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Amendment

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Offered by:

REP. RITTER, 38th Dist.

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To: Subst. House Bill No. 6678

File No. 616

Cal. No. 404

**"AN ACT CONCERNING REVISIONS TO DEPARTMENT OF
PUBLIC HEALTH LICENSING STATUTES."**

1 After the last section, add the following and renumber sections and
2 internal references accordingly:

3 "Sec. 501. (NEW) (*Effective July 1, 2011*) (a) The University of
4 Connecticut Health Center shall, in consultation with the Yale
5 University School of Medicine, develop, implement and promote an
6 evidence-based outreach and education program concerning the
7 therapeutic and cost-effective utilization of prescription drugs for the
8 benefit of licensed physicians, pharmacists and other health care
9 professionals authorized to prescribe and dispense prescription drugs.
10 In developing such program, The University of Connecticut Health
11 Center shall consider whether such program may be developed in
12 coordination with, or as a part of, the Connecticut Area Health
13 Education Center.

14 (b) The program established pursuant to subsection (a) of this

15 section shall: (1) Arrange for licensed physicians, pharmacists and
16 nurses to conduct in person educational visits with prescribing
17 practitioners, utilizing evidence-based materials, borrowing methods
18 from behavioral science and educational theory and, when
19 appropriate, utilizing pharmaceutical industry data and outreach
20 techniques; (2) inform prescribing practitioners about drug marketing
21 that is designed to prevent competition to brand name drugs from
22 generic or other therapeutically-equivalent pharmaceutical alternatives
23 or other evidence-based treatment options; and (3)
24 provide outreach and education to licensed physicians and other
25 health care practitioners who are participating providers in state-
26 funded health care programs, including, but not limited to, Medicaid,
27 the HUSKY Plan, Parts A and B, the state-administered general
28 assistance program, the Charter Oak Health Plan, the ConnPACE
29 program, the Department of Correction inmate health services
30 program and the state employees' health insurance plan.

31 (c) The University of Connecticut Health Center shall, to the extent
32 feasible, utilize or incorporate into the program other independent
33 educational resources or models that are proven to be effective in
34 disseminating high quality, evidenced-based, cost-effective
35 information to prescribing practitioners regarding the effectiveness
36 and safety of prescription drugs. Such other resources or models that
37 The University of Connecticut Health Center reviews shall include: (1)
38 The Pennsylvania PACE Independent Drug Information Service
39 affiliated with the Harvard Medical School; (2) the Vermont Academic
40 Detailing Program sponsored by the University of Vermont College of
41 Medicine Office of Primary Care; and (3) the Drug Effectiveness
42 Review project conducted by the Oregon Health and Science
43 University Evidence-based Practice Center.

44 (d) The University of Connecticut Health Center shall seek federal
45 funds for the administration of the program. In addition, The
46 University of Connecticut Health Center may seek funding from
47 nongovernmental health access foundations for the program. The
48 University of Connecticut Health Center shall not be required to

49 develop, implement and promote the program described in this
50 section, if federal, state and private funds in the aggregate are
51 insufficient to pay for the initial and ongoing expenses of such
52 program.

53 Sec. 502. Section 19a-638 of the general statutes is repealed and the
54 following is substituted in lieu thereof (*Effective July 1, 2009*):

55 (a) Except as provided in sections 19a-487a and 19a-639a to 19a-
56 639c, inclusive, as amended by this act:

57 (1) Each health care facility or institution, that intends to (A) transfer
58 [all or part of] its ownership or control, (B) change the governing
59 powers of the board of a parent company or an affiliate, whatever its
60 designation, or (C) change or transfer the powers or control of a
61 governing or controlling body of an affiliate, shall submit to the office,
62 prior to the proposed date of such transfer, or change, a request for
63 permission to undertake such transfer or change. For purposes of this
64 section and section 19a-639b, as amended by this act, "transfer its
65 ownership or control" means a transfer that impacts or changes the
66 governance or controlling body of a health care facility or institution,
67 including, but not limited to, all affiliations, mergers or any sale or
68 transfer of net assets of a health care facility or institution.

69 (2) Each health care facility or institution or state health care facility
70 or institution, including any inpatient rehabilitation facility, which
71 intends to introduce any additional function or service into its
72 program of health care shall submit to the office, prior to the proposed
73 date of the institution of such function or service, a request for
74 permission to undertake such function or service.

75 (3) Each health care facility or institution or state health care facility
76 or institution which intends to terminate a health service offered by
77 such facility or institution or reduce substantially its total bed capacity,
78 shall submit to the office, prior to the proposed date of such
79 termination or decrease, a request to undertake such termination or
80 decrease.

81 (4) Except as provided in sections 19a-639a to 19a-639c, inclusive, as
82 amended by this act, each applicant, prior to submitting a certificate of
83 need application under this section or section 19a-639, as amended by
84 this act, or under both sections, shall submit a request, in writing, for
85 application forms and instructions to the office. The request shall be
86 known as a letter of intent. A letter of intent shall include: (A) The
87 name of the applicant or applicants; (B) a statement indicating whether
88 the application is for (i) a new, replacement or additional facility,
89 service or function, (ii) the expansion or relocation of an existing
90 facility, service or function, (iii) a [change in] transfer of its ownership
91 or control, (iv) a termination of a service or a reduction in total bed
92 capacity and the bed type, (v) any new or additional beds and their
93 type, (vi) a capital expenditure over three million dollars, (vii) the
94 purchase, lease or donation acceptance of major medical equipment
95 costing over three million dollars, (viii) a CT scanner, PET scanner,
96 PET/CT scanner or MRI scanner, [cineangiography equipment,] a
97 linear accelerator or other similar equipment utilizing technology that
98 is new or being introduced into the state, or (ix) any combination
99 thereof; (C) the estimated capital cost, value or expenditure; (D) the
100 town where the project is or will be located; and (E) a brief description
101 of the proposed project. The office shall provide public notice of any
102 complete letter of intent submitted under this section or section 19a-
103 639, as amended by this act, or both, by publication in a newspaper
104 having a substantial circulation in the area served or to be served by
105 the applicant. Such notice shall be submitted for publication not later
106 than twenty-one days after the date the office determines that a letter
107 of intent is complete. No certificate of need application will be
108 considered submitted to the office unless a current letter of intent,
109 specific to the proposal and in compliance with this subsection, has
110 been on file with the office for not less than sixty days. A current letter
111 of intent is a letter of intent that has been on file at the office up to and
112 including one hundred twenty days, except that an applicant may
113 request a one-time extension of a letter of intent of up to an additional
114 thirty days for a maximum total of up to one hundred fifty days if,
115 prior to the expiration of the current letter of intent, the office receives

116 a written request to so extend the letter of intent's current status. The
117 extension request shall fully explain why an extension is requested.
118 The office shall accept or reject the extension request not later than
119 seven days from the date the office receives such request and shall so
120 notify the applicant.

