



House of Representatives

General Assembly

File No. 491

January Session, 2005

Substitute House Bill No. 6602

House of Representatives, April 21, 2005

The Committee on Judiciary reported through REP. LAWLOR of the 99th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING CLAIMS AGAINST THE STATE.

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

1 Section 1. Section 4-158 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2005*):

3 [(a) The Claims Commissioner may approve immediate payment of
4 just claims not exceeding seven thousand five hundred dollars. The]

5 (a) The Claims Commissioner may (1) order that a claim be denied
6 or dismissed, (2) order immediate payment of a just claim in an
7 amount not exceeding seven thousand five hundred dollars, (3)
8 recommend to the General Assembly payment of a just claim in an
9 amount exceeding seven thousand five hundred dollars, or (4)
10 authorize a claimant to sue the state, as provided in section 4-160, as
11 amended by this act.

12 (b) Any person who has filed a claim for more than seven thousand
13 five hundred dollars may request the General Assembly to review a

14 decision of the Claims Commissioner (1) ordering the denial or
15 dismissal of the claim pursuant to subdivision (1) of subsection (a) of
16 this section, including denying or dismissing a claim that requests
17 permission to sue the state, or (2) ordering immediate payment of a
18 just claim in an amount not exceeding seven thousand five hundred
19 dollars pursuant to subdivision (2) of subsection (a) of this section. A
20 request for review shall be in writing and filed with the Office of the
21 Claims Commissioner not later than twenty days after the date the
22 person requesting such review receives a copy of the decision. The
23 filing of a request for review shall automatically stay the decision of
24 the Claims Commissioner.

25 (c) The Claims Commissioner shall submit each claim for which a
26 request for review is filed pursuant to this section to the General
27 Assembly pursuant to section 4-159, as amended by this act.

28 (d) If the Claims Commissioner orders immediate payment of a just
29 claim in an amount not exceeding seven thousand five hundred dollars
30 pursuant to subdivision (2) of subsection (a) of this section and a
31 request for review is not timely filed pursuant to subsection (b) of this
32 section, the clerk of the Office of the Claims Commissioner shall
33 deliver to the Comptroller a certified copy of the Claims
34 Commissioner's order and the Comptroller shall make payment from
35 such appropriation as the General Assembly may have made for the
36 payment of claims or, in the case of contractual claims for goods or
37 services furnished or for property leased, from the appropriation of the
38 agency which received such goods or services or occupied such
39 property. [Within]

40 (g) Not later than five days after the convening of each regular
41 session, the Claims Commissioner shall report to the General
42 Assembly on all claims decided pursuant to this section.

43 [(b) Any person who, having filed a claim for more than seven
44 thousand five hundred dollars, wishes to protest an award of the
45 Claims Commissioner under the provisions of this section may waive
46 immediate payment and his claim shall be submitted to the General

47 Assembly under the provisions of section 4-159. Such waiver shall be
48 in writing and shall be filed with the Claims Commissioner within ten
49 days after the claimant receives a copy of the order approving
50 payment.]

51 Sec. 2. Section 4-159 of the general statutes is repealed and the
52 following is substituted in lieu thereof (*Effective October 1, 2005*):

53 [After hearing, the Claims Commissioner shall make his
54 recommendations to the General Assembly for the payment or
55 rejection of amounts exceeding seven thousand five hundred dollars.
56 Within]

57 (a) Not later than five days after the convening of each regular
58 session and at such other times as the speaker of the House of
59 Representatives and president pro tempore of the Senate may desire,
60 the Claims Commissioner shall submit [such recommendations] to the
61 General Assembly (1) all claims for which the Claims Commissioner
62 recommended payment of a just claim in an amount exceeding seven
63 thousand five hundred dollars pursuant to subdivision (3) of
64 subsection (a) of section 4-158, as amended by this act, and (2) all
65 claims for which a request for review has been filed pursuant to
66 subsection (b) of section 4-158, as amended by this act, together with a
67 copy of [his] the Claim Commissioner's findings and [of] the hearing
68 record of each claim so reported. [The General Assembly may (1)
69 accept or alter any such recommendation or (2) reject any such
70 recommendation and grant or deny the claimant permission to sue the
71 state.]

