General Assembly

Bill No. 6705

January Session, 2013

LCO No. **8648**

Referred to Committee on No Committee

Introduced by:
REP. SHARKEY, 88th Dist.
SEN. WILLIAMS, 29th Dist.

AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET RECOMMENDATIONS FOR HOUSING, HUMAN SERVICES AND PUBLIC HEALTH.

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

Section 1. (NEW) (*Effective July 1, 2013*) The Commissioner of Housing may appoint a Deputy Commissioner of Housing who shall be qualified by training and experience for the duties of the office of commissioner and shall, in the absence, disability or disqualification of the commissioner, perform all the functions and have all the powers and duties of said office. The position of the Deputy Commissioner of Housing shall be exempt from the classified service.

Sec. 2. (*Effective from passage*) (a) Wherever in sections 4-66h, 8-13m to 8-13s, inclusive, 8-13u to 8-13x, inclusive, and 12-170e of the general statutes the term "secretary" is used, the term "commissioner" shall be substituted in lieu thereof, and wherever the term "the Office of Policy and Management" is used, the term "Housing" shall be substituted in

lieu thereof.

(b) Wherever the term "Economic and Community Development" is used in the following general statutes, the term "Housing" shall be substituted in lieu thereof: 4b-21, 7-392, 8-37v, 8-37w, 8-37y, 8-37aa, 8-37jj, 8-37pp, 8-37qq, as amended by this act, 8-37rr, 8-37tt, 8-37vv, 8-37zz, 8-37aaa, 8-37*lll*, 8-37mmm, 8-39, 8-44a, 8-45, 8-47, 8-49, 8-57, 8-64c, 8-68, 8-68a, 8-68b, 8-68d, 8-68e, 8-68f, 8-68g, 8-68h, 8-68j, 8-70, 8-71, 8-72, 8-72a, 8-73, 8-74, 8-76a, 8-77, 8-78, 8-79, 8-79a, 8-80, 8-82, 8-83, 8-84, 8-85, 8-87, 8-89, 8-92, 8-113a, 8-114a, 8-114d, 8-115a, 8-116a, 8-117b, 8-118a, 8-118b, 8-118c, 8-119a, 8-119c, 8-119h, 8-119i, 8-119j, 8-119k, 8-119*l*, 8-119m, 8-119x, 8-119dd, 8-119ee, 8-119ff, 8-119gg, 8-119hh, 8-119jj, 8-119zz, 8-126, 8-154a, 8-154c, 8-154e, 8-161, 8-162, 8-169b, 8-169w, 8-206, 8-206e, 8-208, 8-208b, 8-208c, 8-209, 8-214a, 8-214b, 8-214e, 8-214f, 8-214g, 8-214h, 8-215, 8-216, 8-216b, 8-216c, 8-218, 8-218a, 8-218b, 8-218c, 8-218e, 8-219a, 8-219b, 8-219c, 8-219d, 8-219e, 8-220, 8-220a, 8-243, 8-265p, 8-265w, 8-265oo, 8-271, 8-272, 8-273, 8-274, 8-278, 8-279, 8-280, 8-281, 8-284, 8-286, 8-336f, as amended by this act, 8-336m, 8-336p, 8-355, 8-356, 8-357, 8-359, 8-365, 8-367, 8-367a, 8-376, 8-381, 8-384, 8-386, 8-387, 8-388, 8-389, 8-400, 8-401, 8-402, 8-403, 8-404, 8-405, 8-410, 8-411, 8-412, 8-420, 8-423, 12-631, 16a-40, 16a-40j, as amended by this act, 17a-3, 17a-485c, 17b-337, 21-70, 21-70a, 21-84a, as amended by this act, 22a-1d, 29-271, 47-88b, 47-284, 47-288, 47-294, 47-295, 47a-56i, 47a-56j and 47a-56k.

(c) Wherever the term "Social Services" is used in the following general statutes, the term "Housing" shall be substituted in lieu thereof: 17b-802, 17b-803, 17b-804, 17b-805, 17b-811a, 17b-812, 17b-812a, 17b-814 and 17b-815.

(d) The Legislative Commissioners' Office shall, in codifying the provisions of this section, make such technical, grammatical and punctuation changes as are necessary to carry out the purposes of this section.

Sec. 3. Subsection (c) of section 8-37i of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(c) Said department shall constitute a successor to the functions, powers and duties of the Department of Community Affairs relating to **[**housing**]** economic development as set forth in chapters **[**128, 129,**]** 130, 131 and 135, in accordance with the provisions of sections 4-38d and 4-39.

Sec. 4. Subsection (b) of section 8-37r of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(b) The Department of Housing shall constitute a successor to the functions, powers and duties of the Department of Economic Development relating to housing, community development, redevelopment and urban renewal as set forth in chapters 128, 129, 130, 135 and 136 in accordance with the provisions of sections 4-38d, 4-38e and 4-39. The Department of Housing is designated a public housing agency for the purpose of administering the Section 8 existing certificate program and the housing voucher program pursuant to the Housing Act of 1937.

Sec. 5. Subsection (a) of section 8-121 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) The Connecticut Housing Authority shall, in accordance with the provisions of sections 4-38d, 4-38e and 4-39, constitute a successor to the functions, powers and duties of the Commissioner of **[**Economic and Community Development**]** Housing relating to the exercise by the Commissioner of **[**Economic and Community Development**]** Housing of the powers of a housing authority pursuant to chapter 128 and this chapter.

Sec. 6. Subsection (g) of section 8-206a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(g) In accordance with the provisions of section 4-38d, all powers and duties transferred to the Commissioner of Community Affairs by this section are transferred to the Commissioner of **[**Economic and Community Development**]** Housing.

Sec. 7. Section 32-1k of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

As used in **[**sections 8-244b to 8-244d, inclusive, this section and**]** section 32-1*l*, as amended by this act, the following terms shall have the following meanings unless the context clearly indicates another meaning and intent:

(1) "Department" means the Department of Economic and Community Development;

(2) "Commissioner" means the Commissioner of Economic and Community Development; and

(3) **[**"CHFA" means the Connecticut Housing Finance Authority, as created under chapter 134;**]** "CII" means Connecticut Innovations, Incorporated, as created under chapter 581.

[(4) "CII" means Connecticut Innovations, Incorporated, as created under chapter 581; and

(5) "SHE" means the State Housing Authority as created under section 8-244b.**]**

Sec. 8. Section 32-1*l* of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

In addition to his other powers and duties, the commissioner shall

have the following powers and duties:

(1) To utilize the department's resources for planning and developing an economic and community development reorganization plan which (A) sets forth policy goals for the department, (B) determines strategies to encourage economic and community development, [and the provision of housing in this state, including housing for very low, low and moderate income families,] (C) determines the feasibility of dividing the operation of programs and resources of the state in support of economic and community development between and among the department [and CHFA] and CII, (D) identifies strategies to increase the leverage of resources of the state used in furtherance of the purposes of [CHFA and] CII, (E) identifies, if feasible, divisions and recommends a timetable and procedures for transferring resources and operations between and among the department [and CHFA] and CII, and (F) recommends specific economic and community development objectives and administrative structures for the department [and CHFA] and CII. In developing such plan, the department shall be the lead agency, in collaboration with [CHFA and] CII, for research, planning and development of the plan and shall solicit community and regional input in the preparation of such plan in such a manner as will best help develop, clarify or further state policies for economic and community development. The commissioner shall submit a copy of the reorganization plan to the joint standing committees of the General Assembly having cognizance of matters relating to commerce and planning and development;

[(2) To propose to the Governor on or before January 1, 1996, legislation to implement the economic and community development reorganization plan described in subdivision (1) of this section;]

[(3)] (2) Notwithstanding the provisions of the general statutes or any special act and with the approval of the Treasurer and the Secretary of the Office of Policy and Management, to transfer to

[CHFA and] CII: (A) Any revenues received by the department or the state in connection with any program or project of the department and the right to receive any such revenues; and (B) any loan assets or equity interests held by the department in connection with any program or project of the department; provided, no such transfer shall be approved by the Treasurer or the Secretary of the Office of Policy and Management if either determines that such transfer could adversely affect the tax-exempt status of any bonds of the state, the substantial interests of third parties, the financial budget of the state or other essential rights, interests, or prerogatives of the state. The commissioner may impose such conditions as he deems necessary or appropriate with respect to the use by [CHFA or] CII of any revenues, rights, assets, interests or amounts transferred to it by the department under this subdivision; provided, the commissioner may waive any requirement under this subdivision for the adoption of written procedures until July 1, 1996;

[(4)] (3) To award to [CHFA or] CII financial, technical or other assistance. Financial assistance awarded by the department to [CHFA or] CII may take any of the following forms, subject to any conditions imposed by the department: (A) Grants; (B) loans; (C) guarantees; (D) contracts of insurance; and (E) investments. In addition, to the extent funds or resources are available to the department for such purposes, the commissioner may provide such further financial or other assistance to [CHFA and] CII as the commissioner in his sole discretion deems appropriate for any of the purposes of [CHFA and] CII respectively;

[(5)] (4) To enter into such agreements with [CHFA and] CII as may be appropriate for the purpose of performing its duties which agreements may include, but shall not be limited to, provisions for the delivery of services by [CHFA and] CII to third parties, provisions for payment by the department to [CHFA or] CII for the delivery of such services, provisions for advances and reimbursements to the department for any expenses incurred or to be incurred by it in

delivery of any services, assistance, revenues, rights, assets and interests and provisions for the sharing with [CHFA or] CII of assistants, agents and other consultants, professionals and employees, and facilities and other real and personal property used in the conduct of the department's affairs; and

[(6)] (5) To provide financial assistance for economic development projects directly or in participation with Connecticut Innovations, Incorporated, to purchase participation interests in loans made by Connecticut Innovations, Incorporated and enter into any agreements or contracts it deems necessary or convenient in connection with such loans.

Sec. 9. (NEW) (*Effective July 1, 2013*) (a) As used in sections 8-244b to 8-244d, inclusive, of the general statutes and this section, the following terms shall have the following meanings unless the context clearly indicates another meaning and intent:

(1) "Department" means the Department of Housing;

(2) "Commissioner" means the Commissioner of Housing;

(3) "CHFA" means the Connecticut Housing Finance Authority, as created under chapter 134 of the general statutes; and

(4) "SHE" means the State Housing Authority as created under section 8-244b of the general statutes.

(b) In addition to his or her other powers and duties, the commissioner shall have the following powers and duties:

(1) To utilize the department's resources for planning and developing a housing and community development reorganization plan that (A) sets forth policy goals for the department; (B) determines strategies to encourage housing and community development and the provision of housing in this state, including housing for very low, low and moderate income families; (C) determines the feasibility of

195 dividing the operation of programs and resources of the state in
196 support of housing and community development between the
197 department and CHFA; (D) identifies strategies to increase the
198 leverage of resources of the state used in furtherance of the purposes of
199 CHFA; (E) identifies, if feasible, divisions and recommends a timetable
200 and procedures for transferring resources and operations between the
201 department and CHFA; and (F) recommends specific housing and
202 community development objectives and administrative structures for
203 the department and CHFA. In developing such plan, the department
204 shall be the lead agency, in collaboration with CHFA, for research,
205 planning and development of the plan and shall solicit community and
206 regional input in the preparation of such plan in such a manner as will
207 best help develop, clarify or further state policies for housing and
208 community development. The commissioner shall submit a copy of the
209 reorganization plan to the joint standing committees of the General
210 Assembly having cognizance of matters relating to commerce and
211 planning and development;

212 (2) Notwithstanding the provisions of the general statutes or any
213 special act and with the approval of the Treasurer and the Secretary of
214 the Office of Policy and Management, to transfer to CHFA: (A) Any
215 revenues received by the department or the state in connection with
216 any program or project of the department and the right to receive any
217 such revenues; and (B) any loan assets or equity interests held by the
218 department in connection with any program or project of the
219 department; provided, no such transfer shall be approved by the
220 Treasurer or the Secretary of the Office of Policy and Management if
221 either determines that such transfer could adversely affect the tax-
222 exempt status of any bonds of the state, the substantial interests of
223 third parties, the financial budget of the state or other essential rights,
224 interests or prerogatives of the state. The commissioner may impose
225 such conditions as he or she deems necessary or appropriate with
226 respect to the use by CHFA of any revenues, rights, assets, interests or
227 amounts transferred to it by the department under this subdivision,

provided the commissioner may waive any requirement under this subdivision;

(3) To award to CHFA financial, technical or other assistance. Financial assistance awarded by the department to CHFA may take any of the following forms, subject to any conditions imposed by the department: (A) Grants; (B) loans; (C) guarantees; (D) contracts of insurance; and (E) investments. In addition, to the extent funds or resources are available to the department for such purposes, the commissioner may provide such further financial or other assistance to CHFA as the commissioner in his or her sole discretion deems appropriate for any of the purposes of CHFA; and

(4) To enter into such agreements with CHFA as may be appropriate for the purpose of performing its duties, which agreements may include, but shall not be limited to, provisions for the delivery of services by CHFA to third parties, provisions for payment by the department to CHFA for the delivery of such services, provisions for advances and reimbursements to the department for any expenses incurred or to be incurred by it in delivery of any services, assistance, revenues, rights, assets and interests and provisions for the sharing with CHFA of assistants, agents and other consultants, professionals and employees, and facilities and other real and personal property used in the conduct of the department's affairs.

Sec. 10. Subsection (b) of section 4a-60g of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(b) It is found and determined that there is a serious need to help small contractors, minority business enterprises, nonprofit organizations and individuals with disabilities to be considered for and awarded state contracts for the construction, reconstruction or rehabilitation of public buildings, the construction and maintenance of highways and the purchase of goods and services. Accordingly, the

necessity, in the public interest and for the public benefit and good, of the provisions of this section, sections 4a-60h to 4a-60j, inclusive, and sections 32-9i to 32-9p, inclusive, is declared as a matter of legislative determination. Notwithstanding any provisions of the general statutes to the contrary, and except as set forth herein, the head of each state agency and each political subdivision of the state other than a municipality shall set aside in each fiscal year, for award to small contractors, on the basis of competitive bidding procedures, contracts or portions of contracts for the construction, reconstruction or rehabilitation of public buildings, the construction and maintenance of highways and the purchase of goods and services. Eligibility of nonprofit corporations under the provisions of this section shall be limited to predevelopment contracts awarded by the Commissioner of **[**Economic and Community Development**]** Housing for housing projects. The total value of such contracts or portions thereof to be set aside by each such agency shall be at least twenty-five per cent of the total value of all contracts let by the head of such agency in each fiscal year, provided that neither: (1) A contract that may not be set aside due to a conflict with a federal law or regulation; or (2) a contract for any goods or services which have been determined by the Commissioner of Administrative Services to be not customarily available from or supplied by small contractors shall be included. Contracts or portions thereof having a value of not less than twenty-five per cent of the total value of all contracts or portions thereof to be set aside shall be reserved for awards to minority business enterprises.