121 (b) The office shall make such review of a request made pursuant to
122 subdivision (1), (2) or (3) of subsection (a) of this section as it deems
123 necessary. In the case of a [proposed transfer of] health care facility or
124 institution that intends to transfer its ownership or control, the review
125 shall include, but not be limited to, the financial responsibility and
126 business interests of the transferee and the ability of the institution to
127 continue to provide needed services or, in the case of the introduction
128 of a new or additional function or service expansion or the termination
129 of a service or function, ascertaining the availability of such service or
130 function at other inpatient rehabilitation facilities, health care facilities
131 or institutions or state health care facilities or institutions or other
132 providers within the area to be served, the need for such service or
133 function within such area and any other factors which the office deems
134 relevant to a determination of whether the facility or institution is
135 justified in introducing or terminating such functions or services into
136 or from its program. The office shall grant, modify or deny such
137 request no later than ninety days after the date of receipt of a complete
138 application, except as provided for in this section. Upon the request of
139 the applicant, the review period may be extended for an additional
140 fifteen days if the office has requested additional information
141 subsequent to the commencement of the review period. The
142 commissioner may extend the review period for a maximum of thirty
143 days if the applicant has not filed in a timely manner information
144 deemed necessary by the office. Failure of the office to act on such
145 request within such review period shall be deemed approval thereof.
146 The ninety-day review period, pursuant to this subsection, for an
147 application filed by a hospital, as defined in section 19a-490, and
148 licensed as a short-term acute-care general hospital or children's
149 hospital by the Department of Public Health or an affiliate of such a

150 hospital or any combination thereof, shall not apply if, in the certificate
151 of need application or request, the hospital or applicant projects either
152 (1) that, for the first three years of operation taken together, the total
153 impact of the proposal on the operating budget of the hospital or an
154 affiliate of such a hospital or any combination thereof will exceed one
155 per cent of the actual operating expenses of the hospital for the most
156 recently completed fiscal year as filed with or determined by the office,
157 or (2) that the total capital expenditure for the project will exceed
158 fifteen million dollars. If the office determines that an application is not
159 subject to the ninety-day review period pursuant to this subsection, it
160 shall remain so excluded for the entire review period of that
161 application, even if the application or circumstances change and the
162 application no longer meets the stated terms of the exclusion. Upon a
163 showing by such facility or institution that the need for such function
164 [] or service or termination or [change of] transfer of its ownership or
165 control is of an emergency nature, in that the function, service or
166 termination or [change of] transfer of its ownership or control is
167 necessary to maintain continued access to the health care services
168 provided by the facility or institution, or to comply with requirements
169 of any federal, state or local health, fire, building or life safety code, the
170 commissioner may waive the letter of intent requirement, provided
171 such request shall be submitted not less than fourteen days before the
172 proposed date of institution of the function, service or termination or
173 [change] transfer of its ownership or control.

174 (c) (1) The office may hold a public hearing with respect to any
175 complete certificate of need application submitted under this section.
176 At least two weeks' notice of such public hearing shall be given to the
177 applicant, in writing, and to the public by publication in a newspaper
178 having a substantial circulation in the area served by the facility,
179 institution or provider. At the discretion of the office, such hearing
180 may be held in Hartford or in the area so served or to be served. In
181 conducting its activities under this section, section 19a-639, as
182 amended by this act, or under both sections, the office may hold
183 hearings on applications of a similar nature at the same time.

184 (2) The office may hold a public hearing after consideration of
185 criteria that include, but need not be limited to, whether the proposal
186 involves: (A) The provision of a new or additional health care function
187 or service through the use of technology that is new or being
188 introduced into the state; (B) the provision of a new or additional
189 health care function or service that is not provided in either a region
190 designated by the applicant or in the applicant's existing primary
191 service area as defined by the office; or (C) the termination of an
192 existing health care function or service, the reduction of total beds or
193 the closing of a health care facility.

194 (3) The office shall hold a public hearing with respect to any
195 complete certificate of need application submitted to the office under
196 this section if (A) three individuals or an individual representing an
197 entity with five or more people submit a request, in writing, that a
198 public hearing be held on the proposal after the office has published
199 notice of a complete letter of intent, and (B) such request is received by
200 the office not later than twenty-one days after the date that the office
201 deems the certificate of need application complete.

202 Sec. 503. Section 19a-639 of the general statutes is repealed and the
203 following is substituted in lieu thereof (*Effective July 1, 2009*):

204 (a) Except as provided in sections 19a-639a to 19a-639c, inclusive, as
205 amended by this act, each health care facility or institution, including,
206 but not limited to, any inpatient rehabilitation facility, any health care
207 facility or institution or any state health care facility or institution
208 proposing (1) a capital expenditure exceeding three million dollars, (2)
209 to purchase, lease or accept donation of major medical equipment
210 requiring a capital expenditure, as defined in regulations adopted
211 pursuant to section 19a-643, in excess of three million dollars, or (3) to
212 purchase, lease or accept donation of a CT scanner, PET scanner,
213 PET/CT scanner or MRI scanner, [cineangiography equipment,] a
214 linear accelerator or other similar equipment utilizing technology that
215 is new or being introduced into this state, including the purchase, lease
216 or donation of equipment or a facility, shall submit a request for

217 approval of such expenditure to the office, with such data, information
218 and plans as the office requires in advance of the proposed initiation
219 date of such project.

220 (b) (1) The commissioner shall notify the Commissioner of Social
221 Services of any certificate of need request that may impact
222 expenditures under the state medical assistance program. The office
223 shall consider such request in relation to the community or regional
224 need for such capital program or purchase of land, the possible effect
225 on the operating costs of the health care facility or institution and such
226 other relevant factors as the office deems necessary. In approving or
227 modifying such request, the commissioner may not prescribe any
228 condition, such as but not limited to, any condition or limitation on the
229 indebtedness of the facility or institution in connection with a bond
230 issue, the principal amount of any bond issue or any other details or
231 particulars related to the financing of such capital expenditure, not
232 directly related to the scope of such capital program and within control
233 of the facility or institution.

