



General Assembly

February Session, 2006

Raised Bill No. 317

LCO No. 1998

01998 _____ PH_

Referred to Committee on Public Health

Introduced by:
(PH)

AN ACT CONCERNING REVISIONS TO DEPARTMENT OF PUBLIC HEALTH STATUTES.

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

1 Section 1. Subsection (a) of section 7-73 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective*
3 *October 1, 2006*):

4 (a) To any person performing the duties required by the provisions
5 of the general statutes relating to registration of [births,] marriages,
6 deaths and fetal deaths, the following fees shall be allowed: (1) [To the
7 registrar for completing each record of birth by procuring and
8 inserting the full name of the child, or for the recording, indexing,
9 copying and endorsing of each birth, marriage, death or fetal death
10 certificate, two dollars; (2) for] For the license to marry, ten dollars; and
11 [(3)] (2) for issuing each burial or burial transit removal permit, three
12 dollars.

13 Sec. 2. Subsection (c) of section 19a-14 of the 2006 supplement to the
14 general statutes is repealed and the following is substituted in lieu
15 thereof (*Effective October 1, 2006*):

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

18 (1) Speech and language pathologist and audiologist;

19 (2) Hearing instrument specialist;

20 (3) Nursing home administrator;

21 (4) Sanitarian;

22 (5) Subsurface sewage system installer or cleaner;

23 (6) Marital and family therapist;

24 (7) Nurse-midwife;

25 (8) Licensed clinical social worker;

26 (9) Respiratory care practitioner;

27 (10) Asbestos contractor and asbestos consultant;

28 (11) Massage therapist;

29 (12) Registered nurse's aide;

30 (13) Radiographer;

31 (14) Dental hygienist;

32 (15) Dietitian-Nutritionist;

33 (16) Asbestos abatement worker;

34 (17) Asbestos abatement site supervisor;

35 (18) Licensed or certified alcohol and drug counselor;

36 (19) Professional counselor;

- 37 (20) Acupuncturist;
- 38 (21) Occupational therapist and occupational therapist assistant;
- 39 (22) Lead abatement contractor, lead consultant contractor, lead
40 consultant, lead abatement supervisor, lead abatement worker,
41 inspector and planner-project designer;
- 42 (23) Emergency medical technician, emergency medical technician-
43 intermediate, medical response technician and emergency medical
44 services instructor;
- 45 (24) Paramedic; and
- 46 [(25) Dialysis patient care technician; and]
- 47 [(26)] (25) Perfusionist.

48 The department shall assume all powers and duties normally vested
49 with a board in administering regulatory jurisdiction over such
50 professions. The uniform provisions of this chapter and chapters 368v,
51 369 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399, 400a
52 and 400c, including, but not limited to, standards for entry and
53 renewal; grounds for professional discipline; receiving and processing
54 complaints; and disciplinary sanctions, shall apply, except as otherwise
55 provided by law, to the professions listed in this subsection.

56 Sec. 3. Subsection (c) of section 19a-14 of the 2006 supplement to the
57 general statutes, as amended by section 8 of public act 00-226, is
58 repealed and the following is substituted in lieu thereof (*Effective on*
59 *and after the later of October 1, 2000, or the date notice is published by the*
60 *Commissioner of Public Health in the Connecticut Law Journal indicating*
61 *that the licensing of athletic trainers and physical therapist assistants is being*
62 *implemented by the commissioner*):

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

- 65 (1) Speech and language pathologist and audiologist;
- 66 (2) Hearing instrument specialist;
- 67 (3) Nursing home administrator;
- 68 (4) Sanitarian;
- 69 (5) Subsurface sewage system installer or cleaner;
- 70 (6) Marital and family therapist;
- 71 (7) Nurse-midwife;
- 72 (8) Licensed clinical social worker;
- 73 (9) Respiratory care practitioner;
- 74 (10) Asbestos contractor and asbestos consultant;
- 75 (11) Massage therapist;
- 76 (12) Registered nurse's aide;
- 77 (13) Radiographer;
- 78 (14) Dental hygienist;
- 79 (15) Dietitian-Nutritionist;
- 80 (16) Asbestos abatement worker;
- 81 (17) Asbestos abatement site supervisor;
- 82 (18) Licensed or certified alcohol and drug counselor;
- 83 (19) Professional counselor;
- 84 (20) Acupuncturist;
- 85 (21) Occupational therapist and occupational therapist assistant;

86 (22) Lead abatement contractor, lead consultant contractor, lead
87 consultant, lead abatement supervisor, lead abatement worker,
88 inspector and planner-project designer;

89 (23) Emergency medical technician, emergency medical technician-
90 intermediate, medical response technician and emergency medical
91 services instructor;

92 (24) Paramedic;

93 (25) Athletic trainer; and

94 [(26) Dialysis patient care technician; and]

95 [(27)] (26) Perfusionist.

96 The department shall assume all powers and duties normally vested
97 with a board in administering regulatory jurisdiction over such
98 professions. The uniform provisions of this chapter and chapters 368v,
99 369 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399, 400a
100 and 400c, including, but not limited to, standards for entry and
101 renewal; grounds for professional discipline; receiving and processing
102 complaints; and disciplinary sanctions, shall apply, except as otherwise
103 provided by law, to the professions listed in this subsection.