Sec. 11. Subdivision (8) of subsection (a) of section 8-30g of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(8) "Commissioner" means the Commissioner of **[**Economic and Community Development**]** Housing.

Sec. 12. Section 17b-2 of the general statutes is repealed and the

following is substituted in lieu thereof (*Effective July 1, 2013*):

The Department of Social Services is designated as the state agency for the administration of (1) the child care development block grant pursuant to the Child Care and Development Block Grant Act of 1990; (2) the Connecticut energy assistance program pursuant to the Low Income Home Energy Assistance Act of 1981; (3) programs for the elderly pursuant to the Older Americans Act; (4) the state plan for vocational rehabilitation services for the fiscal year ending June 30, 1994; (5) the refugee assistance program pursuant to the Refugee Act of 1980; (6) the legalization impact assistance grant program pursuant to the Immigration Reform and Control Act of 1986; (7) the temporary assistance for needy families program pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996; (8) the Medicaid program pursuant to Title XIX of the Social Security Act; (9) the supplemental nutrition assistance program pursuant to the Food and Nutrition Act of 2008; (10) the state supplement to the Supplemental Security Income Program pursuant to the Social Security Act; (11) the state child support enforcement plan pursuant to Title IV-D of the Social Security Act; and (12) the state social services plan for the implementation of the social services block grants and community services block grants pursuant to the Social Security Act. **[**The Department of Social Services is designated a public housing agency for the purpose of administering the Section 8 existing certificate program and the housing voucher program pursuant to the Housing Act of 1937.**]**

Sec. 13. Section 8-37s of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

The Commissioner of **[**Economic and Community Development**]** <u>Housing</u> shall monitor the progress of the public and private sector toward meeting housing needs and shall collect and annually publish data on housing production in the state. In order to ensure a steady flow of information for the purposes of this section, all municipalities

shall submit to the commissioner a copy of the monthly federal Bureau of the Census report on building permits issued and public construction filed at the same time as such report is filed with the federal Bureau of the Census.

Sec. 14. Section 8-37t of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

The Commissioner of **[**Economic and Community Development**]** Housing, in consultation with the Connecticut Housing Finance Authority, shall prepare the state's consolidated plan for housing and community development in accordance with 24 CFR Part 91, as amended from time to time.

Sec. 15. Section 8-37u of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) The Commissioner of **[**Economic and Community Development**]** Housing shall work with regional planning agencies, regional councils of elected officials, regional councils of governments, municipalities and municipal agencies, housing authorities and other appropriate agencies for the purpose of coordinating housing policy and housing activities, provided such coordination shall not be construed to restrict or diminish any power, right or authority granted to any municipality, agency, instrumentality, commission or any administrative or executive head thereof in accordance with the other provisions of the general statutes to proceed with any programs, projects or activities.

(b) The Commissioner of **[**Economic and Community Development**]** Housing shall coordinate on an ongoing basis the activities and programs of state agencies or quasi-state authorities which have a major impact on the cost, production or availability of housing, provided, such coordination shall not be construed to restrict or diminish any power, right or authority granted to any such agency or authority, or of any administrative or executive head thereof in accordance with the other provisions of the general statutes, to proceed

with any programs, projects or activities, except as specifically provided in this section.

(c) In order to facilitate such coordination, the Connecticut Housing Finance Authority shall submit annually to the Commissioner of [Economic and Community Development] Housing a projected twelve-month operating plan. Said plan shall be prepared in a manner so as to be consistent with the state's consolidated plan for housing and community development prepared pursuant to section 8-37t, as amended by this act, as such plan is then in effect. Said plan shall include such matters as the authority determines are necessary and shall include, but not be limited to, production targets under each multifamily program of the authority, including targets for rental housing production for both elderly and nonelderly families in a proportion consistent with housing needs estimated pursuant to the state's consolidated plan for housing and community development; proposed new and expanded programs; proposed outreach activities to help serve areas of the state or segments of the population whose housing needs have been particularly underserved, and estimated level of subsidy needed to support the proposed level of production. The first such plan shall be submitted to the Commissioner of [Economic and Community Development] Housing prior to January 1, 1981, and subsequent plans on each twelve-month anniversary thereof.

(d) In the event the commissioner determines that the Connecticut Housing Finance Authority has not complied with the requirements of subsection (c) of this section, [he] the commissioner shall file a report with the Secretary of the Office of Policy and Management setting forth the items of the plan which are inconsistent with the [five-year plan] consolidated plan for housing and community development and setting forth those recommendations which in [his] the commissioner's opinion would result in such plan being consistent with [the five-year] such plan. In the event that the Secretary of the Office of Policy and Management concurs with the Commissioner of [Economic and Community Development, he] Housing, said secretary shall convene a

panel of the Commissioner of [Economic and Community Development] Housing, the chairman of the Connecticut Housing Finance Authority and the Secretary of the Office of Policy and Management, which panel shall resolve the inconsistencies. Nothing contained in this section shall limit the right or obligation of the Connecticut Housing Finance Authority to comply with the provisions of or covenants contained in any contract with or for the benefit of the holders of any bonds, notes or other obligations evidencing indebtedness of such authority.

(e) The Connecticut Housing Finance Authority shall, to the maximum extent practical, conduct its business according to the plan approved by the commissioner.

(f) The Commissioner of [Economic and Community Development] Housing shall consult with the Commissioner of Agriculture with regard to the policies, activities, plans and programs specified in this section and the impact on and degree of protection provided to agricultural land by such policies, activities, plans and programs.

Sec. 16. Subsection (b) of section 8-37nnn of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(b) The council shall consist of the following members: (1) The Commissioners of Social Services, Mental Health and Addiction Services, Children and Families, Correction, [and] Economic and Community Development, Education, Aging and Developmental Services, or their designees; (2) the Secretary of the Office of Policy and Management, or his or her designee; (3) the executive director of the Partnership for Strong Communities, or his or her designee; (4) the executive director of the Connecticut Housing Coalition, or his or her designee; (5) the executive director of the Connecticut Coalition to End Homelessness, or his or her designee; (6) the executive director of the Connecticut Housing Finance Authority, or his or her designee; (7) the

president of the Connecticut chapter of the National Association of Housing and Redevelopment Officials, or his or her designee; (8) two members, appointed by the members specified in subdivisions (1) to (6), inclusive, of this subsection, who shall be tenants receiving state housing assistance; and [(8)] (9) one member, appointed by the members specified in subdivisions (1) to (6), inclusive, of this subsection, who shall be a state resident eligible to receive state housing assistance. The Governor shall designate a member of the council to serve as chairperson.

Sec. 17. Section 8-37z of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) The Commissioner of [Economic and Community Development] Housing shall ensure that the involuntary displacement of persons and families residing in any single-family or multifamily dwelling, which displacement occurs in connection with any housing or community development project [or] receiving state financial assistance under any program administered by the commissioner under the general statutes, is reduced to the minimum level consistent with achieving the objectives of such program. The Commissioner of Economic and Community Development shall ensure that the involuntary displacement of persons and families residing in any single-family or multi-family dwelling, which displacement occurs in connection with any economic development project receiving state financial assistance under any program administered by the commissioner under the general statutes, is reduced to the minimum level consistent with achieving the objectives of such program. The [commissioner] commissioners shall require, as a condition of any contract for state financial assistance under the provisions of any such program, that the project for which such financial assistance is provided (1) will not cause the temporary or permanent displacement of persons and families residing in any single-family or multifamily dwelling or (2) will cause only the minimum level of such displacement which cannot be avoided due to the nature of the project. The [commissioner]

451 commissioners shall ensure that all steps necessary to provide any
452 relocation assistance available under chapter 135 to persons and
453 families unavoidably displaced as a result of any [state assisted] state-
454 assisted housing or community development project or economic
455 development project have been taken before granting final approval of
456 any financial assistance for such project.

457 (b) The Commissioner of [Economic and Community Development
458 shall] Housing, in consultation with the Commissioner of Economic
459 and Community Development, may adopt regulations, in accordance
460 with the provisions of chapter 54, to carry out the purposes of this
461 section.

462 Sec. 18. Section 8-37bb of the general statutes is repealed and the
463 following is substituted in lieu thereof (*Effective July 1, 2013*):

464 (a) On or before December 31, [1991] 2013, and annually thereafter,
465 each housing agency, except the Department of [Economic and
466 Community Development] Housing, shall submit to the General
467 Assembly a report, for the year ending the preceding September
468 thirtieth, which analyzes by income group, households served by its
469 housing construction, substantial rehabilitation, purchase and rental
470 assistance programs. Each report [submitted after December 31, 1991,]
471 shall analyze the households served under each program by race. The
472 analysis shall provide information by housing development, if
473 applicable, and by program. Each analysis shall include data for all
474 households (1) entering an agency program during the year ending the
475 preceding September thirtieth, and (2) in occupancy or receiving the
476 benefits of an agency rental program the preceding September
477 thirtieth. The report of the Connecticut Housing Finance Authority
478 shall also identify, by census tract, the number of households served in
479 each program and the total amount of financial assistance provided to
480 such households. The provisions of this section shall not be construed
481 to preclude a housing agency from reporting additional information
482 on programs it administers. Each report submitted under this section

483 shall also analyze the efforts, and the results of such efforts, of each
484 agency in promoting fair housing choice and racial and economic
485 integration. The provisions of this section shall not be construed to
486 require an occupant or applicant to disclose his race on an application
487 or survey form.

488 (b) Each report submitted under this section shall also document the
489 efforts of the agency in promoting fair housing choice and racial and
490 economic integration and shall include data on the racial composition
491 of the occupants and persons on the waiting list of each housing
492 project which is assisted under any housing program established by
493 the general statutes or special act or which is supervised by the agency.
494 The provisions of this subsection shall not be construed to require
495 disclosure of such information by any occupant or person on a waiting
496 list.

497 (c) **[**On and after October 1, 1996, the**]** The report shall be submitted
498 to the joint standing committee of the General Assembly having
499 cognizance of matters relating to housing and, upon request, to any
500 member of the General Assembly. A summary of the report shall be
501 submitted to each member of the General Assembly if the summary is
502 two pages or less and a notification of the report shall be submitted to
503 each member if the summary is more than two pages. Submission shall
504 be by mailing the report, summary or notification to the legislative
505 address of each member of the committee or the General Assembly, as
506 applicable.

507 Sec. 19. Section 8-37ff of the general statutes is repealed and the
508 following is substituted in lieu thereof (*Effective July 1, 2013*):

509 **[**Not later than July 1, 2006, the**]** The Department of **[**Economic and
510 Community Development**]** Housing shall develop and maintain a
511 comprehensive inventory of all assisted housing, as defined in section
512 8-30g, as amended by this act, in the state. The inventory shall identify
513 all existing assisted rental units by type and funding source, and

include, but not be limited to, information on tenant eligibility, rents charged, available subsidies, occupancy and vacancy rates, waiting lists and accessibility features. In order to assist the department in the completion of the inventory, all owners of such housing units, both public and private, shall report accessible housing units to the database established and maintained under section 8-119x.

Sec. 20. Section 8-37kk of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

The Department of Economic and Community Development, the Department of Housing and the Connecticut Housing Finance Authority shall give preference to loans for energy efficient projects in all grant and loan programs.

Sec. 21. Section 8-37*ll* of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) No state financial assistance shall be provided by the Commissioner of Housing for any housing or community development project or by the Commissioner of Economic and Community Development for any economic development project **[**shall be provided by the Commissioner of Economic and Community Development**]** under any program administered by **[**the commissioner**]** such commissioners unless the commissioner responsible for administering the program has first approved a residential antidisplacement and relocation assistance plan submitted under subsection (b) of this section by the applicant seeking such financial assistance. The Commissioner of Economic and Community Development shall ensure that any such plan is properly implemented for each project for which a plan is submitted.

(b) Any applicant seeking state financial assistance for any housing or community development project under any program administered by the Commissioner of Housing or economic development project under any program administered by the Commissioner of Economic

545 and Community Development shall submit a residential
546 antidisplacement and relocation assistance plan to the commissioner
547 responsible for administering the program as part of the application
548 for such financial assistance. The plan shall demonstrate that the
549 project for which financial assistance is applied for will not cause the
550 temporary or permanent displacement of persons and families
551 residing in any single-family or multifamily residential dwelling or, if
552 such displacement will result, that such project will cause no more
553 displacement than is necessary to accomplish the project. If occupiable
554 dwelling units are destroyed as a result of the project or displacement
555 of low and moderate income households will result from the project,
556 the plan shall further demonstrate that: (1) The applicant shall provide
557 comparable replacement dwellings within the same municipality for
558 the same number of occupants as could have been housed in the
559 occupied and vacant occupiable residential dwellings that will be
560 demolished or converted to a use other than housing for low and
561 moderate income persons and families as a result of the project; (2)
562 such replacement dwellings shall be designed to remain affordable to
563 low and moderate income persons and families for ten years; (3)
564 relocation assistance benefits shall be provided pursuant to chapter 135
565 for all persons displaced as a result of the project; and (4) displaced
566 persons, to the extent practicable, who wish to remain in the same
567 neighborhood shall be relocated within such neighborhood. As used in
568 this subsection, "low and moderate income persons and families"
569 means persons, families or households whose annual income is less
570 than or equal to eighty per cent of the area median income for the area
571 of the state in which they live, as determined by the United States
572 Department of Housing and Urban Development. An applicant shall
573 be deemed to have met the replacement requirements of this section by
574 rehabilitation of vacant, unoccupiable units.

575 (c) The Commissioner of Economic and Community Development
576 or the Commissioner of Housing may exempt an applicant from the
577 provisions of this section upon determination that:

578 (1) Based on objective data, there is available in the area an adequate
579 supply of habitable affordable housing for the full range of low and
580 moderate income persons, or

581 (2) The project will dedicate at least as much total floor space to
582 housing for low and moderate income persons and families as was
583 contained in all the dwelling units being replaced, whether occupied
584 or vacant, and either (A) the project will not permanently displace any
585 person or family or (B) all of the following: (i) The sizes and purposes
586 of the dwelling units in the project are at least as needed as the sizes
587 and purposes of the dwelling units to be replaced; (ii) the number of
588 very low income persons to be served in the project is not less than the
589 number of very low income persons served by the structure to be
590 replaced, and (iii) the persons and families to be displaced by the
591 project will be relocated to permanent housing and will receive
592 relocation assistance pursuant to chapter 135. As used in this
593 subsection, "very low income persons" means persons whose annual
594 income is less than or equal to fifty per cent of the area median income
595 for the area of the state in which they live, as determined by the United
596 States Department of Housing and Urban Development.

