



General Assembly

Bill No. 7505

*June Special Session,
2001*

LCO No. **9182**

Referred to Committee on No Committee

Introduced by:

REP. LYONS, 146th Dist.

SEN. SULLIVAN, 5th Dist.

***AN ACT CONCERNING THE IMPLEMENTATION OF EXPENDITURES
FOR VARIOUS STATE HEALTH PROGRAMS AND SERVICES AND
MAKING TECHNICAL AND OTHER CHANGES TO CERTAIN PUBLIC
HEALTH AND RELATED STATUTES.***

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

1 Section 1. The sum of two hundred nineteen thousand dollars of the
2 amount appropriated to the Department of Public Health for Breast
3 and Cervical Cancer Detection and Treatment, for the fiscal year
4 ending June 30, 2002, in section 1 of house bill 7501 of the current
5 session, shall be transferred to Other Expenses and used by the
6 Department of Public Health for chlamydia education and testing in
7 school-based health centers, community health centers and community
8 health vans.

9 Sec. 2. Subsection (c) of section 19a-14 of the general statutes is
10 repealed and the following is substituted in lieu thereof:

11 (c) No board shall exist for the following professions that are
12 licensed or otherwise regulated by the Department of Public Health:

- 13 (1) Speech pathologist and audiologist;
- 14 (2) Hearing [aid dealer] instrument specialist;
- 15 (3) Nursing home administrator;
- 16 (4) Sanitarian;
- 17 (5) Subsurface sewage system installer or cleaner;
- 18 (6) Marital and family therapist;
- 19 (7) Nurse-midwife;
- 20 (8) Licensed clinical social worker;
- 21 (9) Respiratory care practitioner;
- 22 (10) Asbestos contractor and asbestos consultant;
- 23 (11) Massage therapist;
- 24 (12) Registered nurse's aide;
- 25 (13) Radiographer;
- 26 (14) Dental hygienist;
- 27 (15) Dietitian-Nutritionist;
- 28 (16) Asbestos abatement worker;
- 29 (17) Asbestos abatement site supervisor;
- 30 (18) Licensed or certified alcohol and drug counselor;
- 31 (19) Professional counselor;
- 32 (20) Acupuncturist;
- 33 (21) Occupational therapist and occupational therapist assistant;

34 (22) Lead abatement contractor, [; and] lead consultant contractor,
35 lead consultant, lead abatement supervisor, lead abatement worker,
36 inspector and planner-project designer;

37 (23) [Nail technician] Emergency medical technician, emergency
38 medical technician-intermediate, medical response technician and
39 emergency medical services instructor; and

40 (24) Paramedic.

41 The department shall assume all powers and duties normally vested
42 with a board in administering regulatory jurisdiction over [said] such
43 professions. The uniform provisions of this chapter and chapters 368v,
44 369 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399, 400a
45 and 400c, including, but not limited to, standards for entry and
46 renewal; grounds for professional discipline; receiving and processing
47 complaints; and disciplinary sanctions, shall apply, except as otherwise
48 provided by law, to the professions listed in this subsection.

49 Sec. 3. Subsection (c) of section 19a-14 of the general statutes, as
50 amended by section 8 of public act 00-226, is repealed and the
51 following is substituted in lieu thereof:

52 (c) No board shall exist for the following professions that are
53 licensed or otherwise regulated by the Department of Public Health:

54 (1) Speech pathologist and audiologist;

55 (2) Hearing [aid dealer] instrument specialist;

56 (3) Nursing home administrator;

57 (4) Sanitarian;

58 (5) Subsurface sewage system installer or cleaner;

59 (6) Marital and family therapist;

- 60 (7) Nurse-midwife;
- 61 (8) Licensed clinical social worker;
- 62 (9) Respiratory care practitioner;
- 63 (10) Asbestos contractor and asbestos consultant;
- 64 (11) Massage therapist;
- 65 (12) Registered nurse's aide;
- 66 (13) Radiographer;
- 67 (14) Dental hygienist;
- 68 (15) Dietitian-Nutritionist;
- 69 (16) Asbestos abatement worker;
- 70 (17) Asbestos abatement site supervisor;
- 71 (18) Licensed or certified alcohol and drug counselor;
- 72 (19) Professional counselor;
- 73 (20) Acupuncturist;
- 74 (21) Occupational therapist and occupational therapist assistant;
- 75 (22) Lead abatement contractor, lead consultant contractor, lead
- 76 consultant, lead abatement supervisor, lead abatement worker,
- 77 inspector and planner-project designer;
- 78 (23) [Nail technician; and] Emergency medical technician,
- 79 emergency medical technician-intermediate, medical response
- 80 technician and emergency medical services instructor;
- 81 (24) Paramedic; and

82 [(24)] (25) Athletic trainer.

83 The department shall assume all powers and duties normally vested
84 with a board in administering regulatory jurisdiction over [said] such
85 professions. The uniform provisions of this chapter and chapters 368v,
86 369 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399, 400a
87 and 400c, including, but not limited to, standards for entry and
88 renewal; grounds for professional discipline; receiving and processing
89 complaints; and disciplinary sanctions, shall apply, except as otherwise
90 provided by law, to the professions listed in this subsection.

91 Sec. 4. Subsection (e) of section 19a-88 of the general statutes is
92 repealed and the following is substituted in lieu thereof:

93 (e) Each person holding a license or certificate issued under section
94 19a-514, 20-74s, 20-195cc or 20-206ll and chapters 370 to 373, inclusive,
95 375, 378 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399 or
96 400a and section 20-206n [,] or 20-206o [or 20-266c] shall, annually,
97 during the month of such person's birth, apply for renewal of such
98 license or certificate to the Department of Public Health, giving such
99 person's name in full, such person's residence and business address
100 and such other information as the department requests. Each person
101 holding a license or certificate issued pursuant to section 20-475 or 20-
102 476 shall, annually, during the month of such person's birth, apply for
103 renewal of such license or certificate to the department. Each entity
104 holding a license issued pursuant to section 20-475 shall, annually,
105 during the anniversary month of initial licensure, apply for renewal of
106 such license or certificate to the department.

107 Sec. 5. Subsection (e) of section 19a-88 of the general statutes, as
108 amended by section 9 of public act 00-226, is repealed and the
109 following is substituted in lieu thereof:

110 (e) Each person holding a license or certificate issued under section
111 19a-514, 20-65k, 20-74s, 20-195cc or 20-206ll and chapters 370 to 373,
112 inclusive, 375, 378 to 381a, inclusive, 383 to 388, inclusive, 393a, 395,

113 398, 399 or 400a and section 20-206n [,] or 20-206o [or 20-266c] shall,
114 annually, during the month of such person's birth, apply for renewal of
115 such license or certificate to the Department of Public Health, giving
116 such person's name in full, such person's residence and business
117 address and such other information as the department requests. Each
118 person holding a license or certificate issued pursuant to section 20-475
119 or 20-476 shall, annually, during the month of such person's birth,
120 apply for renewal of such license or certificate to the department. Each
121 entity holding a license issued pursuant to section 20-475 shall,
122 annually, during the anniversary month of initial licensure, apply for
123 renewal of such license or certificate to the department.

124 Sec. 6. The sum of twenty-five thousand dollars of the amount
125 appropriated to the Department of Public Health for Breast and
126 Cervical Cancer Detection and Treatment, for the fiscal year ending
127 June 30, 2002, in section 1 of house bill 7501 of the current session, shall
128 be transferred to Other Expenses and used by the Department of
129 Public Health for the cost of producing educational materials
130 regarding gynecologic cancer pursuant to section 7 of this act.

131 Sec. 7. (NEW) The Department of Public Health shall develop a
132 pamphlet containing summary information concerning gynecologic
133 cancers, including cervical, ovarian and uterine cancer. Such pamphlet
134 shall contain standardized information with respect to such cancers,
135 written in plain language, that includes (1) signs and symptoms, (2)
136 risk factors, (3) the benefits of early detection through appropriate
137 diagnostic testing, (4) treatment options, and (5) such other
138 information as the department deems necessary. The department shall
139 make such pamphlet available to hospitals, physicians and other
140 health care providers for distribution to patients. The department shall
141 also prepare appropriate multilingual versions of such pamphlet for
142 use by Spanish-speaking and other non-English-speaking patients.

143 Sec. 8. (NEW) Notwithstanding any provision of the general statutes
144 or any public or special act, no uncompensated care or

145 disproportionate share payment may be made to any hospital under
146 any provision of the general statutes or any public or special act unless
147 the Secretary of the Office of Policy and Management certifies that
148 such hospital has made reasonable efforts to provide uncompensated
149 care in this state.

150 Sec. 9. Section 17b-256 of the general statutes is repealed and the
151 following is substituted in lieu thereof:

152 The Commissioner of Social Services may administer, within
153 available appropriations, a program providing payment for the cost of
154 drugs prescribed by a physician for the prevention or treatment of
155 acquired immunodeficiency syndrome (AIDS) [, AIDS-related complex
156 (ARC)] or human immunodeficiency virus (HIV infection). The
157 commissioner shall determine specific drugs to be covered and may
158 implement a pharmacy lock-in procedure for the program. The
159 commissioner shall adopt regulations, in accordance with the
160 provisions of chapter 54, to carry out the purposes of this section. The
161 commissioner may implement the program while in the process of
162 adopting regulations, provided notice of intent to adopt the
163 regulations is published in the Connecticut Law Journal within twenty
164 days of implementation. The regulations may include eligibility for all
165 persons with AIDS or HIV infection whose income is below four
166 hundred per cent of the federal poverty level. The commissioner may,
167 within available appropriations, purchase and maintain insurance
168 policies for eligible clients, including, but not limited to, coverage of
169 costs associated with such policies, that provide a full range of HIV
170 treatments and access to comprehensive primary care services as
171 determined by the commissioner and as provided by federal law, and
172 may provide payment, determined by [said] the commissioner, for (1)
173 drugs and nutritional supplements prescribed by a physician that
174 prevent or treat opportunistic diseases and conditions associated with
175 AIDS or HIV infection; (2) ancillary supplies related to the
176 administration of such drugs; and (3) laboratory tests ordered by a
177 physician.