234 (2) An applicant, prior to submitting a certificate of need
235 application, shall submit a request, in writing, for application forms
236 and instructions to the office. The request shall be known as a letter of
237 intent. A letter of intent shall conform to the letter of intent
238 requirements of subdivision (4) of subsection (a) of section 19a-638, as
239 amended by this act. No certificate of need application will be
240 considered submitted to the office unless a current letter of intent,
241 specific to the proposal and in compliance with this subsection, is on
242 file with the office for not less than sixty days. A current letter of intent
243 is a letter of intent that has been on file at the office no more than one
244 hundred twenty days, except that an applicant may request a one-time
245 extension of a letter of intent of not more than an additional thirty days
246 for a maximum total of not more than one hundred fifty days if, prior
247 to the expiration of the current letter of intent, the office receives a
248 written request to so extend the letter of intent's current status. The
249 extension request shall fully explain why an extension is requested.
250 The office shall accept or reject the extension request not later than

251 seven days from the date the office receives the extension request and
252 shall so notify the applicant. Upon a showing by such facility or
253 institution that the need for such capital program is of an emergency
254 nature, in that the capital expenditure is necessary to maintain
255 continued access to the health care services provided by the facility or
256 institution, or to comply with any federal, state or local health, fire,
257 building or life safety code, the commissioner may waive the letter of
258 intent requirement, provided such request shall be submitted not less
259 than fourteen days before the proposed initiation date of the project.
260 The commissioner shall grant, modify or deny such request not later
261 than ninety days or not later than fourteen days, as the case may be,
262 after receipt of such request, except as provided for in this section.
263 Upon the request of the applicant, the review period may be extended
264 for an additional fifteen days if the office has requested additional
265 information subsequent to the commencement of the review period.
266 The commissioner may extend the review period for a maximum of
267 thirty days if the applicant has not filed, in a timely manner,
268 information deemed necessary by the office. Failure of the office to act
269 upon such request within such review period shall be deemed
270 approval of such request. The ninety-day review period, pursuant to
271 this section, for an application filed by a hospital, as defined in section
272 19a-490, and licensed as a short-term acute care general hospital or a
273 children's hospital by the Department of Public Health or an affiliate of
274 such a hospital or any combination thereof, shall not apply if, in the
275 certificate of need application or request, the hospital or applicant
276 projects either (A) that, for the first three years of operation taken
277 together, the total impact of the proposal on the operating budget of
278 the hospital or an affiliate or any combination thereof will exceed one
279 per cent of the actual operating expenses of the hospital for the most
280 recently completed fiscal year as filed with the office, or (B) that the
281 total capital expenditure for the project will exceed fifteen million
282 dollars. If the office determines that an application is not subject to the
283 ninety-day review period pursuant to this subsection, it shall remain
284 so excluded for the entire period of that application, even if the
285 application or circumstances change and the application no longer

286 meets the stated terms of the exclusion. The office shall adopt
287 regulations, in accordance with chapter 54, to establish an expedited
288 hearing process to be used to review requests by any facility or
289 institution for approval of a capital expenditure to establish an energy
290 conservation program or to comply with requirements of any federal,
291 state or local health, fire, building or life safety code or final court
292 order. The office shall adopt regulations in accordance with the
293 provisions of chapter 54 to provide for the waiver of a hearing for any
294 part of a request by a facility or institution for a capital expenditure,
295 provided such facility or institution and the office agree upon such
296 waiver.

297 (3) The office shall comply with the public notice provisions of
298 subdivision (4) of subsection (a) of section 19a-638, as amended by this
299 act, and shall hold a public hearing with respect to any complete
300 certificate of need application filed under this section, if: (A) The
301 proposal has associated total capital expenditures or total capital costs
302 that exceed twenty million dollars for land, building or nonclinical
303 equipment acquisition, new building construction or building
304 renovation; (B) the proposal has associated total capital expenditures
305 per unit or total capital costs per unit that exceed three million dollars
306 for the purchase, lease or donation acceptance of major medical
307 equipment; (C) the proposal is for the purchase, lease or donation
308 acceptance of equipment utilizing technology that is new or being
309 introduced into the state, including scanning equipment,
310 [cineangiography equipment,] a linear accelerator or other similar
311 equipment; or (D) three individuals or an individual representing an
312 entity comprised of five or more people submit a request, in writing,
313 that a public hearing be held on the proposal and such request is
314 received by the office not later than twenty-one days after the office
315 deems the certificate of need application complete. At least two weeks'
316 notice of such public hearing shall be given to the applicant, in writing,
317 and to the public by publication in a newspaper having a substantial
318 circulation in the area served by the applicant. At the discretion of the
319 office, such hearing shall be held in Hartford or in the area so served or

320 to be served.

321 (c) Each person or provider, other than a health care or state health
322 care facility or institution subject to subsection (a) of this section,
323 proposing to purchase, lease, accept donation of or replace (1) major
324 medical equipment with a capital expenditure in excess of three
325 million dollars, or (2) a CT scanner, PET scanner, PET/CT scanner or
326 MRI scanner, [cineangiography equipment,] a linear accelerator or
327 other similar equipment utilizing technology that is new or being
328 introduced into the state, shall submit a request for approval of any
329 such purchase, lease, donation or replacement pursuant to the
330 provisions of subsection (a) of this section. In determining the capital
331 cost or expenditure for an application under this section or section 19a-
332 638, as amended by this act, the office shall use the greater of (A) the
333 fair market value of the equipment as if it were to be used for full-time
334 operation, whether or not the equipment is to be used, shared or
335 rented on a part-time basis, or (B) the total value or estimated value
336 determined by the office of any capitalized lease computed for a three-
337 year period. Each method shall include the costs of any service or
338 financing agreements plus any other cost components or items the
339 office specifies in regulations, adopted in accordance with chapter 54,
340 or deems appropriate.

341 (d) Notwithstanding the provisions of section 19a-638, as amended
342 by this act, or subsection (a) of this section, no community health
343 center, as defined in section 19a-490a, shall be subject to the provisions
344 of said section 19a-638 or subsection (a) of this section if the
345 community health center is: (1) Proposing a capital expenditure not
346 exceeding three million dollars; (2) exclusively providing primary care
347 or dental services; and (3) either (A) financing one-third or more of the
348 cost of the proposed project with moneys provided by the state of
349 Connecticut, (B) receiving funds from the Department of Public Health
350 for the proposed project, or (C) locating the proposed project in an area
351 designated by the federal Health Resources and Services
352 Administration as a health professional shortage area, a medically
353 underserved area or an area with a medically underserved population.

354 Each community health center seeking an exemption under this
355 subsection shall provide the office with documentation verifying to the
356 satisfaction of the office, qualification for this exemption. Each
357 community health center proposing to provide any service other than
358 a primary care or dental service at any location, including a designated
359 community health center location, shall first obtain a certificate of need
360 for such additional service in accordance with this section and section
361 19a-638, as amended by this act. Each satellite, subsidiary or affiliate of
362 a federally qualified health center, in order to qualify under this
363 exemption, shall: (i) Be part of a federally qualified health center that
364 meets the requirements of this subsection; (ii) exclusively provide
365 primary care or dental services; and (iii) be located in a health
366 professional shortage area or a medically underserved area. If the
367 subsidiary, satellite or affiliate does not so qualify, it shall obtain a
368 certificate of need.