597 (d) The Commissioner of Economic and Community Development
598 **[**shall**]** <u>and the Commissioner of Housing may</u> adopt regulations, in
599 accordance with the provisions of chapter 54, to carry out the purposes
600 of this section. Such regulations shall define the objective data used
601 under subdivision (1) of subsection (c) of this section to determine
602 whether there is an adequate supply of habitable affordable housing
603 for the full range of low and moderate income persons and families
604 residing in the area.

605 Sec. 22. Section 8-37yy of the general statutes is repealed and the
606 following is substituted in lieu thereof (*Effective July 1, 2013*):

607 (a) The Department of **[**Economic and Community Development**]**
608 <u>Housing</u> shall, in consultation with the State-Assisted Housing

609 Sustainability Advisory Committee, established pursuant to section 8-
610 37zz, establish and maintain the State-Assisted Housing Sustainability
611 Fund for the purpose of the preservation of eligible housing. The
612 moneys of the fund shall be available to the department to provide
613 financial assistance to the owners of eligible housing for the
614 maintenance, repair, rehabilitation, and modernization of eligible
615 housing and for other activities consistent with preservation of eligible
616 housing, including, but not limited to, (1) emergency repairs to abate
617 actual or imminent emergency conditions that would result in the loss
618 of habitable housing units, (2) major system repairs or upgrades,
619 including, but not limited to, repairs or upgrades to roofs, windows,
620 mechanical systems and security, (3) reduction of vacant units, (4)
621 remediation or abatement of hazardous materials, including lead, (5)
622 increases in development mobility and sensory impaired accessibility
623 in units, common areas and accessible routes, (6) relocation costs and
624 alternative housing for not more than sixty days, necessary because of
625 the failure of a major building system, and (7) a comprehensive
626 physical needs assessment. Financial assistance shall be awarded to
627 applicants consistent with standards and criteria adopted in
628 consultation with the joint standing committee of the General
629 Assembly having cognizance of matters relating to housing.

630 (b) In each of the fiscal years ending June 30, 2008, and June 30,
631 2009, the department may expend not more than seven hundred fifty
632 thousand dollars from the fund for reasonable administrative costs
633 related to the operation of the fund, including the expenses of the
634 State-Assisted Housing Sustainability Advisory Committee, the
635 development of analytic tools and research concerning the capital and
636 operating needs of eligible housing for the purpose of advising the
637 General Assembly on policy regarding eligible housing and the study
638 required by section 107 of public act 07-4 of the June special session.
639 Thereafter, the department shall prepare an administrative budget.

640 (c) The department may adopt regulations, in accordance with
641 chapter 54, to implement the provisions of this section and sections 8-

37xx, 8-37zz and 8-37aaa. Such regulations shall establish guidelines for grants and loans, and a process for certifying an emergency condition in not more than forty-eight hours and for committing emergency funds, including costs of resident relocation, if necessary, not more than five business days after application by the owner of eligible housing for emergency repair financial assistance.

(d) In reviewing applications and providing financial assistance under this section, the department, in consultation with the joint standing committee of the General Assembly having cognizance of matters relating to housing, shall consider the long-term viability of the eligible housing and the likelihood that financial assistance will assure such long-term viability. As used in this section, "viability" includes, but is not limited to, continuous habitability and adequate operating cash flow to maintain the existing physical plant and any capital improvements and to provide basic services required under the lease and otherwise required by local codes and ordinances.

(e) **[**On or before February 1, 2009, and annually thereafter,**]** Annually, on or before March thirty-first, the department shall submit a report on the operation of the fund, for the previous calendar year, to the General Assembly, in accordance with section **[**32-1m**]** 55 of this act. The report shall include an analysis of the distribution of funds and an evaluation of the performance of said fund and may include recommendations for modification to the program.

Sec. 23. Section 8-64a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

No housing authority which receives or has received any state financial assistance may sell, lease, transfer or destroy, or contract to sell, lease, transfer or destroy, any housing project or portion thereof in any case where such project or portion thereof would no longer be available for the purpose of low or moderate income rental housing as a result of such sale, lease, transfer or destruction, except the

673 Commissioner of [Economic and Community Development] Housing
674 may grant written approval for the sale, lease, transfer or destruction
675 of a housing project if the commissioner finds, after a public hearing,
676 that (1) the sale, lease, transfer or destruction is in the best interest of
677 the state and the municipality in which the project is located, (2) an
678 adequate supply of low or moderate income rental housing exists in
679 the municipality in which the project is located, (3) the housing
680 authority has developed a plan for the sale, lease, transfer or
681 destruction of such project in consultation with the residents of such
682 project and representatives of the municipality in which such project is
683 situated and has made adequate provision for said residents' and
684 representatives' participation in such plan, and (4) any person who is
685 displaced as a result of the sale, lease, transfer or destruction will be
686 relocated to a comparable dwelling unit of public or subsidized
687 housing in the same municipality or will receive a tenant-based rental
688 subsidy and will receive relocation assistance under chapter 135. The
689 commissioner shall consider the extent to which the housing units
690 which are to be sold, leased, transferred or destroyed will be replaced
691 in ways which may include, but need not be limited to, newly
692 constructed housing, rehabilitation of housing which is abandoned or
693 has been vacant for at least one year, or new federal, state or local
694 tenant-based or project-based rental subsidies. The commissioner shall
695 give the residents of the housing project or portion thereof which is to
696 be sold, leased, transferred or destroyed written notice of said public
697 hearing by first class mail not less than ninety days before the date of
698 the hearing. Said written approval shall contain a statement of facts
699 supporting the findings of the commissioner. This section shall not
700 apply to the sale, lease, transfer or destruction of a housing project
701 pursuant to the terms of any contract entered into before June 3, 1988.
702 The commissioner shall not impose a one-for-one replacement
703 requirement on King Court in East Hartford. This section shall not
704 apply to phase I of Father Panik Village in Bridgeport, Elm Haven in
705 New Haven, [Pequonock] Pequonnock Gardens Project in Bridgeport,
706 Evergreen Apartments in Bridgeport, Quinnipiac Terrace/Riverview

in New Haven, Dutch Point in Hartford, Southfield Village in Stamford and, upon approval by the United States Department of Housing and Urban Development of a HOPE VI revitalization application and a revitalization plan that includes at least the one-for-one replacement of low and moderate income units, Fairfield Court in Stamford.

Sec. 24. Subsection (b) of section 8-68c of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(b) **[**On and after July 1, 2006, any**]** Any owner of multifamily rental housing for persons and families of low and moderate income, that is assisted pursuant to a contract, mortgage, or mortgage insured under any covered program shall, not later than one year prior to the expiration or planned or proposed termination of any subsidy for the development, sale, transfer of title, lease of the development, prepayment of any such contract or mortgage, or maturity of such mortgage, if any such action will result in the cessation or reduction of the financial assistance or regulatory requirements designed to make the assisted units affordable to low and moderate income households, provide written notice of such action to the Commissioner of **[**Economic and Community Development**]** Housing, the chief executive officer of the municipality in which such housing is located and to all tenants residing in such housing. Nothing in this section shall be construed to limit the contractual rights or the ability of such owner to prepay any such mortgage or to interfere with any existing contract. Not later than ten business days after receipt of any notice, the Commissioner of **[**Economic and Community Development**]** Housing shall cause such notice to be posted on the web site of the department. Such notice shall also be made available electronically to those persons who have provided the commissioner with a written request to receive such notices along with a current electronic mail address.

739 Sec. 25. Section 8-76 of the general statutes is repealed and the
740 following is substituted in lieu thereof (*Effective July 1, 2013*):

741 Upon the determination by the Commissioner of **[**Economic and
742 Community Development**]** Housing of the termination of the acute
743 shortage of moderate rental housing in the locality or upon the
744 determination by the Commissioner of **[**Economic and Community
745 Development**]** Housing and the developer owning a moderate rental
746 housing project that it is in the best interest of the state and such
747 developer, such project or any part thereof may be sold by the
748 developer upon terms and conditions approved by the Commissioner
749 of **[**Economic and Community Development**]** Housing.

750 (a) Such project or any part of such project sufficiently separable
751 from other property retained by the developer, unless the developer
752 deems it advisable to sell such project as individual one-family or two-
753 family dwelling units, shall be sold, in accordance with regulations
754 adopted by said commissioner which shall establish the order of
755 priorities among the following eligible purchasers: A cooperative or
756 condominium association, membership in which is open to any tenants
757 of the project or part of the project to be sold, the United States
758 Department of Housing and Urban Development or a private sponsor,
759 provided any such purchaser shall agree to use such project for
760 purposes of housing for persons or families of moderate income for as
761 long as a need for such housing continues to exist, as determined by
762 said commissioner, and provided further no tenant occupying a
763 dwelling unit of the project at the time of sale shall be evicted except
764 for cause.

765 (b) In the sale of a one-family or two-family dwelling unit in a
766 project, or of shares in a cooperative or condominium association
767 purchasing a project or part of a project, preference shall be given to
768 buyers in accordance with the following schedule: (1) First preference
769 shall go to persons who are tenants of the project at the time of sale
770 and whose incomes are below the levels for continued occupancy in

771 the project; (2) second preference shall go to persons who are tenants
772 of the project at the time of sale other than those tenants specified in
773 subdivision (1) of this subsection; (3) third preference shall go to
774 applicants who are residents of the community on the waiting list for
775 admission to moderate rental housing projects in the community and
776 whose incomes are below the maximum limits for admission to such
777 moderate rental housing projects; (4) fourth preference shall go to
778 veterans who are residents of the community and whose incomes are
779 below the maximum limits for admission to occupancy of such
780 moderate rental housing projects in the community; (5) fifth preference
781 shall be given to other residents of the municipality, including
782 occupants of publicly-assisted housing projects whose incomes are
783 below the levels for continued occupancy in moderate rental housing
784 projects in the community. No sale or lease of one-family or two-
785 family dwelling units, or of a share in a cooperative or condominium
786 association owning a housing project, originally purchased from the
787 authority according to this section, shall be made to any person who
788 does not meet the qualifications of one or more of the above categories
789 without the approval of the Commissioner of **[**Economic and
790 Community Development**]** Housing and any deed conveying such
791 dwelling units or housing project shall state this restriction, which
792 shall run with the land until released by written instrument in
793 recordable form executed by said commissioner, and which may be
794 enforced by said commissioner.

795 (c) The purchase price of a project or any part thereof may be
796 payable by a purchase money note only when the cost of the project
797 was financed with a loan or deferred loan by the state. Each purchase
798 money note shall provide for its complete amortization by periodic
799 payments within a period not exceeding forty-one years from its date,
800 shall bear interest at a rate to be determined by the State Bond
801 Commission and shall be secured by a first mortgage on the dwelling
802 unit purchased, provided when the sale is to a tenant of the project or
803 to a cooperative or condominium association, membership in which is

open to any tenants of the project or part of the project to be sold, the commissioner may set an interest rate on such purchase money note commensurate with the amount by which the income of any such individual tenant purchaser or of any tenant member of a cooperative or condominium association exceeds the maximum limits permitted for continued occupancy of such project, but in no case shall such interest rate be set below the minimum determined by the State Bond Commission.

(d) In the event that the original purchaser of a one-family or two-family dwelling unit sells, assigns, transfers or otherwise conveys any interest in such unit, the entire unpaid principal balance of the note, with interest thereon, shall become due and payable. In the event that the original purchaser of a one-family or two-family dwelling unit ceases to occupy said unit, the entire unpaid principal balance of any loan, made pursuant to this section on and after April 9, 1976, with interest thereon, may become due and payable at the discretion of the commissioner. If such sale, assignment, transfer or conveyance takes place within seven years of the original purchase, the state, acting by and in the discretion of the commissioner, may recapture a portion of the assistance it provided to finance the purchase of the unit, to be determined as follows: The original purchaser shall pay to the state an amount equal to the sum of (1) additional interest representing the difference between the actual interest paid by the original purchaser on the permanent mortgage loan and the interest that the original purchaser would have paid had the terms of the mortgage loan required interest at a rate of eight per cent per annum, from the date of execution of the mortgage loan to the date of prepayment of the mortgage loan; and (2) fifty per cent of the net appreciation if the unit is resold in the first, second or third year, thirty per cent of the net appreciation if the unit is resold in the fourth or fifth year and twenty per cent of the net appreciation if the unit is resold in the sixth or seventh year following the original purchase. Notwithstanding the provisions contained in this subsection, the total amount of such

recapture shall not exceed the net gain realized upon the resale of the unit. Permanent mortgage documents provided to original purchasers on and after July 1, 1987, shall contain provisions necessary to fulfill the requirements of this subsection.

(e) The proceeds of any sale of any project, or of any part thereof, the cost of which was financed with a loan or deferred loan by the state to a housing authority, after payment of all necessary expenses incident to such sale, shall be applied to liquidate the outstanding balance of such loan or deferred loan. To this end, the authority shall endorse each purchase money note received by the authority in payment of the purchase price to the order of the state without recourse and shall deliver such note, together with a duly executed assignment of the mortgage securing the same, to the Commissioner of **[**Economic and Community Development**]** Housing, and the State Treasurer shall credit the face amount of such note as having been paid upon such loan. If the proceeds of the sale of such project or of any part thereof, including as such proceeds the face amount of any purchase money note received by an authority and endorsed and delivered by it to the Commissioner of **[**Economic and Community Development**]** Housing, as aforesaid, are more than sufficient to liquidate the outstanding balance of such loan, such proceeds shall be applied toward the outstanding balance, if any, on any loan or deferred loan made pursuant to this part on any other project owned and operated by such authority. If any balance remains after all such loans or deferred loans have been liquidated, an amount equal to one-half of any balance remaining shall be retained by or paid over to the state and an amount equal to the remaining one-half of such balance shall be retained by or paid over to the authority for payment by it to the municipality in which the project is located. The proceeds of the sale of any project the cost of which was financed by notes or bonds issued by the authority and guaranteed by the state, or of any part thereof, after payment of all necessary expenses incident to such sale, shall be applied so far as practicable to the redemption of all such

outstanding notes or bonds. If such proceeds are more than sufficient to redeem all such outstanding notes and bonds, one-half of any balance remaining shall be paid over to the state and the remaining one-half of such balance shall be paid over to the authority for payment by it to the municipality in which the project is located. If such proceeds are insufficient for complete redemption of such notes and bonds, any balance remaining after redemption of the largest possible amount thereof shall be paid over to the state. No such sales shall affect the obligation of the authority upon such notes or bonds or the obligation of the state on its guarantee thereof. The proceeds of the sale of any project, or any part thereof, the cost of which was financed, wholly or partially, by a grant, after payment of all necessary expenses incident to such sale, shall first be used for the repayment of such grant to the state.