104 Sec. 4. Section 19a-88b of the 2006 supplement to the general statutes
105 is repealed and the following is substituted in lieu thereof (*Effective*
106 *October 1, 2006*):

107 (a) (1) Notwithstanding section 19a-14, as amended by this act, or
108 any other provision of the general statutes relating to continuing
109 education or refresher training, the Department of Public Health shall
110 renew a license, certificate, permit or registration issued to an
111 individual pursuant to chapters 368d, 368v, 371 to 378, inclusive, 379a
112 to 388, inclusive, 393a, 395, 398, 399, 400a and 400c that becomes void
113 pursuant to section 19a-88, as amended, or 19a-195b while the holder
114 of the license, certificate, permit or registration is on active duty in the

115 armed forces of the United States, not later than six months from the
116 date of discharge from active duty, upon completion of any continuing
117 education or refresher training required to renew a license, certificate,
118 registration or permit that has not become void pursuant to section
119 19a-88, as amended, or 19a-195b. A licensee applying for license
120 renewal pursuant to this section shall submit an application on a form
121 prescribed by the department and other such documentation as may
122 be required by the department.

123 (2) Notwithstanding section 19a-14, as amended by this act, or any
124 other provisions of the general statutes relating to continuing
125 education, the Department of Public Health shall renew a license
126 issued to an individual pursuant to chapter 370 that becomes void
127 pursuant to section 19a-88, as amended, while the holder of the license
128 is on active duty in the armed forces of the United States, not later than
129 one year from the date of discharge from active duty, upon completion
130 of twenty-five contact hours of continuing education that meet the
131 criteria set forth in subsection (b) of section 20-10b. A licensee applying
132 for license renewal pursuant to this subdivision shall submit an
133 application on a form prescribed by the department and other such
134 documentation as may be required by the department.

135 (3) Notwithstanding section 19a-14, as amended by this act, or any
136 other provision of the general statutes relating to continuing
137 education, the Department of Public Health shall renew a license
138 issued to an individual pursuant to chapter 379 that becomes void
139 pursuant to section 19a-88, as amended, while the holder of the license
140 is on active duty in the armed forces of the United States, not later than
141 one year from the date of discharge from active duty, upon completion
142 of twelve contact hours of continuing education that meet the criteria
143 set forth in subsection (b) of section 20-126c. A licensee applying for
144 license renewal pursuant to this subdivision shall submit an
145 application on a form prescribed by the department and other such
146 documentation as may be required by the department.

147 (4) Notwithstanding section 19a-14, as amended by this act, or any
148 other provision of the general statutes relating to continuing
149 education, the Department of Public Health shall renew a license
150 issued to an individual pursuant to chapter 381a that becomes void
151 pursuant to section 19a-88 of the 2006 supplement to the general
152 statutes while the holder of the license is on active duty in the armed
153 forces of the United States, not later than one year from the date of
154 discharge from active duty, upon completion of six contact hours of
155 continuing education that meet the criteria set forth in section 13 of this
156 act. A licensee applying for license renewal pursuant to this
157 subdivision shall submit an application on a form prescribed by the
158 department and other such documentation as may be required by the
159 department.

160 (b) The provisions of this section do not apply to reservists or
161 National Guard members on active duty for annual training that is a
162 regularly scheduled obligation for reservists or members of the
163 National Guard for training that is not a part of mobilization.

164 (c) No license shall be issued under this section to any applicant
165 against whom professional disciplinary action is pending or who is the
166 subject of an unresolved complaint.

167 Sec. 5. Subsection (b) of section 19a-124 of the general statutes is
168 repealed and the following is substituted in lieu thereof (*Effective from*
169 *passage*):

170 (b) The programs shall: (1) Be incorporated into existing acquired
171 immunodeficiency syndrome prevention and outreach projects in the
172 selected cities; (2) provide for free and anonymous exchanges of
173 needles and syringes and (A) provide that program participants
174 receive an equal number of needles and syringes for those returned,
175 [up to a cap of thirty needles and syringes per exchange,] (B) provide
176 that first-time applicants to the program receive an initial packet of
177 thirty needles and syringes, educational material and a list of drug
178 counseling services; and (C) assure, through program-developed and

179 commissioner-approved protocols, that a person receive only one such
180 initial packet over the life of the program; (3) offer education on the
181 transmission of the human immunodeficiency virus and prevention
182 measures and assist program participants in obtaining drug treatment
183 services; and (4) for the first year of operation of the program, require
184 all needles and syringes to be marked and checked for return rates.

185 Sec. 6. Section 19a-266 of the general statutes is repealed and the
186 following is substituted in lieu thereof (*Effective October 1, 2006*):

187 (a) For purposes of this section:

188 (1) "Breast cancer treatment services" means a procedure intended to
189 treat cancer of the human breast, including, but not limited to, surgery,
190 radiation therapy, chemotherapy, hormonal therapy and related
191 medical follow-up services.