72 (b) The General Assembly shall:

73 (1) With respect to a decision of the Claims Commissioner ordering
74 the denial or dismissal of a claim pursuant to subdivision (1) of
75 subsection (a) of section 4-158, as amended by this act:

76 (A) Confirm the decision; or

77 (B) Vacate the decision and, in lieu thereof, (i) order the payment of

78 the claim in a specified amount, or (ii) authorize the claimant to sue the
79 state;

80 (2) With respect to a decision of the Claims Commissioner ordering
81 the immediate payment of a just claim in an amount not exceeding
82 seven thousand five hundred dollars pursuant to subdivision (2) of
83 subsection (a) of section 4-158, as amended by this act:

84 (A) Confirm the decision;

85 (B) Modify the decision by ordering that a different amount be paid;
86 or

87 (C) Vacate the decision and, in lieu thereof, (i) order no payment be
88 made, or (ii) authorize the claimant to sue the state;

89 (3) With respect to a decision of the Claims Commissioner
90 recommending payment of a just claim in an amount exceeding seven
91 thousand five hundred dollars pursuant to subdivision (3) of
92 subsection (a) of section 4-158, as amended by this act:

93 (A) Accept the recommendation and order payment of the specified
94 amount;

95 (B) Modify the recommendation by ordering that a different amount
96 be paid; or

97 (C) Reject the recommendation and, in lieu thereof, (i) order no
98 payment be made, or (ii) authorize the claimant to sue the state; or

99 (4) With respect to a decision of the Claims Commissioner pursuant
100 to subdivision (1), (2) or (3) of subsection (a) of section 4-158, as
101 amended by this act, remand the claim to the Claims Commissioner for
102 such further proceedings as the General Assembly may direct.

103 (c) The General Assembly may grant the claimant permission to sue
104 the state under the provisions of this section when the General
105 Assembly deems it just and equitable and believes the claim to present
106 an issue of law or fact under which the state, were it a private person,

107 could be liable.

108 (d) If the General Assembly orders the payment of a claim, the clerk
109 of the Office of the Claims Commissioner shall deliver to the
110 Comptroller a notice of the order and the Comptroller shall make
111 payment in the manner prescribed for payment of an order of the
112 Claims Commissioner pursuant to section 4-158, as amended by this
113 act.

114 (e) The review by the General Assembly of claims submitted to it by
115 the Claims Commissioner under this section shall be conducted in
116 accordance with such procedures as the General Assembly may
117 prescribe.

118 Sec. 3. Section 4-154 of the general statutes is repealed and the
119 following is substituted in lieu thereof (*Effective October 1, 2005*):

120 [Within] (a) Not later than ninety days after hearing a claim, the
121 Claims Commissioner shall render a decision as provided in
122 subsection (a) of section 4-158, as amended by this act. The Claims
123 Commissioner shall make a finding of fact for each claim and file such
124 finding with the order, [or] recommendation or authorization
125 disposing of the claim. The clerk of the Office of the Claims
126 Commissioner shall deliver a copy of such finding and order, [or]
127 recommendation or authorization to the claimant and to the
128 representative for the state, which representative may in appropriate
129 cases be the Attorney General.

130 (b) If such claim will automatically be submitted to the General
131 Assembly by the Claims Commissioner pursuant to the provisions of
132 subdivision (1) of subsection (a) of section 4-159, as amended by this
133 act, the clerk shall give written notice to the claimant that such claim
134 will be so submitted and that the General Assembly may accept, [alter]
135 modify or reject the recommendation of the Claims Commissioner or
136 remand the claim to the Claims Commissioner.