369 (e) Notwithstanding the provisions of section 19a-638, as amended
370 by this act, subsection (a) of section 19a-639a, as amended by this act,
371 or subsection (a) of this section, no school-based health care center
372 shall be subject to the provisions of section 19a-638, as amended by this
373 act, or subsection (a) of this section if the center: (1) Is or will be
374 licensed by the Department of Public Health as an outpatient clinic; (2)
375 proposes capital expenditures not exceeding three million dollars and
376 does not exceed such amount; (3) once operational, continues to
377 operate and provide services in accordance with the department's
378 licensing standards for comprehensive school-based health centers;
379 and (4) is or will be located entirely on the property of a functioning
380 school.

381 (f) In conducting its activities under this section or section 19a-638,
382 as amended by this act, or under both sections, the office may hold
383 hearings on applications of a similar nature at the same time.

384 Sec. 504. Section 19a-639a of the general statutes is repealed and the
385 following is substituted in lieu thereof (*Effective July 1, 2009*):

386 (a) Except as provided in subsection (c) of section 19a-639, as
387 amended by this act, or as required in subsection (b) of this section, the
388 provisions of section 19a-638, as amended by this act, and subsection
389 (a) of section 19a-639, as amended by this act, shall not apply to: (1) An
390 outpatient clinic or program operated exclusively by, or contracted to
391 be operated exclusively for, a municipality or municipal agency, a
392 health district, as defined in section 19a-240, or a board of education;
393 (2) a residential facility for the mentally retarded licensed pursuant to
394 section 17a-227 and certified to participate in the Title XIX Medicaid
395 program as an intermediate care facility for the mentally retarded; (3)
396 an outpatient rehabilitation service agency that was in operation on
397 January 1, 1998, that is operated exclusively on an outpatient basis and
398 that is eligible to receive reimbursement under section 17b-243; (4) a
399 clinical laboratory; (5) an assisted living services agency; (6) an
400 outpatient service offering chronic dialysis; (7) a program of
401 ambulatory services established and conducted by a health
402 maintenance organization; (8) a home health agency; (9) a clinic
403 operated by the AmeriCares Foundation; (10) a nursing home; [or] (11)
404 a rest home; or (12) a program licensed or funded by the Department
405 of Children and Families, provided such program is not a psychiatric
406 residential treatment facility, as defined in 42 CFR 483.352. The
407 exemptions provided in this section shall not apply when a nursing
408 home or rest home is, or will be created, acquired, operated or in any
409 other way related to or affiliated with, or under the complete or partial
410 ownership or control of a facility or institution or affiliate subject to the
411 provisions of section 19a-638, as amended by this act, or subsection (a)
412 of section 19a-639, as amended by this act.

413 (b) Each health care facility or institution exempted under this
414 section shall register with the office by filing the information required
415 by subdivision (4) of subsection (a) of section 19a-638, as amended by
416 this act, for a letter of intent at least fourteen days but not more than
417 sixty calendar days prior to commencing operations and prior to
418 changing, expanding, terminating or relocating any facility or service
419 otherwise covered by section 19a-638, as amended by this act, or

420 subsection (a) of section 19a-639, as amended by this act, or covered by
421 both sections or subsections, except that, if the facility or institution is
422 in operation on June 5, 1998, said information shall be filed not more
423 than sixty days after said date. Not later than fourteen days after the
424 date that the office receives a completed filing required under this
425 subsection, the office shall provide the health care facility or institution
426 with written acknowledgment of receipt. Such acknowledgment shall
427 constitute permission to operate or change, expand, terminate or
428 relocate such a facility or institution or to make an expenditure
429 consistent with an authorization received under subsection (a) of
430 section 19a-639, as amended by this act, until the next September
431 thirtieth. Each entity exempted under this section shall renew its
432 exemption by filing current information once every two years in
433 September.

434 (c) Each health care facility, institution or provider that proposes to
435 purchase, lease or accept donation of a CT scanner, PET scanner,
436 PET/CT scanner or MRI scanner, [cineangiography equipment] or a
437 linear accelerator shall be exempt from certificate of need review
438 pursuant to sections 19a-638, as amended by this act, and 19a-639, as
439 amended by this act, if such facility, institution or provider (1)
440 provides to the office satisfactory evidence that it purchased or leased
441 such equipment for under four hundred thousand dollars on or before
442 July 1, 2005, and such equipment was in operation on or before July 1,
443 2006, or (2) obtained, on or before July 1, 2005, from the office, a
444 certificate of need or a determination that a certificate of need was not
445 required for the purchase, lease or donation acceptance of such
446 equipment.

447 (d) The Office of Health Care Access shall, in its discretion, exempt
448 from certificate of need review pursuant to sections 19a-638, as
449 amended by this act, and 19a-639, as amended by this act, any health
450 care facility or institution that proposes to purchase or operate an
451 electronic medical records system on or after October 1, 2005.

452 (e) Each health care facility or institution that proposes a capital

453 expenditure for parking lots and garages, information and
454 communications systems, physician and administrative office space,
455 acquisition of land for nonclinical purposes, and acquisition and
456 replacement of nonmedical equipment, including, but not limited to,
457 boilers, chillers, heating ventilation and air conditioning systems, shall
458 be exempt for such capital expenditure from certificate of need review
459 under subsection (a) of section 19a-639, as amended by this act,
460 provided (1) the health care facility or institution submits information
461 to the office regarding the type of capital expenditure, the reason for
462 the capital expenditure, the total cost of the project and any other
463 information which the office deems necessary; and (2) the total capital
464 expenditure does not exceed twenty million dollars. Approval of a
465 health care facility's or institution's proposal for acquisition of land for
466 nonclinical purposes shall not exempt such facility or institution from
467 compliance with any of the certificate of need requirements prescribed
468 in this chapter if such facility or institution subsequently seeks to
469 develop the land that was acquired for nonclinical purposes.

470 (f) Each short-term acute care general or children's hospital, chronic
471 disease hospital or hospital for the mentally ill that on July 1, 2009, is
472 providing outpatient services, including, but not limited to, physical
473 therapy, occupational therapy, speech therapy, cardiac rehabilitation,
474 occupational injury management, occupational disease management
475 and company contracted services that thereafter proposes to provide
476 such services at an alternative location within the primary services
477 area of the health care facility or institution, shall be exempt from the
478 certificate of need requirements prescribed in subsection (a) of section
479 19a-638, as amended by this act, as relates to any such proposal to
480 provide such services at an alternative location, provided the short-
481 term acute care general or children's hospital, chronic disease hospital
482 or hospital for the mentally ill submits information to the office
483 concerning the type of outpatient services such hospital proposes to
484 provide at the alternative location, the location where such services
485 will be provided and the reasons for the proposal to provide such
486 services at an alternative location.