192 (2) "Cervical cancer treatment services" means a procedure intended
193 to treat cancer of the human cervix, including, but not limited to,
194 surgery, radiation therapy, cryotherapy, electrocoagulation and related
195 medical follow-up services.

196 (3) "Unserved or underserved populations" means women who are:
197 (A) At or below two hundred per cent of the federal poverty level for
198 individuals; (B) without health insurance that covers breast cancer
199 screening mammography or cervical cancer screening services; and (C)
200 nineteen to sixty-four years of age.

201 (b) There is established, within existing appropriations, a breast and
202 cervical cancer early detection and treatment referral program, within
203 the Department of Public Health, to promote screening detection and
204 treatment of breast cancer and cervical cancer among unserved or
205 underserved populations, to educate the public regarding breast
206 cancer and cervical cancer and the benefits of early detection and to
207 provide counseling and referral services for treatment.

208 (c) The program shall include, but not be limited to:

209 (1) Establishment of a public education and outreach initiative to
210 publicize breast cancer and cervical cancer early detection services and
211 the extent of coverage for such services by health insurance, the
212 medical assistance program and other public and private programs
213 and the benefits of early detection of cervical cancer and the
214 recommended frequency of pap tests;

215 (2) Development of professional education programs, including the
216 benefits of early detection of breast cancer and the recommended
217 frequency of mammography and the benefits of early detection of
218 cervical cancer and the recommended frequency of pap tests;

219 (3) Establishment of a system for the purpose of tracking and
220 follow-up of all women screened for breast cancer and cervical cancer
221 in the program. The system shall include, but not be limited to, follow-
222 up of abnormal screening tests and referral to treatment when needed
223 and tracking women to be screened at recommended screening
224 intervals;

225 (4) Insurance that all participating providers of breast cancer and
226 cervical cancer screening are in compliance with national and state
227 quality assurance legislative mandates.

228 (d) The Department of Public Health shall provide unserved or
229 underserved populations, within existing appropriations and through
230 contracts with health care providers: (1) One mammogram every year
231 for populations age forty-five to sixty-four; (2) one mammogram every
232 year for populations age thirty-five to forty-four with a first degree
233 female relative who has had breast cancer or with other risk factors of
234 equal weight; (3) one pap test for cervical cancer per year for
235 populations age nineteen to sixty-four who have had a positive
236 finding, otherwise one every three years or more frequently as directed
237 by a physician; (4) a sixty-day follow-up pap test for victims of sexual
238 assault; and (5) a pap test every six months for women who have
239 tested HIV positive.

240 [(e) The Department of Public Health may apply for and receive
241 money from public and private sources and from the federal
242 government for the purposes of a program for breast cancer and
243 cervical cancer early detection and treatment referral. Any payment to
244 the state as a settlement of a court action of which the proceeds may be
245 used for women's health shall be deposited in an account designated
246 for use by the Department of Public Health for breast and cervical
247 cancer treatment services.]

248 [(f)] (e) The Commissioner of Public Health shall report annually to
249 the joint standing committees of the General Assembly having
250 cognizance of matters relating to public health and appropriations. The
251 report shall include, but not be limited to, a description of the rate of
252 breast cancer and cervical cancer morbidity and mortality in this state
253 and the extent of participation in breast cancer and cervical cancer
254 screening.

255 [(g)] (f) The organizations providing the testing and treatment
256 services shall report to the Department of Public Health the names of
257 the insurer of each underinsured woman being tested to facilitate
258 recoupment.

259 Sec. 7. (NEW) (*Effective July 1, 2006*) The Department of Public
260 Health may apply for and receive money from public and private
261 sources and from the federal government for the purpose of funding,
262 in whole or in part, a comprehensive cancer program. Any payment to
263 the state as a settlement of a court action of which the proceeds may be
264 used for health shall be deposited in an account designated for use by
265 the Department of Public Health for comprehensive cancer initiatives.

266 Sec. 8. Section 19a-269a of the 2006 supplement to the general
267 statutes is repealed and the following is substituted in lieu thereof
268 (*Effective October 1, 2006*):

269 Any certified dialysis patient care technician employed in an
270 outpatient dialysis unit may administer saline, heparin or lidocaine as

271 necessary to initiate or terminate a patient's dialysis, provided (1) the
272 ratio of on-duty staff providing direct patient care to dialysis patients
273 is at least three to nine, and (2) at least one of the three on-duty direct
274 patient care staff persons is a registered nurse licensed to practice in
275 this state. For purposes of this section, "certified dialysis patient care
276 technician" means a person who has obtained certification as a dialysis
277 patient care technician by an organization approved by the
278 Department of Public Health.