137 (c) If the claimant has the right pursuant to subsection (b) of section

138 4-158, as amended by this act, to request the General Assembly to
139 review the decision of the Claims Commissioner, the clerk shall give
140 written notice to the claimant that the claimant may request the
141 General Assembly to review the decision and that the General
142 Assembly may confirm, modify or vacate the decision or remand the
143 claim to the Claims Commissioner. The notice shall indicate the date
144 by which such a request must be filed with the Office of the Claims
145 Commissioner.

146 Sec. 4. Section 4-160 of the general statutes is repealed and the
147 following is substituted in lieu thereof (*Effective October 1, 2005*):

148 (a) When the Claims Commissioner deems it just and equitable, [he]
149 the Claims Commissioner may authorize suit against the state on any
150 claim which, in [his] the opinion of the Claims Commissioner, presents
151 an issue of law or fact under which the state, were it a private person,
152 could be liable.

153 (b) In any claim alleging malpractice against the state, a state
154 hospital or a sanitorium or against a physician, surgeon, dentist,
155 podiatrist, chiropractor or other licensed health care provider
156 employed by the state, the attorney or party filing the claim may
157 submit a certificate of good faith to the Claims Commissioner in
158 accordance with section 52-190a. If such a certificate is submitted, the
159 Claims Commissioner shall authorize suit against the state on such
160 claim.

161 (c) In each action authorized by the Claims Commissioner pursuant
162 to subsection (a) or (b) of this section or by the General Assembly
163 pursuant to section 4-159, as amended by this act, or 4-159a, the
164 claimant shall allege such authorization and the date on which it was
165 granted, except that evidence of such authorization shall not be
166 admissible in such action as evidence of the state's liability. The state
167 waives its immunity from liability and from suit in each such action
168 and waives all defenses which might arise from the eleemosynary or
169 governmental nature of the activity complained of. The rights and
170 liability of the state in each such action shall be coextensive with and

171 shall equal the rights and liability of private persons in like
172 circumstances.

173 (d) No such action shall be brought but within one year from the
174 date such authorization to sue is granted. With respect to any claim
175 pending before the Claims Commissioner on October 1, 1992, or
176 presented to the Claims Commissioner on or after said date for which
177 authorization to sue is granted, any statute of limitation applicable to
178 such action shall be tolled until the date such authorization to sue is
179 granted. Action shall be brought against the state as party defendant in
180 the judicial district in which the claimant resides or, if the claimant is
181 not a resident of this state, in the judicial district of Hartford or in the
182 judicial district in which the claim arose.

183 (e) Civil process directed against the state shall be served as
184 provided by section 52-64.

185 (f) Issues arising in such actions shall be tried to the court without a
186 jury.

187 (g) The laws and rules of practice governing disclosures in civil
188 actions shall apply against state agencies and state officers and
189 employees possessing books, papers, records, documents or
190 information pertinent to the issues involved in any such action.

191 (h) The Attorney General, with the consent of the court, may
192 compromise or settle any such action. The terms of every such
193 compromise or settlement shall be expressed in a judgment of the
194 court.

195 (i) Costs may be allowed against the state as the court deems just,
196 consistent with the provisions of chapter 901.

197 (j) The clerk of the court in which judgment is entered against the
198 state shall forward a certified copy of such judgment to the
199 Comptroller. The Attorney General shall certify to the Comptroller
200 when the time allowed by law for proceeding subsequent to final
201 judgment has expired and [he] the Attorney General shall designate

202 the state agency involved in the action. Upon receipt of such judgment
203 and certification the Comptroller shall make payment as follows:
204 Amounts directed by law to be paid from a special fund shall be paid
205 from such special fund; amounts awarded upon contractual claims for
206 goods or services furnished or for property leased shall be paid from
207 the appropriation of the agency which received such goods or services
208 or occupied such property; all other amounts shall be paid from such
209 appropriation as the General Assembly may have made for the
210 payment of claims.

