

The bill places the responsibility for an HVAC system's routine maintenance and cleaning with the grant recipients and requires them to train to school personnel and building maintenance staff about the system's proper use and maintenance.

EFFECTIVE DATE: July 1, 2022

Background — Adjusted Equalized Net Grand List (AENGL) Per Capita

AENGL per capita is a measure of town property wealth. It is

calculated using the following formula:

1. Take the net grand list of the town upon which taxes were levied for the town's general expenses three years before the fiscal year when the grant will be paid, equalized by the Office of Policy and Management secretary to calculate ECS grants consistent with state law.
2. Divide the above number by the product of the (a) town's total population and (b) ratio of the town's per capita income to the per-capita income of the town at the 100th percentile among all towns when ranked from lowest to highest in per capita income (CGS § 10-261).

§ 372 — HVAC SYSTEM PIPELINE TRAINING PILOT PROGRAM

Requires OWS to establish an HVAC system pipeline training program

By March 1, 2023, the bill requires the Office of Workforce Strategy, in consultation with the Department of Labor (DOL), Office of Higher Education (OHE), and Technical Education and Career System (TECS), to establish, within available appropriations, a heating, ventilation, and air conditioning (HVAC) system pipeline training pilot program.

The pilot program must develop pre-apprenticeship workforce pipeline training programs that meet the following criteria:

1. are designed to identify and support individuals from underserved and underrepresented populations and historically marginalized communities in (a) the training for installation and maintenance of HVAC systems and (b) any related, associated trades;
2. are offered to these individuals; and
3. include comprehensive career navigational and wraparound training services, including recruitment; job coaching; supportive services including transportation services; and job placement support.

Selection of Participating Organizations

Under bill, the Office of Workforce Strategy (OWS) must consult with DOL to develop selection criteria and use that criteria to select organizations to provide services as part of the pilot program. The criteria must prioritize the following:

1. low-income and underrepresented individuals who reside in a municipality with a population of more than 100,000 and
2. nonprofit and community-based organizations that currently serve low-income and underrepresented individuals.

Selection of Program Participants

The bill allows OWS, in consultation with DOL, OHE, and TECS, to identify recent HVAC program participants in the state and support them in transitioning to a career to immediately fill HVAC system talent demands.

Reporting to the Legislature

By December 1, 2023, OWS must report to the governor and the Education, Higher Education, and Labor committees on the number of individuals who have (1) enrolled in a training program offered as part of the pilot, (2) completed these training programs, and (3) completed these training programs and obtained a permanent job in the HVAC system sector.

EFFECTIVE DATE: July 1, 2022

§ 373 — INDOOR AIR QUALITY IN SCHOOLS

Requires boards of education to conduct a uniform inspection and evaluation of the HVAC system in each school building under its jurisdiction every five years; requires the HVAC inspection report be made public at a board of education meeting and include any corrective actions; requires the existing air quality inspections to take place every three years rather than five

Five-Year Inspection and Evaluation

Due by January 1, 2024, and every five years thereafter, each board of education must conduct an inspection and evaluation of the heating, ventilation, and air conditioning (HVAC) system within each school building under its jurisdiction. The written assessment report must be

available for public inspection, posted on the entity's website, and submitted to DOL.

Ventilation Inspection and Report

A certified testing, adjusting, and balancing technician, an industrial hygienist certified by the American Board of Industrial Hygiene or the Board for Global EHS Credentialing, or a mechanical engineer must perform inspection and evaluation.

Under the bill a "certified testing, adjusting and balancing technician" is (1) a technician certified to perform testing, adjusting, and balancing of HVAC systems by the Associated Air Balance Council; the National Environmental Balancing Bureau; or the Testing, Adjusting and Balancing Bureau or (2) an individual training under the supervision of a (A) Testing, Adjusting and Balancing Bureau certified technician or (B) person certified to perform ventilation assessments of HVAC systems through a certification body accredited by the American National Standards Institute.

The bill includes specific items that must be in the HVAC system inspection and evaluation, including the following:

1. testing for maximum filter efficiency,
2. physical measurements of outside air rate,
3. verification of ventilation components' operation,
4. measurement of all air distribution through inlets and outlets,
5. verification of unit operation and performance of required maintenance in accordance with American Society of Heating, Refrigerating and Air-Conditioning Engineers standards,
6. verification of control sequences,
7. verification of carbon dioxide sensors and indoor air concentrations, and

8. collection of field data for the installation of mechanical ventilation if none exist.

The inspection and evaluation must identify to what extent each school's current ventilation system components, including any existing central or noncentral mechanical ventilation system, are operating to provide appropriate ventilation to the school building in accordance with most recent indoor ventilation standards set by the American Society of Heating, Refrigerating and Air-Conditioning Engineers. The inspection and evaluation must result in a written report that includes any corrective actions necessary to be performed to the mechanical ventilation system or the HVAC infrastructure. Corrective actions can include (1) installation of appropriate filters and carbon dioxide sensors and (2) additional maintenance, repairs, upgrades, or replacement.

Contractors

The bill requires any corrective actions to an HVAC system to be performed by a properly licensed HVAC contractor.

Public Disclosure of Inspections

Any school district conducting an inspection and evaluation must make the results available for public inspection at a regularly scheduled meeting of its board of education and on its website and on the school's website if the school has one. Inspections are not required of a school if the building will cease to be used as a school within the three years from when the inspection and evaluation would take place.

Under current law, school districts must conduct air quality and HVAC inspections and evaluations every five years on schools that were built, extended, renovated, or replaced after January 1, 2003 using such means as the EPA's Tools for Schools Program. The bill requires these inspections and evaluations to instead take place every three years.

The law requires, and the bill leaves unchanged, the inspections to cover, among other things: HVAC systems; radon levels; potential for exposure to microbiological airborne particles, including fungi, mold,

and bacteria; chemical compounds of concern to indoor air quality including volatile organic compounds; pest infestation, including insects and rodents; and the degree of pesticide usage. The results of the inspection and evaluation must be made public at a board of education meeting and posted online.

EFFECTIVE DATE: July 1, 2022

§ 374 — SCHOOL INDOOR AIR QUALITY WORKING GROUP

Creates working group to make recommendations about school air quality to the legislature

Group Charge

The bill establishes a working group to study and make recommendations related to indoor air quality within schools. The group's recommendations must as least include:

1. optimal humidity and temperature ranges to ensure healthy air and promote student learning;
2. the threshold school air quality emergency conditions warranting temporary school closures based on the presence of insufficient heat, an excessive combination of indoor temperature and humidity levels, or some other thresholds;
3. criteria for rating the priority of HVAC repair and remediation needs, including the public health condition and needs of the students attending a school;
4. optimal HVAC system performance benchmarks for minimizing the spread of infectious disease;
5. protocols for school districts to receive, investigate, and address complaints or evidence of mold, pest infestation, hazardous odors or chemicals, and poor indoor air-quality;
6. the frequency with which boards of education should be providing for a uniform inspection and evaluation program of the indoor air quality within school buildings, such as the Environmental Protection Agency's Indoor Air Quality Tools for

- Schools Program, and whether it should be provided for at all schools or only at those constructed before or after a certain date;
7. best practices for the proper maintenance of HVAC systems in school buildings;
 8. any other criteria affecting school indoor air quality; and
 9. possible legislation to carry out any of the working group's recommendations.

Group Membership and Reporting Deadline

Under the bill, the working group will consist of the following members:

1. three appointed by the Senate president (a representative of ConnectiCOSH, a representative of the Associated Sheet Metal and Roofing Contractors of Connecticut, and a member of the Senate);
2. three appointed by the House speaker (a specialist in the field of children's health, a representative of the Connecticut State Building Trades Council, and a member of the House);
3. two appointed by the Senate majority leader (one representative each from the American Federation of Teachers-Connecticut and the Connecticut Association of Public School Superintendents);
4. two appointed by the House majority leader (one representative each from the Connecticut Education Association and the Connecticut Association of Boards of Education);
5. two appointed by the Senate minority leader (a specialist in the field of medicine on respiratory health and a representative of the Council of Small Towns);
6. two appointed by the minority leader of the House minority leader (an industrial hygienist and a representative of the Mechanical Contractors of Connecticut);

7. two appointed by the governor (a school nurse and a representative of the Connecticut Conference of Municipalities); and
8. the OPM secretary and the commissioners of education, administrative services, labor, public health, consumer protection, and energy and environmental protection, or their respective designees.

All appointments must be made no later than 60 days after the bill's effective date. Vacancies are filled by the appointing authority.

The working group members from the Senate and the House will serve as the chairpersons and they must schedule the first meeting of the working group no later than 60 days after the bill's effective date.

The working group must submit a report on its findings and recommendations to the governor and the education, labor, and public health committees by January 4, 2023. The working group terminates on January 4, 2023, or on the submission of the report, whichever is later.

EFFECTIVE DATE: Upon passage

§ 375 — SPACE STANDARDS FOR PRE-1959 SCHOOLS

Extends the allowable 25% increase in per-pupil square footage limits in current law for school buildings built before 1950 to include those built before 1959

By law, reimbursement grants for school building projects authorized by the legislature must follow per-pupil square footage limits set in state law or regulation. Currently, any building constructed before 1950 receives a 25% increase to any square footage limit. The bill expands eligibility for this increase to include any building constructed before 1959.

EFFECTIVE DATE: July 1, 2022

§ 376 — PRIORITY LIST ADDENDUM

Requires the DAS commissioner to create an addendum to the school construction priority list project report to include grants awarded by DAS for certain school construction projects without legislative approval ("emergency grants")

The law allows the DAS commissioner to award school construction grants for certain projects without legislative approval (“emergency grants”), within the limit of appropriated funds.

Beginning July 1, 2022, the bill requires the commissioner to create an addendum to the school construction priority list project report. By law, she must send this report to the legislature’s school construction committee before December 31 each year. Under the bill, the report addendum must contain all emergency grants approved by the DAS commissioner during the previous fiscal year. The law allows her to approve emergency grants for the following purposes:

1. remedy fire and catastrophic damage;
2. correct safety, health, and other code violations;
3. replace roofs, including skylight installation;
4. remedy a certified school indoor air quality emergency;
5. insulate exterior walls and attics; or
6. purchase and install a limited use and limited access elevator, windows, photovoltaic panels, wind generation systems, building management systems, or portable classrooms.

(The bill also eliminates emergency grant authority for certain projects; see below.)

EFFECTIVE DATE: July 1, 2022

§ 377 — EMERGENCY PROJECT APPROVAL

Eliminates the DAS commissioner’s authority to approve emergency school construction reimbursement grants for administrative and service facility and school safety projects; removes the requirement that a superintendent notify the DAS commissioner of the need for an emergency grant and formally apply within a certain timeframe

The bill subjects the following projects to legislative approval by eliminating the DAS commissioner’s authority to approve reimbursement grants on an emergency basis: (1) public school administrative or service facilities and (2) school security projects,

including improvements to existing school security infrastructure or new infrastructure. Accordingly, these types of projects must instead appear on the school priority list and the project report that the DAS submits to the legislature's school construction committee for approval every December.

The bill also removes the requirement that a superintendent notify the DAS commissioner of the need for an emergency grant and formally apply within a certain timeframe. Under current law, a superintendent has seven calendar days after discovering the emergency to notify the commissioner in writing about the reason for the emergency grant, and to receive the grant he or she must apply to the commissioner within six months after submitting the written notice.

EFFECTIVE DATE: July 1, 2022

§ 378 — PROJECT COMPLETION AND CLOSURE

Requires school construction grant recipients to submit a project completion notice to DAS within three years after the certificate of occupancy for the project was issued

Beginning July 1, 2022, the bill requires towns and regional school districts that are grant recipients to submit a project completion notice to DAS within three years after the date when a certificate of occupancy for the project was issued. If a grant recipient does not submit this notice on time, then the DAS commissioner must deem the project complete and begin a final project audit. By law, DAS must conduct an audit within five years after a school district files a notice of project completion (CGS § 10-286e(a)).

Additionally, the bill requires the commissioner to deem a project authorized before July 1, 2022, as complete if its grant recipient has received a certificate of occupancy and has not submitted a project completion notice to DAS on or before July 1, 2025.

EFFECTIVE DATE: July 1, 2022

§ 380 — BIDDING REQUIREMENTS AND CONSTRUCTION MANAGEMENT SERVICES

Eliminates from current law the (1) newspaper advertising requirement for public invitations to bid on orders and contracts for school construction services; (2) option for a

construction manager to self-perform any school construction project element, which takes effect under current law beginning on July 1, 2022; and (3) requires the construction manager to invite bids on project elements on the State Contracting Portal

Public Invitations to Bid

The bill eliminates the newspaper advertising requirement for public invitations to bid on orders and contracts for (1) school building construction projects receiving state grants, (2) architectural services, and (3) construction management services. Under current law, these public invitations to bid must be advertised in a newspaper having circulation in the town where the construction will take place, except for certain projects such as those using a state contract. The bill retains provisions in current law requiring a public bidding process, but does not specify a particular method for giving public notice of bidding opportunities.

Construction Manager Self-Performance

The bill eliminates the option for a construction manager to self-perform any project element, which under current law becomes effective beginning July 1, 2022. Current law conditions this option upon the (1) DAS commissioner and the awarding authority determining that the construction manager can self-perform the work more cost-effectively than a subcontractor could and (2) commissioner's written approval.

Subcontractor Bids

For subcontractor bids on school building projects, the bill requires the construction manager to invite bids on project elements and give notice of bidding opportunities on the State Contracting Portal. It explicitly deems the construction manager ineligible to bid on any project element.

The bill requires that each bid be kept sealed until opened publicly at the time and place stated in the bid solicitation notice. After consultation with and approval by the employing town or regional school district, the construction manager must award any related contracts for project elements to the lowest responsible qualified bidder. As under current law, construction cannot begin before the guaranteed maximum price is

determined (except for site preparation and demolition work).

EFFECTIVE DATE: July 1, 2022

§§ 384-409 & 483 — PROJECT EXEMPTIONS, WAIVERS, MODIFICATIONS, AND REPEALS

Exempts school construction projects in 16 towns and one regional school district from certain statutory and regulatory requirements to allow them to, among other things, qualify for state reimbursement grants, receive higher reimbursement percentages for these grants, or have their projects reauthorized due to a change in scope; repeals a prior project authorization

The bill exempts school construction projects in 16 towns and one regional school district from various statutory and regulatory requirements to allow them to, among other things, (1) qualify for state reimbursement grants, (2) receive higher reimbursement percentages for these grants, or (3) have their projects reauthorized due to a change in scope. These exemptions are referred to as “notwithstandings.”

Additionally, the bill repeals a Danbury high school project on the 2020 priority list.

EFFECTIVE DATE: Upon passage

Exemptions, Waivers, and Modifications (§§ 384-409)

The table below describes the notwithstandings that the bill grants.