(f) The proceeds of any sale of any project, or of any part thereof, the cost of which was financed with a loan or deferred loan by the state to a nonprofit corporation, after payment of all necessary expenses incident to such sale, shall be applied to liquidate the outstanding balance of such loan or deferred loan. To this end, the nonprofit corporation shall endorse each purchase money note received by the nonprofit corporation in payment of the purchase price to the order of the state without recourse and shall deliver such note, together with a duly executed assignment of the mortgage securing the same, to the Commissioner of **[**Economic and Community Development**]** Housing, and the State Treasurer shall credit the face amount of such note as having been paid upon such loan or deferred loan. If any balance remains after the loan or deferred loan has been liquidated, such balance shall be paid over to the state for deposit to the credit of the General Fund. The proceeds of the sale of any project, or any part thereof, the cost of which was financed, wholly or partially, by a grant, after payment of all necessary expenses incident to such sale, shall first be used for the repayment of such grant to the state. If any balance remains after the grant has been repaid, such balance shall be paid

903 over to the state for deposit to the credit of the General Fund.

904 Sec. 26. Section 8-119f of the general statutes is repealed and the
905 following is substituted in lieu thereof (*Effective July 1, 2013*):

906 The Commissioner of **[**Economic and Community Development**]**
907 Housing shall design, implement, operate and monitor a program of
908 congregate housing. For the purpose of this program, the
909 Commissioner of **[**Economic and Community Development**]** Housing
910 shall consult with the Commissioner **[**of Social Services**]** on Aging for
911 the provision of services for the physically disabled in order to comply
912 with the requirements of section 29-271.

913 Sec. 27. Section 8-119n of the general statutes is repealed and the
914 following is substituted in lieu thereof (*Effective July 1, 2013*):

915 (a) The Commissioner of **[**Economic and Community Development**]**
916 Housing shall **[**establish**]** maintain a pilot program in the congregate
917 housing facility existing in the town of Norwich **[**on July 1, 1997,**]** to
918 provide assisted living services for the frail elderly. Such assisted
919 living services shall include, but not be limited to, routine nursing
920 services and assistance with activities of daily living. Such congregate
921 housing facility shall contract with an assisted living services agency,
922 as defined in section 19a-490. The commissioner may provide technical
923 assistance and shall provide financial assistance in the form of grants-
924 in-aid for such pilot program. For purposes of this section, "frail
925 elderly" means elderly persons who have temporary or periodic
926 difficulties with one or more essential activities of daily living, as
927 determined by the commissioner.

928 **[**(b) Not later than January 1, 1999, the manager of the congregate
929 housing facility in the town of Norwich in which said pilot program is
930 operated, shall submit a report to the select committee of the General
931 Assembly having cognizance of matters relating to aging, and to the
932 joint standing committees of the General Assembly having cognizance
933 of matters relating to human services and appropriations. Said report

934 shall analyze the strengths and shortcomings of the pilot program and
935 shall include data on (1) the number of clients served by the program,
936 (2) the number and type of services offered under the program, and (3)
937 the monthly cost per client under the program.]

938 [(c)] (b) The Commissioner of [Economic and Community
939 Development] Housing may adopt regulations, in accordance with the
940 provisions of chapter 54, to carry out the purposes of this section.

941 Sec. 28. Section 8-119t of the general statutes is repealed and the
942 following is substituted in lieu thereof (*Effective July 1, 2013*):

943 (a) The Commissioner of [Economic and Community Development]
944 Housing shall encourage the development of independent living
945 opportunities for low and moderate income handicapped and
946 developmentally disabled persons by making grants-in-aid, within
947 available appropriations, to state-wide, private, nonprofit housing
948 development corporations which are organized and operating for the
949 purpose of expanding independent living opportunities for such
950 persons. Such grants-in-aid shall be used to facilitate the development
951 of small, noninstitutionalized living units for such persons, through
952 programs including, but not limited to, preproject development,
953 receipt of federal funds, site acquisition and architectural review. For
954 the purposes of this part, "handicapped and developmentally disabled
955 persons" means any persons who are physically or mentally
956 handicapped, including, but not limited to, persons with autism,
957 persons with intellectual disability or persons who are physically
958 disabled or sensory impaired.

959 (b) The Commissioner of [Economic and Community Development
960 shall] Housing may adopt regulations, in accordance with chapter 54,
961 to carry out the purposes of this section.

962 Sec. 29. Section 8-119kk of the general statutes is repealed and the
963 following is substituted in lieu thereof (*Effective July 1, 2013*):

964 (a) [On and after July 1, 1997, the] The Commissioner of [Economic
965 and Community Development] Housing shall implement and
966 administer a program of rental assistance for elderly persons who
967 reside in state-assisted rental housing for the elderly.

968 (b) Housing eligible for use in the program shall comply with
969 applicable state and local health, housing, building and safety codes.

970 (c) In addition to rental assistance certificates made available to
971 qualified tenants, to be used in eligible housing which such tenants are
972 able to locate, the program may include housing support in which
973 rental assistance for tenants is linked to participation by the property
974 owner in other municipal, state or federal housing repair,
975 rehabilitation or financing programs. The commissioner shall use
976 rental assistance under this section to encourage the preservation of
977 existing housing and the revitalization of neighborhoods or the
978 creation of additional rental housing.

979 (d) The commissioner shall administer the program under this
980 section to promote housing choice for certificate holders and
981 encourage diversity of residents. The commissioner shall establish
982 maximum rent levels for each municipality in a manner that promotes
983 the use of the program in all municipalities. Any certificate issued
984 pursuant to this section may be used for housing in any municipality
985 in the state. The commissioner shall inform certificate holders that a
986 certificate may be used in any municipality and, to the extent
987 practicable, the commissioner shall assist certificate holders in finding
988 housing in the municipality of their choice.

989 (e) Nothing in this section shall give any person a right to continued
990 receipt of rental assistance at any time that the program is not funded.

991 (f) Whenever an individual who qualifies for rental assistance
992 pursuant to this section moves into congregate housing, as defined in
993 section 8-119e, the Commissioner of [Economic and Community
994 Development] Housing shall calculate the rental assistance for such

individual to include the entire period of his occupancy in the congregate housing facility, regardless of the rental-assistance status of any former congregate housing occupant.

(g) The commissioner shall adopt regulations in accordance with the provisions of chapter 54 to carry out the purposes of this section. The regulations shall establish maximum income eligibility guidelines for such rental assistance and criteria for determining the amount of rental assistance which shall be provided to elderly persons, provided **[**, effective July 1, 1997,**]** the amount of assistance for elderly persons who are certificate holders shall be the difference between thirty per cent of their adjusted gross income, less a utility allowance, and the base rent. **[**The commissioner may administer the program under this section pursuant to regulations adopted pursuant to section 17b-812 which are in effect on July 1, 1997.**]**

Sec. 30. Section 8-119*ll* of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

Annually, the Department of **[**Economic and Community Development**]** Housing in consultation with the Connecticut Housing Finance Authority shall conduct a comprehensive assessment of current and future needs for rental assistance under section 8-119kk, as amended by this act, for housing projects for the state's elderly and disabled. **[**Not later than April 1, 2006, the results of the first such analysis shall be presented to the joint standing committee of the General Assembly having cognizance of matters relating to housing, in accordance with section 11-4a. Any analyses submitted after April 1, 2006,**]** Such analyses shall be incorporated into the report required pursuant to section **[**32-1m**]** 55 of this act.

Sec. 31. Section 8-214d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) The state, acting by and in the discretion of the Commissioner of **[**Economic and Community Development**]** Housing, may contract with

1026 a nonprofit corporation for state financial assistance in the form of a
1027 state grant-in-aid, loan or deferred loan to such corporation on such
1028 terms and conditions as the commissioner may prescribe. Such grant-
1029 in-aid, loan or deferred loan shall be used by such corporation to
1030 acquire, hold and manage real property for the purpose of providing
1031 for existing and future housing needs of very low, low and moderate
1032 income families. In the case of a deferred loan, the contract shall
1033 require that payments on interest are due currently but that payments
1034 on principal may be made at a later time. The commissioner may
1035 prescribe the terms and conditions by which real property acquired
1036 under this section shall be either held for the existing and future
1037 housing needs of very low, low and moderate income families or
1038 placed in a community land trust, except that such terms and
1039 conditions, in the discretion of the commissioner and with the
1040 approval of the State Bond Commission, may be subordinated in the
1041 case of a subsequent first mortgage or a requirement of a governmental
1042 program relating to such real property. Ancillary housing-related
1043 services may be located on such real property. The commissioner shall
1044 give notice of an application for financial assistance under this section
1045 which would complete a partially constructed housing development to
1046 the chief executive official of the municipality in which the real
1047 property is located. A nonprofit corporation holding title to such real
1048 property, with or without structures, may lease such real property to
1049 very low, low and moderate income families, limited equity
1050 cooperatives or other corporations, provided that the terms of any
1051 such lease shall require that such real property be developed and used
1052 solely for the purpose of housing for very low, low and moderate
1053 income families. The lessee may hold title to any building or
1054 improvement situated on real property acquired with financial
1055 assistance made under this section, provided the nonprofit corporation
1056 holding title to such real property shall have first option to purchase
1057 any building or improvement that the lessee may place on such real
1058 property at a below-market price set forth in such lease. The legitimate
1059 heirs of any such lessee shall have the right under such lease to assume

1060 the lease upon the death of such lessee if the lessee is a natural person
1061 and if such heirs agree to make the leased premises their principal
1062 residence.

1063 (b) A nonprofit corporation holding title to real property acquired
1064 with state financial assistance made under this section may convey title
1065 to structures and improvements situated upon such real property to
1066 very low, low and moderate income families, limited equity
1067 cooperatives or other corporations, provided (1) the terms and
1068 conditions of any instrument conveying such title requires that such
1069 structures and improvements be developed and used solely for the
1070 purpose of housing for very low, low or moderate income families,
1071 except that such terms and conditions, in the discretion of the
1072 commissioner and with the approval of the State Bond Commission,
1073 may be subordinated in the case of a subsequent first mortgage or a
1074 requirement of a governmental program relating to such real property,
1075 (2) the nonprofit corporation retains title to the real property upon
1076 which such structures and improvements are situated, and (3) the
1077 nonprofit corporation shall have first option to purchase any structures
1078 and improvements transferred at a below-market price agreed to at the
1079 time of such transfer. A nonprofit corporation holding title to real
1080 property acquired with state financial assistance made under this
1081 section for which a declaration of condominium has been filed may
1082 transfer the units in such condominium to (A) another eligible
1083 nonprofit corporation as determined by the commissioner, or (B) very
1084 low, low or moderate income families in accordance with chapter 828,
1085 subject to deed restrictions, acceptable to the commissioner, requiring
1086 that the units be used solely for the purpose of housing for very low,
1087 low and moderate income families, provided in the case of a transfer
1088 under subparagraph (B) of this subdivision, the original nonprofit
1089 corporation shall have first option to purchase the unit at a below-
1090 market price agreed to at the time of acquisition of the unit by the
1091 family.

1092 (c) A nonprofit corporation existing on or after October 1, 1991, and

holding title to real property acquired with state financial assistance made under this section may convey title to such real property, with the approval of the commissioner, to a community land trust corporation. A nonprofit corporation holding title to real property which has been acquired with state financial assistance under this section for the existing and future needs of very low, low or moderate income families, may, with the approval of the commissioner, convey title to such real property to another nonprofit corporation.

(d) A nonprofit corporation existing on or after October 1, 1991, and holding title to real property acquired with state financial assistance made under this section, may lease such real property, with the approval of the commissioner, to a partnership, as defined in section 34-301, or a limited partnership, as defined in section 34-9, provided the nonprofit corporation has a material role in such partnership or limited partnership. The terms of any such lease shall require that such real property be developed and used solely for the purpose of housing for very low, low and moderate income families. The lessee may hold title to any building or improvement situated on real property acquired with financial assistance made under this section, provided the nonprofit corporation holding title to such real property shall have first option to purchase any building or improvement that the lessee may place on such real property at a below-market price set forth in the lease.

(e) If a nonprofit corporation fails to develop the project in accordance with the development plan for the project and title to the land or interests in land acquired with state financial assistance under this section vests in the state pursuant to a default, foreclosure action, deed-in-lieu of foreclosure, voluntary transfer, or other similar voluntary or compulsory action, the commissioner may, upon approval of the State Bond Commission, convey such land or interests in land to the municipality in which the land or interests in land is located. The municipality shall use the land or interests in land, or shall cause the land or interests in land to be used for, or in conjunction

with, activities related to, or similar to, any program administered by the commissioner pursuant to state or federal law.

(f) The Commissioner of **[**Economic and Community Development**]** Housing shall adopt regulations, in accordance with chapter 54, to carry out the purposes of sections 8-214b to 8-214e, inclusive. Such regulations shall include, without limitation, provisions concerning the terms and conditions of such grants-in-aid, loans or deferred loans and the conditions for approval of the articles of incorporation or basic documents of organization of a nonprofit corporation applying for assistance under said sections.

(g) As used in this section, housing-related services and facilities includes but is not limited to, administrative, community, health, recreational, educational and child-care facilities relevant to an affordable housing development, as defined by the commissioner in regulations adopted in accordance with chapter 54.

[(h) (1) The Commissioner of Economic and Community Development may make a determination, based upon a full examination of the circumstances, that a nonprofit corporation is unable to develop or manage the land or interests in land acquired with state financial assistance under this section. Upon such a determination, the commissioner may cause title to the land or interests in land acquired with state financial assistance under this section to vest in the state by foreclosure, voluntary transfer, or other similar voluntary or compulsory action, and the commissioner may take any action which is in the best interests of the state to convey, upon approval of the Secretary of the Office of Policy and Management, such land or interests in land, including, but not limited to, (A) transferring, or authorizing the transfer of, the land or interests in land to the low and moderate income families that reside on such land, (B) determining whether any restrictions in the deed or deeds for the land or interests in land shall be modified or removed prior to conveying such land or interests in land and authorizing such

1158 modifications or removals, or (C) establishing such terms and
1159 conditions for such conveyance as the commissioner deems
1160 appropriate under each particular transaction.

1161 (2) The commissioner shall authorize the conveyance of land or
1162 interests in land under subdivision (1) of this subsection in no more
1163 than three locations.