279 Sec. 9. Section 19a-422 of the general statutes is repealed and the
280 following is substituted in lieu thereof (*Effective October 1, 2006*):

281 To be eligible for the issuance or renewal of a youth camp license
282 pursuant to this chapter, the camp shall satisfy the following
283 requirements: (1) The location of the camp shall be such as to provide
284 adequate surface drainage and afford facilities for obtaining a good
285 water supply; (2) each dwelling unit, building and structure shall be
286 maintained in good condition, suitable for the use to which it is put,
287 and shall present no health or fire hazard as so certified [, within
288 ninety days of such application,] by the department [or] and the State
289 Fire Marshal [, as the case may be] or local fire marshal, as indicated by
290 a current fire marshal certificate dated within the past year and
291 available on site when the youth camp is in operation; (3) there shall be
292 an adequate and competent staff, which includes the camp director or
293 assistant director, one of whom shall be on site at all times the camp is
294 in operation, activities specialists, counselors and maintenance
295 personnel, of good character and reputation; (4) prior to assuming
296 responsibility for campers, staff shall be trained, at a minimum, on the
297 camp's policies and procedures pertaining to behavioral management
298 and supervision, emergency health and safety procedures and
299 recognizing, preventing and reporting child abuse and neglect; (5) all
300 hazardous activities, including, but not limited to, archery, aquatics,
301 horseback riding and firearms instruction, shall be supervised by a
302 qualified activities specialist who has adequate experience and training
303 in such specialist's area of specialty; [(5)] (6) the staff of a resident and

304 nonresident camp shall at all times include an adult trained in the
305 administration of first aid as required by the commissioner; ~~[(6)]~~ (7)
306 records of personal data for each camper shall be kept in any
307 reasonable form the camp director may choose, and shall include (A)
308 the camper's name, age and address, (B) the name, address and
309 telephone number of the parents or guardian, (C) the dates of
310 admission and discharge, and (D) such other information as the
311 commissioner shall require. Any youth camp licensed under this
312 chapter shall operate only as the type of camp authorized by such
313 license. Such camps shall not advertise any service they are not
314 equipped or licensed to offer. The license shall be posted in a
315 conspicuous place at camp headquarters and failure to so post the
316 license shall result in the presumption that the camp is being operated
317 in violation of this chapter.

318 Sec. 10. Section 19a-423 of the general statutes is repealed and the
319 following is substituted in lieu thereof (*Effective October 1, 2006*):

320 [(a) Upon the denial of an application for an original youth camp
321 license under this chapter, the commissioner shall notify the applicant
322 in writing of such denial, by mailing a notice to the applicant at the
323 applicant's address shown on the application.]

324 [(b)] (a) The commissioner may [suspend, revoke or refuse to renew
325 the license of any youth camp regulated and licensed under this
326 chapter] take any of the actions authorized under subsection (b) of this
327 section if the youth camp licensee: (1) Is convicted of any offense
328 involving moral turpitude, the record of conviction being conclusive
329 evidence thereof; (2) is legally adjudicated insane or mentally
330 incompetent, the record of such adjudication being conclusive
331 evidence thereof; (3) uses any narcotic or any controlled drug, as
332 defined in section 21a-240, to an extent or in a manner that such use
333 impairs the licensee's ability to properly care for children; (4)
334 consistently fails to maintain standards prescribed and published by
335 the department; (5) furnishes or makes any misleading or any false

336 statement or report to the department; (6) refuses to submit to the
337 department any reports or refuses to make available to the department
338 any records required by it in investigating the facility for licensing
339 purposes; (7) fails or refuses to submit to an investigation or inspection
340 by the department or to admit authorized representatives of the
341 department at any reasonable time for the purpose of investigation,
342 inspection or licensing; (8) fails to provide, maintain, equip and keep in
343 safe and sanitary condition premises established for or used by the
344 campers pursuant to minimum standards prescribed by the
345 department or by ordinances or regulations applicable to the location
346 of such facility; or (9) wilfully or deliberately violates any of the
347 provisions of this chapter.

348 (b) The Commissioner of Public Health, after a contested case
349 hearing held in accordance with the provisions of chapter 54, may take
350 any of the following actions, singly or in combination, in any case in
351 which the commissioner finds that there has been a substantial failure
352 to comply with the requirements established under sections 19a-420 to
353 19a-428, inclusive, the Public Health Code or regulations adopted
354 pursuant to section 19a-428: (1) Revoke a license; (2) suspend a license;
355 (3) impose a civil penalty; (4) place a licensee on probationary status
356 and require such licensee to report regularly to the department on the
357 matters that are the basis of the probation; or (5) restrict the acquisition
358 of other facilities for a period of time set by the commissioner.

359 (c) The commissioner shall notify the licensee, in writing, of the
360 commissioner's intention to suspend or revoke the license or to impose
361 a licensure action. The licensee may, if aggrieved by such intended
362 action, make application for a hearing, in writing, over the licensee's
363 signature to the commissioner. The licensee shall state in the
364 application in plain language the reasons why the licensee claims to be
365 aggrieved. The application shall be delivered to the commissioner not
366 later than thirty days after the licensee's receipt of notification of the
367 intended action.

368 (d) The commissioner shall hold a hearing not later than sixty days
369 after receipt of such application and shall, at least ten days prior to the
370 date of such hearing, mail a notice, giving the time and place of the
371 hearing, to the licensee. The hearing may be conducted by the
372 commissioner or by a hearing officer appointed by the commissioner,
373 in writing. The licensee and the commissioner or hearing officer may
374 issue subpoenas requiring the attendance of witnesses. The licensee
375 shall be entitled to be represented by counsel and a transcript of the
376 hearing shall be made. If the hearing is conducted by a hearing officer,
377 the hearing officer shall state the hearing officer's findings and make a
378 recommendation to the commissioner on the issue of revocation or
379 suspension or the intended licensure action.

