



House of Representatives

General Assembly

File No. 394

February Session, 2006

Substitute House Bill No. 5478

House of Representatives, April 5, 2006

The Committee on Public Health reported through REP. SAYERS of the 60th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING THE DEPARTMENT OF MENTAL RETARDATION.

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

1 Section 1. (*Effective from passage*) The Commissioner of Mental
2 Retardation shall, within available appropriations, solicit input from
3 clients and families receiving services provided by the department,
4 advocates of persons with mental retardation and other interested
5 parties, regarding a name change for the Department of Mental
6 Retardation and shall submit a report of the commissioner's findings
7 and recommendations, including the cost of any recommended name
8 change, to the Governor, the Office of Policy and Management and the
9 joint standing committee of the General Assembly having cognizance
10 of matters relating to public health, not later than January 1, 2007, in
11 accordance with the provisions of section 11-4a of the general statutes.

12 Sec. 2. (NEW) (*Effective October 1, 2006*) The absence of a diagnosis
13 of, or reference to, mental retardation, intellectual disability or
14 developmental disability within an individual's school records or

15 medical records shall not preclude the Department of Mental
16 Retardation from making a finding of mental retardation, as defined in
17 section 1-1g of the 2006 supplement to the general statutes.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section
Sec. 2	<i>October 1, 2006</i>	New section

PH *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: None

Municipal Impact: None

Explanation

The bill requires the Department of Mental Retardation to solicit input regarding a department name change and submit a report including their findings and recommendations no later than January 1, 2007 which will result in no fiscal impact. In addition, the bill's provision regarding the department's eligibility determination will not result in a fiscal impact.

The Out Years

There is no fiscal impact in the out years.

OLR Bill Analysis**sHB 5478*****AN ACT CONCERNING THE DEPARTMENT OF MENTAL RETARDATION.*****SUMMARY:**

This bill specifies that the Department of Mental Retardation (DMR) is not precluded from determining that a person has mental retardation just because his school or medical records do not contain a diagnosis of, or reference to, mental retardation or intellectual or developmental disability.

The bill also requires the DMR commissioner to gather information from DMR clients, their families, and other interested parties about changing the department's name. He must do this within available appropriations and report his findings and recommendations to the governor, Office of Policy and Management, and the Public Health Committee by January 1, 2007. The findings must include an estimate of the costs of changing the name.

EFFECTIVE DATE: Upon passage for the name change study; October 1, 2006 for the mental retardation diagnosis provision.

BACKGROUND***Mental Retardation Definition***

By law, mental retardation is "significantly subaverage general intellectual functioning existing concurrently with deficits in adaptive behavior and manifested during the developmental period." "Significantly subaverage general intellectual functioning" means a person scores more than two standard deviations below the mean (69 or lower) on a standardized intelligence quotient test. "Adaptive behavior" means how well a person meets the standards of personal

independence and social responsibility expected of someone of his age and cultural group (that is, the person needs much more assistance in adaptive behavior tests than others his age). Mental retardation must first manifest before a person turns age 18 (CGS § 1-1g).

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 23 Nay 0 (03/17/2006)