Table: Notwithstandings for School Construction Projects

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
384	New Britain (state project)	E.C. Goodwin Technical High School, unspecified, but includes installing artificial turf athletic field	Waives the requirement to apply before June 30, 2021, to be on the 2022 priority list for the project with a maximum cost of \$45 million, if the application is filed by October 1, 2023, and the project is otherwise eligible under the program
385	Stamford	Westhill High School, new construction	Sets the project reimbursement rate at 80% if (1) Stamford establishes a pathway-to-

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
			career regional program at the new school and enrolls students from, and shares services with, surrounding towns to reduce racial isolation in the community and (2) the project is otherwise eligible under the program
386	Torrington	Torrington Middle & High School, new construction	Reauthorizes new construction project that has changed substantially in scope or cost, if the project cost does not exceed \$179,575,000 Allows a project reimbursement rate of 85% if the project is otherwise eligible under the program
386	Torrington	Torrington Middle & High School, construction of a central administration facility	Sets the allowable project reimbursement rate at 85%, including for any costs that would otherwise be reimbursed at one-half of this rate
387	Norwalk	Norwalk High School, new construction	Amends a 2020 notwithstanding for the same project to increase its maximum cost from \$189 million to \$239 million
388	Danbury	Danbury Career Academy at Cartus, new construction	Waives the requirement to apply before June 30, 2021, to be on the 2022 priority list for the project with a maximum cost of \$154 million, if the town files an application by October 1, 2022, and the project is otherwise eligible for the program Sets the project

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
			<p>reimbursement rate at 80%, including site acquisition, limited eligible costs, and the associated central administration project</p> <p>Sets the project reimbursement rate at 80% for purchasing parcels of land adjacent to the project site</p> <p>Waives the standard building space requirements</p> <p>Allows the town to receive reimbursement for certain ineligible project costs as long as they do not exceed \$992,842</p>
389	Farmington	Farmington High School, new construction of high school and construction of outdoor athletic facilities	Sets the allowable project reimbursement rate at 30% for both projects, including for any athletic facilities costs that would otherwise be reimbursed at one-half of this rate
390	Farmington	Farmington High School, central administration facility	Sets the allowable project reimbursement rate at 30%, including for any costs that would otherwise be reimbursed at one-half of this rate
391	Ellington	Windermere Elementary School, renovation and extension and alteration	Waives the requirement to apply before June 30, 2021, to be on the 2022 priority list for the project with a maximum cost of \$61.64 million if the town files an application by October 1, 2022, and the project is otherwise eligible for the program

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
			Sets the project reimbursement rate at 70% for the project to address the presence of pyrrhotite in the foundation
392	Manchester	Keeney Elementary School, renovation	Allows an 83.77% reimbursement rate if the project is otherwise eligible under the program Waives the deadline for the town to file certain notices with DAS in order to avoid a lapse of the grant authorization
393	New Fairfield	New Fairfield High School, code violation	Reauthorizes renovation project that has changed substantially in scope or cost, if the project cost does not exceed \$1,118,551
394	New Fairfield	Consolidated Early Learning Academy at Meeting Hill House School, extension and alteration	Makes certain otherwise ineligible extension and alteration project costs reimbursable, if these costs do not exceed \$2.9 million Waives the standard building space requirements
395	New Fairfield	Projects accepted as complete by the local board of education for the town at meetings held on the following dates: October 19, 2017 May 2, 2019 June 6, 2019	Forgiveness of a refund to the state for the unamortized balance of the remaining state grant as of the date the building project was abandoned, sold, leased, demolished, or redirected for use other than a public school
396	Seymour	Seymour High School, roof replacement and energy	Makes certain otherwise ineligible panel costs

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
		conservation	<p>eligible for reimbursement and release of final retainage</p> <p>Waives the requirement that construction bid not be let out prior to DAS approval of the plans and specifications</p> <p>Waives the standard building space requirements</p>
397	Seymour	Bungay Elementary School, roof replacement and energy conservation project	<p>Makes certain otherwise ineligible panel costs eligible for reimbursement and release of final retainage</p> <p>Waives the requirement that construction bid not be let out prior to DAS approval of the plans and specifications</p> <p>Waives the standard building space requirements</p>
398	Seymour	Seymour Middle School, energy conservation project	<p>Makes certain otherwise ineligible panel costs eligible for reimbursement and release of final retainage</p> <p>Waives the requirement that construction bid not be let out prior to DAS approval of the plans and specifications</p> <p>Waives the standard building space requirements</p>
399	Bridgeport	Bassick High School, new construction	Reauthorizes project and allows a change in scope to include land acquisition and site remediation

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
			costs, if the project cost does not exceed \$129 million Sets a 78.93% project reimbursement rate
400	Bristol	Memorial Boulevard Intradistrict Arts Magnet School, extension and alteration	Reauthorizes extension and alteration project that has changed substantially in scope or cost, if the project cost does not exceed \$63 million
401	Granby	Granby Memorial High School, alteration	Waives the standard building space requirements
402	New Britain	Chamberlain Elementary School, renovation	Amends 2021 notwithstanding for the same project, which allowed a change in scope to include preschool facilities, to require that construction of these facilities occur on a site approved by DAS
403	Hartford	Any school building project related to the District Model for Excellence Restructuring Recommendations and School Closures	Amends a 2019 notwithstanding for these same projects by extending the application deadline by two years, to June 30, 2024
404	Hartford	Bulkeley High School, board of education/central administration facility	Reauthorizes project and allows a change in scope, so long as costs do not exceed \$29.75 million and if the project is otherwise eligible under the program Sets the allowable project reimbursement rate at 95%, including for any costs that would otherwise be reimbursed at one-half of this rate

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
405	Hartford	Bulkeley High School, renovation	Waives the standard building space requirements Sets the project reimbursement rate at 95% for the renovation, construction, extension, or major alteration of an athletic facility, gymnasium, or auditorium, including for any costs that would otherwise be reimbursed at one-half of this rate
406	Region 14 (i.e., Bethlehem and Woodbury)	Nonnewaug High School, extension and alteration	Reauthorizes extension and alteration project that has changed substantially in scope or cost, if the project cost does not exceed \$1,939,400 Waives the standard building space requirements
407	Rocky Hill (University-run <i>Sheff</i> magnet school)	Goodwin University PreK School, interdistrict magnet facility, extension, alteration, and site purchase	Waives the requirement to apply before June 30, 2021, to be on the 2022 priority list for the project with a maximum cost of \$19,715,574, so long as Goodwin files an application by December 31, 2022 Sets the reimbursement rate at 100% if the project assists the state in meeting its <i>Sheff</i> obligations Waives the standard building space requirements
408	East Hartford (University-run <i>Sheff</i> magnet school)	Goodwin University Industry 5.0 Magnet Technical High School, alteration	Waives the requirement to apply before June 30, 2021, to be on the 2022 priority list for the project

Bill §	Town	School and Project	Exemption, Waiver, or Other Change
			<p>with a maximum cost of \$ 28,986,700, so long as Goodwin files an application by December 31, 2022</p> <p>Sets the reimbursement rate at 100% if the project assists the state in meeting its <i>Sheff</i> obligations</p> <p>Waives the standard building space requirements</p>
409	Hartford	Greater Hartford Academy of the Arts, renovation and new addition	<p>Waives the requirement to apply before June 30, 2021, to be on the 2022 priority list for the project with a maximum cost of \$95.9 million if (1) DAS, in consultation with the Capitol Region Education Council (CREC), administers the project's design and construction components as under state law, (2) the purchase and installation of furniture, fixtures, and equipment and move management is administered as under state law, and (3) CREC enters into a memorandum of understanding with the DAS commissioner for the project</p> <p>Makes the project eligible for total project cost reimbursement</p>

Repealed Project (§ 483)

The bill repeals a Danbury high school project approved under a

DAS-established pilot program that approves the renovation of commercial space as new. This project, which had a maximum cost of \$93 million, was placed on the 2020 priority list by a notwithstanding in the 2020 school construction act (PA 20-8, September Special Session, § 6).

§ 410 — CONNECTICUT AIRPORT AUTHORITY BUILDING APPLICATIONS

Eliminates the requirement for duplicate copies of plans and specifications when applying for a building permit for certain CAA largescale projects

By law, the State Building Inspector is responsible for reviewing and approving building permit applications for certain Connecticut Airport Authority (CAA) buildings or structures that exceed certain threshold limits or include residential occupancies for 25 or more individuals. Current law requires applications to include two copies of the plans and specifications for these projects. The bill eliminates the requirement for copies.

EFFECTIVE DATE: July 1, 2022

§ 411 — CODE VARIANCE PUBLICATIONS

Allows DAS to publish its biennial list of code variances and exemptions on its website rather than sending the list to building officials

The bill allows DAS to publish its biennial list of code variances and exemptions on its website rather than sending the list to building officials and taking appropriate action to publicize the list.

By law and unchanged by the bill, the State Building Inspector and the Codes and Standards Committee must biennially create this list of variations or exemptions.

EFFECTIVE DATE: July 1, 2022

§ 412 — PROPERTY TAX CREDIT INCREASE

Beginning with the 2022 tax year, increases the property tax credit from \$200 to \$300 and expands the number of taxpayers who may claim it

Beginning with the 2022 tax year, the bill (1) increases the property tax credit against the personal income tax from \$200 to \$300 and (2) expands the number of people eligible to claim this credit. It does so by

eliminating provisions under current law that limit the credit to residents who are age 65 or older or claim dependents on their federal tax return.

By law, taxpayers earn the credit for property taxes paid on their primary residences or motor vehicles, and the amount of property taxes paid that can be taken as a credit declines as adjusted gross income (AGI) increases, until it completely phases out.

EFFECTIVE DATE: Upon passage

§ 413 — EARNED INCOME TAX CREDIT (EITC)

Increases the state EITC from 30.5% to 41.5% of the federal credit starting in the 2023 tax year

Beginning with the 2023 tax year, this bill increases the state EITC from 30.5% to 41.5% of the federal credit. The EITC is a refundable tax credit available to people who work and earn incomes below certain levels.

EFFECTIVE DATE: July 1, 2022

§ 414 — EARNED INCOME TAX CREDIT ENHANCEMENT PROGRAM

Establishes a personal income tax exemption for income received through the 2020 and 2021 EITC enhancement program

The bill creates a personal income tax exemption for the 2022 tax year for any income a resident received through the 2020 and 2021 earned income tax credit (EITC) enhancement program, to the extent this income was includable in gross income for federal tax purposes.

Under the EITC enhancement program, taxpayers receive a payment equal to a certain percentage of the federal tax credit they received for the applicable income year. For the 2020 tax year, the EITC enhancement program was funded by the Coronavirus Aid, Relief, and Economic Security (CARES) Act funds and equaled 18.5% of a household's federal EITC for that year. sHB 5037 of this session proposes using a portion of American Rescue Plan Act (ARPA) funds for payments to households equal to approximately 9.5% of the federal EITC for the 2021 tax year.

By law, the state EITC is a refundable tax credit available to people who work and earn incomes below certain levels. The statutory credit equaled (1) 23% of the federal credit in the 2020 tax year and (2) 30.5% in the 2021 tax year.

EFFECTIVE DATE: Upon passage

§ 414 — PENSION AND ANNUITY TAX EXEMPTION ACCELERATION

Accelerates the pension and annuity income tax exemption phase-in by allowing qualifying taxpayers to deduct 100% of this income beginning with the 2022 tax year

The bill accelerates the phase-in of the pension and annuity income tax exemption. Under current law, qualifying taxpayers may deduct (1) 56% of such income in the 2022 tax year, (2) 70% in the 2023 tax year, (3) 84% in the 2024 tax year, and (4) 100% in the 2025 tax year and beyond. Under the bill, pension and annuity income is fully tax exempt starting with the 2022 tax year.

By law, taxpayers are eligible for this exemption only if their federal AGI is below (1) \$75,000 for single filers, married people filing separately, or heads of households and (2) \$100,000 for married people filing jointly.

EFFECTIVE DATE: Upon passage

§ 415 — CHILD TAX REBATE

Establishes a one-time rebate for qualifying, domiciled taxpayers in Connecticut equal to \$250 for each child, for up to three children

The bill establishes a one-time rebate for qualifying, domiciled taxpayers in Connecticut equal to \$250 for each child (i.e., an individual who is age 18 or under as of December 31, 2021). Taxpayers may claim the credit for up to three children whom they validly claimed as dependents on their federal income tax return for the 2021 tax year.

Under the bill, taxpayers are eligible for the full rebate if their federal adjusted gross incomes (AGIs) for the 2021 tax year fall at or below certain thresholds, which vary by filing status. For taxpayers with incomes exceeding these thresholds, the rebate phases out at a rate of 10% for every \$1,000, or fraction of \$1,000, of AGI exceeding the

threshold (e.g., a single filer with a federal AGI of \$101,500 is eligible for 80% of the full rebate amount). The below table indicates the income thresholds at which taxpayers are (1) eligible for the full rebate and (2) not eligible for the rebate.

Table: Rebate Thresholds Under the Bill

<i>Filing Status</i>	<i>Maximum Rebate Threshold</i>	<i>No Rebate</i>
	<i>Federal AGI ≤</i>	<i>Federal AGI ></i>
Single or Married Filing Separately	\$100,000	\$109,000
Head of Household	\$160,000	\$169,000
Joint Filers or Surviving Spouse	\$200,000	\$209,000

To claim a rebate, a taxpayer must apply to the Department of Revenue Services by July 31, 2022. The commissioner must (1) make the application available by June 1, 2022, and (2) require any information necessary to administer the bill's provisions, including the name, age, and social security number of each child the taxpayer claimed as a dependent in the 2021 tax year. Applications must be filed with DRS electronically and under penalty of false statement.

Under the bill, the rebate is not considered income for personal income tax purposes or for determining state program eligibility. Rebate eligibility must be determined without regard to any amount of earned income tax credit the taxpayer received.

The bill specifies that the rebate is subject to withholding if a recipient (1) owes state or municipal taxes or other obligations or (2) is in default of a student loan made by the Connecticut Student Loan Foundation or the Connecticut Higher Education Supplemental Loan Authority (CGS §§ 12-739 & 12-742).

EFFECTIVE DATE: Upon passage

§ 416 — INCOME TAX CREDIT FOR STILLBIRTHS

Establishes a \$2,500 income tax credit for the birth of a stillborn child

The bill establishes a \$2,500 personal income tax credit for the birth of a stillborn child if the child would have been claimed as the taxpayer's dependent on his or her federal income tax return. Taxpayers may claim the credit for the tax year for which the Department of Public Health's State Vital Records Office issued a stillbirth certificate. The credit amount applies regardless of the taxpayer's filing status.

EFFECTIVE DATE: July 1, 2022, and applicable to tax years beginning on or after January 1, 2022.

§§ 417-418 — MOTOR VEHICLE MILL RATE CAP LOWERED

Beginning with FY 23, reduces the motor vehicle mill rate cap from 45 to 32.46 and modifies the reimbursement grant formula; authorizes municipalities and districts to adjust their motor vehicle mill rate for FY 23

Beginning in FY 23, the bill decreases the motor vehicle mill rate cap from 45 to 32.46 mills. The bill also adjusts the reimbursement formula for motor vehicle property tax grants, also referred to as municipal transition grants, which are designed to reimburse municipalities for a portion of the revenue loss attributed to the motor vehicle mill rate cap.

The bill correspondingly authorizes municipalities and districts that set their FY 23 motor vehicle mill rate before the bill's passage to revise them before June 15, 2022. Municipalities may do so (1) by vote of their legislative body (or if it is a town meeting, its board of selectman) and (2) regardless of conflicting special act, municipal charter, or home rule ordinance provisions.

Reimbursement Formula

Currently, municipalities that impose a mill rate on real and personal property, other than motor vehicles, that is greater than 45 mills are eligible for the grants. The statutory formula specifies that the grant amount equals the difference between the amount of property taxes a municipality, and any tax district in it, (1) levied on motor vehicles for the 2017 assessment year (i.e., FY 19) and (2) would have imposed for that year if the motor vehicle mill rate was the same as the rate for other property. Under current law, (1) the mill rate used to calculate a municipality's grant eligibility and amount is the sum of its mill rate and that of its tax districts and (2) municipalities must disburse to districts

the portion of the grants attributable to them within 15 days after receiving the grants.

Under the bill, beginning in FY 23, grants to municipalities are instead calculated using the (1) bill's 32.46 mill rate cap and (2) preceding fiscal year's tax levy data, rather than FY 19. Thus, grants for FY 23 are equal to the difference between the amount of property taxes the municipality would have levied on motor vehicles for FY 22 (i.e., the 2020 assessment year) if the motor vehicle mill rate imposed for that year was (1) 32.46 mills and (2) equal to the mill rate it imposed on real property and personal property other than motor vehicles.

Additionally, beginning in FY 23, the bill makes districts eligible for the grants if they imposed taxes on real property and personal property other than motor vehicles for the preceding fiscal year at a mill rate that, when combined with the municipality's mill rate, exceeded 32.46 mills. The grant amount equals the difference between the amount of taxes the district would have levied on motor vehicles for the preceding fiscal year if the mill rate imposed on motor vehicles for that year, when added to the municipality's motor vehicle mill rate for that year, was (1) 32.46 mills and (2) equal to the mill rate it imposed on real property and personal property other than motor vehicles.

EFFECTIVE DATE: Upon passage

§§ 419-422 — ABANDONED PROPERTY PROGRAM

Expands the range of property the treasurer must publish in his abandoned property notice and changes the notice's required format; establishes conditions under which the treasurer may automatically pay abandoned property amounts of less than \$2,500 to the property's sole owner; requires the treasurer to notify certain abandoned property owners by mail about the process for verifying their ownership of the property and claiming it; eliminates aggregate reporting of abandoned property valued at less than \$50

Searchable List of Abandoned Property

By law, most property held or owed in this state that remains unclaimed by the owner is presumed abandoned after a specified amount of time passes and escheats to the state as abandoned (or unclaimed) property. Current law requires the treasurer to biennially publish an abandoned property notice on his website and include the property, valued at \$50 or more, that (1) was presumed abandoned and

reported or transferred to him during the preceding two calendar years and (2) did not previously appear on the list. The bill instead requires the treasurer to maintain a readily searchable list of all such property, regardless of its value, for which there is sufficient information for him to identify its apparent owner. In doing so, it aligns the statutes to the treasurer's current practice.