380 (e) The commissioner, based upon the findings and
381 recommendation of the hearing officer, or after a hearing conducted by
382 the commissioner, shall render the commissioner's decision, in writing,
383 suspending, revoking or continuing the license or regarding the
384 intended licensure action. A copy of the decision shall be sent by
385 certified mail to the licensee. The decision revoking or suspending the
386 license or a decision imposing a licensure action shall become effective
387 thirty days after it is mailed by registered or certified mail to the
388 licensee. A licensee aggrieved by the decision of the commissioner may
389 appeal as provided in section 19a-85.

390 (f) The provisions of subsections (c) to (e), inclusive, of this section
391 shall not apply to the denial of an initial application for a license under
392 section 19a-421, provided the commissioner notifies the applicant of
393 any such denial and the reasons for such denial by mailing written
394 notice to the applicant at the applicant's address shown on the license
395 application.

396 Sec. 11. (NEW) (*Effective October 1, 2006*) Any person having
397 reasonable cause to believe that a youth camp, as defined in section
398 19a-420 of the general statutes, is operating without a current and valid
399 license or in violation of regulations adopted under section 19a-428 of

400 the general statutes or in a manner which may pose a potential danger
401 to the health, welfare and safety of a child receiving youth camp
402 services, may report such information to the Department of Public
403 Health. The department shall investigate any report or complaint
404 received pursuant to this subsection. The name of the person making
405 the report or complaint shall not be disclosed unless (1) such person
406 consents to such disclosure, (2) a judicial or administrative proceeding
407 results therefrom, or (3) a license action pursuant to section 19a-423 of
408 the general statutes, as amended by this act, results from such report or
409 complaint. All records obtained by the department in connection with
410 any such investigation shall not be subject to the provisions of section
411 1-210 of the 2006 supplement to the general statutes, for a period of
412 thirty days from the date of the petition or other event initiating such
413 investigation, or until such time as the investigation is terminated
414 pursuant to a withdrawal or other informal disposition or until a
415 hearing is convened pursuant to chapter 54 of the general statutes,
416 whichever is earlier. A formal statement of charges issued by the
417 department shall be subject to the provisions of section 1-210 of the
418 2006 supplement to the general statutes, from the time that it is served
419 or mailed to the respondent. Records which are otherwise public
420 records shall not be deemed confidential merely because they have
421 been obtained in connection with an investigation under this section.

422 Sec. 12. Section 20-162p of the general statutes is repealed and the
423 following is substituted in lieu thereof (*Effective October 1, 2006*):

424 The commissioner may take any action set forth in section 19a-17 if
425 the license holder fails to conform to the accepted standards of the
426 respiratory care profession, including, but not limited to, the following:
427 Conviction of a felony, fraud or deceit in the practice of respiratory
428 care; illegal conduct; negligent, incompetent or wrongful conduct in
429 professional activities; emotional disorder or mental illness; physical
430 illness, including, but not limited to, deterioration through the aging
431 process; abuse or excessive use of drugs, including alcohol, narcotics or
432 chemicals; wilful falsification of entries in any hospital, patient or other

433 record pertaining to respiratory care; misrepresentation or
434 concealment of a material fact in the obtaining or reinstatement of a
435 respiratory care practitioner license; failure to comply with the
436 continuing education requirements set forth in section 13 of this act; or
437 violation of any provisions of sections 20-162n to 20-162q, inclusive, as
438 amended, or any regulation adopted pursuant to said section 20-162o.
439 The Commissioner of Public Health may order a license holder to
440 submit to a reasonable physical or mental examination if his physical
441 or mental capacity to practice safely is the subject of an investigation.
442 Said commissioner may petition the superior court for the judicial
443 district of Hartford to enforce such order or any action taken pursuant
444 to section 19a-17. Notice of any contemplated action under said
445 section, of the cause therefor and the date of hearing thereon shall be
446 given and an opportunity for hearing afforded as provided in
447 regulations adopted by the commissioner.

448 Sec. 13. (NEW) (*Effective October 1, 2006*) (a) As used in this section:

449 (1) "Commissioner" means the Commissioner of Public Health;

450 (2) "Contact hour" means a minimum of fifty minutes of continuing
451 education activity;

452 (3) "Department" means the Department of Public Health;

453 (4) "Licensee" means any person who receives a license from the
454 department pursuant to chapter 381a of the general statutes; and

455 (5) "Registration period" means the one-year period for which a
456 license renewed in accordance with section 19a-88 of the 2006
457 supplement to the general statutes, and is current and valid.

458 (b) Except as otherwise provided in this section, for registration
459 periods beginning on and after October 1, 2007, a licensee applying for
460 license renewal shall either maintain credentialing as a respiratory
461 therapist, issued by the National Board for Respiratory Care, or its
462 successor organization, or earn a minimum of six hours of continuing

463 education within the preceding registration period. Such continuing
464 education shall (1) be directly related to respiratory therapy; and (2)
465 reflect the professional needs of the licensee in order to meet the health
466 care needs of the public. Qualifying continuing education activities
467 include, but are not limited to, courses, including on-line courses,
468 offered or approved by the American Association for Respiratory Care,
469 regionally accredited institutions of higher education, or a state or local
470 health department.