487 Sec. 505. Section 19a-639b of the general statutes is repealed and the
488 following is substituted in lieu thereof (*Effective October 1, 2009*):

489 (a) The Commissioner of Health Care Access or the commissioner's
490 designee may grant an exemption from the requirements of section
491 19a-638, as amended by this act, or subsection (a) of section 19a-639, as
492 amended by this act, or both, for any nonprofit facility, institution or
493 provider that is currently under contract with a state agency or
494 department and is seeking to engage in any activity, other than the
495 termination of a service or a facility, otherwise subject to said section
496 or subsection if:

497 (1) The nonprofit facility, institution or provider is proposing a
498 capital expenditure of not more than three million dollars and the
499 expenditure does not in fact exceed three million dollars;

500 (2) The activity meets a specific service need identified by a state
501 agency or department with which the nonprofit facility, institution or
502 provider is currently under contract;

503 (3) The commissioner, executive director, chairman or chief court
504 administrator of the state agency or department that has identified the
505 specific need confirms, in writing, to the office that (A) the agency or
506 department has identified a specific need with a detailed description of
507 that need and that the agency or department believes that the need
508 continues to exist, (B) the activity in question meets all or part of the
509 identified need and specifies how much of that need the proposal
510 meets, (C) in the case where the activity is the relocation of services,
511 the agency or department has determined that the needs of the area
512 previously served will continue to be met in a better or satisfactory
513 manner and specifies how that is to be done, (D) in the case where [the
514 activity is the transfer of all or part of the ownership or control of] a
515 facility or institution [,] seeks to transfer its ownership or control, that
516 the agency or department has investigated the proposed change and
517 the person or entity requesting the change and has determined that the
518 change would be in the best interests of the state and the patients or

519 clients, and (E) the activity will be cost-effective and well managed;
520 and

521 (4) In the case where the activity is the relocation of services, the
522 Commissioner of Health Care Access or the commissioner's designee
523 determines that the needs of the area previously served will continue
524 to be met in a better or satisfactory manner.

525 (b) The Commissioner of Health Care Access or the commissioner's
526 designee may grant an exemption from the requirements of section
527 19a-638, as amended by this act, or subsection (a) of section 19a-639, as
528 amended by this act, or both, for any nonprofit facility, institution or
529 provider that is currently under contract with a state agency or
530 department and is seeking to terminate a service or a facility, provided
531 (1) the commissioner, executive director, chairperson or chief court
532 administrator of the state agency or department with which the
533 nonprofit facility, institution or provider is currently under contract
534 confirms, in writing, to the office that the needs of the area previously
535 served will continue to be met in a better or satisfactory manner and
536 specifies how that is to be done, and (2) the Commissioner of Health
537 Care Access or the commissioner's designee determines that the needs
538 of the area previously served will continue to be met in a better or
539 satisfactory manner.

540 (c) A nonprofit facility, institution or provider seeking an exemption
541 under this section shall provide the office with any information it
542 needs to determine exemption eligibility. An exemption granted under
543 this section shall be limited to part or all of any services, equipment,
544 expenditures or location directly related to the need or location that the
545 state agency or department has identified.

546 (d) The office may revoke or modify the scope of the exemption at
547 any time following a public review that allows the state agency or
548 department and the nonprofit facility, institution or provider to
549 address specific, identified, changed conditions or any problems that
550 the state agency, department or the office has identified. A party to any

551 exemption modification or revocation proceeding and the original
552 requesting agency shall be given at least fourteen calendar days
553 written notice prior to any action by the office and shall be furnished
554 with a copy, if any, of a revocation or modification request or a
555 statement by the office of the problems that have been brought to its
556 attention. If the requesting commissioner, executive director, chairman
557 or chief court administrator or the Commissioner of Health Care
558 Access certifies that an emergency condition exists, only forty-eight
559 hours written notice shall be required for such modification or
560 revocation action to proceed.

561 (e) A nonprofit facility, institution or provider that is a psychiatric
562 residential treatment facility, as defined in 42 CFR 483.352, shall not be
563 eligible for any exemption provided for in this section, irrespective of
564 whether or not such facility is under contract with a state agency or
565 department.

566 Sec. 506. Section 19a-639c of the general statutes is repealed and the
567 following is substituted in lieu thereof (*Effective July 1, 2009*):

568 Notwithstanding the provisions of section 19a-638, as amended by
569 this act, or section 19a-639, as amended by this act, the office may
570 waive the requirements of said sections and grant a certificate of need
571 to any health care facility or institution or provider or any state health
572 care facility or institution or provider proposing to replace major
573 medical equipment, a CT scanner, PET scanner, PET/CT scanner or
574 MRI scanner [, cineangiography equipment] or a linear accelerator if:

575 (1) The health care facility or institution or provider has previously
576 obtained a certificate of need for the equipment to be replaced; [and] or

577 (2) The health care facility or institution or provider had previously
578 obtained a determination pursuant to subsection (c) of section 19a-
579 639a, as amended by this act, that a certificate of need was not required
580 for the original acquisition of the equipment; and

581 ~~[(2)]~~ (3) The replacement value or expenditure is less than three

582 million dollars.

583 Sec. 507. Subsection (a) of section 19a-653 of the general statutes is
584 repealed and the following is substituted in lieu thereof (*Effective July*
585 *1, 2009*):

586 (a) (1) Any person or health care facility or institution that owns,
587 operates or is seeking to acquire major medical equipment costing over
588 three million dollars, or scanning equipment, [cineangiography
589 equipment,] a linear accelerator or other similar equipment utilizing
590 technology that is developed or introduced into the state on or after
591 October 1, 2005, or any person or health care facility or institution that
592 is required to file data or information under any public or special act or
593 under this chapter or sections 19a-486 to 19a-486h, inclusive, or any
594 regulation adopted or order issued under this chapter or said sections,
595 which fails to so file within prescribed time periods, shall be subject to
596 a civil penalty of up to one thousand dollars a day for each day such
597 information is missing, incomplete or inaccurate. Any civil penalty
598 authorized by this section shall be imposed by the Office of Health
599 Care Access in accordance with subsections (b) to (e), inclusive, of this
600 section.

601 (2) If a person or health care facility or institution is unsure whether
602 a certificate of need is required under section 19a-638, as amended by
603 this act, or section 19a-639, as amended by this act, or under both
604 sections, it shall send a letter to the office describing the project and
605 requesting that the office make such a determination. A person making
606 a request for a determination as to whether a certificate of need, waiver
607 or exemption is required shall provide the office with any information
608 the office requests as part of its determination process.