178 Sec. 10. Section 17b-349 of the general statutes is amended by
179 adding subsections (f) and (g) as follows:

180 (NEW) (f) For the fiscal year ending June 30, 2002, any grant awards
181 made to a community health center or its successor for the purpose of
182 supporting the community health center infrastructure services to the
183 uninsured or expansion initiative projects shall be in the same
184 proportion to its grant award made in the fiscal year ending June 30,
185 2001, as the total appropriation for such grant awards for the fiscal
186 year ending June 30, 2002, is to the total appropriation for such grant
187 awards for the prior fiscal year, provided, if any portion of the amount
188 is not required by a given community health center, the differential
189 shall be distributed among all the other health centers according to
190 their share of total funding.

191 (NEW) (g) For the fiscal year ending June 30, 2003, any grant awards
192 made to a community health center or its successor for the purpose of
193 supporting the community health center infrastructure services to the
194 uninsured or expansion initiative projects shall be in the same
195 proportion to its grant award made in the fiscal year ending June 30,
196 2002, as the total appropriation for such grant awards for the fiscal
197 year ending June 30, 2003, is to the total appropriation for such grant
198 awards for the prior fiscal year, provided, if any portion of the amount
199 is not required by a given community health center, the differential
200 shall be distributed among all the other health centers according to
201 their share of total funding.

202 Sec. 11. Section 10-212 of the general statutes is repealed and the
203 following is substituted in lieu thereof:

204 (a) Each local or regional board of education shall appoint one or
205 more school nurses or nurse practitioners. Such school nurses and
206 nurse practitioners appointed by such boards shall be qualified
207 pursuant to regulations adopted in accordance with the provisions of
208 chapter 54 by the State Board of Education with the technical advice
209 and assistance of the Department of Public Health. Such school nurses

210 may also act as visiting nurses in the town, may visit the homes of
211 pupils in the public schools and shall assist in executing the orders of
212 the school medical advisor, if there is any in such town, and perform
213 such other duties as are required by such board.

214 (b) Notwithstanding any provision of the general statutes or any
215 regulation of Connecticut state agencies, nothing in this section shall
216 be construed to prohibit the administering of medications by parents
217 or guardians to their own children on school grounds.

218 Sec. 12. Subdivision (4) of section 20-250 of the general statutes is
219 repealed and the following is substituted in lieu thereof:

220 (4) "Hairdressing and cosmetology" means the art of dressing,
221 arranging, curling, waving, weaving, cutting, singeing, bleaching and
222 coloring the hair and treating the scalp of any person, and massaging,
223 cleansing, stimulating, manipulating, exercising or beautifying with
224 the use of the hands, appliances, cosmetic preparations, antiseptics,
225 tonics, lotions, creams, powders, oils or clays and doing similar work
226 on the face, neck and arms, and manicuring the fingernails and, for
227 cosmetic purposes only, trimming, filing and painting the healthy
228 toenails, excluding cutting nail beds, corns and calluses or other
229 medical treatment involving the foot or ankle, of any person for
230 compensation, provided nothing in this definition shall prohibit an
231 unlicensed person from performing facials, eyebrow arching,
232 shampooing, manicuring of the fingernails or braiding hair.

233 Sec. 13. (NEW) Notwithstanding any provision of chapter 474 of the
234 general statutes or the regulations of Connecticut state agencies, any
235 municipality owning land purchased in January, 1999, that was
236 formerly used for agricultural purposes and that is watershed land or
237 is located adjacent to watershed land may use such municipally-
238 owned land for the construction and operation of a golf course, subject
239 to the following conditions: (1) The golf course shall be owned by the
240 municipality; (2) best management practices, as recommended from
241 time to time by the Department of Environmental Protection, shall be

242 used in the design, construction and operation of the golf course,
243 including, but not limited to, integrated pest management and above-
244 ground storage of chemicals and fuels; and (3) the manager of the golf
245 course shall file an annual report with any water company owned by
246 the municipality, any water company drawing water from the
247 watershed, the Department of Environmental Protection and the
248 municipality describing the best management practices used in the
249 operation of the golf course, including, but not limited to, a description
250 of the kind and amount of pesticides and herbicides used on the golf
251 course during the year and such other information as may be
252 requested by any such water company or the Department of
253 Environmental Protection. Such report shall be made available to the
254 public.

255 Sec. 14. Subsection (b) of section 20-195dd of the general statutes is
256 repealed and the following is substituted in lieu thereof:

257 (b) (1) Prior to July 1, 1999, an applicant for a license as a
258 professional counselor may, in lieu of the requirements set forth in
259 subsection (a) of this section, submit evidence satisfactory to the
260 commissioner of having: [(1)] (A) Earned a master's degree, sixth-year
261 degree or doctoral degree from a regionally accredited institution of
262 higher education with a major the National Board for Certified
263 Counselors or its successor organization deems to be in the discipline
264 of professional counseling; and [(2)] (B) practiced professional
265 counseling for a minimum of two years within a five-year period
266 immediately preceding application.

267 (2) Prior to December 30, 2001, an applicant for a license as a
268 professional counselor may, in lieu of the requirements set forth in
269 subsection (a) of this section, submit evidence satisfactory to the
270 commissioner of having: (A) Earned at least a thirty-hour master's
271 degree, sixth-year degree or doctoral degree from a regionally
272 accredited institution of higher education with a major in social work,
273 marriage and family therapy, counseling, psychology or forensic

274 psychology; (B) practiced professional counseling for a minimum of
275 two years within a five-year period immediately preceding
276 application; and (C) passed an examination prescribed by the
277 commissioner.

278 Sec. 15. The Commissioner of Social Services, in consultation with
279 the Commissioner of Public Health, shall conduct a study to determine
280 the cost and savings related to requiring occupational therapy services
281 in nursing facilities. Such study shall be based on the occupational
282 therapy care needs of residents. Not later than February 1, 2002, the
283 commissioner shall submit a report containing the commissioner's
284 findings and recommendations to the joint standing committees of the
285 General Assembly having cognizance of matters relating to human
286 services, public health, insurance and appropriations and the budgets
287 of state agencies, in accordance with the provisions of section 11-4a of
288 the general statutes.

289 Sec. 16. Section 19a-423 of the general statutes is repealed and the
290 following is substituted in lieu thereof:

291 (a) Upon the denial of an application [of] for an original youth camp
292 license under this chapter, the commissioner shall notify the applicant
293 in writing of such denial, by mailing a notice to [him] the applicant at
294 the applicant's address shown on [his] the application. [Any applicant
295 aggrieved by such denial may appeal therefrom in accordance with the
296 provisions of section 19a-424.]

297 (b) The commissioner may suspend, revoke or refuse to renew the
298 license of any youth camp regulated and licensed under this chapter if
299 the licensee: (1) Is convicted of any offense involving moral turpitude,
300 the record of conviction being conclusive evidence thereof; (2) is
301 legally adjudicated insane or mentally incompetent, the record of such
302 adjudication being conclusive evidence thereof; (3) uses any narcotic or
303 any controlled drug, as defined in section 21a-240, to an extent or in a
304 manner that such use impairs [his] the licensee's ability to properly
305 care for children; (4) consistently fails to maintain standards prescribed

306 and published by the [Department of Public Health] department; (5)
307 furnishes or makes any misleading or any false statement or report to
308 the department; (6) refuses to submit to the department any reports or
309 refuses to make available to the department any records required by it
310 in investigating the facility for licensing purposes; (7) fails or refuses to
311 submit to an investigation or inspection by the department or to admit
312 authorized representatives of the department at any reasonable time
313 for the purpose of investigation, inspection or licensing; (8) fails to
314 provide, maintain, equip and keep in safe and sanitary condition
315 premises established for or used by the campers pursuant to minimum
316 standards prescribed by the [Department of Public Health] department
317 or by ordinances or regulations applicable to the location of such
318 facility; or (9) wilfully or deliberately violates any of the provisions of
319 this chapter.

320 Sec. 17. Section 19a-424 of the general statutes is repealed and the
321 following is substituted in lieu thereof:

322 Any [applicant or] licensee aggrieved by the action of the
323 [Commissioner of Public Health] commissioner in [denying,]
324 suspending or revoking any license under the provisions of this
325 chapter may appeal therefrom in accordance with the provisions of
326 section 4-183.

327 Sec. 18. Section 20-195cc of the general statutes is repealed and the
328 following is substituted in lieu thereof:

329 (a) The Commissioner of Public Health shall grant a license as a
330 professional counselor to any applicant who furnishes evidence
331 satisfactory to the commissioner that [he] such applicant has met the
332 requirements of section 20-195dd. The commissioner shall develop and
333 provide application forms. The application fee shall be two hundred
334 fifty dollars.

335 (b) [The license] Licenses issued under this section may be renewed
336 annually pursuant to section 19a-88. [for a fee of] The fee for such

337 renewal shall be one hundred fifty dollars. Each licensed professional
338 counselor applying for license renewal shall furnish evidence
339 satisfactory to the commissioner of having participated in continuing
340 education programs. The commissioner shall adopt regulations, in
341 accordance with chapter 54, to (1) define basic requirements for
342 continuing education programs, (2) delineate qualifying programs, (3)
343 establish a system of control and reporting, and (4) provide for a
344 waiver of the continuing education requirement for good cause.