As is currently required for the posted notice, the bill requires the searchable list to contain the names and last-known addresses, if any, of anyone reported as an apparent abandoned property owner, and any other information the treasurer adds. The bill also requires the list to include the property's amount and description and the property holder's name and address, rather than a statement that anyone with an interest in the property can receive this information from the treasurer free of charge, as is currently required for the biennial notice.

The bill also makes a conforming change by eliminating a law invalidating any agreement to locate property if it is made within two years of the date the treasurer publishes the notice of abandoned property.

Automatic Payments of Abandoned Property

The bill requires the treasurer to automatically pay abandoned property claims valued at less than \$2,500 to individuals if he (1) has determined that the individual is the property's sole owner and (2) is satisfied that he has this individual's current address. In doing so, it supersedes the existing law requiring anyone claiming an interest in abandoned property to file a certified claim with the treasurer establishing that they are entitled to recover it.

Notice by First-Class Mail

The bill generally requires the treasurer to notify, by first-class mail, each person (1) reported as the apparent owner of abandoned property during the preceding calendar year and (2) for whom the holder reported a last-known address. The notice must include the property's amount and description and how the owner may verify ownership and claim it. The bill excludes from this notification requirement anyone

paid, or who will be paid, an automatic payment as described above.

Aggregate Reporting

The bill eliminates provisions requiring anyone holding property presumed abandoned to aggregately report items valued at less than \$50. It also eliminates the treasurer's authority to approve aggregate reporting of 200 or more items if each item is valued at less than \$50 and the cost of reporting the items would be disproportionate to the amounts involved. It repeals a related provision requiring property holders who make this aggregate reporting election to assume responsibility for any valid claim presented for these items for 20 years.

EFFECTIVE DATE: January 1, 2023

§ 423 — STUDENT LOAN PAYMENT TAX CREDIT

Expands the loans eligible for the student loan payment tax credit and allows "qualified small businesses" to apply to the DRS commissioner to exchange the credit for a refund

Existing law allows businesses that make payments on qualified employees' eligible student loans to claim a tax credit equal to 50% of the payments made, up to an annual credit maximum of \$2,625 per employee. By law, "qualified employees" are generally those who (1) work fulltime for a Connecticut licensed corporation that is subject to state taxes, (2) earned their first bachelor's degree in the last five years, and (3) live and work in the state. Tax credits may be applied against the corporation business or insurance premiums taxes.

Eligible Loans

The bill expands the eligible loans for the purposes of the credit. Under current law, businesses may only claim this credit for payments made on refinancing loans made by the Connecticut Higher Education Supplemental Loan Authority (CHESLA). Under the bill, they may claim a credit for payments made on any CHESLA-issued loan.

Qualified Small Businesses

The bill also allows "qualified small businesses" to apply to the Department of Revenue Services (DRS) commissioner to exchange the credit for a refund equal to the credit's value. Under the bill, a qualified

small business is one with gross receipts of \$5 million or less in the income or calendar year, as applicable, in which the credit is allowed.

Under the bill, applications for credit refunds must be filed on forms and with the information the commissioner prescribes by (1) the original deadline for the tax return for the income or calendar year in which the credit was earned or (2) the return's extended deadline. Refund applications may not be filed after these deadlines have passed.

Any amounts refunded (1) must be refunded in accordance with existing corporation business tax or insurance premiums tax laws and procedures and (2) do not accrue interest. Refunds granted under the bill are subject to the law that allows applying partial payments to outstanding state tax liability, penalties, and interest.

EFFECTIVE DATE: Upon passage, and applicable to calendar and income years beginning on or after January 1, 2022.

§§ 424-428 — JOBSCT TAX REBATE PROGRAM

Establishes the JobsCT tax rebate program under which companies in specified industries may earn rebates against the insurance premiums, corporation business, and PE taxes for reaching certain job creation targets

The bill establishes the JobsCT tax rebate program under which companies in specified industries may earn rebates against the insurance premiums, corporation business, and pass-through entity (PE) taxes for reaching certain job creation targets. The rebate is based on (1) the number of new full-time equivalent employees (FTEs) the business creates and maintains, (2) these FTEs' average wage, and (3) the state income tax that would be paid on this average wage for a single filer.

Under the bill, the rebate program is administered by DECD. A business is eligible for the program (i.e., a qualified business) if it is subject to at least one of the above taxes and in an industry related to finance, insurance, manufacturing, clean energy, bioscience, technology, digital media, or any similar industry, as determined by the DECD commissioner. Generally, the business must create and maintain at least 25 new FTEs to claim a rebate. The bill establishes minimum

wage requirements that the new FTEs must meet to qualify for the rebate but allows the DECD commissioner to waive these requirements for FTEs meeting other criteria (i.e., “discretionary FTEs”).

Generally, the rebate equals 25% of the state income tax paid by the new FTEs (50% for FTEs in an opportunity zone or distressed municipality). The bill establishes a minimum rebate of \$1,000 per new FTE (\$750 per discretionary FTE) and a maximum of \$5,000 per new or discretionary FTE. However, it doubles the minimum amounts for rebates earned, claimed, or payable before January 1, 2024 (i.e., \$2,000 per new FTE and \$1,500 per discretionary FTE). It allows a business to receive rebates in up to seven successive years, beginning with the second year after it is accepted into the program. The rebate is refundable if it exceeds the business’s tax liability and may exceed the existing insurance premiums and corporation business tax credit limits. The bill caps the aggregate rebate amount awarded at \$40 million per fiscal year.

Lastly, the bill repeals obsolete language about insurance premiums and corporation business tax credit caps.

EFFECTIVE DATE: July 1, 2022, and applicable to taxable years commencing on or after January 1, 2023, except that a provision about the order of corporation business tax credits is applicable to income years commencing on or after January 1, 2023.

JobsCT Rebate Program Eligibility (§424)

Under the bill, an eligible business qualifies for the rebate if it creates and maintains at least 25 new or discretionary FTEs. New FTEs are those that did not exist in the state when the business applies to the DECD commissioner for acceptance into the program. They exclude FTEs (1) acquired due to a merger or acquisition, (2) employed in the state by a related person (e.g., entities controlled by the business) within the previous 12 months, or (3) hired to replace FTEs that existed in the state after January 1, 2020. The bill allows the DECD commissioner to issue implementation guidance.

To qualify as a new FTE, an employee must be paid wages sourced to the state (i.e., qualified wages) of at least 85% of the median household income for the location where the position is primarily located or \$37,500, whichever is greater. Both measures are proportionally reduced for fractional FTEs (e.g., the wage floor is \$18,750 for a 0.5 FTE).

The bill creates an exception to these wage requirements for new discretionary FTEs (see below).

Program Application (§ 424)

Application (§ 424(c)). Under the bill, qualified businesses seeking the rebates must apply to the DECD commissioner on a form he prescribes. The form may require the following information:

1. the number of new FTEs the business will create,
2. the number of FTEs it currently employs,
3. feasibility studies or business plans for the projected number of new FTEs,
4. projected state and local revenue reasonably derived from the increased FTEs, and
5. any other information needed to determine whether there will be net benefits to the economy of the state and the municipality or municipalities where the business is located.

The bill allows the commissioner to require the business to submit additional information to evaluate an application.

DECD Review and Approval (§ 424(c)). The bill requires the DECD commissioner, when reviewing the application, to determine whether (1) the qualified business can reasonably meet the hiring targets and other metrics stated in the application and (2) the proposed job growth would (a) provide a net benefit to economic development and employment opportunities in the state and (b) exceed the number of jobs the business had before January 1, 2020. Under the bill, the business

must meet each of these requirements to be eligible for the rebate program.

The bill requires the DECD commissioner to approve or reject the application within 90 days after receiving it. He may approve the application in whole, in part, or with amendments. If he rejects an application, he must identify the defects and explain the specific reasons for the rejection.

The bill allows the commissioner to combine the approval of an application with the exercise of any of his other powers, including providing other financial assistance.

Discretionary FTEs (§ 424(c)). Under the bill, a discretionary FTE is an FTE paid qualified wages who does not meet the bill's wage requirements (see above) but is approved by the DECD commissioner. The bill allows the commissioner to approve an application in whole, in part, or with amendments, if a majority of the new discretionary FTEs meet the following criteria:

1. are receiving, or have received, services from the Department of Aging and Disability Services because of a disability;
2. are receiving employment services from the Department of Mental Health and Addiction Services or participating in employment opportunities or day services operated or funded by the Department of Developmental Services;
3. have been unemployed for at least six of the preceding 12 months;
4. have been convicted of a misdemeanor or felony;
5. are veterans;
6. lack a postsecondary credential and are not currently enrolled in a postsecondary institution or program; or
7. are currently enrolled in a workforce training program fully or

substantially funded by the employer that results in the individual earning a postsecondary credential.

Awarding the Rebate (§ 424)

Contract and Allocation Notice (§ 424(c)). The bill requires the DECD commissioner to enter into a contract with an approved qualified business. The contract must at least include the business's consent for DECD to access data from other state agencies, including the Labor Department, for audit and enforcement purposes. Additionally, if the commissioner approves the business for new discretionary FTEs, the contract must include the required wage that the business must pay them.

After signing the contract, the bill requires the DECD commissioner to issue the approved qualified business a rebate allocation notice that certifies its eligibility to claim the rebate if it meets the terms stated in the notice. The notice must state the maximum rebate available for the rebate period and the specific terms the business must meet to qualify.

Voucher (§ 424(i) & (j)). The bill requires approved qualified businesses to provide information to the DECD commissioner, annually by January 31 during their rebate period, on the number of new or discretionary FTEs created or maintained during the previous calendar year and their qualified wages. It allows DECD to audit this information.

The bill requires DECD to issue a rebate voucher to an approved qualified business by March 15 in each year of the rebate period. The voucher must state the rebate amount and the taxable year against which the rebate may be claimed. The bill requires the DECD commissioner to annually provide the revenue services commissioner with a report detailing all rebate vouchers. (The bill does not specify a deadline for this report.)

Rebate Period (§ 424(h)). The bill allows a business to receive a rebate for up to seven successive calendar years. It prohibits DECD from granting a rebate until at least 24 months after the commissioner

approves the business's application.

Annual Report (§ 424(k)). The bill requires the DECD commissioner to annually report to the Office of Policy and Management beginning January 1, 2023, on the rebate program's expenses and the number of FTEs and discretionary FTEs created and maintained. The commissioner must submit the report in consultation with the state comptroller's office and state auditors.

Rebate Calculation (§ 424)

FTE Calculation (§ 424(d)). Under the bill, FTEs may be full-time (i.e., employees who work at least 35 hours per week) or part-time employees. One FTE consists of a job in which an employee works or is expected to work at least 1,750 hours in a calendar year (i.e., 35 hours per week for 50 weeks). For employees who work fewer than 1,750 hours, an FTE fraction is calculated by dividing the number of hours worked by 1,750. The bill allows the DECD commissioner to adjust the FTE calculation.

New FTEs (§ 424(e)). Under the bill, an approved qualified business must employ at least 25 new FTEs in Connecticut by December 31 in the calendar year that is two years before the calendar year in which it claims the rebate. For purposes of calculating the rebate, new FTEs refers to the number of new FTEs (1) created two years before the rebate year or (2) maintained in the year before the rebate year, whichever is less.

The rebate is based on (1) the number of new FTEs created or maintained (see above), (2) their average wage, and (3) the state income tax that would be paid on this average wage for a single filer. Generally, if the new FTEs are in an opportunity zone or distressed municipality (i.e., "designated locations," see *Background*), the rebate equals 50% of the average state income tax that would be paid by these employees, multiplied by the number of employees. If the new FTEs are outside of these locations (i.e., "other locations"), the rebate equals 25% of the average state income tax that would be paid by these employees, multiplied by the number of employees.

Under the bill, the total rebate is calculated by adding the rebate amount from the designated locations to the amount from the other locations, as shown in the figure below.

JobsCT Rebate Calculation

New FTEs in designated locations		New FTEs in other locations		Total rebate amount
x	+	x	=	
50% of the income tax that would be paid on these employees' average wage		25% of the income tax that would be paid on these employees' average wage		

Rebate Floor and Ceiling (§ 424(e)). The bill generally establishes a rebate floor of \$1,000 per new FTE, regardless of where it is created. However, for tax credits earned, claimed, or payable before January 1, 2024, the rebate floor equals \$2,000 per new FTE. It caps the rebates at \$5,000 per new FTE.

Discretionary FTEs (§ 424(f)). Under the bill, the process for calculating the rebates for new discretionary FTEs is the same as the process for calculating the rebates for new FTEs (see above). Additionally, new discretionary FTEs have the same \$5,000 per FTE cap as new FTEs. However, the floor for new discretionary FTEs is (1) \$750 per FTE generally and (2) \$1,500 for credits earned, claimed, or payable before January 1, 2024.

FTE Minimum (§ 424(e), (f) & (h)). The bill prohibits a business from receiving a rebate if it does not maintain at least 25 new FTEs or new discretionary FTEs (as applicable) in the calendar year immediately before the calendar year in which the rebate is being claimed.

Additionally, if a business fails to create 25 new FTEs or new discretionary FTEs in two consecutive calendar years, it must forfeit all remaining rebate allocations unless the DECD commissioner recognizes mitigating circumstances of a regional or national nature, including a recession.

Rebate Caps (§ 424(g)). The bill limits the aggregate rebate amount

that may be awarded in a fiscal year to (1) \$10 million for discretionary FTEs and (2) \$40 million overall. It prohibits the DECD commissioner from approving an application in whole or in part if doing so would result in exceeding the applicable cap in any fiscal year.

Rebates and Tax Credit Caps (§§ 425-428)

Under the bill, JobsCT rebates are treated as credits against the corporation business and PE taxes and offsets against the insurance premiums tax. If the rebate against any of these taxes exceeds the business’s liability for that tax, then the DRS commissioner must treat the excess as an overpayment and refund it to the business without interest.

The bill allows the JobsCT rebate to exceed existing law’s caps on insurance premiums (generally 30-70% of the amount of tax owed by the business) and corporation business tax credits (50.01% of the tax due). Additionally, the bill requires that any JobsCT rebate against the corporation business tax be claimed only after the business has claimed any other available credits against the tax.

Under existing law, if a pass-through business (i.e., affected business entity) is subject to the PE tax, its members (i.e., owners) receive an offsetting credit at the personal or corporate income tax level that equals 87.5% of the member’s direct and indirect share of the PE tax paid by the pass-through business. The bill requires that the members’ personal income tax credit be calculated before any JobsCT rebate is applied to the business’s PE tax due.

Background — Distressed Municipalities

By law, the DECD commissioner must annually designate distressed municipalities based on a combination of economic, education, demographic, and housing criteria. In 2021, he designated the following 25 municipalities as distressed:

Ansonia	Bridgeport	Chaplin
Derby	East Hartford	East Haven
Griswold	Groton	Hartford
Meriden	Montville	New Britain

New London	Norwich	Plainfield
Putnam	Sprague	Sterling
Stratford	Torrington	Voluntown
Waterbury	West Haven	Winchester
Windham		

Background — Opportunity Zones

The federal Opportunity Zone program, created as part of the 2017 federal Tax Cuts and Jobs Act (P.L. 115-97), is designed to spur economic development and job creation in distressed communities by providing federal tax benefits for private investments in the zones. The program’s tax benefits are available to investors that reinvest gains earned on prior investments in a qualified opportunity zone fund that invests in zone businesses. Investors may receive additional tax benefits if they hold their investments in the fund for at least five, seven, or 10 years. Connecticut has 72 opportunity zones in 27 municipalities that were approved by the U.S. Treasury Department in 2018.

§ 429 — EXTENDING THE MANUFACTURING APPRENTICESHIP TAX CREDIT TO PASS-THROUGH ENTITIES

Extends the manufacturing apprenticeship tax credit to the affected business entity tax

The bill extends the manufacturing apprenticeship tax credit to the affected business entity tax (i.e., pass-through entity or PE tax), allowing members of pass-through entities (e.g., limited liability companies (LLCs) and S corporations) to claim the credit against this tax and reduce their PE tax liability. The bill allows pass-through entities to do so for tax years beginning on or after January 1, 2022, and requires that the available credit be based on the PE tax due before applying this credit or any other payments against the tax.

Although current law allows pass-through entities to earn the manufacturing apprenticeship tax credit, it bars their owners from claiming it. Instead, the law allows them to cash in their credits by selling, assigning, or transferring them to businesses that may apply them against the corporation business tax, utility companies tax, and petroleum products gross earnings tax. The bill eliminates this authorization for tax years beginning on or after January 1, 2022.