1164 (3) The provisions of this subsection shall terminate on October 1,
1165 2000.**]**

1166 Sec. 32. Subsection (a) of section 8-218h of the general statutes is
1167 repealed and the following is substituted in lieu thereof (*Effective July*
1168 *1, 2013*):

1169 (a) There is established a task force consisting of the cochairmen and
1170 ranking members of the joint standing committee of the General
1171 Assembly having cognizance of matters relating to public safety; the
1172 State Building Inspector or his <u>or her</u> designee; the assistant director of
1173 the Office of Protection and Advocacy for Persons with Disabilities;
1174 four representatives of the Home Builders Association, one of whom
1175 shall be appointed by the president pro tempore of the Senate, one by
1176 the minority leader of the Senate, one by the speaker of the House of
1177 Representatives and one by the minority leader of the House of
1178 Representatives; and four members of the public having physical
1179 disabilities, two of whom shall be appointed by the Governor, one by
1180 the majority leader of the Senate and one by the majority leader of the
1181 House of Representatives. On and after July 1, 1990, the task force shall
1182 also consist of the Commissioner of Social Services, or his <u>or her</u>
1183 designee; an additional representative of the Home Builders
1184 Association, who shall be appointed jointly by the ranking members of
1185 the joint standing committee of the General Assembly having
1186 cognizance of matters relating to public safety; and an additional
1187 member of the public having a physical disability, who shall be
1188 appointed jointly by the cochairpersons of said joint standing

committee. On and after June 26, 1991, the task force shall also consist of the Commissioner of Economic and Community Development, or his or her designee, and a representative of each community housing development corporation administering the program established under subsection (d) of section 8-218, appointed by the Commissioner of Economic and Community Development. On and after July 1, 2013, the task force shall also consist of the Commissioner of Housing, or his or her designee.

Sec. 33. Subsection (a) of section 8-244 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(a) There is created a body politic and corporate to be known as the "Connecticut Housing Finance Authority". Said authority is constituted a public instrumentality and political subdivision of this state and the exercise by the authority of the powers conferred by this chapter shall be deemed and held to be the performance of an essential public and governmental function. The Connecticut Housing Finance Authority shall not be construed to be a department, institution or agency of the state. The board of directors of the authority shall consist of **[**fifteen**]** sixteen members as follows: (1) The Commissioner of Economic and Community Development, the Commissioner of Housing, the Secretary of the Office of Policy and Management, the Banking Commissioner and the State Treasurer, ex officio, or their designees, with the right to vote, (2) seven members to be appointed by the Governor, and (3) four members appointed as follows: One by the president pro tempore of the Senate, one by the speaker of the House of Representatives, one by the minority leader of the Senate and one by the minority leader of the House of Representatives. The member initially appointed by the speaker of the House of Representatives shall serve a term of five years; the member initially appointed by the president pro tempore of the Senate shall serve a term of four years. The members initially appointed by the Senate minority leader shall serve a term of three years. The member initially appointed by the

minority leader of the House of Representatives shall serve a term of two years. Thereafter, each member appointed by a member of the General Assembly shall serve a term of five years. The members appointed by the Governor and the members of the General Assembly shall be appointed in accordance with section 4-9b and among them be experienced in all aspects of housing, including housing design, development, finance, management and state and municipal finance, and at least one of whom shall be selected from among the officers or employees of the state. At least one shall have experience in the provision of housing to very low, low and moderate income families. On or before July first, annually, the Governor shall appoint a member for a term of five years from said July first to succeed the member whose term expires and until such member's successor has been appointed, except that in 1974 and 1995 and quinquennially thereafter, the Governor shall appoint two members. The chairperson of the board shall be **[**the Commissioner of Economic and Community Development**]** appointed by the Governor. The board shall annually elect one of its appointed members as vice-chairperson of the board. Members shall receive no compensation for the performance of their duties hereunder but shall be reimbursed for necessary expenses incurred in the performance thereof. The Governor or appointing member of the General Assembly, as the case may be, shall fill any vacancy for the unexpired term. A member of the board shall be eligible for reappointment. Any member of the board may be removed by the Governor or appointing member of the General Assembly, as the case may be, for misfeasance, malfeasance or wilful neglect of duty. Each member of the board before entering upon such member's duties shall take and subscribe the oath of affirmation required by article XI, section 1, of the State Constitution. A record of each such oath shall be filed in the office of the Secretary of the State. Each ex-officio member may designate such member's deputy or any member of such member's staff to represent such member at meetings of the board with full power to act and vote on such member's behalf.

Sec. 34. Section 8-378 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

The Commissioner of **[**Economic and Community Development**]** Housing may approve the designation of up to three areas in the state as housing development zones, provided the commissioner shall not approve the designation of more than one housing development zone in any municipality. Proposals for financial assistance received by the commissioner from eligible developers, as defined in section 8-39, for programs or projects authorized pursuant to chapter 128, 130 **[**,**]** or 133 **[**or 138**]** which will be located in a housing development zone shall be accorded a high priority to receive financial assistance from the commissioner. The commissioner may remove the designation of any area which has been approved as a housing development zone if such area no longer meets the criteria for designation as such a zone set forth in sections 8-376 and 8-377 or in regulations adopted pursuant to section 8-381, provided no such designation shall be removed less than ten years from the original date of approval of such zone.

Sec. 35. Subsections (e) and (f) of section 10-416b of the general statutes are repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(e) Prior to beginning any rehabilitation work on a certified historic structure, the owner shall submit to the officer (1) (A) a rehabilitation plan for a determination of whether or not such rehabilitation work meets the standards developed under the provisions of subsections (b) to (d), inclusive, of this section, and (B) if such rehabilitation work is planned to be undertaken in phases, a complete description of each such phase, with anticipated schedules for completion, (2) an estimate of the qualified rehabilitation expenditures, and (3) for projects pursuant to subdivision (2) of subsection (f) of this section, (A) the number of units of affordable housing, as defined in section 8-39a, to be created, (B) the proposed rents or sale prices of such units, and (C) the median income for the municipality where the project is located.

1287 For projects pursuant to subdivision (2) of subsection (f) of this section,
1288 the owner shall submit a copy of data required under subdivision (3)
1289 of this subsection to the Department of Housing.

1290 (f) If the officer certifies that the rehabilitation plan conforms to the
1291 standards developed under the provisions of subsections (b) to (d),
1292 inclusive, of this section, the Department of Economic and Community
1293 Development shall reserve for the benefit of the owner an allocation
1294 for a tax credit equivalent to (1) twenty-five per cent of the projected
1295 qualified rehabilitation expenditures, or (2) for rehabilitation plans
1296 submitted pursuant to subsection (e) of this section on or after June 14,
1297 2007, thirty per cent of the projected qualified rehabilitation
1298 expenditures if (A) at least twenty per cent of the units are rental units
1299 and qualify as affordable housing, as defined in section 8-39a, or (B) at
1300 least ten per cent of the units are individual homeownership units and
1301 qualify as affordable housing, as defined in section 8-39a. No tax credit
1302 shall be allocated for the purposes of this subdivision unless an
1303 applicant has received a certificate from the Department of **[**Economic
1304 and Community Development**]** Housing pursuant to section 8-37*lll*
1305 confirming that the project complies with affordable housing
1306 requirements under section 8-39a.

1307 Sec. 36. Section 12-120b of the general statutes is repealed and the
1308 following is substituted in lieu thereof (*Effective July 1, 2013, and*
1309 *applicable to assessment years commencing on or after October 1, 2012*):

1310 (a) As used in this section:

1311 (1) "Claimant" means a person, company, limited liability company,
1312 firm, association, corporation or other business entity having received
1313 approval for financial assistance from a town's assessor or a municipal
1314 official;

1315 (2) "Financial assistance" means a property tax exemption, property
1316 tax credit or rental rebate for which the state of Connecticut provides
1317 direct or indirect reimbursement; and

1318 (3) "Program" means (A) property tax exemptions under section 12-
1319 81g or subdivision (55), (59), (60), (70), (72) or (74) of section 12-81, and
1320 (B) tax relief pursuant to section 12-129d or 12-170aa. [, and (C) rebates
1321 under section 12-170d.]

1322 (b) A claimant negatively affected by a decision of the Secretary of
1323 the Office of Policy and Management with respect to any program may
1324 appeal such decision in the manner set forth in subsection (d) of this
1325 section. Any notice the secretary issues pursuant to this section shall be
1326 sent by first class United States mail to a claimant at the address
1327 entered on the application for financial assistance as filed unless,
1328 subsequent to the date of said filing, the claimant sends the secretary a
1329 written request that any correspondence regarding said financial
1330 assistance be sent to another name or address. The date of any notice
1331 sent by the secretary pursuant to this section shall be deemed to be the
1332 date the notice is delivered to the claimant.

1333 (c) The secretary may review any application for financial assistance
1334 submitted by a claimant in conjunction with a program. The secretary
1335 may exclude from reimbursement any property included in an
1336 application that, in the secretary's judgment, does not qualify for
1337 financial assistance or may modify the amount of any financial
1338 assistance approved by an assessor or municipal official in the event
1339 the secretary finds it to be mathematically incorrect, not supported by
1340 the application, not in conformance with law or if the secretary
1341 believes that additional information is needed to justify its approval.

1342 (d) (1) If the secretary modifies the amount of financial assistance
1343 approved by an assessor or municipal official under a program, or
1344 makes a preliminary determination that the claimant who filed written
1345 application for such financial assistance is ineligible therefor, the
1346 secretary shall send a written notice of preliminary modification or
1347 denial to said claimant and shall concurrently forward a copy to the
1348 office of the assessor or municipal official who approved said financial
1349 assistance. The notice shall include plain language setting forth the

reason for the preliminary modification or denial, the name and telephone number of a member of the secretary's staff to whom questions regarding the notice may be addressed, a request for any additional information or documentation that the secretary believes is needed in order to justify the approval of such financial assistance, the manner by which the claimant may request reconsideration of the secretary's preliminary determination and the timeframe for doing so. Not later than ninety days after the date an assessor receives a copy of such preliminary notice, the assessor shall determine whether an increase to the taxable grand list of the town is required to be made as a result of such modification or denial, unless, in the interim, the assessor has received written notification from the secretary that a request for a hearing with respect to such financial assistance has been approved pursuant to subparagraph (B) of subdivision (2) of this subsection. If an assessment increase is warranted, the assessor shall promptly issue a certificate of correction adding the value of such property to the taxable grand list for the appropriate assessment year and shall forward a copy thereof to the tax collector, who shall, not later than thirty days following, issue a bill for the amount of the additional tax due as a result of such increase. Such additional tax shall become due and payable not later than thirty days from the date such bill is sent and shall be subject to interest for delinquent taxes as provided in section 12-146. With respect to the preliminary modification or denial of financial assistance for which a hearing is held, the assessor shall not issue a certificate of correction until the assessor receives written notice of the secretary's final determination following such hearing.

(2) (A) Any claimant aggrieved by the secretary's notice of preliminary modification or denial of financial assistance under a program may, not later than thirty business days after receiving said notice, request a reconsideration of the secretary's decision for any factual reason, provided the claimant states the reason for the reconsideration request in writing and concurrently provides any

1383 additional information or documentation that the secretary may have
1384 requested in the preliminary notice of modification or denial. The
1385 secretary may grant an extension of the date by which a claimant's
1386 additional information or documentation must be submitted, upon
1387 receipt of proof that the claimant has requested such data from another
1388 governmental agency or if the secretary determines there is good cause
1389 for doing so.

1390 (B) Not later than thirty business days after receiving a claimant's
1391 request for reconsideration and any additional information or
1392 documentation the claimant has provided, the secretary shall
1393 reconsider the preliminary decision to modify or deny said financial
1394 assistance and shall send the claimant a written notice of the
1395 secretary's determination regarding such reconsideration. If aggrieved
1396 by the secretary's notice of determination with respect to the
1397 reconsideration of said financial assistance, the claimant may, not later
1398 than thirty business days after receiving said notice, make application
1399 for a hearing before said secretary, or the secretary's designee. Such
1400 application shall be in writing and shall set forth the reason why the
1401 financial assistance in question should not be modified or denied. Not
1402 later than thirty business days after receiving an application for a
1403 hearing, the secretary shall grant or deny such hearing request by
1404 written notice to the claimant. If the secretary denies the claimant's
1405 request for a hearing, such notice shall state the reason for said denial.
1406 If the secretary grants the claimant's request for a hearing, the secretary
1407 shall send written notice of the date, time and place of the hearing,
1408 which shall be held not later than thirty business days after the date of
1409 the secretary's notice granting the claimant a hearing. Such hearing
1410 may, at the secretary's discretion, be held in the judicial district in
1411 which the claimant or the claimant's property is located. Not later than
1412 thirty business days after the date on which a hearing is held, a written
1413 notice of the secretary's determination with respect to such hearing
1414 shall be sent to the claimant and a copy thereof shall be concurrently
1415 sent to the assessor or municipal official who approved the financial

1416 assistance in question.

1417 (3) If any claimant is aggrieved by the secretary's determination
1418 concerning the hearing regarding the claimant's financial assistance or
1419 the secretary's decision not to hold a hearing, such claimant may, not
1420 later than thirty business days after receiving the secretary's notice
1421 related thereto, appeal to the superior court of the judicial district in
1422 which the claimant resides or in which the claimant's property that is
1423 the subject of the appeal is located. Such appeal shall be accompanied
1424 by a citation to the secretary to appear before said court, and shall be
1425 served and returned in the same manner as is required in the case of a
1426 summons in a civil action. The pendency of such appeal shall not
1427 suspend any action by a municipality to collect property taxes from the
1428 applicant on the property that is the subject of the appeal. The
1429 authority issuing the citation shall take from the applicant a bond or
1430 recognizance to the state of Connecticut, with surety, to prosecute the
1431 application in effect and to comply with the orders and decrees of the
1432 court in the premises. Such applications shall be preferred cases, to be
1433 heard, unless cause appears to the contrary, at the first session, by the
1434 court or by a committee appointed by the court. Said court may grant
1435 such relief as may be equitable and, if the application is without
1436 probable cause, may tax double or triple costs, as the case demands;
1437 and, upon all applications which are denied, costs may be taxed
1438 against the applicant at the discretion of the court, but no costs shall be
1439 taxed against the state.

1440 (4) The secretary shall notify each claimant of the final modification
1441 or denial of financial assistance as claimed, in accordance with the
1442 procedure set forth in this subsection. A copy of the notice of final
1443 modification or denial shall be sent concurrently to the assessor or
1444 municipal official who approved such financial assistance. With
1445 respect to property tax exemptions under section 12-81g or subdivision
1446 (55), (59), (60) or (70) of section 12-81, and tax relief pursuant to section
1447 12-129d or 12-170aa, the notice pursuant to this subdivision shall be
1448 sent not later than one year after the date claims for financial assistance

for each such program are filed with the secretary. For property tax exemptions under subdivision (72) or (74) of section 12-81, such notice shall be sent not later than the date by which a final modification to the payment for such program must be reflected in the certification of the secretary to the Comptroller. **[**For the program of rebates under section 12-170d, such notice shall be sent not later than the date by which the secretary certifies the amounts of payment to the Comptroller.**]**

Sec. 37. (NEW) (*Effective July 1, 2013*) (a) As used in this section:

(1) "Claimant" means a person having received approval for financial assistance from a town's assessor or a municipal official;

(2) "Financial assistance" means a rental rebate for which the state provides direct or indirect reimbursement; and

(3) "Program" means rebates under section 12-170d of the general statutes, as amended by this act.