345 Sec. 19. Subsection (c) of section 20-402a of the general statutes is
346 repealed and the following is substituted in lieu thereof:

347 (c) Every hearing [aid dealer] instrument specialist, audiologist,
348 corporation, partnership, trust, association or like organization that
349 engages in the sale of hearing aids at retail shall include in every
350 receipt, contract or order pertaining to the sale of a hearing aid, in
351 reasonable proximity to the space reserved for the signature of the
352 buyer, or on the first page if there is no space reserved for the
353 signature of the buyer, a clear and conspicuous disclosure of the
354 following specific statement in all capital letters of no less than twelve
355 point boldface type of uniform font and in an easily readable style:
356 ANY BUYER WHO ORDERS A HEARING AID AND LEAVES A
357 DEPOSIT OF ONE HUNDRED DOLLARS OR MORE WITH THE
358 SELLER SHALL BE ENTITLED TO CANCEL SUCH ORDER AND
359 DEMAND A FULL REFUND OF SUCH DEPOSIT, LESS ANY
360 EXAMINATION COSTS, IF THE BUYER IS UNABLE TO INSPECT
361 THE HEARING AID AT THE SELLER'S PLACE OF BUSINESS
362 WITHIN FORTY-FIVE DAYS AFTER THE DATE THE SELLER
363 RECEIVES THE DEPOSIT.

364 Sec. 20. Subdivision (7) of section 20-413 of the general statutes is
365 repealed and the following is substituted in lieu thereof:

366 (7) The activity and services of hearing [aid dealers] instrument
367 specialists.

368 Sec. 21. (NEW) (a) As used in this section and subsection (b) of
369 section 20-138b of the general statutes, as amended by this act:

370 (1) "Health care services" means health care related services or
371 products rendered or sold by a provider within the scope of the
372 provider's license or legal authorization, and includes hospital,
373 medical, surgical, dental, vision and pharmaceutical services or
374 products;

375 (2) "Person" means an individual, agency, political subdivision,
376 partnership, corporation, limited liability company, association or any
377 other entity;

378 (3) "Preferred provider network" means an arrangement in which
379 agreements relating to the health care services to be rendered by
380 providers, including the amounts to be paid to the providers for such
381 services, are entered into between such providers and a person who
382 establishes, operates, maintains or underwrites the arrangement, in
383 whole or in part, and includes any provider-sponsored preferred
384 provider network or independent practice association that offers
385 network services, but does not include a workers' compensation
386 preferred provider organization established pursuant to section 31-
387 279-10 of the regulations of Connecticut state agencies or an
388 arrangement relating only to health care services offered by providers
389 to individuals covered under self-insured Employee Welfare Benefit
390 Plans established pursuant to the federal Employee Retirement Income
391 Security Act of 1974, as from time to time amended;

392 (4) "Provider" means an individual or entity duly licensed or legally
393 authorized to provide health care services; and

394 (5) "Commissioner" means the Insurance Commissioner.

395 (b) All preferred provider networks shall file with the commissioner
396 prior to the start of enrollment and shall annually update such filing
397 by July first of each year thereafter. The filing required by such

398 preferred provider network shall include the following information:
399 (1) The identity of any company or organization controlling the
400 operation of the preferred provider network, a description of such
401 company or organization and, where applicable, the following: (A) A
402 certificate from the Secretary of the State regarding the company's or
403 organization's good standing to do business in the state; (B) a copy of
404 the company's or organization's balance sheet at the end of its most
405 recently concluded fiscal year, along with the name and address of any
406 public accounting firm or internal accountant which prepared or
407 assisted in the preparation of such balance sheet; (C) a list of the
408 names, official positions and occupations of members of the company's
409 or organization's board of directors or other policy-making body and
410 of those executive officers who are responsible for the company's or
411 organization's activities with respect to the medical care network; (D) a
412 list of the company's or organization's principal owners; (E) in the case
413 of an out-of-state company or organization, a certificate that such
414 company or organization is in good standing in its state of
415 organization; (F) in the case of a Connecticut or out-of-state company
416 or organization, a report of the details of any suspension, sanction or
417 other disciplinary action relating to such company or organization in
418 this state or in any other state; and (G) the identity, address and
419 current relationship of any related or predecessor company or
420 organization. For purposes of this subparagraph, "related" means that
421 a substantial number of the board or policy-making body members,
422 executive officers or principal owners of both companies are the same;
423 (2) a general description of the preferred provider network and
424 participation in the preferred provider network, including: (A) The
425 geographical service area of and the names of the hospitals included in
426 the preferred provider network; and (B) the primary care physicians,
427 the specialty physicians, any other contracting health care providers
428 and the number and percentage of each group's capacity to accept new
429 patients; and (3) the name and address of the person to whom
430 applications may be made for participation.

431 (c) Any person developing a preferred provider network, or

432 expanding a preferred provider network into a new county, pursuant
433 to this section and subsection (b) of section 20-138b of the general
434 statutes, as amended by this act, shall publish a notice, in at least one
435 newspaper having a substantial circulation in the service area in which
436 the preferred provider network operates or will operate, indicating
437 such planned development or expansion. Such notice shall include the
438 medical specialties included in the preferred provider network, the
439 name and address of the person to whom applications may be made
440 for participation and a time frame for making application. The
441 preferred provider network shall provide the applicant with written
442 acknowledgment of receipt of the application. Each complete
443 application shall be considered by the preferred provider network in a
444 timely manner.

445 (d) (1) Each preferred provider network shall file with the
446 commissioner and make available upon request from a provider, the
447 general criteria for its selection or termination of providers. Disclosure
448 shall not be required of criteria deemed by the preferred provider
449 network to be of a proprietary or competitive nature that would hurt
450 the preferred provider network's ability to compete or to manage
451 health services. For purposes of this section, disclosure of criteria is
452 proprietary or anticompetitive if it has the tendency to cause health
453 care providers to alter their practice pattern in a manner that would
454 circumvent efforts to contain health care costs and is proprietary if
455 revealing criteria would cause the preferred provider network's
456 competitors to obtain valuable business information.

457 (2) If a preferred provider network uses criteria that have not been
458 filed pursuant to subdivision (1) of this subsection to judge the quality
459 and cost-effectiveness of a provider's practice under any specific
460 program within the preferred provider network, the preferred
461 provider network may not reject or terminate the provider
462 participating in that program based upon such criteria until the
463 provider has been informed of the criteria that the provider's practice
464 fails to meet.

465 (e) A preferred provider network which has a limited network and
466 which does not provide any reimbursement when an enrollee obtains
467 service outside that limited network shall inform each applicant of that
468 fact prior to enrolling the applicant for coverage.

469 Sec. 22. Subsection (b) of section 20-138b of the general statutes is
470 repealed and the following is substituted in lieu thereof:

471 (b) If any health care center, as defined in section 38a-175, or
472 preferred provider network, as defined in section [19a-647b] 21 of this
473 act, offers health care benefits which provide ophthalmologic care for
474 any person, partnership, corporation, association or [any] group,
475 however organized, such health care center or preferred provider
476 network shall provide optometric care. If the ophthalmologic care
477 provided may be lawfully rendered by an optometrist, such health
478 care center or preferred provider network shall provide the identical
479 eye care coverage and benefits for its members when such care is
480 rendered by an optometrist under contract with such health care center
481 or preferred provider network. Such health care center or preferred
482 provider network shall (1) contract with ophthalmologists and
483 optometrists in a manner which will provide fair and sufficient
484 representation of such providers in relation to the benefits provided by
485 the health care center plan or preferred provider network, and (2)
486 equally inform its members of the availability of ophthalmologic and
487 optometric services.

488 Sec. 23. Section 38a-478a of the general statutes is repealed and the
489 following is substituted in lieu thereof:

490 On March 1, 1999, and annually thereafter, the Insurance
491 Commissioner shall submit a report, to the Governor and to the joint
492 standing committees of the General Assembly having cognizance of
493 matters relating to public health and relating to insurance, concerning
494 the commissioner's responsibilities under the provisions of sections
495 [19a-647,] 38a-226 to 38a-226d, inclusive, 38a-478 to 38a-478u, inclusive,
496 [and] 38a-993 and section 21 of this act. The report shall include: (1) A

497 summary of the quality assurance plans submitted by managed care
498 organizations pursuant to section 38a-478c along with suggested
499 changes to improve such plans; (2) suggested modifications to the
500 consumer report card developed under the provisions of section 38a-
501 478l; (3) a summary of the commissioner's procedures and activities in
502 conducting market conduct examinations of utilization review
503 companies, including, but not limited to: (A) The number of desk and
504 field audits completed during the previous calendar year; (B) a
505 summary of findings of the desk and field audits, including any
506 recommendations made for improvements or modifications; (C) a
507 description of complaints concerning managed care companies,
508 including a summary and analysis of any trends or similarities found
509 in the managed care complaints filed by enrollees; (4) a summary of
510 the complaints received by the Insurance Department's Consumer
511 Affairs Division and the commissioner under section 38a-478n,
512 including a summary and analysis of any trends or similarities found
513 in the complaints received; (5) a summary of any violations the
514 commissioner has found against any managed care organization; and
515 (6) a summary of the issues discussed related to health care or
516 managed care organizations at the Insurance Department's quarterly
517 forums throughout the state.

518 Sec. 24. Section 38a-478b of the general statutes is repealed and the
519 following is substituted in lieu thereof:

520 (a) Each managed care organization, as defined in section 38a-478,
521 that fails to file the data, reports or information required by sections
522 [19a-647,] 38a-226 to 38a-226d, inclusive, 38a-478 to 38a-478u, inclusive,
523 [and] 38a-993 and section 21 of this act, shall pay a late fee of one
524 hundred dollars per day for each day from the due date of such data,
525 reports or information to the date of filing. Each managed care
526 organization that files incomplete data, reports or information shall be
527 so informed by the commissioner, shall be given a date by which to
528 remedy such incomplete filing and shall pay said late fee commencing
529 from the new due date.