By law, the manufacturing apprenticeship tax credit is available for each apprentice under a qualified training program and equals the lesser of \$6 per hour the apprentice works, \$7,500, or 50% of the actual apprenticeship wages. Taxpayers may claim it in the first year of a two-year program or the first three years of a four-year program.

The bill also makes conforming and technical changes.

EFFECTIVE DATE: July 1, 2022, and applicable to income or tax years beginning on or after January 1, 2022.

§ 430 — BRAINARD AIRPORT PROPERTY STUDY

Requires DECD to have an analysis conducted on the benefits and opportunity costs to Hartford and the state of the current and alternative uses of the Hartford Brainard Airport property and generally prohibits the CAA from further encumbering the property

Required Study and Goals

The bill requires the state to assess the benefits and opportunity costs to Hartford and the state of the current and alternative uses of the Hartford Brainard Airport property. The state must do so in a way that is consistent with and supports the bill's stated goals of promoting the health, welfare, and safety of people in Connecticut; increasing their quality of life; boosting tourism; stimulating the economy; and enhancing people's ability to enjoy the Connecticut river.

Entities Conducting the Analysis

The bill requires the Department of Economic and Community Development (DECD) to have this analysis conducted. To do so, DECD must issue a request for proposals for an entity to oversee the analysis and produce the report. The bill requires the selected entity to subsequently issue separate requests for qualifications to hire consultants, entities, or both, to take on the analysis' economic, environmental, and regulatory components. The entity must select consultants and entities whose expertise best lends itself to analyzing these specific subjects.

The bill requires the Connecticut Airport Authority (CAA) to assist and collaborate with these entities and consultants. It also requires the Department of Energy and Environmental Protection (DEEP) to obtain

from the U.S. Army Corps of Engineers any information or reports it has generated in the last 10 years about the Connecticut River in Hartford and Wethersfield. DEEP must provide the information or reports to DECD to distribute to the appropriate consultants or entities to inform their analysis.

DECD must submit a report of the analysis's findings, by October 15, 2023, to the Finance, Revenue and Bonding Committee.

Study Scope

The bill requires the analysis to identify the following:

1. the economic impact (direct, indirect, quantitative, and qualitative) to the state and surrounding region of the property's (a) current use and (b) alternative uses, including commercial, residential, and recreational opportunities;
2. the (a) environmental or flood control obstacles to the property's alternative uses, including conducting any required site testing, and (b) possible ways and associated costs of making the property environmentally developable;
3. any federal, state, or local governmental obstacles (including existing contracts) to developing alternative uses, the possible ways to remove the obstacles, and their associated costs; and
4. the property's highest and best use, if it is not its current use.

To identify the highest and best use, the bill requires the study to consider the (1) study's findings on economic impact and environmental and governmental obstacles and (2) bill's stated goals (i.e., promoting people's health, welfare, and safety; increasing quality of life; boosting tourism; stimulating the economy; and enhancing enjoyment of the Connecticut River.)

Limitation on CAA Agreement and Obligations

From July 1, 2022, to May 31, 2024, the bill generally prohibits the CAA from entering into any agreements or incurring any obligations

that would further encumber the property or prohibit or impinge developing alternative uses. It excludes from this prohibition any agreement or obligation that allows for termination without liability in the event the airport is to be closed in the future; the termination must occur within 6 months after the decision is made to close the airport.

The bill also excludes from this prohibition the acceptance of Federal Aviation Administration grants deemed necessary to safely operate the airport. However, the bill specifies that nothing that extends or results in extending a runway is considered to be for safety maintenance purposes.

EFFECTIVE DATE: July 1, 2022

§§ 431 & 432 — XL CENTER RETAIL SPORTS WAGERING PROCEEDS

Provides CRDA with the proceeds from retail sports wagering at the XL Center to operate the facility; requires CLC to monthly estimate and certify this amount

The bill provides the Capital Region Development Authority (CRDA) with the retail sports wagering proceeds at the XL Center in Hartford to operate the facility. These proceeds are those that exceed the funding of approved Connecticut Lottery Corporation (CLC) reserves and the payments of (1) prizes and winnings and their applicable federal excise taxes and (2) current operating expenses.

The bill requires the OPM secretary, on the state's behalf, to enter into an agreement with CRDA on the proceeds of operating retail sports wagering at the XL Center. Regardless of any funds that may be appropriated to CRDA for operating the XL Center, this agreement must require the state to distribute to CRDA a sum equal to the proceeds amount CLC monthly certifies on the XL Center's retail sports wagering proceeds. OPM must distribute this amount to CRDA quarterly and in a way the agreement specifies. The authority must use the money to operate the XL Center.

Under the bill, the CLC president must monthly estimate and certify to the OPM secretary the amount CLC transferred to the General Fund from retail sports wagering proceeds at the XL Center.

EFFECTIVE DATE: Upon passage

§ 433 — SALES AND USE TAX REFUNDS FOR BEER AND WINE MANUFACTURERS

Extends certain manufacturing-related sales and use tax exemptions to holders of manufacturer permits for a farm winery and wine, cider, and mead; allows these same permittees and manufacturer permittees for beer to receive a sales and use tax refund on these manufacturing-related purchases made from July 1, 2018, through July 1, 2023

Under existing law, beginning July 1, 2023, manufacturer permittees for beer (i.e., beer manufacturers) are eligible for specified manufacturing-related sales and use tax exemptions even though they do not otherwise qualify because they manufacture or will manufacture beer at a facility that also makes substantial retail sales. The bill extends these same exemptions to manufacturer permittees for a (1) farm winery and (2) wine, cider, and mead.

The bill additionally makes these three types of permittees eligible for a refund of any sales and use taxes they paid on these manufacturing-related purchases for the five preceding income or tax years. To qualify for this refund, the manufacturers must be in good standing with the Department of Consumer Protection on July 1, 2023.

The bill's provisions apply to the following sales and use tax exemptions:

1. gas and electricity for direct use in a manufacturing plant, provided it is a metered building where at least 75% of the gas or electricity consumed is used for manufacturing purposes (CGS § 12-412(3)(A));
2. materials, tools, and fuel to become part of items sold or used directly in an industrial plant to make finished products for sale (CGS § 12-412(18));
3. materials, tools, fuels, machinery, and equipment used in manufacturing that are not otherwise eligible for an exemption (50% of the gross receipts from such items) (CGS § 12-412i); and
4. machinery used directly in a beer, wine, brandy, cider, or mead

manufacturing process (CGS § 12-412(34)).

Under the bill, taxpayers may file a refund claim with the Department of Revenue Services (DRS) by July 1, 2026. In doing so, they must provide documentation that substantiates the tax amount for which they are seeking a refund. As under existing sales and use tax refund law, these claims must be (1) made in writing and state the specific grounds upon which they are founded and (2) verified by the DRS commissioner and disallowed if he determines that they are not valid. Any refunded amount is without interest. As under existing law, taxpayers with disallowed refund claims may file a written protest with the commissioner, subject to the existing procedures for doing so.

EFFECTIVE DATE: July 1, 2023

§ 434 — SALES AND USE TAX EXEMPTION FOR WATER COMPANIES

Exempts certain water company purchases from sales and use tax

The bill exempts from sales and use tax the goods and services water companies purchase to maintain, operate, manage, or control a pond, lake, reservoir, stream, well, or distributing plant or system that supplies water to at least 50 customers. Under the bill, “water companies” are those regulated by the Public Utilities Regulatory Authority (i.e., private, investor-owned water companies).

EFFECTIVE DATE: July 1, 2022, and applicable to sales occurring on or after that date.

§ 435 — GAS TAX HOLIDAY

Extends through November 30, 2022, the current suspension of the 25-cent-per-gallon motor vehicle fuels tax on gasoline and gasohol

This bill extends through November 30, 2022, the current suspension of the 25-cent-per-gallon motor vehicle fuels tax on gasoline and gasohol which currently expires June 30, 2022. By law, the tax is imposed on fuel distributors and applies to motor vehicle fuel used or sold in Connecticut. As with the current suspension, the bill’s provisions do not affect the tax due on propane, natural gas, or diesel.

Under existing law, (1) retail fuel dealers must reduce the per-gallon price of the gasoline and gasohol they sell by 25 cents and (2) violations of this requirement are an unfair or deceptive trade practice under the Connecticut Unfair Trade Practices Act (CUTPA).

Retailers may use the following as affirmative defenses against alleged violations of the bill's price reduction requirement:

1. an increase in the wholesale price of fuel that occurs after the tax reduction,
2. an increase in any other tax imposed on the fuel that occurs after the tax reduction, or
3. any other bona fide business cost increase the retailer incurs and relied upon in making the decision to not reduce the price (CGS § 14-332a(c)(4)).

EFFECTIVE DATE: Upon passage

Background — CUTPA

The law prohibits businesses from engaging in unfair and deceptive acts or practices. CUTPA allows the consumer protection commissioner to issue regulations defining what constitutes an unfair trade practice, investigate complaints, issue cease and desist orders, order restitution in cases involving less than \$10,000, enter into consent agreements, ask the attorney general to seek injunctive relief, and accept voluntary statements of compliance. It also allows individuals to sue. Courts may issue restraining orders; award actual and punitive damages, costs, and reasonable attorney's fees; and impose civil penalties of up to \$5,000 for willful violations and \$25,000 for violation of a restraining order.

§ 436 — MOTOR VEHICLE FUELS TAX REFUND FOR EMERGENCY MEDICAL SERVICE ORGANIZATIONS

Allows EMS organizations to get a motor vehicle fuels tax refund for fuel used in ambulances the organization owns

The bill allows emergency medical service (EMS) organizations to apply for a motor vehicle fuels tax refund for fuel used in ambulances the organization owns. An EMS organization is a corporation or other

public, private, or voluntary organization that (1) is licensed by the Department of Public Health's Office of Emergency Medical Services and (2) offers ambulance transportation or treatment to patients primarily under emergency circumstances or a mobile integrated health care program.

Existing law already allows hospitals and nonprofit civic organizations to get refunds for fuel used in ambulances they own.

EFFECTIVE DATE: July 1, 2022

§§ 437 & 438 — MUNICIPAL GAS COMPANY GROSS EARNINGS TAX EXEMPTION

Beginning July 1, 2022, exempts municipal gas utilities from the utility companies tax

Beginning July 1, 2022, the bill exempts municipal gas utilities from the utility companies tax. Under current law, municipal gas utilities pay a 4% tax on gross receipts from their residential customers and 5% on those from nonresidential customers. The bill makes numerous technical and conforming changes.

EFFECTIVE DATE: July 1, 2022; the changes to the utility companies tax rate provisions are applicable to tax quarters beginning on or after July 1, 2022.

§ 439 — ADMISSIONS TAX ON MOVIES ELIMINATED

Eliminates the 6% admissions tax on movie tickets beginning in 2023

Starting January 1, 2023, the bill eliminates the 6% admissions tax on movie tickets. Under current law, this tax applies to movie tickets costing more than \$5.

PA 21-2, June Special Session (§ 434) eliminated the admissions tax on other venues (e.g., theatres, stadiums, and amusement parks) beginning July 1, 2021, but retained the tax on movies tickets.

EFFECTIVE DATE: July 1, 2022

§§ 440 & 482 — AMBULATORY SURGICAL CENTER TAX REPEAL

Eliminates the ASC tax beginning July 1, 2022

Beginning July 1, 2022, the bill (1) sunsets the ambulatory surgical center (ASC) gross receipts tax and (2) eliminates the ASC net revenue tax currently scheduled to take effect on July 1, 2023.

Under current law, the ASC gross receipts tax is 6% of each ASC's gross receipts for each quarter, excluding (1) the first \$1 million in the applicable fiscal year, excluding Medicaid and Medicare payments; (2) net revenue of a hospital subject to the hospital provider tax; and (3) any Medicaid and Medicare payments the ASC receives. Beginning July 1, 2023, current law replaces the gross receipts tax with a 3% net revenue on specified ASC services, excluding (1) Medicaid and Medicare payments on these services and (2) any net revenue of a hospital subject to the hospital provider tax.

EFFECTIVE DATE: Upon passage for the sunset of the gross receipts tax; July 1, 2022, for the repeal of the net revenue tax.

§ 441 — SPONSORED CAPTIVE AND ASSOCIATION CAPTIVE INSURER DEFINITIONS

Changes definitions as they relate to statutes governing captive insurers to, among other things, incorporate sponsored captives

Generally, existing law prohibits certain captive insurers from insuring risks other than those of its parent company, affiliated companies, or controlled unaffiliated businesses. (A captive insurer is an insurance company generally formed to insure or reinsure the risks of its parent or affiliated company. The law allows for several different types of captives to be licensed and operated in the state, such as pure captives, sponsored captives, and risk retention groups.)

The bill expands the definition of “controlled unaffiliated business” to incorporate sponsored captives. Specifically, it adds as a controlled unaffiliated business, any person who (1) is not in the participant’s corporate system, or that of its affiliated business, (2) has a contractual relationship with the participant or its affiliated businesses, and (3) has their risks managed by the sponsored captive. It makes corresponding changes, including by specifying that a “participant” includes a controlled unaffiliated business insured by a sponsored captive insurer.

The bill also removes a requirement that an “association” (for purposes of being insured by an association captive) be in continuous existence for at least one year.

EFFECTIVE DATE: July 1, 2022

§§ 441 & 443-447 — FOREIGN BRANCH CAPTIVES

Adds “foreign captive insurer” to the definition of “branch captive insurance company,” which allows a foreign captive to open a branch in Connecticut; Incorporates foreign captives into the statutes governing other captive branches

The bill adds “foreign captive insurance company” to the definition of “branch captive insurance company,” therefore, allowing a foreign captive to open a Connecticut branch as the law currently allows for alien captives. Branch captives are licensed to transact business in Connecticut through a business unit with a principal place of business in the state (CGS § 38a-91ff). By law, an alien captive is licensed in another country; a foreign captive is licensed in another state.

The bill generally requires foreign captives to meet the same requirements as licensed alien captives (see below). Under the bill, a “foreign captive insurance company” is an insurer licensed in a state other than Connecticut with statutory or regulatory standards that the insurance commissioner deems acceptable.

EFFECTIVE DATE: July 1, 2022

Premium Tax (§ 441)

By law, captive insurers must pay an annual tax on direct premiums and reinsurance premiums collected or contracted, with a varying rate based on the amount of premiums (CGS § 38a-91nn(c)(1)). With some exceptions, the minimum aggregate tax is \$7,500, and the maximum aggregate tax is \$200,000. Under the bill, a foreign branch captive is subject to the tax as it applies to the branch’s business.

Examinations (§§ 443 & 447)

The bill prohibits the insurance commissioner from licensing a foreign branch captive insurer unless it allows him to examine the foreign captive in the jurisdiction that it was formed, operates, or

maintains books and records.

The bill requires foreign branch captives to undergo a financial condition review by the commissioner or his designee at least every five years, though the examination is limited to branch business and operations as long as it (1) annually gives the commissioner a certificate of compliance or similar document issued by, or filed with, its domiciliary jurisdiction and (2) shows that it is operating in sound financial condition according to the laws and regulations of its domiciliary jurisdiction. (The bill also extends, from three to five years, the current requirement of these reviews for alien branch captives, see below).

Minimum Capital and Surplus Requirements for Branch Captives (§ 444)

As a condition of licensure, current law requires branch captives to maintain as security for its liabilities paid-in capital and surplus of at least \$250,000. The bill reduces the required capital and surplus amount to the greater of \$50,000 or another amount the commissioner determines necessary to secure the liabilities attributed to the captive's operations.

In addition to capital, existing law requires branch captives to have reserves on its insurance or reinsurance policies that it issues or assumes through its branch operations. The reserves must include reserves for losses, allocated loss adjustment expenses, incurred but not reported losses, and unearned premiums.

Under current law, the commissioner may allow a credit against the reserves for certain assets posted with a ceding insurer or posted by a reinsurer. The bill instead allows a credit for assets belonging to:

1. the branch captive that are held in a trust for, or segregated or controlled by, a ceding insurer to secure the captive's reinsurance obligations to the ceding insurer or
2. a reinsurer that are held in trust for, or otherwise controlled by, the branch captive and secure the reinsurer for its obligations to

the captive.

Branch captives' capital and reserves must be held according to law, which generally requires a trust or irrevocable letter of credit.

The bill allows the commissioner to exempt a foreign branch captive from the capital and reserve requirements if he determines that the branch captive is financially stable.