609 Sec. 508. Section 19a-80f of the general statutes is repealed and the
610 following is substituted in lieu thereof (*Effective October 1, 2009*):

611 [In accordance with section 17a-101j, the Commissioner of Children
612 and Families shall notify the Commissioner of Public Health of all
613 information concerning substantiated complaints, pursuant to

614 subsection (b) of said section 17a-101j, of incidents of abuse or neglect
615 which have occurred at any licensed day care facility. If the
616 Commissioner of Children and Families determines that there was
617 abuse or neglect of a child, he shall notify the person about whom the
618 claim was substantiated of the determination, in writing. Such
619 notification shall include a description of the abuse or neglect and the
620 reasons for substantiation. The Commissioner of Public Health shall
621 compile a listing of the information and of complaints received and
622 substantiated by the Department of Public Health concerning a
623 licensed day care facility during the prior three-year period. The
624 Commissioner of Public Health shall disclose information contained in
625 the listing to any person who requests it, provided the information
626 does not identify children, families, staff members or employees of any
627 licensed facility or any person residing in the household of a person
628 licensed under section 19a-87b.]

629 (a) As used in this section, "facility" means a child day care center, a
630 group day care home and a family day care home, as defined in section
631 19a-77, as amended by this act, and a youth camp, as defined in section
632 19a-420, as amended by this act.

633 (b) Notwithstanding any provision of the general statutes, the
634 Commissioner of Children and Families, or the commissioner's
635 designee, shall provide to the Department of Public Health all records
636 concerning reports and investigations of suspected child abuse or
637 neglect, including records of any administrative hearing held pursuant
638 to section 17a-101k: (1) Occurring at any facility, and (2) by any staff
639 member or licensee of any facility and by any household member of
640 any family day care home, as defined in section 19a-77, as amended by
641 this act, irrespective of where the abuse or neglect occurred.

642 (c) The Department of Children and Families and the Department of
643 Public Health shall jointly investigate reports of abuse or neglect
644 occurring at any facility. All information, records and reports
645 concerning such investigation shall be shared between agencies as part
646 of the investigative process.

647 (d) The Commissioner of Public Health shall compile a listing of
648 allegations of violations that have been substantiated by the
649 Department of Public Health concerning a facility during the prior
650 three-year period. The Commissioner of Public Health shall disclose
651 information contained in the listing to any person who requests it,
652 provided the information does not identify children or family
653 members of those children.

654 (e) Notwithstanding any provision of the general statutes, when the
655 Commissioner of Children and Families has made a finding
656 substantiating abuse or neglect: (1) That occurred at a facility, or (2) by
657 any staff member or licensee of any facility, or by any household
658 member of any family day care home and such finding is included on
659 the state child abuse or neglect registry, maintained by the Department
660 of Children and Families pursuant to section 17a-101k, such finding
661 may be included in the listing compiled by the Department of Public
662 Health pursuant to subsection (d) of this section and may be disclosed
663 to the public by the Department of Public Health.

664 (f) Notwithstanding any provision of the general statutes, when the
665 Commissioner of Children and Families, pursuant to section 17a-101j,
666 has notified the Department of Public Health of suspected child abuse
667 or neglect at a facility and if such child abuse or neglect resulted in or
668 involves (1) the death of a child; (2) the risk of serious physical injury
669 or emotional harm of a child; (3) the serious physical harm of a child;
670 (4) the arrest of a person due to abuse or neglect of a child; (5) a
671 petition filed by the Commissioner of Children and Families pursuant
672 to section 17a-112 or 46b-129; or (6) sexual abuse of a child, the
673 Commissioner of Public Health may include a finding of child abuse or
674 neglect in the listing under subsection (d) of this section and may
675 disclose such finding to the public. If the Commissioner of Children
676 and Families, or the commissioner's designee, notifies the
677 Commissioner of Public Health that such child abuse or neglect was
678 not substantiated after investigation or reversed after appeal, the
679 Commissioner of Public Health shall immediately remove such
680 information from the listing and shall not further disclose any such

681 information to the public.

682 (g) Notwithstanding any provision of the general statutes, all
683 records provided by the Commissioner of Children and Families, or
684 the commissioner's designee, to the Department of Public Health
685 regarding child abuse or neglect occurring at any facility, may be
686 utilized in an administrative proceeding or court proceeding relative to
687 facility licensing. In any such proceeding, such records shall be
688 confidential, except as provided by the provisions of section 4-177c,
689 and such records shall not be subject to disclosure pursuant to section
690 1-210.

691 Sec. 509. Subdivision (1) of section 19a-420 of the general statutes is
692 repealed and the following is substituted in lieu thereof (*Effective*
693 *October 1, 2009*):

694 (1) "Youth camp" means any regularly scheduled program or
695 organized group activity advertised as a camp or operated only during
696 school vacations or on weekends by a person, partnership,
697 corporation, association, the state or a municipal agency for
698 recreational or educational purposes and accommodating for profit or
699 under philanthropic or charitable auspices five or more children, who
700 are at least three years of age and under sixteen years of age, who are
701 (A) not bona fide personal guests in the private home of an individual,
702 and (B) living apart from their relatives, parents or legal guardian, for
703 a period of three days or more per week or portions of three or more
704 days per week, provided any such relative, parent or guardian who is
705 an employee of such camp shall not be considered to be in the position
706 of loco parentis to such employee's child for the purposes of this
707 chapter, but does not include (i) classroom-based summer instructional
708 programs operated by any person, provided no activities that may
709 pose a health risk or hazard to participating children are conducted at
710 such programs, (ii) public schools, or private schools in compliance
711 with section 10-188 and approved by the State Board of Education or
712 accredited by an accrediting agency recognized by the State Board of
713 Education, which operate a summer educational program, (iii) licensed

714 day care centers, or (iv) drop-in programs for children who are at least
715 six years of age administered by a nationally chartered boys' and girls'
716 club.

717 Sec. 510. Section 19a-423 of the general statutes is repealed and the
718 following is substituted in lieu thereof (*Effective October 1, 2009*):

719 (a) The commissioner may take any of the actions authorized under
720 subsection (b) of this section if the youth camp licensee: (1) Is convicted
721 of any offense involving moral turpitude, the record of conviction
722 being conclusive evidence thereof; (2) is legally adjudicated insane or
723 mentally incompetent, the record of such adjudication being
724 conclusive evidence thereof; (3) uses any narcotic or any controlled
725 drug, as defined in section 21a-240, to an extent or in a manner that
726 such use impairs the licensee's ability to properly care for children; (4)
727 fails to comply with the statutes and regulations for licensing youth
728 camps; (5) furnishes or makes any misleading or any false statement or
729 report to the department; (6) refuses to submit to the department any
730 reports or refuses to make available to the department any records
731 required by it in investigating the facility for licensing purposes; (7)
732 fails or refuses to submit to an investigation or inspection by the
733 department or to admit authorized representatives of the department
734 at any reasonable time for the purpose of investigation, inspection or
735 licensing; (8) fails to provide, maintain, equip and keep in safe and
736 sanitary condition premises established for or used by the campers
737 pursuant to minimum standards prescribed by the department or by
738 ordinances or regulations applicable to the location of such facility; or
739 (9) wilfully or deliberately violates any of the provisions of this
740 chapter.