211 (k) [Within] Not later than five days after the convening of each
212 regular session, the Attorney General shall report to the joint standing
213 committee of the General Assembly on the judiciary on the status and
214 disposition of all actions authorized pursuant to this section or section
215 4-159, as amended by this act, or brought against the state under any
216 other provision of law and in which the interests of the state are
217 represented by the Attorney General. The report shall include: (1) The
218 number of such actions pending in state and federal court, categorized
219 by the alleged ground for the action, (2) the number of new actions
220 brought in the preceding year in state and federal court, categorized by
221 the alleged ground for the action, (3) the number of actions disposed of
222 in the preceding year, categorized by the ground for the action that
223 was disposed of and whether the action was disposed of by settlement
224 or litigation to final judgment, and the amount paid for actions within
225 the respective categories, and (4) such other information as may be
226 requested, from time to time, by the joint standing committee of the
227 General Assembly on the judiciary. The report shall identify each
228 action disposed of by payment of an amount exceeding one hundred
229 thousand dollars.

230 Sec. 5. (NEW) (*Effective October 1, 2005*) The Commissioner of
231 Correction shall establish a lost property board within the Department
232 of Correction to hear and determine any claim by an inmate of a
233 correctional facility who seeks compensation not exceeding three
234 thousand five hundred dollars for lost or damaged personal property.
235 The board shall hear and determine each such claim and may, if it

236 determines the claim is one which in equity and justice the state should
237 pay, award damages. If the board denies a claim in whole or in part,
238 the inmate may, not later than sixty days after such decision, present
239 the claim to the Claims Commissioner in accordance with section 4-147
240 of the general statutes. The filing of a claim with the lost property
241 board shall toll the time limit for presenting a claim to the Claims
242 Commissioner pursuant to section 4-148 of the general statutes. The
243 Commissioner of Correction shall adopt regulations, in accordance
244 with chapter 54 of the general statutes, to implement the provisions of
245 this section.

246 Sec. 6. Section 4a-20 of the general statutes is repealed and the
247 following is substituted in lieu thereof (*Effective October 1, 2005*):

248 The State Insurance and Risk Management Board shall determine
249 the method by which the state shall insure itself against losses by the
250 purchase of insurance governed by the provisions of title 38a to obtain
251 the broadest coverage at the most reasonable cost. It shall direct the
252 negotiations for purchase of such insurance and determine whether
253 deductible or other risk retention provisions should be included in the
254 insurance contract. Wherever appropriate it shall determine that the
255 state shall act as a self-insurer and may request funds from the
256 contingency fund to establish reserves and carry out such practices as
257 are necessary to safeguard the self-insurance activity. Said board may
258 develop and implement risk management and loss prevention
259 programs related to insurance plans established pursuant to the
260 provisions of sections 4a-19 to 4a-21, inclusive, as amended by this act,
261 and may recommend to the Governor and the General Assembly the
262 enactment of policies designed to reduce risks and hazards that may
263 result in state liability for tortious conduct. It shall designate the agent
264 or agents of record and shall select the companies from whom
265 insurance coverage and surety bonds shall be purchased.
266 Notwithstanding any other provision of the general statutes, including
267 without limitation sections 38a-707 and 38a-825, it shall have full
268 authority to negotiate either a commission or fee structure to
269 compensate the agent or agents of record for services performed. It

270 shall also have full authority to retain consulting firms and to negotiate
271 their fee compensation for services performed. Any refund, dividend
272 or other payment from any insurance company in connection with
273 insurance for the state shall be returned to the Comptroller for deposit
274 in the General Fund. The board shall establish specifications for each
275 contract of insurance and shall request bids for each such contract
276 through the agent of record. Each such contract shall be for a specified
277 period of time.