530 (b) On June 1, 1998, and annually thereafter, the commissioner shall
531 submit, to the Governor and to the joint standing committees of the
532 General Assembly having cognizance of matters relating to public
533 health and matters relating to insurance, a list of those managed care
534 organizations that have failed to file any data, report or information
535 required by sections [19a-647,] 38a-226 to 38a-226d, inclusive, 38a-478
536 to 38a-478u, inclusive, [and] 38a-993 and section 21 of this act.

537 Sec. 25. Section 38a-478t of the general statutes is repealed and the
538 following is substituted in lieu thereof:

539 The Commissioner of Public Health may request and shall receive
540 any data, report or information filed with the Insurance Commissioner
541 pursuant to the provisions of sections [19a-647,] 38a-226 to 38a-226d,
542 inclusive, 38a-478 to 38a-478u, inclusive, [and] 38a-993 and section 21
543 of this act.

544 Sec. 26. Section 38a-478u of the general statutes is repealed and the
545 following is substituted in lieu thereof:

546 The Insurance Commissioner shall adopt regulations in accordance
547 with the provisions of chapter 54 to implement the provisions of
548 sections [19a-647,] 38a-226 to 38a-226d, inclusive, 38a-478 to 38a-478u,
549 inclusive, [and] 38a-993 and section 21 of this act.

550 Sec. 27. Subsection (a) of section 46b-22 of the general statutes is
551 repealed and the following is substituted in lieu thereof:

552 (a) All judges and retired judges, either elected or appointed and
553 including federal judges and judges of other states who may legally
554 join persons in marriage in their jurisdictions, family support
555 magistrates, state referees and justices of the peace may join persons in
556 marriage in any town in the state and all ordained or licensed
557 clergymen, belonging to this state or any other state, so long as they
558 continue in the work of the ministry may join persons in marriage. All
559 marriages solemnized according to the forms and usages of any

560 religious denomination in this state, including marriages witnessed by
561 a duly constituted Spiritual Assembly of the Baha'is, are valid. All
562 marriages attempted to be celebrated by any other person are void.

563 Sec. 28. Subsection (a) of section 19a-320 of the general statutes is
564 repealed and the following is substituted in lieu thereof:

565 (a) Any resident of this state, or any corporation formed under the
566 law of this state, may erect, maintain and conduct a crematory in this
567 state and provide the necessary appliances and facilities for the
568 disposal by incineration of the bodies of the dead, in accordance with
569 the provisions of this section. The location of such crematory shall be
570 within the confines of an established cemetery containing not less than
571 twenty acres, which cemetery shall have been in existence and
572 operation for at least five years immediately preceding the time of the
573 erection of such crematory, or shall be within the confines of a plot of
574 land approved for the location of a crematory by the selectmen of any
575 town, the mayor and council or board of aldermen of any city and the
576 warden and burgesses of any borough; provided, in any town, city or
577 borough having a zoning commission, such commission shall have the
578 authority to grant such approval. On and after October 1, 1998, no
579 crematory which is not operating on October 1, 1998, shall be located
580 within five hundred feet of any residential structure or land used for
581 residential purposes not owned by the owner of the crematory. This
582 section shall not apply to any resident of this state or any corporation
583 formed under the law of this state that was issued an air quality permit
584 by the Department of Environmental Protection prior to October 1,
585 1998.

586 Sec. 29. Section 19a-490d of the general statutes is repealed and the
587 following is substituted in lieu thereof:

588 Each health care facility or institution licensed by the Department of
589 Public Health pursuant to this chapter shall, if advised by the federal
590 Occupational Safety and Health Administration, and each health care
591 facility or institution that employs state employees, except the school

592 of dental medicine of The University of Connecticut and the dental
593 clinics of said school until such time as manufacturers have designed
594 and are making needles that have self-contained secondary
595 precautionary type sheathing devices for dental medicine, shall use
596 only injectable equipment having self-contained secondary
597 precautionary type sheathing devices or alternate devices designed to
598 prevent accidental needlestick injuries. The provisions of this section
599 shall not apply to any drug or biologic product that is prepackaged
600 with an administration system or used in a prefilled syringe and is
601 approved for commercial distribution or investigational use by the
602 federal Food and Drug Administration, provided a sharp object injury
603 protection disposal system is in place.

604 Sec. 30. Subsection (c) of section 20-195bb of the general statutes is
605 repealed and the following is substituted in lieu thereof:

606 (c) No license as a professional counselor shall be required of the
607 following: (1) A person who furnishes uncompensated assistance in an
608 emergency; (2) a clergyman, priest, minister, rabbi or practitioner of
609 any religious denomination accredited by the religious body to which
610 the person belongs and settled in the work of the ministry, provided
611 the activities that would otherwise require a license as a professional
612 counselor are within the scope of ministerial duties; (3) a sexual assault
613 counselor, as defined in section 52-146k; (4) a person participating in
614 uncompensated group or individual counseling; (5) a person with a
615 master's degree in a health-related or human services-related field
616 employed by a hospital, as defined in subsection (b) of section 19a-490,
617 performing services in accordance with section 20-195aa under the
618 supervision of a person licensed by the state in one of the professions
619 identified in subparagraphs (A) to (F), inclusive, of subdivision (2) of
620 subsection (a) of section 20-195dd; (6) a person licensed or certified by
621 any agency of this state and performing services within the scope of
622 practice for which licensed or certified; ~~[(6)]~~ (7) a student, intern or
623 trainee pursuing a course of study in counseling in a regionally
624 accredited institution of higher education, provided the activities that

625 would otherwise require a license as a professional counselor are
626 performed under supervision and constitute a part of a supervised
627 course of study; [(7)] (8) a person employed by an institution of higher
628 education to provide academic counseling in conjunction with the
629 institution's programs and services; or [(8)] (9) a vocational
630 rehabilitation counselor, job counselor, credit counselor, consumer
631 counselor or any other counselor or psychoanalyst who does not
632 purport to be a counselor whose primary service is the application of
633 established principles of psycho-social development and behavioral
634 science to the evaluation, assessment, analysis and treatment of
635 emotional, behavioral or interpersonal dysfunction or difficulties that
636 interfere with mental health and human development.

637 Sec. 31. (NEW) No cause of action for civil assault, civil battery,
638 invasion of privacy or failure to obtain informed consent shall arise
639 against any acute care general hospital licensed under chapter 368v of
640 the general statutes or any other health care provider or person
641 responsible for administering an HIV-related test, or causing such test
642 to be administered, as required by section 19a-55 or 19a-593 of the
643 general statutes, on the basis that such HIV-related test was
644 administered without the consent of the patient or the patient's parent
645 or guardian. Nothing in this section shall be construed to: (1) Relieve
646 any person or entity from liability for (A) negligence in administering
647 such HIV-related test, (B) negligence in the reporting or distribution of
648 the results of such HIV-related test, (C) negligence related to the
649 provision of any counseling about a patient's decision whether to
650 obtain treatment as a result of such HIV-related test, or (D) negligence
651 in the treatment of a patient; or (2) eliminate or limit any defense to
652 any cause of action that is or may be alleged against such hospital,
653 health care provider or person responsible for administering such
654 HIV-related test or causing such test to be administered.

655 Sec. 32. Notwithstanding the provisions of subsection (a) of section
656 20-195c of the general statutes, during the period commencing on the
657 effective date of this section and ending thirty days after said effective

658 date, an applicant for licensure as a marital and family therapist under
659 chapter 383a of the general statutes, in lieu of the requirements for
660 having completed a graduate degree specializing in marital and family
661 therapy and having completed a minimum of twelve months of a
662 supervised practicum or internship supervised by the program
663 granting the requisite degree or by an accredited postgraduate clinical
664 training program approved by the Commission on Accreditation for
665 Marriage and Family Therapy Education, may submit evidence
666 satisfactory to the Commissioner of Public Health of: (1) Having
667 earned a master's degree in counseling and guidance prior to 1980; (2)
668 having passed the licensing examination for marital and family
669 therapy prior to 2000; (3) current licensure as a marital and family
670 therapist in another state; (4) current clinical membership in the
671 American Association of Marriage and Family Therapy; and (5) having
672 no disciplinary history.

673 Sec. 33. Notwithstanding the provisions of subsection (b) of section
674 20-206bb of the general statutes, during the period commencing on the
675 effective date of this section and ending thirty days after said effective
676 date, the Department of Public Health shall issue a license as an
677 acupuncturist under chapter 384c of the general statutes to any
678 applicant who presents to the department satisfactory evidence that
679 the applicant has: (1) Passed the National Commission for the
680 Certification of Acupuncturists written examination by test or by
681 credentials review; (2) successfully completed the practical
682 examination of point location skills offered by the National
683 Commission for the Certification of Acupuncturists; and (3)
684 successfully completed the Clean Needle Technique Course offered by
685 the Council of Colleges of Acupuncture and Oriental Medicine.

686 Sec. 34. (a) Notwithstanding the provisions of subsection (a) of
687 section 20-195dd of the general statutes, during the period
688 commencing on the effective date of this section and ending thirty
689 days after said effective date, an applicant for licensure as a
690 professional counselor under chapter 383c of the general statutes, in

691 lieu of the requirements for having completed sixty graduate semester
692 hours in or related to the field of professional counseling and having
693 earned a master's degree of at least forty-two graduate semester hours,
694 may submit evidence satisfactory to the Commissioner of Public
695 Health of: (1) Having earned a master's degree in counselor education
696 prior to 1980; (2) having practiced professional counseling for a
697 minimum of ten years immediately preceding the date of application;
698 (3) current certification by the American Nurses Association as a
699 psychiatric nurse; and (4) having passed the national clinical mental
700 health counseling examination.