(b) A claimant negatively affected by a decision of the Commissioner of Housing with respect to the program may appeal such decision in the manner set forth in subsection (d) of this section. Any notice the commissioner issues pursuant to this section shall be sent by first class United States mail to a claimant at the address entered on the application for financial assistance as filed unless, subsequent to the date of said filing, the claimant sends the commissioner a written request that any correspondence regarding said financial assistance be sent to another name or address. The date of any notice sent by the commissioner pursuant to this section shall be deemed to be the date the notice is delivered to the claimant.

(c) The commissioner may review any application for financial assistance submitted by a claimant in conjunction with the program.

(d) (1) If the commissioner modifies the amount of financial assistance approved by an assessor or municipal official under the

1478 program, or makes a preliminary determination that the claimant who
1479 filed written application for such financial assistance is ineligible
1480 therefor, the commissioner shall send a written notice of preliminary
1481 modification or denial to said claimant and shall concurrently forward
1482 a copy to the office of the assessor or municipal official who approved
1483 said financial assistance. The notice shall include plain language
1484 setting forth the reason for the preliminary modification or denial, the
1485 name and telephone number of a member of the commissioner's staff
1486 to whom questions regarding the notice may be addressed, a request
1487 for any additional information or documentation that the
1488 commissioner believes is needed in order to justify the approval of
1489 such financial assistance, the manner by which the claimant may
1490 request reconsideration of the commissioner's preliminary
1491 determination and the timeframe for doing so.

1492 (2) (A) Any claimant aggrieved by the commissioner's notice of
1493 preliminary modification or denial of financial assistance under the
1494 program may, not later than thirty business days after receiving said
1495 notice, request a reconsideration of the commissioner's decision for any
1496 factual reason, provided the claimant states the reason for the
1497 reconsideration request in writing and concurrently provides any
1498 additional information or documentation that the commissioner may
1499 have requested in the preliminary notice of modification or denial. The
1500 commissioner may grant an extension of the date by which a
1501 claimant's additional information or documentation must be
1502 submitted, upon receipt of proof that the claimant has requested such
1503 data from another governmental agency or if the commissioner
1504 determines there is good cause for doing so.

1505 (B) Not later than thirty business days after receiving a claimant's
1506 request for reconsideration and any additional information or
1507 documentation the claimant has provided, the commissioner shall
1508 reconsider the preliminary decision to modify or deny said financial
1509 assistance and shall send the claimant a written notice of the
1510 commissioner's determination regarding such reconsideration. If

1511 aggrieved by the commissioner's notice of determination with respect
1512 to the reconsideration of said financial assistance, the claimant may,
1513 not later than thirty business days after receiving said notice, make
1514 application for a hearing before said commissioner, or his or her
1515 designee. Such application shall be in writing and shall set forth the
1516 reason why the financial assistance in question should not be modified
1517 or denied. Not later than thirty business days after receiving an
1518 application for a hearing, the commissioner shall grant or deny such
1519 hearing request by written notice to the claimant. If the commissioner
1520 denies the claimant's request for a hearing, such notice shall state the
1521 reason for said denial. If the commissioner grants the claimant's
1522 request for a hearing, the commissioner shall send written notice of the
1523 date, time and place of the hearing, which shall be held not later than
1524 thirty business days after the date of the commissioner's notice
1525 granting the claimant a hearing. Such hearing may, at the
1526 commissioner's discretion, be held in the judicial district in which the
1527 claimant or the claimant's property is located. Not later than thirty
1528 business days after the date on which a hearing is held, a written
1529 notice of the commissioner's determination with respect to such
1530 hearing shall be sent to the claimant and a copy thereof shall be
1531 concurrently sent to the assessor or municipal official who approved
1532 the financial assistance in question.

1533 (3) If any claimant is aggrieved by the commissioner's determination
1534 concerning the hearing regarding the claimant's financial assistance or
1535 the commissioner's decision not to hold a hearing, such claimant may,
1536 not later than thirty business days after receiving the commissioner's
1537 notice related thereto, appeal to the superior court of the judicial
1538 district in which the claimant resides or in which the claimant's
1539 property that is the subject of the appeal is located. Such appeal shall
1540 be accompanied by a citation to the commissioner to appear before
1541 said court, and shall be served and returned in the same manner as is
1542 required in the case of a summons in a civil action. The pendency of
1543 such appeal shall not suspend any action by a municipality to collect

property taxes from the applicant on the property that is the subject of the appeal. The authority issuing the citation shall take from the applicant a bond or recognizance to the state of Connecticut, with surety, to prosecute the application in effect and to comply with the orders and decrees of the court in the premises. Such applications shall be preferred cases, to be heard, unless cause appears to the contrary, at the first session, by the court or by a committee appointed by the court. Said court may grant such relief as may be equitable and, if the application is without probable cause, may tax double or triple costs, as the case demands; and, upon all applications which are denied, costs may be taxed against the applicant at the discretion of the court, but no costs shall be taxed against the state.

(4) The commissioner shall notify each claimant of the final modification or denial of financial assistance as claimed, in accordance with the procedure set forth in this subsection. A copy of the notice of final modification or denial shall be sent concurrently to the assessor or municipal official who approved such financial assistance. Such notice shall be sent not later than the date by which the commissioner certifies the amounts of payment to the Comptroller.

Sec. 38. Section 12-170d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013, and applicable to applications received on and after April 1, 2013*):

(a) Beginning with the calendar year 1973 and for each calendar year thereafter any renter of real property, or of a mobile manufactured home, as defined in section 12-63a, which he occupies as his home, who meets the qualifications set forth in this section, shall be entitled to receive in the following year in the form of direct payment from the state, a grant in refund of utility and rent bills actually paid by or for him on such real property or mobile manufactured home to the extent set forth in section 12-170e. Such grant by the state shall be made upon receipt by the state of a certificate of grant with a copy of the application therefor attached, as provided in section 12-170f, <u>as</u>

amended by this act, provided such application shall be made within one year from the close of the calendar year for which the grant is requested. If the rental quarters are occupied by more than one person, it shall be assumed for the purposes of this section and sections 12-170e and 12-170f, as amended by this act, that each of such persons pays his proportionate share of the rental and utility expenses levied thereon and grants shall be calculated on that portion of utility and rent bills paid that are applicable to the person making application for grant under said sections. For purposes of this section and said sections 12-170e and 12-170f, as amended by this act, a husband and wife shall constitute one tenant, and a resident of cooperative housing shall be a renter. To qualify for such payment by the state, the renter shall meet qualification requirements in accordance with each of the following subdivisions: (1) (A) At the close of the calendar year for which a grant is claimed be sixty-five years of age or over, or his spouse who is residing with him shall be sixty-five years of age or over, at the close of such year, or be fifty years of age or over and the surviving spouse of a renter who at the time of his death had qualified and was entitled to tax relief under this chapter, provided such spouse was domiciled with such renter at the time of his death or (B) at the close of the calendar year for which a grant is claimed be under age sixty-five and eligible in accordance with applicable federal regulations, to receive permanent total disability benefits under Social Security, or if he has not been engaged in employment covered by Social Security and accordingly has not qualified for benefits thereunder but has become qualified for permanent total disability benefits under any federal, state or local government retirement or disability plan, including the Railroad Retirement Act and any government-related teacher's retirement plan, determined by the Secretary of the Office of Policy and Management to contain requirements in respect to qualification for such permanent total disability benefits which are comparable to such requirements under Social Security; (2) shall reside within this state and shall have resided within this state for at least one year or his spouse who is domiciled

with him shall have resided within this state for at least one year and shall reside within this state at the time of filing the claim and shall have resided within this state for the period for which claim is made; (3) shall have taxable and nontaxable income, the total of which shall hereinafter be called "qualifying income", during the calendar year preceding the filing of his claim in an amount of not more than twenty thousand dollars, jointly with spouse, if married, and not more than sixteen thousand two hundred dollars if unmarried, provided such maximum amounts of qualifying income shall be subject to adjustment in accordance with subdivision (2) of subsection (a) of section 12-170e, and provided the amount of any Medicaid payments made on behalf of the renter or the spouse of the renter shall not constitute income; and (4) shall not have received financial aid or subsidy from federal, state, county or municipal funds, excluding Social Security receipts, emergency energy assistance under any state program, emergency energy assistance under any federal program, emergency energy assistance under any local program, payments received under the federal Supplemental Security Income Program, payments derived from previous employment, veterans and veterans disability benefits and subsidized housing accommodations, during the calendar year for which a grant is claimed, for payment, directly or indirectly, of rent, electricity, gas, water and fuel applicable to the rented residence. Notwithstanding the provisions of subdivision (4) of this subsection, a renter who receives cash assistance from the Department of Social Services in the calendar year prior to that in which such renter files an application for a grant may be entitled to receive such grant provided the amount of the cash assistance received shall be deducted from the amount of such grant and the difference between the amount of the cash assistance and the amount of the grant is equal to or greater than ten dollars. Funds attributable to such reductions shall be transferred annually from the appropriation to the **[**Office of Policy and Management**]** Department of Housing, for tax relief for elderly renters, to the Department of Social Services, to the appropriate accounts, following the issuance of such grants. Notwithstanding the provisions

of subsection (b) of section 12-170aa, the owner of a mobile manufactured home may elect to receive benefits under section 12-170e in lieu of benefits under said section 12-170aa.

(b) For purposes of determining qualifying income under subsection (a) of this section with respect to a married renter who submits an application for a grant in accordance with sections 12-170d to 12-170g, inclusive, the Social Security income of the spouse of such renter shall not be included in the qualifying income of such renter, for purposes of determining eligibility for benefits under said sections, if such spouse is a resident of a health care or nursing home facility in this state receiving payment related to such spouse under the Title XIX Medicaid program. An applicant who is legally separated pursuant to the provisions of section 46b-40, as of the thirty-first day of December preceding the date on which such person files an application for a grant in accordance with sections 12-170d to 12-170g, inclusive, may apply as an unmarried person and shall be regarded as such for purposes of determining qualifying income under subsection (a) of this section.

<u>(c) Any individual who did not receive a grant for the calendar year 2011 pursuant to subsection (a) of this section shall not be eligible to apply for a grant under this program. Any individual who did receive a grant for the calendar year 2011 pursuant to subsection (a) of this section shall continue to be eligible to apply for a grant under this section, provided that any such individual who does not receive a grant in any subsequent calendar year shall no longer be eligible to apply for a grant under this program.</u>

Sec. 39. Subsection (a) of section 12-170f of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) Any renter, believing himself or herself to be entitled to a grant under section 12-170d<u>, as amended by this act,</u> for any calendar year,

shall make application for such grant to the assessor of the municipality in which the renter resides or to the duly authorized agent of such assessor or municipality on or after April first and not later than October first of each year with respect to such grant for the calendar year preceding each such year, on a form prescribed and furnished by the [Secretary of the Office of Policy and Management] Commissioner of Housing to the assessor. A renter may make application to the [secretary] commissioner prior to December fifteenth of the claim year for an extension of the application period. The [secretary] commissioner may grant such extension in the case of extenuating circumstance due to illness or incapacitation as evidenced by a certificate signed by a physician or an advanced practice registered nurse to that extent, or if the [secretary] commissioner determines there is good cause for doing so. A renter making such application shall present to such assessor or agent, in substantiation of the renter's application, a copy of the renter's federal income tax return, and if not required to file a federal income tax return, such other evidence of qualifying income, receipts for money received, or cancelled checks, or copies thereof, and any other evidence the assessor or such agent may require. When the assessor or agent is satisfied that the applying renter is entitled to a grant, such assessor or agent shall issue a certificate of grant, in triplicate, in such form as the [secretary] commissioner may prescribe and supply showing the amount of the grant due. The assessor or agent shall forward the original copy and attached application to the [secretary] commissioner not later than the last day of the month following the month in which the renter has made application. On or after December 1, 1989, any municipality which neglects to transmit to the [secretary] commissioner the claim and supporting applications as required by this section shall forfeit two hundred fifty dollars to the state, provided said [secretary] commissioner may waive such forfeiture in accordance with procedures and standards adopted by regulation in accordance with chapter 54. A duplicate of such certificate with a copy of the application attached shall be delivered to the renter and the assessor or

agent shall keep the third copy of such certificate and a copy of the application. After the [secretary's] commissioner's review of each claim, pursuant to section [12-120b] 38 of this act, and verification of the amount of the grant the [secretary] commissioner shall, not later than September thirtieth of each year prepare a list of certificates approved for payment, and shall thereafter supplement such list monthly. Such list and any supplements thereto shall be approved for payment by the [secretary] commissioner and shall be forwarded by the [secretary] commissioner to the Comptroller, not later than [ninety] one hundred twenty days after receipt of such applications and certificates of grant from the assessor or agent, and the Comptroller shall draw an order on the Treasurer, not later than fifteen days following, in favor of each person on such list and on supplements to such list in the amount of such person's claim and the Treasurer shall pay such amount to such person, not later than fifteen days following. Any claimant aggrieved by the results of the [secretary's] commissioner's review shall have the rights of appeal as set forth in section [12-120b] 38 of this act. Applications filed under this section shall not be open for public inspection. Any person who, for the purpose of obtaining a grant under section 12-170d, as amended by this act, wilfully fails to disclose all matters related thereto or with intent to defraud makes false statement shall be fined not more than five hundred dollars.

Sec. 40. Section 12-170g of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

Any person aggrieved by the action of the assessor or agent in fixing the amount of the grant under section 12-170f, as amended by this act, or in disapproving the claim therefor may apply to the [Secretary of the Office of Policy and Management] Commissioner of Housing in writing, within thirty business days from the date of notice given to such person by the assessor or agent, giving notice of such grievance. The [secretary] commissioner shall promptly consider such notice and may grant or deny the relief requested, provided such decision shall be

made not later than thirty business days after the receipt of such notice. If the relief is denied, the applicant shall be notified forthwith, and the applicant may appeal the decision of the [secretary] commissioner in accordance with the provisions of section [12-120b] 37 of this act.

Sec. 41. (NEW) (*Effective July 1, 2013*) The Commissioner of Housing shall have power to enforce the provisions relative to rebates under section 12-170d of the general statutes, as amended by this act, and make all necessary regulations, adopted pursuant to chapter 54 of the general statutes, for that purpose and for carrying out, enforcing and preventing violations of all provisions.