Incorporation (§§ 441 & 445)

The bill requires foreign branch captives to maintain a principal place of business in Connecticut. Additionally, before conducting business in the state, the foreign captive insurer must petition the commissioner for a certificate stating that the branch's licensure and operations will promote the general good of the state. In making his finding, the commissioner must consider the insurer's character, reputation, financial responsibility, and insurance experience and its officers' and directors' business qualifications.

Annual Reporting (§ 446)

Current law requires an alien branch captive insurer to, annually by March 1, submit to the insurance commissioner a copy of the reports and statements that must be submitted in the alien captive insurer's domiciliary jurisdiction. The bill instead requires all branch captives (alien and foreign) to file the copies and statements with the commissioner on the same day they must be filed in the domiciliary jurisdiction.

As with existing requirements for alien branch captives, the bill allows the commissioner to waive additional annual reporting if he finds that the foreign captive's submitted material gives adequate information on its financial condition. If he does not, or if the branch captive is not required to file in its domiciliary jurisdiction, the bill requires the alien or foreign branch captive to submit additional reports, at a time and in a form and manner the commissioner prescribes, containing adequate information about its financial condition.

The bill also allows, as is already the case for alien branch captives, a

foreign branch captive to apply to the commissioner to file annual reports at the end of its fiscal year (CGS § 38a-91gg(c)(2)).

§ 442 — TAX AMNESTY PROGRAM

Creates a tax amnesty program for insureds that open a branch captive in, or transfer an alien or foreign captive to, Connecticut by June 30, 2023, that waives the (1) taxes, interest, and penalties related to the independently procured insurance tax for tax periods before July 1, 2019, and (2) penalties for tax periods between July 1, 2019, and July 1, 2022

By law, insureds that independently procure insurance (i.e., buy it directly from a nonadmitted insurer without a broker) must pay a 4% tax on the gross premiums. The tax applies to insureds with Connecticut as their “home state,” meaning that they maintain their principal place of business in the state or, if the risks are all located out-of-state, or for an affiliated group covered by a single contract, Connecticut has the largest percentage of allocated premiums. An insured who fails to pay the tax is subject to penalties and interest (CGS § 38a-277).

The bill establishes a limited tax amnesty program for insureds liable for the tax. Under the program, qualified insureds are not liable for (1) the tax, interest, or penalties for tax periods before July 1, 2019, and (2) applicable tax penalties for tax periods between July 1, 2019, and July 1, 2022.

To qualify, an insured, by June 30, 2023, must (1) establish a branch captive in, or transfer the domicile of its alien or foreign captive to, Connecticut and (2) pay all independently procured insurance premium taxes and interest due for the tax periods between July 1, 2019, and July 1, 2022.

EFFECTIVE DATE: July 1, 2022

§ 444 — MINIMUM CAPITAL AND SURPLUS REQUIREMENTS FOR CERTAIN CAPTIVES

Reduces the minimum capital and surplus requirement for certain captive insurers

The bill makes similar reductions to the minimum capital and surplus requirement for certain other captives as it does for branch captives (described above), as shown in the table below.

Table : Minimum Capital and Surplus Requirements for Certain Captives Under Current Law and the Bill

<i>Captive Type</i>	<i>Current Law</i>	<i>The Bill</i>
Pure Captive	\$250,000	The greater of \$50,000 or an amount the commissioner determines is necessary for the captive to meet its obligations
Association, Industrial, or Agency Captive	\$500,000	The greater of \$250,000 or an amount the commissioner determines is necessary for the captive to meet its obligations
Sponsored Captive	\$225,000	The greater of \$75,000 or an amount the commissioner determines is necessary for the captive to meet its obligations
Special Purpose Captive	\$250,000	The greater of \$250,000 or an amount the commissioner determines is necessary for the captive to meet its obligations
Sponsored Captive licensed as a Special Purpose Captive	\$500,000	The greater of \$250,000 or an amount the commissioner determines is necessary for the captive to meet its obligations

EFFECTIVE DATE: July 1, 2022

§ 447 — EXAMINATIONS OF CAPTIVE INSURERS

Requires the insurance commissioner to examine captive insurers at least every five years, and allows him to waive the requirement for pure captives

Current law requires the insurance commissioner to visit, inspect, and examine captive insurers at least once every three years and allows him to extend this period to five years if the insurer conducts annual audits. The bill instead requires him or his designee to inspect and examine the insurers at least once every five years, and allows him to waive the requirement for pure captives and their branches.

EFFECTIVE DATE: July 1, 2022

§§ 448 & 451 — TECHNICAL CHANGES

Makes technical changes

The bill makes technical changes in the captive insurer statutes.

EFFECTIVE DATE: July 1, 2022

§ 449 — REINSURANCE RISKS

Allows captive insurers to assume all types of reinsurance

The bill allows captive insurers to assume all types of reinsurance from other insurers, instead of assuming reinsurance only on risks the company is authorized to write directly as under current law.

EFFECTIVE DATE: July 1, 2022

§ 450 — CAPTIVE INSURER REGULATIONS

Expands the insurance commissioner's general authority to adopt regulations concerning captive insurers

Current law allows the commissioner to adopt regulations pertaining to the captive insurance statutes, as well as to set standards for a parent or affiliated company to manage risk of controlled unaffiliated businesses that are insured by pure captive insurers. The bill (1) expands his general authority to adopt regulations related to all related captive statutes (CGS §§ 38a-91aa - 91xx, excluding CGS § 38a-91vv) and (2) specifies that his regulatory authority over risk management standards includes controlled unaffiliated businesses insured by pure, industrial, or sponsored captives. It makes a corresponding change allowing him to approve coverage of these risks by industrial and sponsored captives until regulations are approved.

EFFECTIVE DATE: July 1, 2022

§ 452 — CERTIFICATE OF DORMANCY FOR CAPTIVE INSURERS

Extends how long a certificate of dormancy is good before it must be renewed and lowers certain capital requirements for dormant captives

By law, pure, sponsored, and industrial captive insurers that have stopped conducting business and have no more liabilities can apply to the commissioner for a certificate of dormancy. The bill (1) extends, from two to five years, the length of time before a certificate of dormancy must be renewed and (2) lowers the minimum capital and surplus that a dormant captive must maintain from \$25,000 to \$15,000. It also allows a captive that was never capitalized to become dormant without adding more capital.

EFFECTIVE DATE: July 1, 2022

§§ 453-460 & 481 — STATE RECOVERY OF PUBLIC ASSISTANCE BENEFITS

Prohibits the state from recovering properly paid cash or medical assistance unless required to do so under federal law and releases liens and claims filed before July 1, 2022, to recover assistance when recoveries are not required under federal law or associated with child support collection

The bill prohibits the state from recovering properly paid cash or medical assistance unless required to do so under federal law. The bill also requires the state to release any lien on real property or any claim filed before July 1, 2022, to recover public assistance that is not required under the federal law or associated with child support collection. Relatedly, it eliminates provisions releasing liens under more narrow circumstances.

Current law generally limits the state's claim to recover cash and medical assistance to amounts required to be recovered under federal law for recipients of aid under cash assistance programs (i.e., State Supplement Program (SSP), Aid to Families with Dependent Children (AFDC), Temporary Family Assistance (TFA, which replaced AFDC) provided to anyone over age 18, or State Administered General Assistance (SAGA)) or Medicaid. This includes recoveries from windfalls such as lottery winnings, proceeds from a lawsuit, and inheritances. But, under current law, when children receive or have received cash assistance benefits under AFDC, TFA, or SAGA, their parents are generally liable to the state for the full amount of aid paid to or on behalf of either parent, their spouses, and dependent children. The bill eliminates these provisions. It also eliminates provisions that cap the state's claim when parents receive a windfall from a lawsuit or inheritance at (1) 50% of the lawsuit proceeds or inheritance received by the parent or (2) the amount the parent owes, whichever is less.

Estates and Annuities

Current law gives the state a claim to the estate of someone who dies and (1) received benefits under SSP, medical assistance (including Medicaid but excluding HUSKY D), AFDC, TFA, or SAGA or (2) has a child who received benefits under AFDC, TFA, or SAGA. The bill instead only allows the state to recover assistance from an estate when a person who received Medicaid dies and only to the extent that (1) the

state has not been reimbursed and is required to recover the funds under federal law and (2) the beneficiary's surviving spouse, parent, or dependent children do not need the funds for support.

Similarly, under current law, funds due under an annuity purchased by a public assistance beneficiary are deemed part of the beneficiary's estate and subject to recovery. The bill limits annuity recovery to Medicaid beneficiaries and only to the extent that federal law requires recovery.

Child Support Recoveries

The bill specifies that its provisions do not preclude the state, in a IV-D support case, from retaining child support collected from a parent subject to a support order from the Superior Court of a family support magistrate, unless doing so conflicts with federal law. Current law and the bill give the state a lien against any property, estate, or claim of any kind for a parent of an AFDC or TFA beneficiary for child support and arrearages owed under these support orders and exempts certain property from the lien (e.g., a home, household goods, and other personal property). The bill also makes a technical change to remove the state's claim to recover child support from parents of SAGA beneficiaries. Generally, IV-D support cases are cases in which DSS's Office of Child Support Services provides child support enforcement services for Medicaid and TFA recipients, among others (CGS § 46b-231(b)(13)).

The bill eliminates provisions that cap the state's claim when parents receive a windfall from a lawsuit or inheritance at (1) 50% of the lawsuit proceeds or inheritance received by the parent or (2) the amount the parent owes, whichever is less.

Under current law, when funds are collected for public assistance or child support recoveries and the person who would have otherwise been entitled to the funds is subject to a child support order, the funds are paid in the following order:

1. first, to the state to reimburse Medicaid funds granted to the

- person for medical expenses incurred for injuries related to a legal claim that was subject to the state's lien,
2. then to DSS's Office of Child Support Services to be distributed as child support, and
 3. any remaining funds must be paid to the state for payment of previously provided cash assistance or medical assistance.

The bill generally retains this payment order, but applies it to payments collected from legally liable third parties (e.g., health insurers). Funds are paid first to reimburse the state for Medicaid funds for treatment of injuries related to legal claims that are subject to the state's right of subrogation. This right generally allows the state to collect funds from insurers that are obliged to pay before Medicaid pays. Similar to current law, remaining funds are paid to DSS's Office of Child Support Services to be distributed as child support. Under the bill, any additional claim of the state to the remainder of such funds, if any, must be paid in accordance with state law.

The bill also eliminates a requirement that DSS adopt regulations to establish criteria and procedures to adjust the state's claim for public assistance or child support in order to encourage noncustodial parents to be positively involved in their children's lives and begin making regular support payments.

Recoveries in Other Circumstances

The bill separates other recovery requirements from provisions affecting public assistance recoveries.

By law, a person who has received or is receiving care in a state humane institution is liable, along with his or her estate, to reimburse the state for any unpaid portion of the per capita cost of care. The bill eliminates a provision under which this liability is to the same extent and subject to the same limitations as a public beneficiary's liability under current law.

By law, similarly, a parent of a minor child who receives care or

support under state laws related to juvenile matters (e.g., neglected or delinquent children) is liable to reimburse the state for the cost of this care or support. The bill eliminates a provision under which this liability is to the same extent, and under the same terms and conditions as liability for parents of public assistance recipients.

The bill also makes minor, technical, and conforming changes.

EFFECTIVE DATE: July 1, 2022

§§ 461-462 — COST OF INCARCERATION

Regarding the state's claim for incarceration costs, (1) exempts up to \$50,000 of an inmate's other assets, except those for inmates incarcerated for certain serious crimes; and (2) makes the states lien against lawsuit proceeds applicable only to inmates incarcerated for certain serious crimes

Exempt Property

By law the Department of Correction (DOC) commissioner must assess inmates the costs of their incarceration.

Current law gives the state a claim against any property owned by an inmate, except:

1. property that is statutorily exempt from execution to satisfy court judgments and exempt property of a farm partnership;
2. money from a contract for reenacting the inmate's violent crime in various media (such as movies and books) or from the expression of the person's thoughts or feelings about the crime which by law must be paid to the Office of Victim Services;
3. property acquired for work performed during incarceration as part of a program designated or defined in DOC regulation as job training, skill development, a career opportunity, or an enhancement program; and
4. property the inmate acquired after he or she was released from incarceration.

The bill additionally exempts up to \$50,000 of other assets, except for inmates incarcerated for capital felony or murder with special

circumstances, felony murder, 1st and 2nd degree sexual assault, 1st degree aggravated sexual assault, or aggravated sexual assault of a minor.

Under existing law, unchanged by the bill, any action by the state must be brought within two years of the inmate's release from prison or within two years of his death if he dies while in DOC custody. This time restriction does not apply to property that is fraudulently concealed.

Lawsuit Proceeds

Under the law, whenever a person who owes the state money for the cost of his or her incarceration wins a lawsuit judgment, for a case he or she brought within 20 years of release, the state's claim is a lien against the proceeds. The maximum amount of the claim is the full cost of the inmate's incarceration or 50% of the proceeds, minus certain expenses (e.g., attorney's fees), whichever is less.

The bill limits this to lawsuit proceeds for inmates incarcerated for capital felony or murder with special circumstances, felony murder, 1st and 2nd degree sexual assault, 1st degree aggravated sexual assault, or aggravated sexual assault of a minor.

EFFECTIVE DATE: Upon passage, and applicable to costs of incarceration incurred, before, on or after that date.

§ 463 — OEC START EARLY – EARLY CHILDHOOD DEVELOPMENT INITIATIVE

Requires OEC to establish and administer the Start Early - Early Child Development Initiative; allows OEC to use funds the state received through the American Rescue Plan Act to administer it

The bill requires the Office of Early Childhood (OEC) to establish and administer the Start Early - Early Child Development Initiative. OEC must develop funding priorities for the initiative for early education and support services through a grant program for research and early education service providers to support the growth and enhancement of a system of high-quality early childhood care and education and support services.

Under the bill, OEC may test more than one type of intervention or

type of program for young children and families; and must track differences in child progress by program type. Funding under the initiative may include targeted formula grants to providers in high-need areas throughout the state to serve a cohort of children from infancy through kindergarten entrance. The funding may also include existing providers serving a cohort of children in the target community who agree to implement research-based professional development or curricular interventions that begin in the infant and toddler years.

Standards

OEC must establish standards for the initiative that include eligibility, participant, and data reporting requirements; program outcome metrics; evaluative methods; and a formula for the distribution of grant funds for at least a five-year period. The standards may include guidelines for staff-child interactions; lesson plans; parental engagement; staff qualifications and training; and curriculum content including physical, social, emotional, quantitative, executive function, and preliteracy development.

Contracts With Higher Education Institutions

Under the bill, the OEC commissioner, or a contractor who has entered into a contract under the initiative with the commissioner, must enter into contracts with a higher education, child care center, group child care home providers, family child care home, or staffed family child care networks. These contracts are for the purpose of creating new, or supporting existing, infant and toddler spaces and preschool spaces within the standards OEC establishes (see above). In entering such a contract, the commissioner must give priority to child care centers, group child care homes, and family child care homes that are:

1. located in towns with the lowest median household income or the greatest deficit of early care availability,
2. creating new infant and toddler spaces,
3. accredited, and
4. licensed to individuals who reflect the demographics of the

population in the community in which the center or home is located.

Contracts entered into under the initiative, may require the provider to provide access to family support services in order to receive the grant-in-aid. These family support services must include parenting support; home visiting; early intervention services; information about child development; and assistance to help parents complete their education, learn English, enroll in a job training program, or find employment.

Funding

The bill authorizes OEC to use federal funds the state received through the American Rescue Plan Act to support administrative expenses related to the initiative, including entering into an agreement with a third party to manage the program; design, collect, and analyze required data on outcome measures as OEC prescribes; and develop data collection and evaluation tools for continuous program evaluation.

Reporting

The bill requires OEC to develop an annual report regarding the initiative's data and outcome measures. The report must include achievement on the elements in the Connecticut Early Learning and Development Standards as reported in the accompanying assessment tool. OEC may also develop recommendations for modifications to the early education system based on an evaluation of the initiative's data and outcome.

Starting by January 1, 2023, OEC must annually submit the report and any recommendations to the Education Committee.

EFFECTIVE DATE: July 1, 2022

§ 464 — DELETED BY HOUSE “C”

§ 465 — TAX INCIDENCE STUDY

Expands the scope of the DRS tax incidence study; advances the deadline for the next study, from February 15, 2024, to December 15, 2023

By law, the DRS tax incidence study must provide the overall incidence of the income tax, sales and excise taxes, corporation business

tax, and property tax. The bill requires that it (1) provide this information for each of the most recent 10 tax years for which complete data are available and (2) include incidence projections for each of these taxes.