471 (c) Each licensee applying for license renewal pursuant to section
472 19a-88 of the 2006 supplement to the general statutes shall sign a
473 statement attesting that he or she has maintained credentialing as a
474 respiratory therapist, issued by the National Board for Respiratory
475 Care, or has satisfied the continuing education requirements of
476 subsection (b) of this section on a form prescribed by the department.
477 Each licensee shall retain credentialing records, or records of
478 attendance or certificates of completion that demonstrate compliance
479 with the continuing education requirements of said subsection (b) for a
480 minimum of five years following the year in which the licensee was
481 recredentialled or in which the continuing education activities were
482 completed and shall submit such records to the department for
483 inspection not later than forty-five days after a request by the
484 department for such records.

485 (d) A licensee applying for the first time for license renewal
486 pursuant to section 19a-88 of the 2006 supplement to the general
487 statutes is exempt from the continuing education requirements of this
488 section.

489 (e) In individual cases involving medical disability or illness, the
490 commissioner may, in the commissioner's discretion, grant a waiver of
491 the continuing education requirements or an extension of time within
492 which to fulfill the continuing education requirements of this section to
493 any licensee, provided the licensee submits to the department an
494 application for waiver or extension of time on a form prescribed by the

495 department, along with a certification by a licensed physician of the
496 disability or illness and such other documentation as may be required
497 by the commissioner. The commissioner may grant a waiver or
498 extension for a period not to exceed one registration period, except that
499 the commissioner may grant additional waivers or extensions if the
500 medical disability or illness upon which a waiver or extension is
501 granted continues beyond the period of the waiver or extension and
502 the licensee applies for an additional waiver or extension.

503 (f) Any licensee whose license has become void pursuant to section
504 19a-88 of the 2006 supplement to the general statutes and who applies
505 to the department for reinstatement of such license pursuant to section
506 19a-14 of the 2006 supplement to the general statutes shall submit
507 evidence documenting successful completion of six contact hours of
508 qualifying continuing education within the one-year period
509 immediately preceding application for reinstatement.

510 Sec. 14. Section 20-222 of the general statutes is amended by adding
511 subsection (g) as follows (*Effective October 1, 2006*):

512 (NEW) (g) All records relating to contracts for funeral services,
513 prepaid funeral contracts or escrow accounts shall be maintained at the
514 address of record of the funeral home identified on the certificate of
515 inspection for a period of not less than three years after the death of
516 the individual for whom funeral services were provided.

517 Sec. 15. Subsection (a) of section 20-230d of the 2006 supplement to
518 the general statutes is repealed and the following is substituted in lieu
519 thereof (*Effective from passage*):

520 (a) If the cremated remains are not accepted by a person in
521 accordance with the requested disposition of the cremated remains on
522 the form required by section 20-230c or by the person designated to
523 take custody and control of the cremated remains, the funeral director
524 may dispose of such cremated remains by: (1) Burial in a cemetery, (2)
525 storage in a crypt of a mausoleum or columbarium, (3) scattering, (4)

526 burial in a memorial garden, (5) storage at the funeral home, or (6)
527 such other method identified in the signed form required by section
528 20-230c, provided the funeral director has complied with the notice
529 requirements of subsection (b) of this section. Upon such disposal of
530 the cremated remains, the funeral director shall notify, in writing, the
531 registrar of vital records [in] of the town [from which the cremation
532 permit for the deceased was issued pursuant to section 19a-323] where
533 death occurred, of the manner in which the cremated remains were
534 disposed. Such written notice shall be attached to the cremation
535 permit.

536 Sec. 16. Subdivision (20) of section 21a-240 of the general statutes is
537 repealed and the following is substituted in lieu thereof (*Effective from*
538 *passage*):

539 (20) (A) "Drug paraphernalia" refers to equipment, products and
540 materials of any kind which are used, intended for use or designed for
541 use in planting, propagating, cultivating, growing, harvesting,
542 manufacturing, compounding, converting, producing, processing,
543 preparing, testing, analyzing, packaging, repackaging, storing,
544 containing or concealing, or injecting, ingesting, inhaling or otherwise
545 introducing into the human body, any controlled substance contrary to
546 the provisions of this chapter including, but not limited to: (i) Kits
547 intended for use or designed for use in planting, propagating,
548 cultivating, growing or harvesting of any species of plant which is a
549 controlled substance or from which a controlled substance can be
550 derived; (ii) kits used, intended for use or designed for use in
551 manufacturing, compounding, converting, producing, processing or
552 preparing controlled substances; (iii) isomerization devices used,
553 intended for use in increasing the potency of any species of plant
554 which is a controlled substance; (iv) testing equipment used, intended
555 for use or designed for use in identifying or analyzing the strength,
556 effectiveness or purity of controlled substances; (v) dilutents and
557 adulterants, such as quinine hydrochloride, mannitol, mannite,
558 dextrose and lactose used, intended for use or designed for use in