701 (b) Notwithstanding the provisions of subsection (a) of section 20-
702 195dd of the general statutes, during the period commencing on the
703 effective date of this section and ending thirty days after said effective
704 date, an applicant for licensure as a professional counselor under
705 chapter 383c of the general statutes, in lieu of the requirements set
706 forth in said subsection, may submit evidence satisfactory to the
707 Commissioner of Public Health of having: (1) Earned a master's degree
708 in school psychology from a regionally accredited institution of higher
709 education; (2) worked as a professional counselor for a minimum of
710 ten years immediately preceding the date of application; and (3)
711 passed an examination prescribed by the commissioner.

712 Sec. 35. (a) Notwithstanding the provisions of subsection (b) of
713 section 20-27 of the general statutes, during the period commencing on
714 the effective date of this section and ending thirty days after said
715 effective date, the Department of Public Health shall issue a license to
716 practice chiropractic under chapter 372 of the general statutes to any
717 applicant who presents to the department satisfactory evidence that
718 the applicant: (1) Has graduated from an accredited school of
719 chiropractic approved by the State Board of Chiropractic Examiners
720 with the consent of the department; (2) has successfully completed
721 parts 1, 2 and 3 and the physiotherapy portion of the National Board of
722 Chiropractic Examiners examination; (3) holds current licensure as a
723 chiropractor in another state and has no disciplinary history; and (4)

724 has practiced chiropractic for not less than twenty years, at least one of
725 which was within the previous two years.

726 (b) Any individual who is granted a license pursuant to subsection
727 (a) of this section shall successfully complete the practical examination
728 required by subsection (a) of section 20-28 of the general statutes prior
729 to the expiration date such license. If such examination is not
730 successfully completed by such date, the individual shall not be
731 eligible for renewal of such license.

732 Sec. 36. Public act 01-94 shall take effect from its passage.

733 Sec. 37. Section 52-557b of the general statutes is repealed and the
734 following is substituted in lieu thereof:

735 (a) A person licensed to practice medicine and surgery under the
736 provisions of chapter 370 or dentistry under the provisions of section
737 20-106 or members of the same professions licensed to practice in any
738 other state of the United States, a person licensed as a registered nurse
739 under section 20-93 or 20-94 or certified as a licensed practical nurse
740 under section 20-96 or 20-97, a medical technician or any person
741 operating a cardiopulmonary resuscitator or a person trained in
742 cardiopulmonary resuscitation or in the use of an automatic external
743 defibrillator in accordance with the standards set forth by the
744 American Red Cross or American Heart Association, who, voluntarily
745 and gratuitously and other than in the ordinary course of such person's
746 employment or practice, renders emergency medical or professional
747 assistance to a person in need thereof, shall not be liable to such person
748 assisted for civil damages for any personal injuries which result from
749 acts or omissions by such person in rendering the emergency care,
750 which may constitute ordinary negligence. The immunity provided in
751 this subsection does not apply to acts or omissions constituting gross,
752 wilful or wanton negligence. For the purposes of this subsection,
753 "automatic external defibrillator" means a device that: (1) Is used to
754 administer an electric shock through the chest wall to the heart; (2)
755 contains internal decision-making electronics, microcomputers or

756 special software that allows it to interpret physiologic signals, make
757 medical diagnosis and, if necessary, apply therapy; (3) guides the user
758 through the process of using the device by audible or visual prompts;
759 and (4) does not require the user to employ any discretion or judgment
760 in its use.

761 (b) A paid or volunteer [fireman or policeman] firefighter or police
762 officer, a teacher or other school personnel on the school grounds or in
763 the school building or at a school function, a member of a ski patrol, a
764 lifeguard, a conservation officer, [patrolman] patrol officer or special
765 [policeman] police officer of the Department of Environmental
766 Protection, or [ambulance] emergency medical service personnel, who
767 has completed a course in first aid offered by the American Red Cross,
768 the American Heart Association, the National Ski Patrol, the
769 Department of Public Health or any director of health, as certified by
770 the agency or director of health offering the course, and who renders
771 emergency first aid to a person in need thereof, shall not be liable to
772 such person assisted for civil damages for any personal injuries which
773 result from acts or omissions by such person in rendering the
774 emergency first aid, which may constitute ordinary negligence. No
775 paid or volunteer [fireman, policeman or ambulance] firefighter, police
776 officer or emergency medical service personnel who forcibly enters the
777 residence of any person in order to render emergency first aid to a
778 person whom such [fireman, policeman or ambulance] firefighter,
779 police officer or emergency medical service personnel reasonably
780 believes to be in need thereof shall be liable to such person for civil
781 damages incurred as a result of such entry. The immunity provided in
782 this subsection does not apply to acts or omissions constituting gross,
783 wilful or wanton negligence.

784 (c) An employee of a railroad company, including any company
785 operating a commuter rail line, who has successfully completed a
786 course in first aid, offered by the American Red Cross, the American
787 Heart Association, the National Ski Patrol, the Department of Public
788 Health or any director of health, as certified by the agency or director

789 of health offering the course, and who renders emergency first aid or
790 cardiopulmonary resuscitation to a person in need thereof, shall not be
791 liable to such person assisted for civil damages for any personal injury
792 or death which results from acts or omissions by such employee in
793 rendering the emergency first aid or cardiopulmonary resuscitation
794 which may constitute ordinary negligence. The immunity provided in
795 this subsection does not apply to acts or omissions constituting gross,
796 wilful or wanton negligence.

797 (d) A railroad company, including any commuter rail line, which
798 provides emergency medical training or equipment to any employee
799 granted immunity pursuant to subsection (c) of this section shall not be
800 liable for civil damages for any injury sustained by a person or for the
801 death of a person which results from the company's acts or omissions
802 in providing such training or equipment or which results from acts or
803 omissions by such employee in rendering emergency first aid or
804 cardiopulmonary resuscitation, which may constitute ordinary
805 negligence. The immunity provided in this subsection does not apply
806 to acts or omissions constituting gross, wilful or wanton negligence.

807 (e) A teacher or other school personnel, on the school grounds or in
808 the school building or at a school function, who has completed both a
809 course in first aid in accordance with subsection (b) of this section and
810 a course given by the medical advisor of the school or by a licensed
811 physician in the administration of medication by injection, who
812 renders emergency care by administration of medication by injection
813 to a person in need thereof, shall not be liable to the person assisted for
814 civil damages for any injuries which result from acts or omissions by
815 the person in rendering the emergency care of administration of
816 medication by injection, which may constitute ordinary negligence.
817 The immunity provided in this subsection does not apply to acts or
818 omissions constituting gross, wilful or wanton negligence.

819 (f) The provisions of this section shall not be construed to require
820 any teacher or other school personnel to render emergency first aid or

821 administer medication by injection.

822 Sec. 38. (NEW) A paid or volunteer firefighter or police officer, a
823 member of a ski patrol, a lifeguard, a conservation officer, patrol
824 officer or special police officer of the Department of Environmental
825 Protection or emergency medical service personnel who has been
826 trained in the use of an automatic external defibrillator in accordance
827 with the standards set forth by the American Red Cross or American
828 Heart Association shall not be subject to additional requirements,
829 except recertification requirements, in order to use an automatic
830 external defibrillator.

831 Sec. 39. (NEW) The Commissioner of Health Care Access shall
832 adopt regulations, in accordance with chapter 54 of the general
833 statutes, to establish uniform debt collection standards for hospitals.

834 Sec. 40. Subsection (c) of section 4-28f of the general statutes is
835 repealed and the following is substituted in lieu thereof:

836 (c) The trust fund shall be administered by a board of trustees which
837 shall consist of seventeen trustees. The appointment of the initial
838 trustees shall be as follows: (1) The Governor shall appoint four
839 trustees, one of whom shall serve for a term of one year from July 1,
840 2000, two of whom shall serve for a term of two years from July 1,
841 2000, and one of whom shall serve for a term of three years from July 1,
842 2000; (2) the speaker of the House of Representatives and the president
843 pro tempore of the Senate each shall appoint two trustees, one of
844 whom shall serve for a term of two years from July 1, 2000, and one of
845 whom shall serve for a term of three years from July 1, 2000; (3) the
846 majority leader of the House of Representatives and the majority
847 leader of the Senate each shall appoint two trustees, one of whom shall
848 serve for a term of one year from July 1, 2000, and one of whom shall
849 serve for a term of three years from July 1, 2000; (4) the minority leader
850 of the House of Representatives and the minority leader of the Senate
851 each shall appoint two trustees, one of whom shall serve for a term of
852 one year from July 1, 2000, and one of whom shall serve for a term of

853 two years from July 1, 2000; and (5) the Secretary of the Office of Policy
854 and Management, or the secretary's designee, as an ex-officio voting
855 member. Following the expiration of such initial terms, subsequent
856 trustees shall serve for a term of three years. The trustees shall serve
857 without compensation except for reimbursement for necessary
858 expenses incurred in performing their duties. The board of trustees
859 shall establish rules of procedure for the conduct of its business which
860 shall include, but not be limited to, criteria, processes and procedures
861 to be used in selecting programs to receive money from the trust fund.
862 The trust fund shall be within the Office of Policy and Management for
863 administrative purposes only. The board of trustees shall meet not less
864 than bimonthly and, not later than January first of each year, shall
865 submit a report of their activities and accomplishments to the joint
866 standing committees of the General Assembly having cognizance of
867 matters relating to public health and appropriations and the budgets of
868 state agencies, in accordance with section 11-4a. Such report shall be
869 approved by each trustee.