Under current law, the report must present information on the tax burden distribution for individual taxpayers by income classes, including income distribution by income deciles (i.e., every 10 percentage points). The bill additionally requires it to present this information for the top 1% and 5% of all income taxpayers.

The bill also advances the deadline for the next study, from February 15, 2024, to December 15, 2023.

EFFECTIVE DATE: July 1, 2022

§ 466 — TOWN AID ROAD REPORTING

Requires each town or district that received TAR funds to annually report to the transportation commissioner on how the funds were used

Starting by September 1, 2022, the bill requires each town or district that received Town Aid Road (TAR) funds to annually report to the transportation commissioner, in a form and manner he prescribes, detailing how the funds were used the previous fiscal year. Specifically, it must list how much TAR funding the town or district spent on each of the permitted uses of TAR funds (e.g., highway construction, reconstruction, improvement, or maintenance).

EFFECTIVE DATE: July 1, 2022

§ 467 — ADVANCED NOTICE OF ROAD PROJECTS

Requires municipalities, utility companies, and OPM to submit certain reports related to advanced notice of road projects affecting utility infrastructure and inspection procedures upon project completion

Town Report

By December 1, 2022, the bill requires each municipality's chief executive officer to submit to the OPM secretary a letter stating whether the municipality does the following:

1. provides advanced notice to gas, water, or other utility

companies of any impending road project involving paving, repaving, or grading of a street or road that include any gas, water, or other utility infrastructure (including maintenance hole covers, sewer grate, and utility service grates) that could impede the safe operation of vehicles and

2. performs a final inspection and approval of the project.

For each affirmative response, the municipality must include a description of the process for providing advanced notice or the procedures for final inspection and approval.

Utility Company Report

By December 1, 2022, each gas, water, or other utility company whose infrastructure is situated so that it may be impacted by road paving, repaving, or grading must submit to OPM a description of the company's experience with advance project notice from each municipality whose project may impact that company's infrastructure.

OPM Report

By January 1, 2023, the OPM secretary must report the following to the Appropriations; Transportation; and Finance, Revenue and Bonding committees:

1. a summary of the (a) processes the municipalities describe for providing advanced notice to utility companies and, (b) final inspection and approval processes the municipalities describe,
2. a comparison of the descriptions provided by the municipalities and the utility companies of the advanced notice process, and
3. any other information the OPM secretary deems relevant.

EFFECTIVE DATE: Upon passage

§§ 468 & 469 — 30-YEAR MUNICIPAL BONDS

(1) Makes permanent an authorization allowing municipalities to issue bonds with a term of up to 30 years and (2) extends this authorization by five years for refunding bonds

Existing law (1) generally limits municipal bond terms to 20 years

unless the general statutes or a special act expressly allows another term. and (2) allows municipalities to issue refunding bonds to pay off all or part of their bonds, notes, or other debt obligations. The refunding bonds generally must mature by the maturity date of the bonds, notes, or obligations which they are used to pay off (i.e., generally 20 years).

Current law allows a term of up to 30 years for bonds and refunding bonds issued from July 1, 2017 to July 1, 2022. The bill (1) makes this authorization permanent for bonds and (2) extends it by five years, until July 1, 2027, for refunding bonds.

As under current law, municipalities may issue refunding bonds with a maturity of up to 30 years only if their legislative bodies adopt a resolution to do so by a two-thirds vote. Existing law allows the resolution approving the refunding bonds to include a provision securing the refunding bonds by a statutory lien on all of the municipality's tax revenues. The revenues are immediately subject to the lien without any further action or authorization by the municipality. The lien is valid and binding against the municipality; its successors, transferees, and creditors; and all other parties asserting rights to these revenues, regardless of whether they received specific notice of the lien, and without physical delivery, recording, or filing of the lien or any further action.

EFFECTIVE DATE: July 1, 2022

§ 470 — ENTERPRISE ZONE DESIGNATION REMOVAL

Prohibits the DECD commissioner from removing an enterprise zone's designation under specified conditions

Existing law authorizes the Department of Economic and Community Development (DECD) commissioner to remove an enterprise zone's designation if the area no longer meets the designation criteria. The bill prohibits the commissioner from doing so if the number of residents in the zone with incomes below the poverty level has not been reduced by at least 75% from the date the zone was originally approved (based on the most recent U.S. census). As under existing law, once designated, an area remains an enterprise zone for at least 10 years.

Generally, to qualify as an enterprise zone under the program's statutory criteria, a proposed zone must meet specified poverty measures (e.g., at least 25% of the zone's residents must have incomes below the poverty level or receive public assistance, or the zone's unemployment rate must be at least double the average state rate).

EFFECTIVE DATE: Upon passage

Background — Enterprise Zone Benefits

Enterprise zone benefits are generally available to businesses that start up in or improve real property there. These benefits include a (1) five-year, 80% property tax exemption for qualifying facility improvements and machinery and equipment purchases (CGS § 12-81(59) & (60)) and (2) seven-year fixed assessment for qualifying commercial and residential real property improvements (CGS § 32-71).

The law designates municipalities containing an enterprise zone as "targeted investment communities," which qualifies them for enhanced funding and other tax incentives (e.g., enhanced financial assistance under the Manufacturing Assistance Act program (CGS § 32-223(c))).

Background — Designated Zones

There are 18 enterprise zones currently designated in the following towns: Bridgeport, Bristol, East Hartford, Groton, Hamden, Hartford, Meriden, Middletown, New Britain, New Haven, New London, Norwalk, Norwich, Southington, Stamford, Thomaston, Waterbury, and Windham.

§§ 471 & 472 — COMMERCIAL DRIVER'S LICENSE TRAINING PROGRAM

Requires the Office of Workforce Strategy (OWS) to design and implement a program to support individuals pursuing commercial driver's license (CDL) training; establishes a nonlapsing account within OWS to support the program; establishes a Connecticut Career Accelerator Program Advisory Committee

The bill requires OWS, by January 1, 2023, to design a program to support individuals pursuing CDL training, including through the use of income share agreements or equivalent financial instruments. The bill allows OWS to competitively procure a consultant to support program's

design and implementation. The program must be implemented by July 1, 2023.

EFFECTIVE DATE: Upon passage

Program Design

Under the bill, program design must consider developing:

1. metrics for identifying qualified training providers;
2. incentive-based payments for training providers, such as paying a trainer (a) 80% of a student's tuition before providing any training and (b) the remaining tuition upon the student's job placement; and
3. a method for targeting potential students for the program.

Tuition Repayment Obligation

The bill requires the program to include terms and conditions for the payment obligations undertaken by individuals who obtain tuition assistance from the program's account (see below). Under the bill, the program must require individuals who receives a direct tuition payment from the account to repay the payment if, after receiving training, the program places them in a job that provides them with a higher income than they received before participating in the program. The bill also requires the program to consider offering wrap-around supports, such as stipends, child care services, counseling, and other supports identified by OWS.

The bill prohibits (1) interest from being charged on any tuition repayment obligation and (2) individuals receiving wrap-around supports from having to repay the account for those supports.

Marketing Plan

Under the bill, OWS must develop a marketing plan to attract individuals who fit program participation eligibility criteria. OWS must target this marketing to recruit individuals who are:

1. underserved, disadvantaged, unemployed, or underemployed;

2. dislocated workers;
3. receiving temporary assistance for needy families, supplemental nutrition assistance program or any other public assistance benefits;
4. formerly incarcerated; or
5. veterans of the armed services.

The bill requires the marketing plan to include outreach to various state agencies, the regional workforce investment boards, transit authorities, housing authorities, the Office of Early Childhood, and other partners OWS identifies.

Reporting

The bill requires OWS, by April 1, 2023, to report on the program's implementation and design to the (1) Appropriations, (2) Commerce, (3) Education, (4) Finance, Revenue and Bonding, (5) Higher Education and Employment Advancement, and (6) Labor and Public Employees committees.

Additionally, starting by July 1, 2024, OWS must submit an annual report to the committees listed above that may include the following:

1. program completion and job placement rates, and funds used as payment obligations, grants, and wraparound services, for individuals participating in the program;
2. starting wages, wage gains, and wage growth of individuals employed after participating in the program; and
3. percentage of program participants in compliance with repayment obligations and total repayments received.

Connecticut Career Accelerator Program Account

The bill establishes a nonlapsing Connecticut Career Accelerator Program account within OWS to support CDL training in the CareerConneCT workforce training program. The account must contain

any money required by law to be deposited into it, and it may accept gifts, grants, or donations from public or private sources. OWS must use the account to carry out the program's purposes.

Connecticut Career Accelerator Program Advisory Committee

The bill establishes a Connecticut Career Accelerator Program Advisory Committee to examine other innovative models that support individuals pursuing CDL training. It must make recommendations for aligning the program with other states' best practices and methods to ensure account sustainability. Under the bill, these methods may include (1) whether to require depositing a percentage of state income tax paid by program graduates into the account and (2) identifying methods of incentivizing corporations, private citizens, and philanthropic organizations to contribute to the account. The committee may hold informational hearings to gather information related to the program.

The bill requires the Finance, Revenue and Bonding Committee chairpersons and ranking members to appoint the advisory committee members, and the committee's administrative staff must serve as the advisory committee's administrative staff. Under the bill, committee membership may include representatives of OWS and the following:

1. the Invest in Student Advancement Alliance;
2. a technology solutions provider that prepares individuals for career training opportunities;
3. nonprofit, for profit, and labor organizations that operate commercial truck driving training programs; and
4. other workforce training programs and other individuals with knowledge and expertise that may facilitate and enhance program operation.

§ 473 — PROPERTY APPRAISAL REQUIREMENT FOR APPEALS UNDER CGS § 12-117A

Requires certain property owners who are aggrieved by a board of assessment appeals' decision and appeal their real property's valuation to the Superior Court to file a property appraisal with the court within 90 days after filing their appeal

Existing law allows property owners to appeal their assessments to a municipality's board of assessment appeals. The appeals board must hold a hearing on each appeal, except for those on commercial, industrial, utility, or apartment properties assessed at over \$1 million. A taxpayer aggrieved by an appeals board's decision can appeal to Superior Court (CGS § 12-117a).

In property tax assessment appeals brought to the Superior Court under this law concerning the valuation of real property assessed at \$1 million or more, the bill requires applicants to file a property appraisal with the court within 90 days after filing the appeal. This requirement applies for any appeal application made on or after July 1, 2022. The appraisal must be completed by an individual or company licensed to perform real estate appraisals in Connecticut. The bill authorizes the court to (1) extend the 90-day period for good cause and (2) dismiss the appeal if the appraisal is not timely filed.

EFFECTIVE DATE: July 1, 2022

§ 474 — DELETED BY HOUSE “C”

§§ 475 & 476 — CRDA'S SOLICITATION OF PRIVATE INVESTMENTS

Authorizes CRDA to solicit private investment funds from companies for projects it undertakes and establishes conditions under which businesses may make these investments if one of their officers, directors, shareholders, or employees is a CRDA board member

The bill authorizes CRDA to solicit private investment funds from businesses to finance any capital city project (see *Background*) or other project CRDA undertakes. It requires that the private investments be made on equivalent or substantially similar terms and conditions as the investments CRDA makes for the project, as set by CRDA's board of directors, but allows CRDA to give these private investments repayment priority.

The bill allows businesses to make these private investments even if an employee, officer, director, or shareholder of the business is a CRDA

board member, so long as the member recuses himself or herself from any board deliberation, action, or vote on the project that is specific to the business.

Background — Distressed Municipalities

By law, the DECD commissioner must annually designate distressed municipalities based on a combination of economic, education, demographic, and housing criteria. The current (2021) distressed municipalities are Ansonia, Bridgeport, Chaplin, Derby, East Hartford, East Haven, Griswold, Groton, Hartford, Meriden, Montville, New Britain, New London, Norwich, Plainfield, Putnam, Sprague, Sterling, Stratford, Torrington, Voluntown, Waterbury, West Haven, Winchester, and Windham.

Background — Capital City Projects

By law, “capital city projects” include, among other things, the:

1. construction or rehabilitation of up to 3,000 downtown housing units,
2. development and redevelopment of buildings in Hartford,
3. development of riverfront infrastructure and improvements in Hartford and East Hartford,
4. demolition or redevelopment of vacant buildings in Hartford and East Hartford, and
5. addition of downtown parking.

§ 477 — REDUCED FY 23 TRANSFER OF AMERICAN RESCUE PLAN ACT FUNDS

Eliminates the FY 22 transfer to the General Fund from designated ARPA funds and reduces the FY 23 transfer from \$1,194.9 million to \$314.9 million

PA 21-2, § 453, June Special Session, requires the comptroller to transfer to the General Fund from the Coronavirus State Fiscal Recovery Fund under ARPA (1) \$559.9 million for FY 22 and (2) \$1,194.9 million for FY 23. The bill (1) eliminates the FY 22 transfer and (2) reduces the FY 23 transfer to \$314.9 million.

EFFECTIVE DATE: Upon passage

§ 478 — ARPA HOME AND COMMUNITY-BASED SERVICES FUNDS

Requires the comptroller to reserve \$83.2 million of General Fund revenue received under ARPA for home and community-based services and substance use disorders in FY 22 to be used for federal revenue collection in FY 23

The bill requires the comptroller to reserve \$83.2 million of General Fund revenue received under ARPA for home and community-based services and substance use disorders in FY 22 to be used for federal revenue collections in FY 23.

EFFECTIVE DATE: Upon passage

§ 479 — REVENUE TRANSFER FROM FY 22 TO FY 23

Requires the comptroller to transfer \$125 million of FY 22 General Fund resources for use in FY 23

By June 30, 2022, the bill requires the comptroller to transfer \$125 million of FY 22 General Fund resources to be accounted for as FY 23 General Fund revenue.

EFFECTIVE DATE: Upon passage

§ 484 — STATE CONTRACTING STANDARDS BOARD LAPSE REPEAL

Repeals a provision in the 2021 implementer concerning a lapse of SCSB's FY 23 appropriation

The bill repeals a provision in the 2021 implementer requiring that \$454,355 of the State Contracting Standards Board's (SCSB) FY 23 appropriation lapse on July 1, 2022 (PA 21-2, June Special Session, § 201). (The 2021 budget act (SA 21-15) appropriated \$637,029 to SCSB in FY 23.)

The 2021 implementer also required that \$449,124 of SCSB's FY 22 appropriation lapse on July 1, 2021.

EFFECTIVE DATE: Upon passage

§§ 501-508 HOUSE “A” — REVENUE ESTIMATES

Modifies previously adopted revenue estimates for FY 23

The bill modifies revenue estimates for FY 23 that were previously

adopted in 2021 as part of the FY 22-23 biennial state budget, as shown in the following table.

Table: Modified FY 23 Revenue Estimates

<i>Fund</i>	<i>Current Law</i>	<i>Bill</i>
General Fund	\$21,809,775,000	\$22,388,200,000
Special Transportation Fund	2,029,300,000	2,091,900,000
Mashantucket Pequot and Mohegan Fund	51,500,000	51,509,000
Banking Fund	29,600,000	29,800,000
Insurance Fund	122,500,000	123,200,000
Consumer Counsel and Public Utility Control Fund	31,000,000	32,800,000
Workers' Compensation Fund	27,050,000	27,300,000
Tourism Fund	13,400,000	13,450,000

EFFECTIVE DATE: July 1, 2022

§ 501 HOUSE “C” — DOH RENT BANK PROGRAM

Modifies the eligibility criteria of DOH’s rent bank program and increases the maximum amount of rent bank assistance an eligible family may receive under the program

The bill modifies the eligibility criteria for the rent bank grant component of DOH’s Eviction and Foreclosure Prevention Program (EFPP). By law, the rent bank must serve families (1) at risk of homelessness, eviction, or foreclosure, and (2) whose income is no more than 60% of the state median income (including those receiving temporary family assistance from the state). To receive rent bank assistance under current law, a family meeting these requirements must:

1. document a loss of income or increase in expenses, including loss of employment, medical disability or emergency, loss or delay in receipt of other benefits, natural or man-made disaster, substantial and permanent change in household composition, and any other condition the DOH commissioner determines is a severe hardship that is unlikely to recur; and
2. participate in a related assessment and mediation EFPP component.

The bill eliminates this second requirement from the rent bank grant law. Existing law on the assessment and mediation program,

unchanged by the bill, requires families to be referred to the program before being eligible for a grant (CGS § 8-347a).