559 cutting controlled substances; (vi) separation gins and sifters used,
560 intended for use or designed for use in removing twigs and seeds
561 from, or in otherwise cleaning or refining, marijuana; (vii) capsules
562 and other containers used, intended for use or designed for use in
563 packaging small quantities of controlled substances; (viii) containers
564 and other objects used, intended for use or designed for use in storing
565 or concealing controlled substances; [(ix) in a quantity greater than
566 thirty hypodermic syringes, needles and other objects used, intended
567 for use or designed for use in parenterally injecting controlled
568 substances into the human body; (x)] (ix) objects used, intended for use
569 or designed for use in ingesting, inhaling, or otherwise introducing
570 marijuana, cocaine, hashish, or hashish oil into the human body, such
571 as: Metal, wooden, acrylic, glass, stone, plastic or ceramic pipes with
572 screens, permanent screens, hashish heads or punctured metal bowls;
573 water pipes; carburetion tubes and devices; smoking and carburetion
574 masks; roach clips: Meaning objects used to hold burning material,
575 such as a marijuana cigarette, that has become too small or too short to
576 be held in the hand; miniature cocaine spoons, and cocaine vials;
577 chamber pipes; carburetor pipes; electric pipes; air-driven pipes;
578 chillums; bongos or ice pipes or chillers;

579 (B) "Factory" means any place used for the manufacturing, mixing,
580 compounding, refining, processing, packaging, distributing, storing,
581 keeping, holding, administering or assembling illegal substances
582 contrary to the provisions of this chapter, or any building, rooms or
583 location which contains equipment or paraphernalia used for this
584 purpose.

585 Sec. 17. Section 21a-267 of the general statutes is repealed and the
586 following is substituted in lieu thereof (*Effective from passage*):

587 (a) No person shall use or possess with intent to use drug
588 paraphernalia, as defined in subdivision (20) of section 21a-240, to
589 plant, propagate, cultivate, grow, harvest, manufacture, compound,
590 convert, produce, process, prepare, test, analyze, pack, repack, store,

591 contain or conceal, [or to inject,] ingest, inhale or otherwise introduce
592 into the human body, any controlled substance as defined in
593 subdivision (9) of section 21a-240. Any person who violates any
594 provision of this subsection shall be guilty of a class C misdemeanor.

595 (b) No person shall deliver, possess with intent to deliver or
596 manufacture with intent to deliver drug paraphernalia knowing, or
597 under circumstances where one reasonably should know, that it will
598 be used to plant, propagate, cultivate, grow, harvest, manufacture,
599 compound, convert, produce, process, prepare, test, analyze, pack,
600 repack, store, contain or conceal, [or to inject,] ingest, inhale or
601 otherwise introduce into the human body, any controlled substance.
602 Any person who violates any provision of this subsection shall be
603 guilty of a class A misdemeanor.

604 (c) Any person who violates subsection (a) or (b) of this section in or
605 on, or within one thousand five hundred feet of, the real property
606 comprising a public or private elementary or secondary school and
607 who is not enrolled as a student in such school shall be imprisoned for
608 a term of one year which shall not be suspended and shall be in
609 addition and consecutive to any term of imprisonment imposed for
610 violation of subsection (a) or (b) of this section.

611 Sec. 18. Section 38a-988 of the general statutes is amended by adding
612 subdivision (20) as follows (*Effective October 1, 2006*):

613 (NEW) (20) Made to the Department of Public Health in conjunction
614 with the investigation of a health care provider pursuant to section
615 19a-14, as amended by this act.

616 Sec. 19. Section 46b-22a of the general statutes is repealed and the
617 following is substituted in lieu thereof (*Effective from passage*):

618 All marriages [,] celebrated before [July 9, 2003] the effective date of
619 this section, otherwise valid except that the justice of the peace joining
620 such persons in marriage did not have a valid certificate of

621 qualification, are validated, provided the justice of the peace who
622 joined such persons in marriage represented himself or herself to be a
623 duly qualified justice of the peace and such persons reasonably relied
624 upon such representation.

625 Sec. 20. Section 46b-24a of the general statutes is repealed and the
626 following is substituted in lieu thereof (*Effective from passage*):

627 All marriages celebrated before [July 9, 2003] the effective date of
628 this section, otherwise valid except that the license for any such
629 marriage was issued in a town other than the town in this state in
630 which such marriage was celebrated, or where either party to the
631 marriage resided at the time of the marriage license application, are
632 validated.

633 Sec. 21. (NEW) (*Effective October 1, 2006*) (a) Except as provided in
634 subsection (c) of this section, each person licensed to practice dentistry
635 under the provisions of chapter 379 of the general statutes who
636 provides direct patient care services shall maintain professional
637 liability insurance or other indemnity against liability for professional
638 malpractice. The amount of insurance which each such person shall
639 carry as insurance or indemnity against claims for injury or death for
640 professional malpractice shall be not less than five hundred thousand
641 dollars for one person, per occurrence, with an aggregate of not less
642 than one million five hundred thousand dollars.