278 Sec. 7. Section 4a-21 of the general statutes is repealed and the
279 following is substituted in lieu thereof (*Effective October 1, 2005*):

280 [Said board] The State Insurance and Risk Management Board shall,
281 on or before September first, annually, make a report to the Governor
282 and, in accordance with the provisions of section 11-4a, to the joint
283 standing committee of the General Assembly on the judiciary of its
284 activities during the year ending the preceding June thirtieth. Such
285 report shall include (1) an evaluation of the state insurance program in
286 terms of adequacy and reasonableness of cost, (2) a complete statement
287 of the costs of said program enumerating lines of coverage, (3) an
288 evaluation of the effectiveness of each portion of the program
289 involving deductibles or partial self-insurance, (4) a statement of the
290 agent or agents of record, or consultants, if any, (5) an evaluation of the
291 agent or agents of record, or consultants, if any, (6) a breakdown of the
292 actual commissions or fees paid, (7) any recommendations adopted by
293 the board for the enactment of policies designed to reduce risks and
294 hazards that may result in state liability for tortious conduct, (8) the
295 status and disposition of claims administered through the state
296 insurance program, and [(7)] (9) such other matters as the board
297 determines to be appropriate and necessary. The portion of the report
298 concerning the status and disposition of claims shall include (A) the
299 number of claims pending under the state insurance program,
300 categorized by the alleged ground for the claim, (B) the number of new
301 claims brought under the state insurance program in the preceding
302 year, categorized by the alleged ground for the claim, (C) the number
303 of claims disposed of in the preceding year, categorized by the ground

304 for the claim that was disposed of and whether the claim was disposed
 305 of by settlement or litigation to final judgment, and the amount paid
 306 for claims within the respective categories, and (D) such other
 307 information within the cognizance of the board as may be requested,
 308 from time to time, by the joint standing committee of the General
 309 Assembly on the judiciary. The report shall identify each claim
 310 disposed of by payment of an amount exceeding one hundred
 311 thousand dollars. Each such report shall become a public record.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2005</i>	4-158
Sec. 2	<i>October 1, 2005</i>	4-159
Sec. 3	<i>October 1, 2005</i>	4-154
Sec. 4	<i>October 1, 2005</i>	4-160
Sec. 5	<i>October 1, 2005</i>	New section
Sec. 6	<i>October 1, 2005</i>	4a-20
Sec. 7	<i>October 1, 2005</i>	4a-21

JUD *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 06 \$	FY 07 \$
Attorney General; Correction, Dept.; Comptroller - Adjudicated Claims Account; Legislative Mgmt.; Claims Comr., Off.	GF - None	None	None
Ins. & Risk Mgmt. Bd.	GF - Cost	Minimal	None

Note: GF=General Fund

Municipal Impact: None

Explanation

Claims Commissioner/Legislative Management

The bill makes minor procedural and technical (clarifying) changes to the legislative review of decisions by the Claims Commissioner. These changes are not expected to substantially alter the workload of either state agency such that additional appropriations would be required; nor are these changes expected to increase or decrease the likelihood that any single claim would be awarded, or that the award amount would be more or less. Consequently, there is no anticipated fiscal impact to the Adjudicated Claims Account, which is used to pay for claims against the state.

Department of Correction

The bill requires the Department of Correction to establish a lost property board to hear and determine claims against the state by inmates for lost or damaged personal property. Passage of the bill would result in additional workload for the department but would not result in the need for additional resources.

Office of the Attorney General

The bill specifies what must be included in the annual report current law requires the Attorney General to submit to the General Assembly concerning the status and disposition of lawsuits authorized by the Claims Commissioner or the General Assembly after receiving the Claims Commissioner's recommendations. It also expands the reporting requirement to include actions brought against the state under any other provision of law and in which the interests of the state are represented by the Attorney General. This reporting requirement could be accommodated within anticipated budgetary resources.

State Insurance and Risk Management Board

There is no fiscal impact for the State Insurance and Risk Management Board to recommend policies designed to reduce risks and hazards. However, to fulfill the new reporting requirements the board will potentially require minimal funds in Other Expenses to cover the cost of having the state's vendor for claims administration re-program their computer systems to capture additional data. There is also a potential cost to the degree that any additional reporting requirements made by the Judiciary Committee would require the vendor for claims administration to do additional re-programming.