870 Sec. 41. Section 10-206 of the general statutes is repealed and the
871 following is substituted in lieu thereof:

872 (a) Each local or regional board of education shall require each pupil
873 enrolled in the public schools to have health assessments pursuant to
874 the provisions of this section. Such assessments shall be conducted by
875 a legally qualified practitioner of medicine, a licensed natureopath, a
876 person licensed to practice chiropractic, an advanced practice
877 registered nurse or registered nurse, licensed pursuant to chapter 378,
878 a physician assistant, licensed pursuant to chapter 370, or by the school
879 medical advisor to ascertain whether such pupil is suffering from any
880 physical disability tending to prevent such pupil from receiving the
881 full benefit of school work and to ascertain whether such school work
882 should be modified in order to prevent injury to the pupil or to secure
883 for the pupil a suitable program of education. No health assessment
884 shall be made of any child enrolled in the public schools unless such
885 examination is made in the presence of the parent or guardian or in the

886 presence of another school employee. The parent or guardian of such
887 child shall receive prior written notice and shall have a reasonable
888 opportunity to be present at such assessment or to provide for such
889 assessment himself or herself. A local or regional board of education
890 may deny continued attendance in public school to any child who fails
891 to obtain the health assessments required under this section.

892 (b) Each local or regional board of education shall require each child
893 to have a health assessment prior to public school enrollment. The
894 assessment shall include: (1) A physical examination which shall
895 include hematocrit or hemoglobin tests, height, weight, [and] blood
896 pressure, and, beginning with the 2003-2004 school year, a chronic
897 disease assessment which shall include, but not be limited to, asthma
898 as defined by the Commissioner of Public Health pursuant to
899 subsection (c) of section 19a-62a, as amended by this act. The
900 assessment form shall include (A) a check box for the provider
901 conducting the assessment, as provided in subsection (a) of this
902 section, to indicate an asthma diagnosis, (B) screening questions
903 relating to appropriate public health concerns to be answered by the
904 parent or guardian, and (C) screening questions to be answered by
905 such provider; (2) an updating of immunizations as required under
906 section 10-204a, provided a registered nurse may only update said
907 immunizations pursuant to a written order by a physician or physician
908 assistant, licensed pursuant to chapter 370, or an advanced practice
909 registered nurse, licensed pursuant to chapter 378; (3) vision, hearing,
910 speech and gross dental screenings; and (4) such other information,
911 including health and developmental history, as the physician feels is
912 necessary and appropriate. The assessment shall also include tests for
913 tuberculosis, sickle cell anemia or Cooley's anemia and tests for lead
914 levels in the blood where the local or regional board of education
915 determines after consultation with the school medical advisor and the
916 local health department, or in the case of a regional board of education,
917 each local health department, that such tests are necessary, provided a
918 registered nurse may only perform said tests pursuant to the written
919 order of a physician or physician assistant, licensed pursuant to

920 chapter 370, or an advanced practice registered nurse, licensed
921 pursuant to chapter 378.

922 (c) Each local or regional board of education shall require each pupil
923 enrolled in the public schools to have health assessments in either
924 grade six or grade seven and in either grade ten or grade eleven. The
925 assessment shall include: (1) A physical examination which shall
926 include hematocrit or hemoglobin tests, height, weight, [and] blood
927 pressure, and, beginning with the 2003-2004 school year, a chronic
928 disease assessment which shall include, but not be limited to, asthma
929 as defined by the Commissioner of Public Health pursuant to
930 subsection (c) of section 19a-62a, as amended by this act. The
931 assessment form shall include (A) a check box for the provider
932 conducting the assessment, as provided in subsection (a) of this
933 section, to indicate an asthma diagnosis, (B) screening questions
934 relating to appropriate public health concerns to be answered by the
935 parent or guardian, and (C) screening questions to be answered by
936 such provider; (2) an updating of immunizations as required under
937 section 10-204a, provided a registered nurse may only update said
938 immunizations pursuant to a written order of a physician or physician
939 assistant, licensed pursuant to chapter 370, or an advanced practice
940 registered nurse, licensed pursuant to chapter 378; (3) vision, hearing,
941 postural and gross dental screenings; and (4) such other information
942 including a health history as the physician feels is necessary and
943 appropriate. The assessment shall also include tests for tuberculosis
944 and sickle cell anemia or Cooley's anemia where the local or regional
945 board of education, in consultation with the school medical advisor
946 and the local health department, or in the case of a regional board of
947 education, each local health department, determines that said
948 screening or test is necessary, provided a registered nurse may only
949 perform said tests pursuant to the written order of a physician or
950 physician assistant, licensed pursuant to chapter 370, or an advanced
951 practice registered nurse, licensed pursuant to chapter 378.

952 (d) The results of each assessment done pursuant to this section and

953 the results of screenings done pursuant to section 10-214 shall be
954 recorded on forms supplied by the State Board of Education. Such
955 information shall be included in the cumulative health record of each
956 pupil and shall be kept on file in the school such pupil attends. If a
957 pupil permanently leaves the jurisdiction of the board of education, the
958 pupil's original cumulative health record shall be sent to the chief
959 administrative officer of the school district to which such student
960 moves. The board of education transmitting such health record shall
961 retain a true copy. Each physician, advanced practice registered nurse,
962 registered nurse, or physician assistant performing health assessments
963 and screenings pursuant to this section and section 10-214 shall sign
964 each form and any recommendations concerning the pupil shall be in
965 writing.

966 (e) Appropriate school health personnel shall review the results of
967 each assessment and screening as recorded pursuant to subsection (d)
968 of this section. When, in the judgment of such health personnel, a
969 pupil, as defined in section 10-206a, is in need of further testing or
970 treatment, the superintendent of schools shall give written notice to the
971 parent or guardian of such pupil and shall make reasonable efforts to
972 assure that such further testing or treatment is provided. Such
973 reasonable efforts shall include a determination of whether or not the
974 parent or guardian has obtained the necessary testing or treatment for
975 the pupil, and, if not, advising the parent or guardian on how such
976 testing or treatment may be obtained. The results of such further
977 testing or treatment shall be recorded pursuant to subsection (d) of this
978 section, and shall be reviewed by school health personnel pursuant to
979 this subsection.

980 (f) On and after February 1, 2004, each local or regional board of
981 education shall report, on an annual basis, the total number of pupils
982 per school and per school district having a diagnosis of asthma
983 recorded on such health assessment forms to the local health
984 department and the Department of Public Health. The report shall
985 contain the asthma information collected as required under

986 subsections (b) and (c) of this section and shall include pupil age,
987 gender, race, ethnicity and school. Beginning on October 1, 2004, and
988 every three years thereafter, the Department of Public Health shall
989 review the asthma screening information reported pursuant to this
990 section and shall submit a report to the joint standing committees of
991 the General Assembly having cognizance of matters relating to public
992 health and education concerning asthma trends and distributions
993 among pupils enrolled in the public schools. The report shall be
994 submitted in accordance with the provisions of section 11-4a and shall
995 include, but not be limited to, trends and findings based on pupil age,
996 gender, race, ethnicity, school and the education reference group, as
997 determined by the Department of Education for the town or regional
998 school district in which such school is located.

999 Sec. 42. Section 19a-62a of the general statutes is repealed and the
1000 following is substituted in lieu thereof:

1001 (a) (1) Within available appropriations, the Commissioner of Public
1002 Health, in consultation with the Commissioner of Social Services, shall
1003 establish a pilot program for the early identification and treatment of
1004 pediatric asthma. The Commissioner of Public Health shall make
1005 grants-in-aid under the pilot program for projects to be established in
1006 two municipalities to identify, screen and refer children with asthma
1007 for treatment. Such projects shall work cooperatively with providers of
1008 maternal and child health, including, but not limited to, local health
1009 departments, community health centers, Healthy Start and Healthy
1010 Families, to target children who were born prematurely, premature
1011 infants or pregnant women at risk of premature delivery for early
1012 identification of asthma. Such projects may utilize private resources
1013 through public-private partnerships to establish a public awareness
1014 program and innovative outreach initiatives targeting urban areas to
1015 encourage early screening of children at risk of asthma.

1016 [(b)] (2) The Commissioner of Public Health shall evaluate the pilot
1017 program established under this [section] subsection and shall submit a

1018 report of the commissioner's findings and recommendations to the
1019 joint standing committees of the General Assembly having cognizance
1020 of matters relating to public health, human services and appropriations
1021 and the budgets of state agencies, not later than October 1, 2001, in
1022 accordance with the provisions of section 11-4a.

1023 (b) Not later than January 1, 2003, the Commissioner of Public
1024 Health shall establish and maintain a system of monitoring asthma.
1025 Such system shall include, but not be limited to, annual surveys of
1026 asthma in schools and reports of asthma visits and the number of
1027 persons having asthma as voluntarily reported by health care
1028 providers. The monitoring system may include reports of the number
1029 of persons having asthma medication prescriptions filled by
1030 pharmacies in this state. Such system shall be used by the
1031 commissioner in estimating the annual incidence and distribution of
1032 asthma in the state, including, but not limited to, such incidence and
1033 distribution based on age and gender and among ethnic, racial and
1034 cultural populations and on school enrollment and the education
1035 reference group, as determined by the Department of Education, for
1036 the town or regional school district in which the student's school is
1037 located.

1038 (c) The Commissioner of Public Health, in consultation with local
1039 directors of health, shall establish a comprehensive state-wide asthma
1040 plan. Not later than October 1, 2002, the commissioner shall develop a
1041 model case definition of asthma for purposes of asthma diagnosis and
1042 monitoring.

1043 (d) Not later than October 1, 2003, and annually thereafter, the
1044 commissioner shall submit a report of the status and results of the
1045 monitoring system established under subsection (b) of this section and
1046 the state-wide asthma plan established under subsection (c) of this
1047 section to the joint standing committee of the General Assembly
1048 having cognizance of matters relating to public health, in accordance
1049 with the provisions of section 11-4a.