Sec. 42. Section 12-170bb of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) On or before March first, annually, [commencing March 1, 1988,] the Secretary of the Office of Policy and Management shall submit a report concerning the state programs of tax relief for elderly homeowners [and grants to elderly renters] to the joint standing committee of the General Assembly on finance, revenue and bonding. Said report shall be prepared in relation to qualified participants, benefits allowed and state payments to municipalities as reimbursement for property tax loss in the preceding calendar year, including data concerning (1) the total number of qualified participants in [each of] the state programs for elderly homeowners, [and the state program for elderly renters] and (2) total benefits allowed in each of such programs. The information as to qualified participants and benefits allowed shall be subdivided to reflect such totals with respect to each of the following categories: (A) Each of the income brackets as included in the schedule of benefits for elderly homeowners, [and renters] and (B) married and unmarried participants.

(b) In addition to the information described in subsection (a), said report pertaining to the state programs of tax reduction for elderly

1773 homeowners [and grant to elderly renters] shall include statistics
1774 related to distribution of benefits, applicable to the preceding calendar
1775 year, as follows:

1776 (1) With respect to each of the bracket of tax reduction benefits in
1777 the following schedules, the total number of persons in the state
1778 program of tax reduction for homeowners under section 12-170aa who
1779 received benefits within the limits of each such bracket, including the
1780 number of persons receiving the maximum and the minimum amounts
1781 of tax reduction:

T1 Amount of Tax Reduction Allowed

	Married Homeowners		Unmarried Homeowners	
T2				
T3	Over	Not Exceeding	Over	Not Exceeding
T4	$	$ 100 (Minimum)	$	$ 100 (Minimum)
T5	100	200	100	200
T6	200	300	200	300
T7	300	400	300	400
T8	400	500	400	500
T9	500	600	500	600
T10	600	700	600	700
T11	700	800	700	800
T12	800	900	800	900
T13	900	1,000	900	999
T14	1,000	1,100		1,000 (Maximum)
T15	1,100	1,249		
T16		1,250 (Maximum)		

1782 [(2) With respect to each of the brackets concerning grants to renters
1783 in the following schedules, the total number of persons in the state
1784 program of grants for elderly renters under sections 12-170d and 12-
1785 170e who received benefits within the limits of each such bracket,
1786 including the number of persons receiving the maximum and the
1787 minimum amount of grant:

T17 Amount of State Grant Allowed

	Married Renters		Unmarried Renters	
T19	Over	Not Exceeding	Over	Not Exceeding
T20	$	$ 100 (Minimum)	$	$ 100 (Minimum)
T21	100	200	100	200
T22	200	300	200	300
T23	300	400	300	400
T24	400	500	400	500
T25	500	600	500	600
T26	600	700	600	699
T27	700	800		700 (Maximum)
T28	800	899		
T29		900 (Maximum)**]**		

1788 **[**(3)**]** (2) With respect to each of the brackets of benefits in the
1789 following schedule, the total number of persons in the state tax-freeze
1790 program for elderly homeowners under section 12-129b who received
1791 benefits in tax reduction within the limits of each such bracket:

T30 Amount of Tax Reduction Benefit Allowed

	Over	Not Exceeding
T32	$	$ 300
T33	300	600
T34	600	900
T35	900	1,200
T36	1,200	1,500
T37	1,500	

1792 Sec. 43. Section 16a-35c of the general statutes is repealed and the
1793 following is substituted in lieu thereof (*Effective July 1, 2013*):

1794 (a) As used in this section and sections 16a-35d to 16a-35g, inclusive:

1795 (1) "Funding" includes any form of assurance, guarantee, grant

payment, credit, tax credit or other assistance, including a loan, loan guarantee, or reduction in the principal obligation of or rate of interest payable on a loan or a portion of a loan;

(2) "Growth-related project" means any project which includes (A) the acquisition of real property when the acquisition costs are in excess of one hundred thousand dollars, except the acquisition of open space for the purposes of conservation or preservation; (B) the development or improvement of real property when the development costs are in excess of one hundred thousand dollars; (C) the acquisition of public transportation equipment or facilities when the acquisition costs are in excess of one hundred thousand dollars; or (D) the authorization of each state grant, any application for which is not pending on July 1, 2006, for an amount in excess of one hundred thousand dollars, for the acquisition or development or improvement of real property or for the acquisition of public transportation equipment or facilities, except the following: (i) Projects for maintenance, repair, additions or renovations to existing facilities, acquisition of land for telecommunications towers whose primary purpose is public safety, parks, conservation and open space, and acquisition of agricultural, conservation and historic easements; (ii) funding by the Department of **[**Economic and Community Development**]** Housing for any project financed with federal funds used to purchase or rehabilitate existing single or multi-family housing or projects financed with the proceeds of revenue bonds if the Commissioner of **[**Economic and Community Development**]** Housing determines that application of this section and sections 16a-35d and 16a-35e (I) conflicts with any provision of federal or state law applicable to the issuance or tax-exempt status of the bonds or any provision of any trust agreement between the Department of **[**Economic and Community Development**]** Housing and any trustee, or (II) would otherwise prohibit financing of an existing project or financing provided to cure or prevent any default under existing financing; (iii) projects that the Commissioner of **[**Economic and Community Development**]** Housing determines

1829 promote fair housing choice and racial and economic integration as
1830 described in section 8-37cc; (iv) projects at an existing facility needed to
1831 comply with state environmental or health laws or regulations
1832 adopted thereunder; (v) school construction projects funded by the
1833 Department of Education under chapter 173; (vi) libraries; (vii)
1834 municipally owned property or public buildings used for government
1835 purposes; and (viii) any other project, funding or other state assistance
1836 not included under subparagraphs (A) to (D), inclusive, of this
1837 subdivision.

1838 (3) "Priority funding area" means the area of the state designated
1839 under subsection (b) of this section.

1840 (b) The Secretary of the Office of Policy and Management, in
1841 consultation with the Commissioners of Economic and Community
1842 Development, Housing, Energy and Environmental Protection,
1843 Administrative Services, Agriculture and Transportation, the regional
1844 planning agencies in the state and any other persons or entities the
1845 secretary deems necessary, shall develop recommendations for
1846 delineation of the boundaries of priority funding areas in the state and
1847 for revisions thereafter. In making such recommendations, the
1848 secretary shall consider areas designated as regional centers, growth
1849 areas, neighborhood conservation areas and rural community centers
1850 on the state plan of conservation and development, redevelopment
1851 areas, distressed municipalities, as defined in section 32-9p, targeted
1852 investment communities, as defined in section 32-222, public
1853 investment communities, as defined in section 7-545, enterprise zones,
1854 designated by the Commissioner of Economic and Community
1855 Development under section 32-70 and corridor management areas
1856 identified in the state plan of conservation and development. The
1857 secretary shall submit the recommendations to the Continuing
1858 Legislative Committee on State Planning and Development established
1859 pursuant to section 4-60d for review when the state plan of
1860 conservation and development is submitted to such committee in
1861 accordance with section 16a-29. The committee shall report its

recommendations to the General Assembly at the time said state plan is submitted to the General Assembly under section 16a-30. The boundaries shall become effective upon approval of the General Assembly.

Sec. 44. Subsections (g) and (h) of section 25-68d of the general statutes are repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(g) The provisions of this section shall not apply to any proposal by the Department of Transportation, the Department of Housing or the Department of Economic and Community Development for a project within a drainage basin of less than one square mile.

(h) The provisions of subsections (a) to (d), inclusive, and (f) and (g) of this section shall not apply to the following critical activities above the one-hundred-year flood elevation that involve state funded housing reconstruction, rehabilitation or renovation, provided the state agency that provides funding for such activity certifies that it complies with the provisions of the National Flood Insurance Program and the requirements of this subsection: (1) Projects involving the renovation or rehabilitation of existing housing on the **[**Department of Economic and Community Development's**]** Department of Housing's most recent affordable housing appeals list; (2) construction of minor structures to an existing building for the purpose of providing handicapped accessibility pursuant to the State Building Code; (3) construction of open decks attached to residential structures, properly anchored in accordance with the State Building Code; (4) the demolition and reconstruction of existing housing for persons and families of low and moderate income, provided there is no increase in the number of dwelling units and (A) such reconstruction is limited to the footprint of the existing foundation of the building or buildings used for such purpose, or which could be used for such purpose subsequent to reconstruction, or (B) such reconstruction is on a parcel of land where the elevation of such land is above the one-hundred-year flood

1894 elevation, provided there is no placement of fill within an adopted
1895 Federal Emergency Management Agency flood zone.

1896 Sec. 45. Subsection (b) of section 17b-90 of the general statutes is
1897 repealed and the following is substituted in lieu thereof (*Effective July*
1898 *1, 2013*):

1899 (b) No person shall, except for purposes directly connected with the
1900 administration of programs of the Department of Social Services and in
1901 accordance with the regulations of the commissioner, solicit, disclose,
1902 receive or make use of, or authorize, knowingly permit, participate in
1903 or acquiesce in the use of, any list of the names of, or any information
1904 concerning, persons applying for or receiving assistance from the
1905 Department of Social Services or persons participating in a program
1906 administered by said department, directly or indirectly derived from
1907 the records, papers, files or communications of the state or its
1908 subdivisions or agencies, or acquired in the course of the performance
1909 of official duties. The Commissioner of Social Services shall disclose (1)
1910 to any authorized representative of the Labor Commissioner such
1911 information directly related to unemployment compensation,
1912 administered pursuant to chapter 567 or information necessary for
1913 implementation of sections 17b-688b, 17b-688c and 17b-688h and
1914 section 122 of public act 97-2 of the June 18 special session, (2) to any
1915 authorized representative of the Commissioner of Mental Health and
1916 Addiction Services any information necessary for the implementation
1917 and operation of the basic needs supplement program or the Medicaid
1918 program for low-income adults, established pursuant to section 17b-
1919 261n, (3) to any authorized representative of the Commissioner of
1920 Administrative Services or the Commissioner of Emergency Services
1921 and Public Protection such information as the Commissioner of Social
1922 Services determines is directly related to and necessary for the
1923 Department of Administrative Services or the Department of
1924 Emergency Services and Public Protection for purposes of performing
1925 their functions of collecting social services recoveries and
1926 overpayments or amounts due as support in social services cases,

1927 investigating social services fraud or locating absent parents of public
1928 assistance recipients, (4) to any authorized representative of the
1929 Commissioner of Children and Families necessary information
1930 concerning a child or the immediate family of a child receiving services
1931 from the Department of Social Services, including safety net services, if
1932 the Commissioner of Children and Families or the Commissioner of
1933 Social Services has determined that imminent danger to such child's
1934 health, safety or welfare exists to target the services of the family
1935 services programs administered by the Department of Children and
1936 Families, (5) to a town official or other contractor or authorized
1937 representative of the Labor Commissioner such information
1938 concerning an applicant for or a recipient of assistance under state-
1939 administered general assistance deemed necessary by the
1940 Commissioner of Social Services and the Labor Commissioner to carry
1941 out their respective responsibilities to serve such persons under the
1942 programs administered by the Labor Department that are designed to
1943 serve applicants for or recipients of state-administered general
1944 assistance, (6) to any authorized representative of the Commissioner of
1945 Mental Health and Addiction Services for the purposes of the
1946 behavioral health managed care program established by section 17a-
1947 453, (7) to any authorized representative of the Commissioner of Public
1948 Health to carry out his or her respective responsibilities under
1949 programs that regulate child day care services or youth camps, (8) to a
1950 health insurance provider, in IV-D support cases, as defined in
1951 subdivision (13) of subsection (b) of section 46b-231, information
1952 concerning a child and the custodial parent of such child that is
1953 necessary to enroll such child in a health insurance plan available
1954 through such provider when the noncustodial parent of such child is
1955 under court order to provide health insurance coverage but is unable
1956 to provide such information, provided the Commissioner of Social
1957 Services determines, after providing prior notice of the disclosure to
1958 such custodial parent and an opportunity for such parent to object,
1959 that such disclosure is in the best interests of the child, (9) to any
1960 authorized representative of the Department of Correction, in IV-D

support cases, as defined in subdivision (13) of subsection (b) of section 46b-231, information concerning noncustodial parents that is necessary to identify inmates or parolees with IV-D support cases who may benefit from Department of Correction educational, training, skill building, work or rehabilitation programming that will significantly increase an inmate's or parolee's ability to fulfill such inmate's support obligation, (10) to any authorized representative of the Judicial Branch, in IV-D support cases, as defined in subdivision (13) of subsection (b) of section 46b-231, information concerning noncustodial parents that is necessary to: (A) Identify noncustodial parents with IV-D support cases who may benefit from educational, training, skill building, work or rehabilitation programming that will significantly increase such parent's ability to fulfill such parent's support obligation, (B) assist in the administration of the Title IV-D child support program, or (C) assist in the identification of cases involving family violence, **[**or**]** (11) to any authorized representative of the State Treasurer, in IV-D support cases, as defined in subdivision (13) of subsection (b) of section 46b-231, information that is necessary to identify child support obligors who owe overdue child support prior to the Treasurer's payment of such obligors' claim for any property unclaimed or presumed abandoned under part III of chapter 32, or (12) to any authorized representative of the Commissioner of Housing for the purpose of verifying whether an applicant for the renters rebate program established by section 12-170d, as amended by this act, is a recipient of cash assistance from the Department of Social Services and the amount of such assistance. No such representative shall disclose any information obtained pursuant to this section, except as specified in this section. Any applicant for assistance provided through said department shall be notified that, if and when such applicant receives benefits, the department will be providing law enforcement officials with the address of such applicant upon the request of any such official pursuant to section 17b-16a.

Sec. 46. Section 17b-347e of the general statutes is repealed and the

following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) The Commissioner of Social Services, in collaboration with the Commissioner of [Economic and Community Development] Housing and the Connecticut Housing Finance Authority, shall [establish] maintain a demonstration project to provide subsidized assisted living services, as defined in section 19-13-D105 of the regulations of Connecticut state agencies, for persons residing in affordable housing, as defined in section 8-39a. The demonstration project shall be conducted in at least three municipalities to be determined by the Commissioner of Social Services. The demonstration project shall be limited to a maximum of three hundred subsidized dwelling units. [Applicants] An applicant shall be eligible for such subsidized assisted living services [shall be subject to the same eligibility requirements as] if such applicant is (1) eligible for the Connecticut home care program for the elderly pursuant to section 17b-342, or (2) sixty-five years of age or older and eligible for the home and community-based program established pursuant to section 17b-602a for adults with severe and persistent psychiatric disabilities.