741 (b) The Commissioner of Public Health, after a contested case
742 hearing held in accordance with the provisions of chapter 54, may take
743 any of the following actions, singly or in combination, in any case in
744 which the commissioner finds that there has been a substantial failure
745 to comply with the requirements established under sections 19a-420 to
746 19a-428, inclusive, as amended by this act, the Public Health Code or

747 regulations adopted pursuant to section 19a-428: (1) Revoke a license;
748 (2) suspend a license; (3) impose a civil penalty of not more than one
749 hundred dollars per violation for each day of occurrence; (4) place a
750 licensee on probationary status and require such licensee to report
751 regularly to the department on the matters that are the basis of the
752 probation; [or] (5) restrict the acquisition of other facilities for a period
753 of time set by the commissioner; or (6) impose limitations on a license.

754 (c) The commissioner shall notify the licensee, in writing, of the
755 commissioner's intention to suspend or revoke the license or to impose
756 a licensure action. The licensee may, if aggrieved by such intended
757 action, make application for a hearing, in writing, over the licensee's
758 signature to the commissioner. The licensee shall state in the
759 application in plain language the reasons why the licensee claims to be
760 aggrieved. The application shall be delivered to the commissioner not
761 later than thirty days after the licensee's receipt of notification of the
762 intended action.

763 (d) The commissioner shall hold a hearing not later than sixty days
764 after receipt of such application and shall, at least ten days prior to the
765 date of such hearing, mail a notice, giving the time and place of the
766 hearing, to the licensee. The hearing may be conducted by the
767 commissioner or by a hearing officer appointed by the commissioner,
768 in writing. The licensee and the commissioner or hearing officer may
769 issue subpoenas requiring the attendance of witnesses. The licensee
770 shall be entitled to be represented by counsel and a transcript of the
771 hearing shall be made. If the hearing is conducted by a hearing officer,
772 the hearing officer shall state the hearing officer's findings and make a
773 recommendation to the commissioner on the issue of revocation or
774 suspension or the intended licensure action.

775 (e) The commissioner, based upon the findings and
776 recommendation of the hearing officer, or after a hearing conducted by
777 the commissioner, shall render the commissioner's decision, in writing,
778 suspending, revoking or continuing the license or regarding the
779 intended licensure action. A copy of the decision shall be sent by

780 certified mail to the licensee. The decision revoking or suspending the
781 license or a decision imposing a licensure action shall become effective
782 thirty days after it is mailed by registered or certified mail to the
783 licensee. A licensee aggrieved by the decision of the commissioner may
784 appeal in the same manner as provided in section 19a-85.

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

791 (g) If the department determines that the health, safety or welfare of
792 a child or staff person at a youth camp requires imperative emergency
793 action by the department to halt an activity being provided at the
794 camp, the department may issue a cease and desist order limiting the
795 license and requiring the immediate cessation of the activity. The
796 department shall provide the licensee with an opportunity for a
797 hearing regarding the issuance of a cease and desist order. Such
798 hearing shall be held not later than ten business days after the date of
799 issuance of the order. Upon receipt of such order, the licensee shall
800 cease providing the activity and provide immediate notification to staff
801 and the parents of all children attending the camp that such activity
802 has ceased at the camp until such time as the cease and desist order is
803 dissolved by the department.

804 Sec. 511. Subsection (f) of section 17a-28 of the general statutes is
805 repealed and the following is substituted in lieu thereof (*Effective*
806 *October 1, 2009*):

807 (f) The commissioner or the commissioner's designee shall, upon
808 request, promptly provide copies of records, without the consent of a
809 person, to (1) a law enforcement agency, (2) the Chief State's Attorney,
810 or the Chief State's Attorney's designee, or a state's attorney for the
811 judicial district in which the child resides or in which the alleged abuse

812 or neglect occurred, or the state's attorney's designee, for purposes of
813 investigating or prosecuting an allegation of child abuse or neglect, (3)
814 the attorney appointed to represent a child in any court in litigation
815 affecting the best interests of the child, (4) a guardian ad litem
816 appointed to represent a child in any court in litigation affecting the
817 best interests of the child, (5) the Department of Public Health, [which
818 licenses] in connection with: (A) Licensure of any person to care for
819 children for the purposes of determining the suitability of such person
820 for licensure, subject to the provisions of sections 17a-101g and 17a-
821 101k, or (B) an investigation conducted pursuant to section 19a-80f, (6)
822 any state agency which licenses such person to educate or care for
823 children pursuant to section 10-145b or 17a-101j, subject to the
824 provisions of sections 17a-101g and 17a-101k concerning nondisclosure
825 of findings of responsibility for abuse and neglect, (7) the Governor,
826 when requested in writing, in the course of the Governor's official
827 functions or the Legislative Program Review and Investigations
828 Committee, the joint standing committee of the General Assembly
829 having cognizance of matters relating to the judiciary and the select
830 committee of the General Assembly having cognizance of matters
831 relating to children when requested in the course of said committees'
832 official functions in writing, and upon a majority vote of said
833 committee, provided no names or other identifying information shall
834 be disclosed unless it is essential to the legislative or gubernatorial
835 purpose, (8) a local or regional board of education, provided the
836 records are limited to educational records created or obtained by the
837 state or Connecticut-Unified School District #2, established pursuant to
838 section 17a-37, (9) a party in a custody proceeding under section 17a-
839 112 or 46b-129, in the Superior Court where such records concern a
840 child who is the subject of the proceeding or the parent of such child,
841 (10) the Chief Child Protection Attorney, or his or her designee, for
842 purposes of ensuring competent representation by the attorneys whom
843 the Chief Child Protection Attorney contracts with to provide legal and
844 guardian ad litem services to the subjects of such records and to ensure
845 accurate payments for services rendered by such contract attorneys,
846 and (11) the Department of Motor Vehicles, for purposes of checking

847 the state's child abuse and neglect registry pursuant to subsection (e) of
848 section 14-44. A disclosure under this section shall be made of any part
849 of a record, whether or not created by the department, provided no
850 confidential record of the Superior Court shall be disclosed other than
851 the petition and any affidavits filed therewith in the superior court for
852 juvenile matters, except upon an order of a judge of the Superior Court
853 for good cause shown. The commissioner shall also disclose the name
854 of any individual who cooperates with an investigation of a report of
855 child abuse or neglect to such law enforcement agency or state's
856 attorney for purposes of investigating or prosecuting an allegation of
857 child abuse or neglect. The commissioner or the commissioner's
858 designee shall, upon request, subject to the provisions of sections 17a-
859 101g and 17a-101k, promptly provide copies of records, without the
860 consent of the person, to (A) the Department of Public Health for the
861 purpose of determining the suitability of a person to care for children
862 in a facility licensed under sections 19a-77 to 19a-80, inclusive, as
863 amended by this act, 19a-82 to 19a-87, inclusive, and 19a-87b, and (B)
864 the Department of Social Services for determining the suitability of a
865 person for any payment from the department for providing child care.