1050 Sec. 43. Subdivision (15) of section 38a-816 of the general statutes, as
1051 amended by public act 01-111, is repealed and the following is
1052 substituted in lieu thereof:

1053 (15) (A) Failure by an insurer, or any other entity responsible for
1054 providing payment to a health care provider pursuant to an insurance
1055 policy, to pay accident and health claims, including, but not limited to,
1056 claims for payment or reimbursement to health care providers, within
1057 the time periods set forth in subparagraph (B) of this subdivision,
1058 unless the Insurance Commissioner determines that a legitimate
1059 dispute exists as to coverage, liability or damages or that the claimant
1060 has fraudulently caused or contributed to the loss. Any insurer, or any
1061 other entity responsible for providing payment to a health care
1062 provider pursuant to an insurance policy, who fails to pay such a claim
1063 or request within the time periods set forth in subparagraph (B) of this
1064 subdivision shall pay the claimant or health care provider the amount
1065 of such claim plus interest at the rate of fifteen per cent per annum, in
1066 addition to any other penalties which may be imposed pursuant to
1067 sections 38a-11, 38a-25, 38a-41 to 38a-53, inclusive, 38a-57 to 38a-60,
1068 inclusive, 38a-62 to 38a-64, inclusive, 38a-76, 38a-83, 38a-84, 38a-117 to
1069 38a-124, inclusive, 38a-129 to 38a-140, inclusive, 38a-146 to 38a-155,
1070 inclusive, 38a-283, 38a-288 to 38a-290, inclusive, 38a-319, 38a-320, 38a-
1071 459, 38a-464, 38a-815 to 38a-819, inclusive, 38a-824 to 38a-826,
1072 inclusive, and 38a-828 to 38a-830, inclusive. Whenever the interest due
1073 a claimant or health care provider pursuant to this section is less than
1074 one dollar, the insurer shall deposit such amount in a separate interest-
1075 bearing account in which all such amounts shall be deposited. At the
1076 end of each calendar year each such insurer shall donate such amount
1077 to The University of Connecticut Health Center.

1078 (B) Each insurer, or other entity responsible for providing payment
1079 to a health care provider pursuant to an insurance policy subject to this
1080 section, shall pay claims not later than forty-five days after receipt by
1081 the insurer of the claimant's proof of loss form or the health care
1082 provider's request for payment filed in accordance with the insurer's

1083 practices or procedures, except that when there is a deficiency in the
1084 information needed for processing a claim, the insurer shall (i) send
1085 written notice to the claimant or health care provider, as the case may
1086 be, of all alleged deficiencies in information needed for processing a
1087 claim not later than thirty days after the insurer receives a claim for
1088 payment or reimbursement under the contract, and (ii) pay claims for
1089 payment or reimbursement under the contract not later than thirty
1090 days after the insurer receives the information requested.

1091 (C) As used in this subdivision, "health care provider" means a
1092 person licensed to provide health care services under chapter 368v,
1093 chapters 370 to 373, inclusive, 375 to 383c, inclusive, 384a to 384c,
1094 inclusive, or chapter 400j.

1095 Sec. 44. (NEW) (a) As used in this section:

1096 (1) "Salon" includes any shop, store, day spa or other commercial
1097 establishment at which the practice of barbering, as described in
1098 section 20-234 of the general statutes, hairdressing and cosmetology, as
1099 defined in section 20-250 of the general statutes, or the services of a
1100 nail technician, or any combination thereof, is offered and provided;
1101 and

1102 (2) "Nail technician" means a person who, for compensation, cuts,
1103 shapes, polishes or enhances the appearance of the nails of the hands
1104 or feet, including, but not limited to, the application and removal of
1105 sculptured or artificial nails.

1106 (b) The director of health for any town, city, borough or district
1107 department of health, or the director's authorized representative, shall,
1108 on an annual basis, inspect all salons within the director's jurisdiction
1109 regarding their sanitary condition. The director of health, or the
1110 director's authorized representative, shall have full power to enter and
1111 inspect any such salon during usual business hours. If any salon, upon
1112 such inspection, is found to be in an unsanitary condition, the director
1113 of health shall make written order that such salon be placed in a

1114 sanitary condition. The director of health may collect from the operator
1115 of any such salon a reasonable fee, not to exceed one hundred dollars,
1116 for the cost of conducting any annual inspection of such salon
1117 pursuant to this section. Notwithstanding any municipal charter, home
1118 rule ordinance or special act, any fee collected by the director of health
1119 pursuant to this section shall be used by the town, city, borough or
1120 district department of health for conducting inspections pursuant to
1121 this section.

1122 Sec. 45. (NEW) Any licensed residential treatment facility that
1123 provides adult mental health or substance abuse treatment services, or
1124 both, and receives state funds for the provision of such services shall
1125 prepare a discharge plan, including housing referrals, for each client
1126 receiving such services prior to such client's release from such
1127 residential treatment facility. The Commissioner of Mental Health and
1128 Addiction Services may adopt regulations, in accordance with chapter
1129 54 of the general statutes, to carry out the provisions of this section.

1130 Sec. 46. Section 19a-7d of the general statutes is repealed and the
1131 following is substituted in lieu thereof:

1132 (a) The Commissioner of Public Health may establish, within
1133 available appropriations, a program to provide three-year grants to
1134 community-based providers of primary care services in order to
1135 expand access to health care for the uninsured. The grants may be
1136 awarded to community-based providers of primary care for (1)
1137 funding for direct services, (2) recruitment and retention of primary
1138 care clinicians and registered nurses through subsidizing of salaries or
1139 through a loan repayment program, and (3) capital expenditures. The
1140 community-based providers of primary care under the direct service
1141 program shall provide, or arrange access to, primary and preventive
1142 services, referrals to specialty services, including rehabilitative and
1143 mental health services, inpatient care, prescription drugs, basic
1144 diagnostic laboratory services, health education and outreach to alert
1145 people to the availability of services. Primary care clinicians and

1146 registered nurses participating in the state loan repayment program or
1147 receiving subsidies shall provide services to the uninsured based on a
1148 sliding fee schedule, provide free care if necessary, accept Medicare
1149 assignment and participate as a Medicaid provider. The commissioner
1150 may adopt regulations, in accordance with the provisions of chapter
1151 54, to establish eligibility criteria, services to be provided by
1152 participants, the sliding fee schedule, reporting requirements and the
1153 loan repayment program. For the purposes of this section, "primary
1154 care clinicians" includes family practice physicians, general practice
1155 osteopaths, obstetricians and gynecologists, internal medicine
1156 physicians, pediatricians, dentists, certified nurse midwives, [nurse
1157 practitioners and] advanced practice registered nurses, physician
1158 assistants and dental hygienists.

1159 (b) Funds appropriated for the state loan repayment program shall
1160 not lapse until fifteen months following the end of the fiscal year for
1161 which such funds were appropriated.

1162 Sec. 47. Subsection (a) of section 17a-215a of the general statutes is
1163 repealed and the following is substituted in lieu thereof:

1164 (a) There is established an Advisory Commission on Services and
1165 Supports for Persons With Developmental Disabilities. The
1166 commission shall consist of: (1) One member appointed by the speaker
1167 of the House of Representatives and one member appointed by the
1168 president pro tempore of the Senate, who shall be members of the
1169 General Assembly; (2) one member appointed by the minority leader
1170 of the House of Representatives and one member appointed by the
1171 minority leader of the Senate, who shall be members of the General
1172 Assembly; (3) a representative of the Governor; (4) the Secretary of the
1173 Office of Policy and Management, or the secretary's designee; (5) the
1174 Commissioner of Mental Retardation, or the commissioner's designee;
1175 (6) the Commissioner of Mental Health and Addiction Services, or the
1176 commissioner's designee; (7) the Commissioner of Children and
1177 Families, or the commissioner's designee; (8) the Commissioner of

1178 Social Services, or the commissioner's designee; (9) the Commissioner
1179 of Education, or the commissioner's designee; (10) the director of the
1180 Office of Protection and Advocacy for Persons with Disabilities, or the
1181 director's designee; (11) the director of the Council on Developmental
1182 Disabilities established pursuant to the federal Developmental
1183 Disabilities Assistance and Bill of Rights Act, as from time to time
1184 amended, or the director's designee; (12) the director of the Bureau of
1185 Rehabilitation Services of the Department of Social Services, or the
1186 director's designee; and [(10)] (13) sixteen persons who shall be
1187 individuals with developmental disabilities who do not have a
1188 condition defined as mental retardation pursuant to section 1-1g,
1189 representatives of providers of services to such individuals, or
1190 members of the families of or advocates for such individuals, three of
1191 whom shall be appointed by the speaker of the House of
1192 Representatives, three of whom shall be appointed by the president
1193 pro tempore of the Senate, three of whom shall be appointed by the
1194 minority leader of the House of Representatives, three of whom shall
1195 be appointed by the minority leader of the Senate, and four of whom
1196 shall be appointed by the Governor.