OLR Bill Analysis

sHB 6602

AN ACT CONCERNING CLAIMS AGAINST THE STATE**SUMMARY:**

By law, the claims commissioner must submit all claims for which he recommends a payment exceeding \$ 7,500 to the General Assembly for its approval. The bill authorizes the General Assembly to remand these claims to the claims commissioner for whatever additional proceedings it specifies.

Under current law, a claimant who filed a claim for more than \$ 7,500 who wishes to protest the commissioner's decision may waive immediate payment and have his claim submitted to the General Assembly. The bill requires that the request for review be in writing and filed with the Office of the Claims Commissioner within 20 instead of 10 days after the date the person requesting the review receives a copy of the decision. The notice must indicate the deadline for filing the request with the commissioner. Under the bill, the filing of a request for review automatically stays the claims commissioner's decision.

The bill requires that the notice the commissioner gives claimants of their right to a legislative review of his decision be in writing.

It requires the legislature to review claims submitted by the claims commissioner in accordance with procedures it establishes.

The bill specifies what must be included in the annual report the attorney general (AG) must, by law, submit on the status and disposition of lawsuits that either the claims commissioner or legislature authorized. It expands the requirement to include other lawsuits filed against the state in which the AG represents the state. It requires that the AG submit the report to the Judiciary Committee instead of the legislature.

The bill requires the Department of Correction commissioner to

establish a lost property board to hear and determine any claim against the state by a correctional facility inmate who seeks up to \$ 3,500 for lost or damaged personal property.

It authorizes the State Insurance Risk Management Board to recommend to the governor and legislature policies designed to reduce risks and hazards that may result in state liability for tortious conduct. It requires that the board's annual report to the governor also be made to the Judiciary Committee, and requires that certain additional information be included.

EFFECTIVE DATE: October 1, 2005

LEGISLATIVE ACTIONS

Under current law, the legislature may (1) accept or alter any recommendation by the claims commissioner or (2) reject a recommendation and grant or deny the claimant permission to sue the state. The bill makes the legislature's authority more explicit and detailed for each of the three possible types of recommendations the commissioner can make (1) a denial; (2) an order of a payment for \$7,500 or less; or (3) a recommendation for a payment of more than \$7,500.

Denial of Claim by Commissioner

When the commissioner denies a claim, the bill authorizes the General Assembly to (1) confirm the decision, or (2) vacate it and order the payment of the claim in a specified amount or authorize the claimant to sue the state.

Commissioner Order to Pay Claim of \$7,500 or Less

When the commissioner orders payment of a claim for \$ 7,500 or less, the bill authorizes the legislature to (1) confirm the decision, (2) modify it by ordering that a different amount be paid, or (3) vacate the decision and either order no payment or authorize the claimant to sue the state.

Commissioner Recommendation to Pay a Claim of More Than \$7,500

When the commissioner recommends paying a claim for over \$7,500, the bill authorizes the legislature to:

1. accept the recommendation and order payment of the specified amount,
2. modify the recommendation by ordering that a different amount be paid,
3. reject the recommendation and order that no payment be made or authorize the claimant to sue the state, or
4. remand the claim to the claims commissioner for whatever proceedings the legislature directs.

LEGISLATIVE ORDERS TO PAY A CLAIM

The bill requires that, when the legislature orders payment of a claim, the clerk of the Claims Commissioner's Office deliver to the comptroller a notice of the order. The comptroller must make payment from legislative appropriations for the payment of claims or, in the case of contractual claims for goods or services furnished or for property leased, from the appropriation of the agency that received the goods or services or occupied the property.

ATTORNEY GENERAL ANNUAL REPORT

The bill requires the attorney general's annual report to the Judiciary Committee to include:

1. the number of lawsuits against the state pending in state and federal court, categorized by the alleged grounds;
2. the number of new lawsuits filed in the preceding year in state and federal court, categorized by the alleged grounds;
3. the number of lawsuits disposed of in the preceding year, categorized by their grounds and whether they were disposed of by settlement or litigation to final judgment, and the amount paid for lawsuits within each category; and
4. other information the committee requests.