643 (b) Each insurance company that issues professional liability
644 insurance, as defined in subdivisions (1), (4), (6), (7), (8) and (9) of
645 subsection (b) of section 38a-393 of the general statutes, shall on and
646 after January 1, 2007, render to the Commissioner of Public Health a
647 true record of the names and addresses, according to classification, of
648 cancellations of and refusals to renew professional liability insurance
649 policies and the reasons for such cancellation or refusal to renew said
650 policies for the year ending on the thirty-first day of December next
651 preceding.

652 (c) A person subject to the provisions of subsection (a) of this section
653 shall be deemed in compliance with such subsection when providing
654 dental services at a clinic licensed by the Department of Public Health
655 that is recognized as tax exempt pursuant to Section 501(c)(3) of the
656 Internal Revenue Code of 1986 or any successor internal revenue code,
657 as may be amended from time to time, provided: (1) Such person is not
658 compensated for such services; (2) the clinic does not charge patients
659 for such services; (3) the clinic maintains professional liability
660 insurance coverage in the amounts required by subsection (a) of this
661 section for each aggregated forty hours of service or fraction thereof
662 for such persons; (4) the clinic carries additional appropriate
663 professional liability coverage on behalf of the clinic and its employees
664 in the amounts of five hundred thousand dollars per occurrence, with
665 an aggregate of not less than one million five hundred thousand
666 dollars; and (5) the clinic maintains total professional liability coverage
667 of not less than one million dollars per occurrence with an annual
668 aggregate of not less than three million dollars. Such person shall be
669 subject to the provisions of subsection (a) of this section when
670 providing direct patient care services in any setting other than such
671 clinic. Nothing in this subsection shall be construed to relieve the clinic
672 from any insurance requirements otherwise required by law.

673 (d) No person insured pursuant to the requirements of subsection
674 (a) of this section with a claims-made medical malpractice insurance
675 policy shall lose the right to unlimited additional extended reporting
676 period coverage upon such person's permanent retirement from
677 practice if such person solely provides professional services without
678 charge at a clinic recognized as tax exempt under Section 501(c)(3) of
679 said internal revenue code.

680 Sec. 22. (NEW) (*Effective October 1, 2006*) Upon the sale,
681 discontinuance or termination of a funeral service business, the person,
682 firm, partnership or corporation to whom the inspection certificate has
683 been issued shall:

684 (1) Publish notice in a newspaper having general circulation in each
685 town where the funeral service business engaged in funeral directing
686 that the funeral service business is being sold, discontinued or
687 terminated. Such notice shall appear twice, seven days apart and shall
688 be no less than two columns wide and two inches in height.

689 (2) Mail a letter to each owner of an established prepaid funeral or
690 escrow account, and make arrangements with the owner of said
691 accounts to transfer the accounts to a funeral service business of the
692 owner's choice.

693 (3) Mail a letter to each person for whom the funeral service
694 business is storing cremated remains.

695 (4) Upon discontinuance or termination of the business, the person,
696 firm, partnership or corporation to whom the inspection certificate has
697 been issued shall provide the Department of Public Health with a list
698 of all unclaimed cremated remains and all prepaid funeral and escrow
699 accounts held by the business at the time of discontinuance or
700 termination, along with contact information for the owners, a
701 statement indicating the status of transfers for all prepaid funeral and
702 escrow accounts, the name of any funeral service business to which the
703 prepaid funeral or escrow account has been transferred and the name
704 of the institution or institutions holding the accounts in escrow.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2006</i>	7-73(a)
Sec. 2	<i>October 1, 2006</i>	19a-14(c)

Sec. 3	<i>on and after the later of October 1, 2000, or the date notice is published by the Commissioner of Public Health in the Connecticut Law Journal indicating that the licensing of athletic trainers and physical therapist assistants is being implemented by the commissioner</i>	19a-14(c)
Sec. 4	<i>October 1, 2006</i>	19a-88b
Sec. 5	<i>from passage</i>	19a-124(b)
Sec. 6	<i>October 1, 2006</i>	19a-266
Sec. 7	<i>July 1, 2006</i>	New section
Sec. 8	<i>October 1, 2006</i>	19a-269a
Sec. 9	<i>October 1, 2006</i>	19a-422
Sec. 10	<i>October 1, 2006</i>	19a-423
Sec. 11	<i>October 1, 2006</i>	New section
Sec. 12	<i>October 1, 2006</i>	20-162p
Sec. 13	<i>October 1, 2006</i>	New section
Sec. 14	<i>October 1, 2006</i>	20-222
Sec. 15	<i>from passage</i>	20-230d(a)
Sec. 16	<i>from passage</i>	21a-240(20)
Sec. 17	<i>from passage</i>	21a-267
Sec. 18	<i>October 1, 2006</i>	38a-988
Sec. 19	<i>from passage</i>	46b-22a
Sec. 20	<i>from passage</i>	46b-24a
Sec. 21	<i>October 1, 2006</i>	New section
Sec. 22	<i>October 1, 2006</i>	New section

Statement of Purpose:

To make revisions to Department of Public Health statutes.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]