866 Sec. 512. Subsection (l) of section 17a-28 of the general statutes is
867 repealed and the following is substituted in lieu thereof (*Effective*
868 *October 1, 2009*):

869 (l) Information disclosed from a person's record shall not be
870 disclosed further without the written consent of the person, except if
871 disclosed (1) pursuant to the provisions of section 19a-80f, or (2) to a
872 party or his counsel pursuant to an order of a court in which a criminal
873 prosecution or an abuse, neglect, commitment or termination
874 proceeding against the party is pending. A state's attorney shall
875 disclose to the defendant or his counsel in a criminal prosecution,
876 without the necessity of a court order, exculpatory information and
877 material contained in such record and may disclose, without a court
878 order, information and material contained in such record which could
879 be the subject of a disclosure order. All written records disclosed to
880 another individual or agency shall bear a stamp requiring

881 confidentiality in accordance with the provisions of this section. Such
882 material shall not be disclosed to anyone without written consent of
883 the person or as provided by this section. A copy of the consent form
884 specifying to whom and for what specific use the record is disclosed or
885 a statement setting forth any other statutory authorization for
886 disclosure and the limitations imposed thereon shall accompany such
887 record. In cases where the disclosure is made orally, the individual
888 disclosing the information shall inform the recipient that such
889 information is governed by the provisions of this section.

890 Sec. 513. Section 19a-77 of the general statutes is repealed and the
891 following is substituted in lieu thereof (*Effective from passage*):

892 (a) As used in sections 19a-77 to 19a-80, inclusive, as amended by
893 this act, and sections 19a-82 to 19a-87, inclusive, "child day care
894 services" shall include:

895 (1) A "child day care center" which offers or provides a program of
896 supplementary care to more than twelve related or unrelated children
897 outside their own homes on a regular basis;

898 (2) A "group day care home" which offers or provides a program of
899 supplementary care (A) to not less than seven or more than twelve
900 related or unrelated children on a regular basis, or (B) that meets the
901 definition of a family day care home except that it operates in a facility
902 other than a private family home;

903 (3) A "family day care home" which consists of a private family
904 home caring for not more than six children, including the provider's
905 own children not in school full time, where the children are cared for
906 not less than three or more than twelve hours during a twenty-four-
907 hour period and where care is given on a regularly recurring basis
908 except that care may be provided in excess of twelve hours but not
909 more than seventy-two consecutive hours to accommodate a need for
910 extended care or intermittent short-term overnight care. During the
911 regular school year, a maximum of three additional children who are
912 in school full time, including the provider's own children, shall be

913 permitted, except that if the provider has more than three children
914 who are in school full time, all of the provider's children shall be
915 permitted;

916 (4) "Night care" means the care provided for one or more hours
917 between the hours of 10:00 p.m. and 5:00 a.m.;

918 (5) "Year-round" program means a program open at least fifty
919 weeks per year.

920 (b) For licensing requirement purposes, child day care services shall
921 not include such services which are:

922 (1) (A) Administered by a public school system, or (B) administered
923 by a municipal agency or department and located in a public school
924 building;

925 (2) Administered by a private school which is in compliance with
926 section 10-188 and is approved by the State Board of Education or is
927 accredited by an accrediting agency recognized by the State Board of
928 Education;

929 (3) Classes in music, dance, drama and art that are no longer than
930 two hours in length; classes that teach a single skill that are no longer
931 than two hours in length; library programs that are no longer than two
932 hours in length; scouting; programs that offer exclusively sports
933 activities; rehearsals; academic tutoring programs; or programs
934 exclusively for children thirteen years of age or older;

935 (4) Informal arrangements among neighbors or relatives in their
936 own homes, provided the relative is limited to any of the following
937 degrees of kinship by blood or marriage to the child being cared for or
938 to the child's parent: Child, grandchild, sibling, niece, nephew, aunt,
939 uncle or child of one's aunt or uncle;

940 (5) Drop-in supplementary child care operations for educational or
941 recreational purposes and the child receives such care infrequently
942 where the parents are on the premises;

943 (6) Drop-in supplementary child care operations in retail
944 establishments where the parents are on the premises for retail
945 shopping, in accordance with section 19a-77a, provided that the drop-
946 in supplementary child-care operation does not charge a fee and does
947 not refer to itself as a child day care center;

948 (7) Drop-in programs administered by a nationally chartered boys'
949 and girls' club; or

950 (8) Religious educational activities administered by a religious
951 institution exclusively for children whose parents or legal guardians
952 are members of such religious institution.

953 (c) No registrant or licensee of any child day care services as defined
954 in subsection (a) of this section shall be issued an additional
955 registration or license to provide any such services at the same facility.

956 (d) When a licensee has vacated premises approved by the
957 department for the provision of child day care services and the
958 landlord of such licensee establishes to the satisfaction of the
959 department that such licensee has no legal right or interest to such
960 approved premises, the department may make a determination with
961 respect to an application for a new license for the provision of child
962 day care services at such premises.

963 Sec. 514. Subdivision (1) of subsection (b) of section 19a-80 of the
964 general statutes is repealed and the following is substituted in lieu
965 thereof (*Effective from passage*):

966 (b) (1) Upon receipt of an application for a license, the
967 Commissioner of Public Health shall issue such license if, upon
968 inspection and investigation, said commissioner finds that the
969 applicant, the facilities and the program meet the health, educational
970 and social needs of children likely to attend the child day care center or
971 group day care home and comply with requirements established by
972 regulations adopted under sections 19a-77 to 19a-80, inclusive, as
973 amended by this act, and sections 19a-82 to 19a-87, inclusive. The

974 Commissioner of Public Health shall offer an expedited application
975 review process for an application submitted by a municipal agency or
976 department. Each license shall be for a term of two years, provided on
977 and after October 1, 2008, each license shall be for a term of four years,
978 shall be transferable, may be renewed upon payment of the licensure
979 fee and may be suspended or revoked after notice and an opportunity
980 for a hearing as provided in section 19a-84 for violation of the
981 regulations adopted under sections 19a-77 to 19a-80, inclusive, as
982 amended by this act, and sections 19a-82 to 19a-87, inclusive."