Additionally, the bill increases the maximum amount of rent bank assistance an eligible family may receive during a consecutive 18-month period from \$1,200 to \$3,500.

EFFECTIVE DATE: July 1, 2022

§ 502 HOUSE “C” — SALES TAX REMITTANCE FOR CERTAIN MARKETPLACE FACILITATORS

Exempts marketplace facilitators that facilitate passenger motor vehicle and rental truck rentals on behalf of rental companies from sales tax collection and remittance requirements on behalf of these sellers

By law, marketplace facilitators (e.g., online marketplaces) are considered retailers for the sales they facilitate for third-party sellers and generally must collect and remit sales tax on behalf of these sellers. The bill exempts marketplace facilitators that facilitate passenger motor vehicle and rental truck rentals on behalf of rental companies from these requirements. In doing so, it makes the rental companies responsible for collecting and remitting sales tax on these sales.

Under the bill and existing law, “rental companies” are generally businesses that rent out a fleet of five or more passenger motor vehicles, rental trucks, or machinery, but not those whose rental income is less than 51% of their total annual revenue. “Passenger motor vehicles” are those rented without a driver that are part of a rental car company’s fleet. “Rental trucks” are (1) vehicles rented without a driver with a gross vehicle weight of 26,000 pounds or less and used to transport personal property (but not for business purposes) or (2) trailers with a gross vehicle weight of 6,000 pounds or less.

EFFECTIVE DATE: July 1, 2023

Background — Marketplace Facilitators

Marketplace facilitators are generally businesses that (1) facilitate retail sales of at least \$250,000 during the previous 12-month period for sellers by providing a forum (e.g., website) that lists or advertises the sellers’ goods and services and (2) collect receipts from customers and

remit payments to sellers. By law, they are considered retailers for these sales and therefore must (1) collect and remit sales tax on taxable sales, (2) be responsible for all obligations imposed under the state’s sales and use tax laws (e.g., timely filing returns), and (3) keep specified records and information on these sales.

§§ 503 – 507 HOUSE “C” — PROTECTIONS FOR REPRODUCTIVE AND GENDER-AFFIRMING HEALTH SERVICES IN THE STATE

Establishes a cause of action for persons against whom there is a state judgment based on reproductive and gender -affirming health care services; it also limits the assistance officers of Connecticut courts, public agencies, and certain health care providers may provide in out-of-state actions related to reproductive or gender-affirming health care services that are legal in this state

The bill establishes a cause of action for persons against whom there is an out-of-state judgment based on reproductive and gender-affirming health care services. It also limits the assistance officers of Connecticut courts, public agencies, and certain health care providers may provide in out-of-state actions related to reproductive or gender-affirming health care services that are legal in this state. With exceptions, the bill generally prohibits the following with respect to these actions:

1. court officers from issuing summons for criminal cases or subpoenas for civil actions or proceedings;
2. public agencies, or individuals acting on their behalf, from providing information or expending resources to support an investigation seeking to impose criminal or civil liability; and
3. certain health care providers, payors, or information processors from disclosing protected information without written consent from a patient or an authorized legal representative.

Under the bill, “reproductive health care services” include all medical, surgical, counseling, or referral services related to the human reproductive system, such as pregnancy, contraception, or pregnancy termination, and “gender-affirming health care services” is all medical care relating to treating gender dysphoria.

(These provisions are similar to sHB 5414, as amended by House “A” (§§ 1-4 & 6), and passed by both chambers, but the language on gender-

affirming health care services is new to this bill.)

EFFECTIVE DATE: July 1, 2022

Recouperation of Out-of-State Judgments Related to Reproductive or Gender-Affirming Health Care Services (§ 503)

Cause of Action. The bill creates a cause of action for persons against whom a judgment was entered in another state based on allegedly providing or receiving, or helping another person to provide or receive, or providing material support for reproductive or gender-affirming health care services that are legal in Connecticut. For this purpose, a “person” is an individual, partnership, association, limited liability company, or corporation.

The bill applies to judgments where the person’s liability in the original action was entirely or partially based on these alleged actions or any theory of vicarious, joint, several, or conspiracy liability arising from them. It allows the person to recover damages from any party that (1) brought the original action that resulted in the judgment or (2) tried to enforce it.

Under the bill, this cause of action is unavailable if no part of the acts that formed the basis for liability occurred in Connecticut. It is also unavailable when the judgment entered in the other state is based on a claim similar to one that exists under Connecticut law and is a:

1. tort-, contract-, or statutory-based claim brought by a patient, or their authorized legal representative, who received the reproductive or gender-affirming health care services, for damages the patient suffered or from another individual’s loss of consortium with the patient; or
2. contract-based claim brought or enforced by someone with a contractual relationship with the person who is subject to the judgment.

Recoverable Damages. Under the bill, the court must award a person who successfully brings an action:

1. just damages resulting from the original action (e.g., the amount of the judgment entered in the other state and costs, expenses, and reasonable attorney's fees spent defending the action) and
2. costs, expenses, and reasonable attorney's fees spent bringing the action under the bill, as the court allows.

Limits on Compelling Witness Participation in Certain Out-of-State Actions (§§ 505 & 506)

Depositions. Under current law, judges, justices of the peace, notaries public, and Superior Court commissioners (Connecticut licensed attorneys) may subpoena and compel material witnesses to appear before (i.e., be deposed by) attorneys licensed in other jurisdictions, including for lawsuits in other states (CGS § 52-155). The bill, with two exceptions, prohibits them from issuing a subpoena that relates to reproductive or gender-affirming health care services that are legal in Connecticut.

Under the bill's two exceptions, these court officers may issue a subpoena if it is for an out-of-state action for which a similar claim would exist under Connecticut law and it is a:

1. tort-, contract-, or statutory-based claim brought by a patient, or their authorized legal representative, who received the reproductive or gender-affirming health care services upon which the original lawsuit was based, for damages the patient suffered or from another individual's loss of consortium with the patient or
2. contract-based claim brought or enforced by someone with a contractual relationship with the person who is subject to the judgment.

Testimony in Criminal Cases. Current law allows a Connecticut judge to issue a summons ordering a person located in this state to attend and testify in a criminal prosecution or grand jury investigation in another state, at that other state's request, if the person is a material witness and certain other requirements are met.

The bill prohibits Connecticut judges from issuing a summons when the other state's prosecution or investigation is for a violation of its law on providing, receiving, or assisting with reproductive or gender-affirming health care services that are legal in Connecticut. However, it allows a judge to issue a subpoena if the acts being prosecuted or investigated would also constitute an offense in this state.

Limits on Use of Agency Resources (§ 507)

The bill generally prohibits Connecticut public agencies, or people acting on their behalf (e.g., employees, appointees, officers, and officials), from providing information or using state resources to help another state's investigation or proceeding to impose civil or criminal liability on a person or entity for (1) providing, seeking, receiving, or inquiring about reproductive or gender-affirming health care services that are legal in this state or (2) assisting another person or entity to do so. Specifically, state agencies, and those acting on their behalf, may not expend or use time, money, facilities, property, equipment, personnel, or other resources for these purposes. These prohibitions do not apply to investigations or proceedings if the conduct at issue would be subject to liability under Connecticut's laws if committed here.

Under the bill, a "public agency" is any (1) state or local governmental agency, department, institution, bureau, board, or commission, including any executive, administrative, or legislative office, and the administrative functions of any judicial office, including the Division of Public Defender Services or (2) entity that is the functional equivalent of these agencies.

Prohibited Patient Information Disclosures (§ 504)

The bill prohibits, with exceptions, certain covered entities that provide health care, payments, or billing services from disclosing specified information in a civil action, or a preliminary proceeding before a civil action, or a probate, legislative, or administrative proceeding. "Covered entities" are health care plans or payors; health care clearinghouses; and health care providers that electronically transmit health information pursuant to Health Insurance Portability and Accountability Act (HIPAA) regulations (45 C.F.R. § 160.103).

Without explicit written consent from the patient or patient's legal representative (e.g., conservator or guardian), the bill prohibits disclosing the following about reproductive or gender-affirming health care services that are legal under Connecticut law:

1. communications made to a covered entity or obtained by it from a patient or the patient's legal representative or
2. information obtained by a physical examination of the patient.

It requires covered entities to inform patients or their legal representatives of the patient's right to withhold consent for these disclosures.

Exceptions. Under the bill, a covered entity does not have to obtain written consent to disclose communications or information:

1. pursuant to state law or judicial branch court rules;
2. to their attorney or professional liability insurer or agent to defend against a claim, or one that is reasonably believed to occur, against the covered entity;
3. to the public health commissioner if the disclosure is for a patient's records that are related to a complaint investigation; or
4. about the abuse of a child, elderly person, incompetent person, or person with a mental or physical disability if it is known or suspected in good faith.

The bill does not impede sharing medicals records if state or federal law or the judicial branch's court rules allows them to be shared, but it may impede subpoenas to produce, copy, or inspect records relating to reproductive or gender-affirming health care services. Additionally, it does not replace existing law's disclosure requirements for communications or records, as applicable:

1. between an individual and psychologist, psychiatric mental health provider, domestic violence or sexual assault counselor, marital and family therapist, or professional counselor;

2. disclosed by a mental health facility for approved research purposes;
3. to the Department Mental Health and Addiction Services (DMHAS) commissioner by facilities or individuals under contract with DMHAS;
4. relating to a social worker's evaluation or treatment; or
5. by a physician, surgeon, or other licensed health care provider in a civil action (including a related preliminary proceeding), or a probate, legislative, or administrative proceeding.

§ 508 HOUSE “C” — PROVIDERS AUTHORIZED TO PERFORM ABORTIONS

Allows APRNs, nurse-midwives, and PAs to perform aspiration abortions; explicitly authorizes these providers to perform medication abortions, conforming to a 2001 attorney general opinion; makes related changes

The bill allows advanced practice registered nurses (APRNs), nurse-midwives, and physician assistants (PAs) to perform aspiration abortions (the most common type of abortion during the first trimester). The bill also explicitly authorizes these providers to perform medication abortions, which conforms to existing practice resulting from a 2001 attorney general opinion. It specifies that these providers may perform either type of abortion in accordance with their respective licensing statutes (see *Background*).

The bill correspondingly specifies that the decision to terminate a pregnancy before the viability of the fetus must be made solely by that patient in consultation with the patient's physician, APRN, nurse-midwife, or PA, not just the patient and physician as under current law.

Under the bill, as under existing law, physicians may perform any type of abortion. Existing law, unchanged by the bill, prohibits an abortion from being performed after the viability of the fetus except when needed to preserve the pregnant patient's life or health.

The bill also makes technical changes to terminology.

(These provisions are identical to sHB 5414, as amended by the House

(§ 7) and passed by both chambers.)

EFFECTIVE DATE: July 1, 2022

Background — Attorney General Opinion on Medical Abortions

Existing state regulations only expressly allow physicians to perform abortions (Conn. Agencies Regs., § 19-13-D54(a)). However, a 2001 Connecticut’s attorney general opinion (2001-15) concluded that this restriction only applied to surgical abortions, and that state statutes allowing APRNs, nurse-midwives, and PAs to prescribe drugs authorized them, under certain conditions, to dispense or administer a drug that would medically terminate a pregnancy.

Background — APRNs, Nurse-Midwives, and PAs

For each of these professions, the existing licensing statutes establish, among other things, certain required relationships with other providers.

APRNs must practice in collaboration with a physician for the first three years after becoming licensed in the state. They may practice without this collaboration if they have been licensed and practicing in collaboration with a physician for at least three years with at least 2,000 hours of practice (CGS § 20-87a).

Nurse-midwives must practice within a health care system. They must have clinical relationships with obstetricians-gynecologists that provide for consultation, collaborative management, or referral, as indicated by the patient’s health status (CGS § 20-86b).

Each PA must have a clearly identified supervising physician who has final responsibility for patient care and the PA’s performance. The functions a physician delegates to a PA must be implemented in accordance with a written delegation agreement between them (CGS §§ 20-12c & -12d).

§ 509 HOUSE “C” — ARPA FUNDS FOR SCHOOL-BASED HEALTH CENTERS

Specifies the allocation of ARPA funding for four school-based health centers

The bill specifies that its ARPA funding allocation to DPH for ICHC

school-based health centers (SBHCs) (see § 10) must be distributed as grants to four SBHCs in East Hartford. The funding must be distributed as follows:

1. to the operators of the SBHCs at Synergy Alternative High School and Langford Elementary School, to expand hours for the provision of primary care and behavioral health services, and
2. for the establishment of new SBHCs at Woodland School and Sunset Ridge Middle School, that will provide primary care and behavioral health services.

EFFECTIVE DATE: July 1, 2022

§ 510 HOUSE “C” — MBR EXEMPTION

Exempts Stratford’s board of education from the MBR in FY 23

The minimum budget requirement (MBR) prohibits towns from budgeting less for education than they did in the previous fiscal year. The bill exempts Stratford’s board of education from the MBR in FY 23.

EFFECTIVE DATE: Upon passage

§ 511 HOUSE “C” — SCHOOL CONSTRUCTION MINIMUM REIMBURSEMENT RATES FOR CERTAIN TOWNS

Creates a minimum school construction reimbursement grant rate for certain towns

Under school construction law, the administrative services commissioner assigns a rank to each town in the state based on its property wealth (using the adjusted equalized net grand list per capita) and uses the rank to determine the reimbursement grant percentage rate for each town. Towns with less property wealth receive a higher reimbursement percentage and towns with greater property wealth receive a lower reimbursement rate. For renovation projects, towns receive percentages of at least 20% but no more than 80% and for new construction they receive 10% to 70%.

The bill establishes a way of determining the reimbursement rate that will create a minimum rate for a group of towns beginning with applications submitted on and after June 1, 2022: (1) any town with a

total population of 80,000 or more will receive the greater of the town's reimbursement percentage rate calculated under existing law or 60% and (2) the town of Cheshire will receive the greater of Cheshire's percentage rate under existing law or 50%.

Based on data from the Department of Public Health for 2020, Norwalk and Stamford meet the population criterion and would get a higher reimbursement rate under this provision. Norwalk's 2022 renovation reimbursement rate is 33% (new construction is 23%) and Stamford's is 29% (new construction is 19%). Cheshire's current renovation rate is 46% (new construction is 36%).

The new provision expires for any application submitted on or after July 1, 2047.

EFFECTIVE DATE: June 1, 2022

§§ 512-515 HOUSE "C" — CHILDHOOD IMMUNIZATION REGISTRY AND TRACKING SYSTEM

Replaces DPH's childhood immunization registry and tracking system ("CIRTS") with an immunization information system ("CT WiZ") that provides access to immunization records to all recipients, instead of only children under age six

The bill replaces the Department of Public Health's (DPH) childhood immunization registry and tracking system ("CIRTS") with an immunization information system ("CT WiZ") that provides vaccine recipients of all ages, instead of only children under age six, with access to their immunization records.

The bill requires, rather than allows, DPH to maintain the system and requires the system to include information to accurately identify a vaccine recipient and assess the recipient's current immunization status.

Under the bill, vaccine recipients' participation in CT WiZ is voluntary, and health care providers must provide a vaccine recipient, or the recipient's legal guardian, conservator, or parent or guardian (if a minor) (hereafter "recipient's representative"), information on how to opt out of enrolling in the system.

As under current law, all personal information in CT WiZ is

confidential and cannot be disclosed without the consent of the vaccine recipient or the recipient's representative.

The bill also requires CT Wiz to comply with the federal Centers for Disease Control and Prevention's Immunization Information System Functional Standards.

Under the bill, healthcare providers:

1. must order vaccines through CT WiZ when administering vaccines to children under the Connecticut Vaccine Program (see *Background* below);
2. must report to DPH certain information regarding the vaccine administration when they administer vaccines to residents; and
3. may use CT WiZ to access a person's current immunization status to (a) determine whether the person requires immunizations or (b) officially document the person's immunization status to meet childcare, school, or higher education immunization entry requirements.

The bill also imposes various requirements on CT WiZ and authorizes DPH to take specified actions, as follows:

1. DPH must, upon request, provide a vaccine recipient, or the recipient's representative, access to any information a health care provider gives to CT WiZ on the recipient's vaccine status;
2. DPH must, in consultation with the Office of Health Strategy (OHS), facilitate interoperability between CT WiZ and the Statewide Health Information Exchange;
3. DPH must provide local and district health directors with sufficient information on residents who live in their jurisdiction and are listed in CT WiZ in order to address under-vaccinated communities and improve health equity;
4. the DPH commissioner may use information in CT WiZ for

medical or scientific research, disease control and prevention, and maintaining the state's list of reportable diseases, emergency illnesses and health conditions, and lab findings (see *Background* below); and

5. DPH may exchange information in CT WiZ with federal agencies providing health care services and other states' immunization information systems.