1197 Sec. 48. Subsection (a) of section 19a-79 of the general statutes is
1198 repealed and the following is substituted in lieu thereof:

1199 (a) The Commissioner of Public Health shall adopt regulations, in
1200 accordance with the provisions of chapter 54, to [further] carry out the
1201 purposes of sections 19a-77 to 19a-80, inclusive, and 19a-82 to 19a-87,
1202 inclusive, and to assure that child day care centers and group day care
1203 homes shall meet the health, educational and social needs of children
1204 utilizing such child day care centers and group day care homes. Such
1205 regulations shall (1) specify that before being permitted to attend any
1206 child day care center or group day care home, each child [must] shall
1207 be protected as age-appropriate by adequate immunization against
1208 diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella,
1209 hemophilus influenzae type B and any other vaccine required by the
1210 schedule of active immunization adopted pursuant to section 19a-7f,

1211 including appropriate exemptions for children for whom such
1212 immunization is medically contraindicated and for children whose
1213 parents object to such immunization on religious grounds, (2) specify
1214 conditions under which child day care center directors and teachers
1215 and group day care home providers may administer tests to monitor
1216 glucose levels in a child with diagnosed diabetes mellitus, and
1217 administer medicinal preparations, including controlled drugs
1218 specified in the regulations by the commissioner, to a child receiving
1219 child day care services at such child day care center or group day care
1220 home pursuant to the written order of a physician licensed to practice
1221 medicine or a dentist licensed to practice dental medicine in this or
1222 another state, or an advanced practice registered nurse licensed to
1223 prescribe in accordance with section 20-94a, or a physician assistant
1224 licensed to prescribe in accordance with section 20-12d, and the written
1225 authorization of a parent or guardian of such child, (3) specify that an
1226 operator of a child day care center or group day care home, licensed
1227 before January 1, 1986, or an operator who receives a license after
1228 January 1, 1986, for a facility licensed prior to January 1, 1986, shall
1229 provide a minimum of thirty square feet per child of total indoor
1230 usable space, free of furniture except that needed for the children's
1231 purposes, exclusive of toilet rooms, bathrooms, coatrooms, kitchens,
1232 halls, isolation room or other rooms used for purposes other than the
1233 activities of the children, [and] (4) specify that a child day care center
1234 or group day care home licensed after January 1, 1986, shall provide
1235 thirty-five square feet per child of total indoor usable space, and (5)
1236 establish appropriate child day care center staffing requirements for
1237 employees certified in cardiopulmonary resuscitation by the American
1238 Red Cross or the American Heart Association.

1239 Sec. 49. Subsection (f) of section 20-206b of the general statutes is
1240 repealed and the following is substituted in lieu thereof:

1241 (f) Notwithstanding the provisions of subsection (a) of this section,
1242 the commissioner may issue a license to an out-of-state applicant who
1243 submits evidence satisfactory to the commissioner of either: (1) [a] (A)

1244 A current license to practice therapeutic massage from another state or
1245 jurisdiction, [(2)] (B) documentation of practice for at least one year
1246 immediately preceding application, and [(3)] (C) successful completion
1247 of the National Certification Examination for Therapeutic Massage and
1248 Bodywork; or (2) (A) graduation from a school of massage therapy
1249 offering a course of study of not less than five hundred classroom
1250 hours, with the instructor present, and, at the time of the applicant's
1251 graduation, was either (i) accredited by an agency recognized by the
1252 United States Department of Education or by a state board of
1253 postsecondary technical trade and business schools, or (ii) accredited
1254 by the Commission on Massage Therapy Accreditation, and (B)
1255 successful completion of the National Certification Examination for
1256 Therapeutic Massage and Bodywork.

1257 Sec. 50. Not later than February 1, 2002, the Commissioner of Public
1258 Health, in consultation with each municipal and district director of
1259 health, shall submit a report to the joint standing committees of the
1260 General Assembly having cognizance of matters relating to public
1261 health and appropriations and the budgets of state agencies, in
1262 accordance with section 11-4a of the general statutes, concerning the
1263 current and ongoing activities of the Department of Public Health and
1264 each municipal and district department of health with respect to the
1265 promotion of the public health within their respective jurisdictions.
1266 Such report shall include, but not be limited to, any plans by the
1267 commissioner or such directors of health for the adoption of national
1268 health standards, including standards recommended by the National
1269 Centers for Disease Control.

1270 Sec. 51. Subdivision (9) of section 19a-177 of the general statutes is
1271 repealed and the following is substituted in lieu thereof:

1272 (9) (A) Establish rates for the conveyance of patients by licensed
1273 ambulance services and invalid coaches and establish emergency
1274 service rates for certified ambulance services, provided (i) the present
1275 rates established for such services and vehicles shall remain in effect

1276 until such time as the commissioner establishes a new rate schedule as
1277 provided in this subdivision, and (ii) any rate increase not in excess of
1278 the National Health Care Inflation Rate Index, as published by the
1279 Bureau of Labor Statistics of the United States Department of Labor,
1280 for the prior year, filed in accordance with subparagraph (B)(iii) of this
1281 subdivision shall be deemed approved by the commissioner; and (B)
1282 adopt regulations, in accordance with the provisions of chapter 54,
1283 establishing methods for setting rates and conditions for charging such
1284 rates. Such regulations shall include, but not be limited to, provisions
1285 requiring that on and after July 1, 2000: (i) Requests for rate increases
1286 may be filed no more frequently than once a year; (ii) only licensed
1287 ambulance services and certified ambulance services that apply for a
1288 rate increase in excess of the National Health Care Inflation Index, as
1289 published by the Bureau of Labor Statistics of the United States
1290 Department of Labor, for the prior year, and do not accept the
1291 maximum allowable rates contained in any voluntary state-wide rate
1292 schedule established by the commissioner for the rate application year
1293 shall be required to file detailed financial information with the
1294 commissioner, provided any hearing that the commissioner may hold
1295 concerning such application shall be conducted as a contested case in
1296 accordance with chapter 54; (iii) licensed ambulance services and
1297 certified ambulance services that do not apply for a rate increase in any
1298 year in excess of the National Health Care Inflation Index, as published
1299 by the Bureau of Labor Statistics of the United States Department of
1300 Labor, for the prior year, or that accept the maximum allowable rates
1301 contained in any voluntary state-wide rate schedule established by the
1302 commissioner for the rate application year shall, not later than July
1303 fifteenth of such year, file with the commissioner either an audited
1304 financial statement or an accountant's review report pertaining to the
1305 most recently completed fiscal year of the licensed ambulance service
1306 or certified ambulance service, including total revenue and total
1307 expenses, a statement of emergency and nonemergency call volume,
1308 and, in the case of a licensed ambulance service or certified ambulance
1309 service that is not applying for a rate increase, a written declaration by

1310 such licensed ambulance service or certified ambulance service that no
1311 change in its currently approved maximum allowable rates will occur
1312 for the rate application year; and (iv) detailed financial and operational
1313 information filed by licensed ambulance services and certified
1314 ambulance services to support a request for a rate increase in excess of
1315 the National Health Care Inflation Index, as published by the Bureau
1316 of Labor Statistics of the United States Department of Labor, for the
1317 prior year, shall cover the time period pertaining to the most recently
1318 completed fiscal year and the rate application year of the licensed
1319 ambulance service or certified ambulance service.

1320 Sec. 52. Section 1 of public act 01-154 is repealed and the following is
1321 substituted in lieu thereof:

1322 (a) Notwithstanding any provision of the general statutes
1323 concerning the sale, lease or transfer of real property by or on behalf of
1324 the state, during the period commencing on the effective date of this
1325 act and ending on the date that is three years from the effective date of
1326 this act or on the date on which the General Assembly approves a plan
1327 that shall be developed by the Department of Mental Retardation for
1328 the elimination of all emergency and priority one waiting list
1329 categories of the department and a plan that shall be developed by the
1330 Department of Mental Health and Addiction Services to meet the
1331 needs identified in the report of the Governor's Blue Ribbon
1332 Commission on Mental Health, whichever date is earlier, no state-
1333 owned real property that is being used or has been used within the
1334 previous ten years for residential purposes by persons with mental
1335 retardation or psychiatric disabilities may be sold, leased or
1336 transferred by or on behalf of the state, except that such property may
1337 be (1) leased if the property continues to be used for the same purpose,
1338 or (2) transferred to the Department of Mental Retardation or to the
1339 Department of Mental Health and Addiction Services for the purposes
1340 of this section.

1341 (b) Subsection (a) of this section shall only apply to any state-

1342 operated community-based residential facility, boarding house, group
1343 home or halfway house meeting the criteria set forth in subsection (a)
1344 of this section and occupied by persons with mental retardation,
1345 persons with psychiatric disabilities, alcohol-dependent persons or
1346 drug-dependent persons.

1347 Sec. 53. (NEW) The provisions of section 22a-19a of the general
1348 statutes shall not apply to any property or structure, or any portion
1349 thereof, that was first listed on the state register of historic places
1350 during the month of March, 2001, if (1) the owner of such property or
1351 structure delivers or has delivered to the director of the Connecticut
1352 Historical Commission and to the State Historic Preservation Officer a
1353 written and notarized objection to the listing of such property or
1354 structure on the National Register of Historic Places that certifies the
1355 person's ownership of such property or structure, and (2) such
1356 objection has not been withdrawn or rescinded by the owner's written
1357 and notarized notice of withdrawal or rescission of objection.

1358 Sec. 54. Subsection (b) of section 22a-1f of the general statutes is
1359 repealed and the following is substituted in lieu thereof:

1360 (b) Evaluations required by section 22a-1b shall not be required for
1361 the Connecticut Juvenile Training School project, as defined in
1362 subsection (l) of section 4b-55, and the extension of such project
1363 otherwise known as the Connecticut River Interceptor Sewer Project,
1364 or a project, as defined in subdivision (16) of section 10a-109c, which
1365 involves the conversion of an existing structure for educational rather
1366 than office or commercial use.

1367 Sec. 55. Section 18 of public act 00-135 is repealed.

1368 Sec. 56. Sections 20-266a to 20-266f, inclusive, of the general statutes
1369 are repealed.

1370 Sec. 57. Section 19a-647 of the general statutes is repealed.

1371 Sec. 58. This act shall take effect July 1, 2001, except that sections 16

1372 to 18, inclusive, 21 to 26, inclusive, 37, 38, 42 to 48, inclusive, and 57
1373 shall take effect October 1, 2001, sections 3 and 5 shall take effect the
1374 later of July 1, 2001, or the effective date of public act 00-226, and
1375 section 41 shall take effect July 1, 2002.