The report must identify each lawsuit disposed of by paying more than \$ 100,000.

LOST PROPERTY BOARD

The bill creates a lost property board to hear and decide inmate claims for up to \$3,500. It may award damages if it determines a claim is one that, in the interest of equity and justice, the state should pay. If the board denies a claim, in whole or in part, the inmate may, within 60 days after the decision, present the claim to the claims commissioner. The bill requires the correction commissioner to adopt regulations to implement this requirement. (It does not explicitly establish a statute of limitations for filing a claim with the board.)

Filing a claim with the board tolls the time limit for presenting one to the claims commissioner. By law, claims must be filed with the claims commissioner within one year from the date when the damage is sustained or discovered, or by exercising reasonable care, should have been discovered, and within three years from the date of the act or event complained of.

STATE INSURANCE AND RISK MANAGEMENT BOARD

The bill requires the State Insurance and Risk Management Board's annual report to include (1) any recommendations it adopts for enacting policies designed to reduce risks and hazards that may result in state liability for tortious conduct and (2) the status and disposition of claims administered through the state insurance program.

It also requires that the portion of the report on the status and disposition of claims include:

1. the number of claims pending under the state insurance program, categorized by the alleged grounds;
2. the number of new claims brought under the program in the preceding year, categorized by their alleged grounds;
3. the number of claims disposed of in the preceding year, categorized by their grounds and whether they were disposed of by settlement or litigation to final judgment, and the amount

paid for claims within each category; and

4. other information within the board's cognizance that the Judiciary Committee may request. The report must identify each claim disposed of by paying more than \$ 100,000.

BACKGROUND

Claims Commissioner Law

The law requires those who wish to sue the state to go to the claims commissioner unless their case falls within an exception established by law. They must file their claim within one year after it accrues. A claim accrues on the date the damage or injury is sustained or discovered or in the exercise of reasonable care should have been discovered. But no claim may be presented more than three years after the date of the act or event complained of (CGS § 4-148).

The law excepts:

1. claims for the periodic payment of disability, pensions, retirement, or other employment benefits;
2. claims for tax refunds;
3. claims for which an administrative hearing procedure is established by law;
4. requests by political subdivisions for the payments of grants in lieu of taxes; and
5. claims that the law allows to go directly to court (CGS § 4-142).

The following laws allow classes of people to sue the state directly without first going to the claims commissioner:

1. CGS § 4-61 authorizes those who have entered into a highway or public works contract with the state to bring disputed claims directly to court;
2. CGS § 4-197 authorizes those aggrieved by a violation of the law protecting the privacy of personal data about state

employees to sue for damages;

3. CGS § 13a-144, authorizes those injured by a defective road or bridge to sue the commissioner of transportation for damages, if the defect is the sole proximate cause;
4. CGS § 17a-550 allows a person injured by a violation of the patient's bill of rights for mentally ill people to sue the state or its commissioners for damages (*Mahoney v. Lesnick*, 2123 Conn. 548 (1990));
5. CGS § 52-556, allows anyone injured because of the negligence of any state official or employee when operating state-owned and -insured motor vehicles to sue the state for damages; and
6. CGS § 19a-24, allows people to sue the public health and mental retardation commissioners, their staffs, and certain other related entities for official acts or omissions if the damage claims exceed \$7,500.

State Insurance and Risk Management Board

The State Insurance and Risk Management Board determines the method by which the state insures itself against losses by the purchase of insurance to obtain the broadest coverage at the most reasonable cost. It must direct the negotiations to purchase such insurance and determine whether deductible or other risk retention provisions should be included in the insurance contract. Where appropriate, it must determine that the state self-insure and may request funds to establish reserves and carry out practices necessary to safeguard the self-insurance activity. It may develop and implement risk management and loss prevention programs related to insurance plans.

COMMITTEE ACTION

Judiciary Committee

Joint Favorable Substitute

Yea 37 Nay 3