The bill also makes various related technical and conforming changes, including repealing a provision requiring DPH to provide COVID-19 vaccine recipients information on their vaccination status.

EFFECTIVE DATE: July 1, 2022

Health Care Provider Definition

Under the bill, a health care provider is someone who:

1. is a physician, physician assistant, nurse midwife, advanced practice registered nurse, registered nurse, pharmacist, or an individual authorized by state or federal law to administer a vaccine and
2. has direct or supervisory responsibility for administering a vaccine or assessing a person's immunization status.

Reporting Requirements

The bill requires each health care provider who administers a vaccine to a resident to report, in a manner the DPH commissioner prescribes, the following information:

1. the vaccine recipient's name and date of birth;
2. the name and date of each vaccine dose administered to the recipient;
3. any other information the commissioner deems necessary; and
4. when appropriate, contraindications or exemptions to

administering each vaccine dose.

Interoperability With the Statewide Health Information Exchange

The bill requires the DPH commissioner, in consultation with the Office of Health Strategy, to facilitate interoperability between the immunization information system and the Statewide Health Information Exchange. It allows the commissioner to implement necessary policies and procedures while in the process of adopting regulations, provided she posts the policies and procedures on the eRegulations System before adopting them. The policies and procedures she implements are valid until the regulations are adopted.

Background — Connecticut Vaccine Program

The Connecticut Vaccine Program is a state and federally funded program that provides certain childhood vaccinations at no cost to health care providers. The state-funded component is funded by an assessment on certain health insurers and third-party administrators.

Background — DPH List of Reportable Diseases

By law, DPH must annually issue a list of (1) reportable diseases, emergency illnesses, and health conditions and (2) reportable laboratory findings. Health care providers and clinical laboratories must report findings of the diseases, illnesses, and conditions identified on this list within 12 hours and 48 hours, respectively.

§§ 516-528 HOUSE “C” — MOTOR VEHICLE ASSESSMENTS

Changes motor vehicle property tax assessment laws, principally to (1) exempt certain snowmobiles, all-terrain vehicles, and utility trailers from property tax; (2) value motor vehicles based on the manufacturer’s suggested retail price (MSRP) and a 20-year depreciation schedule; (3) increase the frequency with which DMV must provide motor vehicle registration information to municipalities; (4) modify the timeline for supplemental property taxes on vehicles registered after the start of the assessment year; (5) extend the period during which taxpayers may claim a property tax credit for motor vehicles that were stolen, sold, totaled, or moved out of state; and (6) require taxpayers to include on personal property declarations motor vehicles that are included in a schedule of motor vehicle plate classes established by OPM

The bill makes numerous changes in motor vehicle property tax assessment laws. Beginning in the 2023 assessment year, the bill:

1. exempts from property tax snowmobiles, all-terrain vehicles, and

- utility trailers used exclusively for personal purposes;
2. requires municipalities to value motor vehicles based on the manufacturer's suggested retail price (MSRP) and a 20-year depreciation schedule, rather than the schedule of values annually recommended by the Office of Policy Management (OPM);
 3. increases the frequency with which the Department of Motor Vehicles (DMV) must provide motor vehicle registration information to municipalities;
 4. modifies the timeline for supplemental property taxes due on motor vehicles registered after each assessment year starts and extends the supplemental tax bill requirement to vehicles registered in August and September of each assessment year;
 5. extends the period during which taxpayers may claim a property tax credit for motor vehicles that were stolen, sold, totaled, or moved out of state;
 6. requires taxpayers to include on personal property declarations motor vehicles that are included in a schedule of motor vehicle plate classes established by OPM; and
 7. prohibits DMV from issuing a vehicle registration or renewal to anyone who owes property taxes on any taxable motor vehicle, rather than only registered vehicles.

The bill also eliminates a provision requiring municipalities to issue a validation sticker showing property taxes have been paid on certain commercial motor vehicles used for construction, paving, or other similar purposes and makes other conforming and technical changes.

EFFECTIVE DATE: July 1, 2022, and applicable to assessment years beginning October 1, 2023, except the provision on motor vehicle valuations and two sections making conforming changes are effective July 1, 2022, irrespective of the assessment year.

Motor Vehicle Valuations

Schedule of Values. Under current law, the OPM secretary must annually recommend a schedule of motor vehicle values based on their average retail price. (In practice, OPM generally recommends the National Automobile Dealers Association’s appraisal guides.) Current law requires municipalities to use this schedule when determining a motor vehicle’s value for tax purposes unless the vehicle is not listed in the schedule. For vehicles that are not listed (e.g., older or modified vehicles), the assessor must generally determine their values.

The bill instead requires vehicles to be valued for property tax purposes as a percentage of their MSRP, based on a 20-year depreciation schedule, as shown in the table below. Under the bill, vehicles that are 20 or more years old must be valued at no less than \$500.

Table: Motor Vehicle Valuations Under the Bill

Vehicle Age (in years)	% of MSRP	Vehicle Age (in years)	% of MSRP
Up to 1	80	9	40
2	75	10	35
3	70	11	30
4	65	12	25
5	60	13	20
6	55	14	15
7	50	15-19	10
8	45	20+	≥ \$500

Under the bill, assessors must determine the value of vehicles for which the MSRP is unavailable in consultation with the Connecticut Association of Assessing Officers (CAAO).

Vehicles Types Subject to the Valuation Method. The bill requires municipalities to value motor vehicles added to its grand list (as described below) using the MSRP and depreciation schedule. These motor vehicles are those that are (1) registered, (2) classified in OPM’s plate class schedule (also described below), or (3) unregistered or unusable and located in the state.

The bill also applies the valuation method to certain commercial

trucks, truck tractors, and tractors and semitrailers used exclusively to transport freight for hire. Under the current law, assessors value these motor vehicles based on their purchase cost and any costs related to modifications, adjusted for depreciation.

DMV Registered Vehicle Report to Municipalities

DMV Annual Report of Motor Vehicles Taxable in the Municipality. Under current law, the DMV commissioner must annually report to each municipal tax assessor the motor vehicles and snowmobiles that are registered in the municipality. (In practice, this list covers all of the vehicles registered in each town on October 1, the start of the assessment year.) The list must include the owners' names and addresses and each vehicle's identification number.

The bill (1) moves up the date by which DMV must annually provide the report, from December 1 to November 1, and (2) requires the report to also include the MSRP for each vehicle for which it is available. The bill also removes the reporting requirement for snowmobiles, which the bill exempts from the property tax.

Supplemental List of Taxable Motor Vehicles. By law, DMV must also provide tax assessors with a supplemental report that lists taxable motor vehicles registered after October 1 (i.e., those not included on the annual report). Under current law, DMV must provide the supplemental report annually by October 1 and include vehicles registered between October 2 and July 31 of the prior year.

Under the bill, DMV must instead provide the supplemental list monthly, beginning by November 15. Each report must identify motor vehicles registered during the prior month and taxable in each municipality.

Under existing law and the bill, the supplemental list must include all the same information provided in the annual report (e.g., each vehicle's identification number) as well as a code indicating the date each vehicle was registered.

Supplemental Motor Vehicle Tax Bills and Credits

By law, property taxes on motor vehicles that are registered as of the assessment date (October 1) are due the following July 1. Under current law, property taxes for vehicles registered after the assessment date (between October 2 and July 31) are due the following January 1 in a supplemental tax bill. The taxes due for vehicles registered from November 1 through July 31 are prorated based on the vehicle's registration date. Vehicles registered from August 1 to September 30, however, are currently exempt from property tax for the remainder of the assessment year in which they are registered.

The bill makes property taxes on motor vehicles registered between (1) October 2 and March 31 due on July 1 of same assessment year and (2) April 1 and September 30 due January 1 of the next assessment year. In doing so, the bill (1) generally advances the tax payment date for vehicles registered after the assessment date but before April 1 and (2) subjects vehicles registered in August or September to tax for those months.

As under current law, the taxes due for vehicles registered between October 1 and October 31 of the assessment year are not prorated. Under the bill, taxes due for vehicles registered from November 1 through September 30 are prorated according to the same formula that applies under current law to vehicles registered from November 1 through July 31. As under current law, municipalities may opt to prorate the taxes on a daily, rather than monthly basis, by vote of their legislative bodies.

Replacement Vehicles. The bill similarly changes the supplemental billing schedule for replacement vehicles (i.e., vehicles that, after the start of the assessment year, replace a taxpayer's registered vehicle that is sold, stolen, or had an unexpired registration that is transferred to the replacement vehicle).

Under current law, supplemental property taxes on replacement vehicles acquired between October 2 and July 31 are due January 1 of the next assessment year. Under the bill, supplemental property taxes on replacement vehicles acquired between October 2 and March 31 are due July 1 of the same assessment year, and those on replacement

vehicles acquired between April 1 and September 30 are due January 1 of the next assessment year.

The bill makes a conforming change by subjecting the taxes due for replacement vehicles registered between November 1 and September 30 to proration, rather than just those registered between November 1 and July 31.

Temporarily Registered Commercial Vehicles. Under existing law, property taxes on temporarily registered commercial motor vehicles that were not permanently registered or added to any town's grand list are due on January 1 during the next assessment year. The bill makes these property taxes due according to the same timeframes described above for replacement vehicles (i.e., July 1 of the same assessment year for vehicles registered between October and March 31, and January 1 of the next assessment year for vehicles registered between April 1 and September 30). As under current law, the taxes due for these vehicles are not prorated.

Property Tax Credit for Stolen, Sold, Removed, or Totaled Vehicles. The bill extends the period during which taxpayers may claim a pro rata credit against their property taxes for motor vehicles that were sold, totaled, stolen, or removed from this state and registered in another state to which the taxpayer moved.

Under current law, the taxpayer must claim the credit by the December 31 following the first full assessment year after the assessment year in which the event occurred (e.g., if a theft occurred November 1, 2022, the taxpayer must claim the credit by December 31, 2024). The bill instead requires the taxpayer to claim the credit within three years after the vehicle's tax bill was due.

Under both current law and the bill, taxpayers waive their right to the credit if they fail to submit a claim within the allowable period.

Personal Property Declarations

By law, taxpayers that own taxable personal property must annually file with the assessor a personal property declaration listing this

property. This requirement generally applies only to business taxpayers since personal property, other than motor vehicles, used by individuals and families is generally exempt from property tax (CGS § 12-81).

OPM-Recommended Plate Classes. Beginning by October 1, 2023, the bill requires the OPM secretary to annually recommend a schedule of motor vehicle plate classes, in consultation with CAAO. It requires municipal assessors to use the schedule to determine the classification of motor vehicles for property tax purposes.

The bill makes motor vehicles listed on the schedule (1) personal property that must be listed in taxpayers' personal property declarations and (2) valued in the same manner as other motor vehicles, as described above, for property tax purposes.

Expanded Types of Personal Property That Must Be Declared. The bill expands the types of personal property that taxpayers must include in their personal property declarations. Under current law, taxpayers must generally exclude from their personal property declarations motor vehicles that are registered with DMV. (These motor vehicles are reported to assessors on the annual and supplemental reports provided by DMV.) The bill instead requires taxpayers to include any motor vehicles they own that are listed on OPM's schedule of motor vehicle plate classes, as described above.

Under the bill, any person who must file a personal property declaration must include in the declaration motor vehicles that are (1) registered in the town and included on OPM's schedule of motor vehicle plate classes, as described above, or (2) unregistered or incapable of being used and located in the town. The bill also allows filers to include in their declarations vehicles that are taxable in a town other than the town it is registered in with DMV. The bill specifies that these motor vehicles are valued and prorated in the same way as other motor vehicles under the bill (i.e., based on the MSRP and depreciated according to a schedule).

After the declaration filing deadline (November 1, annually), the bill requires the assessor to add to a taxpayer's existing declaration, or to a

new one if one does not exist, any motor vehicle the assessor determines is personal property as defined under the bill (i.e., including motor vehicles that are listed on OPM's schedule of motor vehicle plate classes). Generally, under existing law, property a filer wrongly excluded from their declaration is considered "omitted property" and subject to a penalty. But under the bill, the value of a motor vehicle for the current assessment year is not considered omitted property or subject to the penalty.

Commercial or financial information included in a declaration cannot be made public under current law. The bill provides an exception, allowing this information to be made public if it concerns motor vehicles.

Property Wrongly Omitted From a Declaration. By law, municipal assessors must add to a filer's declaration any taxable property that they believe the filer owns but omitted from the declaration. The assessor must also add a 25% penalty to the added property's assessed value.

Under the bill, omitted property includes the MSRP of a vehicle and any after-market alterations to the vehicle. (Presumably, this means that filers must include after-market alterations in their declarations.) As described above, under the bill, a motor vehicle's value in the current assessment year is not considered omitted property and is not subject to the penalty.

Declaration Filing Form. The bill requires OPM, rather than each municipality's assessor as current law requires, to create the form that taxpayers must use to file their annual personal property declarations. It requires OPM to create the form in consultation with CAAO.

Listing Motor Vehicles on Municipal Grand Lists

Situs Rule. Under current law, any registered or unregistered motor vehicle (including a snow mobile) that most frequently leaves from and returns to, or remains in, a Connecticut town is subject to property tax in this state, regardless of whether the vehicle works or is used. Under the "situs rule" a registered motor vehicle is taxable, and added to the

grand list, by the town the vehicle most frequently leaves from and returns to or remains in. The law presumes this town is the same town in which the owner resides or has an established business site, as applicable, and sets out rules for determining which town should add a vehicle when its owner lives in more than one town or out of state.

The bill generally retains the current law's situs rule and expands it to cover unregistered vehicles, as well as registered ones. It specifies municipalities must include in their grand list (1) registered motor vehicles, (2) motor vehicles that are registered and classified in OPM's plate class schedule, and (3) unregistered or unusable motor vehicles that are located in the state.

Vehicles Taxable in a Town Other than the Listing Town. Under current law, if a motor vehicle (or snow mobile) is registered in one town but taxable in another, the assessor of the town in which the vehicle is taxable (the "taxing assessor") must notify the assessor of the town in which it is registered (the "listing assessor"). The taxing assessor must provide to the listing assessor the vehicle owner's name and address and the vehicle's identification number, as well as the name of the town it is taxable in. The law requires the taxing assessor and registered assessor to cooperate in listing the vehicle for property tax purposes.

Under the bill, if a motor vehicle is listed in one town but taxable in another, the listing assessor must notify the listing assessor, and provide the same information current law requires. (Presumably this means the taxing assessor must notify the listing assessor, not that the listing assessor must notify him or herself.) It requires the assessor of the town in which the vehicle is registered and the listing assessor to cooperate in listing the vehicle for property tax purposes. (Presumably this means the listing assessor and taxing assessor.)

DMV Enforcement of Unpaid Property Taxes

The bill expands the DMV's authority with respect to unpaid property taxes to cover both registered and unregistered vehicles, rather than only registered vehicles.

Current law prohibits DMV from issuing a registration to anyone who a municipality reports as owing property taxes on a registered snowmobile or motor vehicle. DMV may also, among other things, (1) collect the unpaid property taxes owed on the registered motor vehicle if DMV has entered an agreement with the municipality, OPM secretary, and state treasurer to do so and (2) immediately suspend or cancel the registrations of all vehicles registered to the reported delinquent taxpayer if the registration was granted due to error, false evidence, or a dishonored check.

The bill instead requires municipalities to report to DMV delinquent property taxes on all motor vehicles, regardless of whether the vehicle is listed on the grand list as a registered vehicle or personal property (e.g., an unregistered and unusable vehicle). (However, the bill does not make a conforming change to the statute requiring tax collectors to provide delinquent property tax information to DMV on a monthly basis.) It also allows DMV to collect delinquent property taxes on all motor vehicles, rather than only those that are registered, if it has entered an agreement to do so.

Existing law and the bill provide an exception for licensed leasing or rental firms and private owners of three or more paratransit vehicles, allowing DMV to continue to register specified vehicles they own under certain circumstances even when property taxes are owed.

§§ 529-531 HOUSE “C”— BOWLING ESTABLISHMENT PERMITS

Makes minor, technical, and conforming changes to replace references to obsolete permits that no longer exist (e.g., bowling establishment permits) with references to the newly structured club permit

The bill makes minor, technical, and conforming changes to replace references to obsolete permits that no longer exist (e.g., bowling establishment permits) with references to the newly structured club permit.

EFFECTIVE DATE: Upon passage