(b) [Not later than January 1, 1999, the Commissioner of Social Services shall enter into] There shall be a memorandum of understanding [with] among the Commissioner of [Economic and Community Development] Housing, the Commissioner of Social Services and the Connecticut Housing Finance Authority. Such memorandum of understanding shall specify that (1) the Department of Social Services apply for a Medicaid waiver to secure federal financial participation to fund assisted living services, establish a process to select nonprofit and for-profit providers and determine the number of dwelling units in the demonstration project, (2) the Department of [Economic and Community Development] Housing provide rental subsidy certificates pursuant to section 8-402 or rental assistance pursuant to section 8-119kk, as amended by this act, and (3) the Connecticut Housing Finance Authority provide second mortgage loans for housing projects for which the authority has provided

2027 financial assistance in the form of a loan secured by a first mortgage
2028 pursuant to section 8-403 for the demonstration project. **[**Not later than
2029 July 1, 1999, the Connecticut Housing Finance Authority shall issue a
2030 request for proposals for persons or entities interested in participating
2031 in the demonstration project.**]**

2032 (c) Nothing in this section shall be construed to prohibit a
2033 combination of unsubsidized dwelling units and subsidized dwelling
2034 units under the demonstration project within the same facility.
2035 Notwithstanding the provisions of section 8-402, the Department of
2036 **[**Economic and Community Development**]** Housing may set the rental
2037 subsidy at any percentage of the annual aggregate family income and
2038 define aggregate family income and eligibility for subsidies in a
2039 manner consistent with such demonstration project.

2040 Sec. 47. Section 17b-800 of the general statutes is repealed and the
2041 following is substituted in lieu thereof (*Effective July 1, 2013*):

2042 (a) The Commissioner of **[**Social Services**]** Housing may, upon
2043 application of any public or private organization or agency, make
2044 grants, within available appropriations, to develop and maintain
2045 programs for homeless individuals including programs for emergency
2046 shelter services, transitional housing services, on-site social services for
2047 available permanent housing and for the prevention of homelessness.

2048 (b) Each shelter receiving a grant pursuant to this section (1) shall
2049 provide decent, safe and sanitary shelter for residents of the shelter; (2)
2050 shall not suspend or expel a resident without good cause; (3) shall, in
2051 the case of a resident who is listed on the registry of sexual offenders
2052 maintained pursuant to chapter 969, provide verification of such
2053 person's residence at the shelter to a law enforcement officer upon the
2054 request of such officer; and (4) shall provide a grievance procedure by
2055 which residents can obtain review of grievances, including grievances
2056 concerning suspension or expulsion from the shelter. No shelter
2057 serving homeless families may admit a person who is listed on the

2058 registry of sexual offenders maintained pursuant to chapter 969. The
2059 Commissioner of [Social Services] Housing shall adopt regulations, in
2060 accordance with the provisions of chapter 54, establishing (A)
2061 minimum standards for shelter grievance procedures and rules
2062 concerning the suspension and expulsion of shelter residents and (B)
2063 standards for the review and approval of the operating policies of
2064 shelters receiving a grant under this section. Shelter operating policies
2065 shall establish a procedure for the release of information concerning a
2066 resident who is listed on the registry of sexual offenders maintained
2067 pursuant to chapter 969 to a law enforcement officer in accordance
2068 with this subsection.

2069 Sec. 48. Section 17b-800a of the general statutes is repealed and the
2070 following is substituted in lieu thereof (*Effective July 1, 2013*):

2071 (a) The Department of [Social Services] Housing, in consultation
2072 with appropriate state agencies and within available appropriations,
2073 shall (1) allocate existing funding and resources to ensure the
2074 availability of homeless shelters that accept intact families or that assist
2075 families to find adequate alternative arrangements that allow the
2076 family to remain together; and (2) review program eligibility
2077 requirements and other policies to ensure that unaccompanied
2078 homeless children have access, to the fullest extent practicable, to
2079 critical services that such children might otherwise have been
2080 prevented from receiving due to age or guardianship requirements. [;
2081 and (3) work, in accordance with state and federal law, to seek relief
2082 from income garnishment orders through the appropriate judicial
2083 authority if it is deemed appropriate to be in the best interests of
2084 children and families.]

2085 (b) The Department of Social Services, in consultation with
2086 appropriate state agencies and within available appropriations, shall
2087 work, in accordance with state and federal law, to seek relief from
2088 income garnishment orders through the appropriate judicial authority
2089 if it is deemed appropriate to be in the best interests of children and

2090 families.

2091 [(b)] (c) The Department of Education, in consultation with
2092 appropriate departments, shall seek full utilization of the federal
2093 McKinney-Vento Homeless Assistance Act to protect children falling
2094 into homelessness from school failure and dropping out of school and
2095 to improve access to higher education.

2096 Sec. 49. Section 17b-806 of the general statutes is repealed and the
2097 following is substituted in lieu thereof (*Effective July 1, 2013*):

2098 (a) The Commissioner of [Social Services] Housing, in consultation
2099 with the Commissioner of Social Services, shall establish and
2100 administer a homefinders program, which includes participation by
2101 housing authorities, to assist families including recipients of temporary
2102 family assistance who are homeless or in imminent danger of eviction
2103 or foreclosure. The commissioner shall administer the program within
2104 available appropriations.

2105 (b) The Commissioner of [Social Services] Housing may adopt
2106 regulations in accordance with chapter 54 to carry out the purposes of
2107 this section.

2108 Sec. 50. Section 17b-813 of the general statutes is repealed and the
2109 following is substituted in lieu thereof (*Effective July 1, 2013*):

2110 The Commissioner of [Social Services] Housing, in consultation
2111 with the Commissioner of Social Services, shall provide emergency
2112 rental assistance for families eligible for assistance under the
2113 temporary family assistance program living in hotels and motels as a
2114 component of the program for rental assistance established under
2115 section 17b-812.

2116 Sec. 51. Subsection (b) of section 32-601 of the general statutes is
2117 repealed and the following is substituted in lieu thereof (*Effective July*
2118 *1, 2013*):

2119 (b) The Capital Region Development Authority shall be governed
2120 by a board of directors consisting of [thirteen] fourteen members. The
2121 members of the board shall be appointed as follows: (1) Four
2122 appointed by the Governor, (2) two appointed by the mayor of the city
2123 of Hartford, one of whom shall be a resident of the city of Hartford,
2124 and one of whom shall be an employee of the city of Hartford who is
2125 not an elected official, (3) one appointed jointly by the speaker of the
2126 House of Representatives and the president pro tempore of the Senate,
2127 and (4) one appointed jointly by the minority leaders of the House of
2128 Representatives and Senate. The mayor of Hartford and the mayor of
2129 East Hartford shall be members of the board. The Secretary of the
2130 Office of Policy and Management and the Commissioners of
2131 Transportation, Housing and Economic and Community
2132 Development, or their designees, shall serve as ex-officio members of
2133 the board. The chairperson shall be designated by the Governor. All
2134 initial appointments shall be made not later than fifteen days after June
2135 15, 2012. The terms of the initial board members appointed shall be as
2136 follows: The four members appointed by the Governor shall serve
2137 four-year terms from said appointment date; the two members
2138 appointed by the mayor of the town and city of Hartford shall serve
2139 three-year terms from said appointment date; the member appointed
2140 jointly by the speaker of the House of Representatives and the
2141 president pro tempore of the Senate shall serve a two-year term from
2142 said appointment date and the member appointed jointly by the
2143 minority leaders of the House of Representatives and the Senate shall
2144 serve a two-year term from said appointment date. Thereafter all
2145 members shall be appointed for four-year terms. A member of the
2146 board shall be eligible for reappointment. Any member of the board
2147 may be removed by the appointing authority for misfeasance,
2148 malfeasance or wilful neglect of duty. Each member of the board,
2149 before commencing such member's duties, shall take and subscribe the
2150 oath or affirmation required by article XI, section 1, of the State
2151 Constitution. A record of each such oath shall be filed in the office of
2152 the Secretary of the State. The board of directors shall maintain a

record of its proceedings in such form as it determines, provided such record indicates attendance and all votes cast by each member. Any member who fails to attend three consecutive meetings or who fails to attend fifty per cent of all meetings held during any calendar year shall be deemed to have resigned from the board. A majority vote of the members of the board shall constitute a quorum and the affirmative vote of a majority of the members present at a meeting of the board shall be sufficient for any action taken by the board. No vacancy in the membership of the board shall impair the right of a quorum to exercise all the rights and perform all the duties of the board. Any action taken by the board may be authorized by resolution at any regular or special meeting and shall take effect immediately unless otherwise provided in the resolution. The board may delegate to three or more of its members, or its officers, agents and employees, such board powers and duties as it may deem proper.

Sec. 52. Subsection (b) of section 32-602 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(b) For these purposes, the authority shall have the following powers: (1) To have perpetual succession as a body corporate and to adopt procedures for the regulation of its affairs and the conduct of its business as provided in subsection (f) of section 32-601, to adopt a corporate seal and alter the same at its pleasure, and to maintain an office at such place or places within the city of Hartford as it may designate; (2) to sue and be sued, to contract and be contracted with; (3) to employ such assistants, agents and other employees as may be necessary or desirable to carry out its purposes, which employees shall be exempt from the classified service and shall not be employees, as defined in subsection (b) of section 5-270, to fix their compensation, to establish and modify personnel procedures as may be necessary from time to time and to negotiate and enter into collective bargaining agreements with labor unions; (4) to acquire, lease, hold and dispose of personal property for the purposes set forth in section 32-602, as

amended by this act; (5) to procure insurance against any liability or loss in connection with its property and other assets, in such amounts and from such insurers as it deems desirable and to procure insurance for employees; (6) to invest any funds not needed for immediate use or disbursement in obligations issued or guaranteed by the United States of America or the state of Connecticut, including the Short Term Investment Fund, and the Tax-Exempt Proceeds Fund, and in other obligations which are legal investments for savings banks in this state and in time deposits or certificates of deposit or other similar banking arrangements secured in such manner as the authority determines; (7) notwithstanding any other provision of the general statutes, upon request of the Secretary of the Office of Policy and Management, to enter into an agreement for funding to facilitate the relocation of state offices within the capital city economic development district; **[**and**]** (8) to enter into such memoranda of understanding as the authority deems appropriate to carry out its responsibilities under this chapter; and (9) to do all acts and things necessary or convenient to carry out the purposes of and the powers expressly granted by this section.

Sec. 53. Subsection (b) of section 32-616 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(b) The proceeds of the sale of said bonds, to the extent of the amount stated in subsection (a) of this section, shall be used by the Department of Economic and Community Development or the Department of Housing for grants-in-aid for capital city projects as follows:

(1) For the Civic Center and coliseum complex renovation and rejuvenation project, not exceeding fifteen million dollars;

(2) For the riverfront infrastructure development and improvement project, not exceeding nineteen million eight hundred eighty thousand dollars provided no amount shall be issued under this subdivision

2217 until the Commissioner of Economic and Community Development
2218 certifies to the State Bond Commission that it has received a
2219 commitment by agreement, contract or other legally enforceable
2220 instrument with private investors or developers for a minimum
2221 private investment equal to the amount of bonds at the time such
2222 bonds are issued pursuant to this subdivision taken together with any
2223 previous commitments;

2224 (3) For housing rehabilitation and new construction projects, as
2225 defined in subparagraph (E) (i) of subdivision (2) of section 32-600, not
2226 exceeding thirty-five million dollars, provided seven million dollars of
2227 said authorization shall be effective July 1, 1999, fourteen million
2228 dollars of said authorization shall be effective July 1, 2000, fourteen
2229 million dollars of said authorization shall be effective July 1, 2001, and
2230 four million dollars of said authorization shall be effective July 1, 2003;

2231 (4) For demolition or redevelopment projects, as defined in
2232 subparagraph (E) (ii) of subdivision (2) of section 32-600, not exceeding
2233 twenty-five million dollars, provided seven million dollars of said
2234 authorization shall be effective July 1, 1999, eight million dollars of
2235 said authorization shall be effective July 1, 2000, five million dollars of
2236 said authorization shall be effective July 1, 2001, and three million
2237 dollars of said authorization shall be effective July 1, 2003;

2238 (5) For parking projects, as defined in subparagraph (F) of
2239 subdivision (2) of section 32-600, not exceeding twelve million dollars.

2240 Sec. 54. Section 32-1m of the general statutes is repealed and the
2241 following is substituted in lieu thereof (*Effective July 1, 2013*):

2242 (a) Not later than February 1, 2006, and annually thereafter, the
2243 Commissioner of Economic and Community Development shall
2244 submit a report to the Governor and the General Assembly, in
2245 accordance with the provisions of section 11-4a. Not later than thirty
2246 days after submission of the report to the Governor and the General
2247 Assembly, said commissioner shall post the report on the Department

of Economic and Community Development's web site. Said report shall include, but not be limited to, the following information with regard to the activities of the Department of Economic and Community Development during the preceding state fiscal year:

(1) A brief description and assessment of the state's economy during such year, utilizing the most recent and reasonably available data, and including:

(A) Connecticut employment by industry;

(B) Connecticut and national average unemployment;

(C) Connecticut gross state product, by industry;

(D) Connecticut productivity, by industry, compared to the national average;

(E) Connecticut manufacturing activity;

(F) Identification of economic and competitive conditions affecting Connecticut's industry sectors, problems resulting from these conditions and state efforts to address the problems;

(G) A brief summary of Connecticut's competitiveness as a place for business, which shall include, but not be limited to, an evaluation of (i) how the programs and policies of state government affect the state economy and state business environment, (ii) the ability of the state to retain and attract businesses, (iii) the steps taken by other states to improve the competitiveness of such states as places for business, and (iv) programs and policies the state could implement to improve the competitiveness of the state in order to encourage economic growth; and

(H) Any other economic information that the commissioner deems appropriate.

2275 (2) A statement of the department's economic and community
2276 development objectives, measures of program success and standards
2277 for granting financial and nonfinancial assistance under programs
2278 administered by the department.

2279 (3) An analysis of the economic development portfolio of the
2280 department, including:

2281 (A) A list of the names, addresses and locations of all recipients of
2282 the department's assistance;

2283 (B) The following information concerning each recipient of such
2284 assistance: (i) Business activities, (ii) standard industrial classification
2285 codes or North American industrial classification codes, (iii) number of
2286 full-time jobs and part-time jobs at the time of application, (iv) number
2287 of actual full-time jobs and actual part-time jobs during the preceding
2288 state fiscal year, (v) whether the recipient is a minority or woman-
2289 owned business, (vi) a summary of the terms and conditions for the
2290 assistance, including the type and amount of state financial assistance,
2291 job creation or retention requirements and anticipated wage rates, (vii)
2292 the amount of investments from private and other nonstate sources
2293 that have been leveraged by the assistance, (viii) the extent to which
2294 employees of the recipient participate in health benefit plans offered
2295 by such recipient, (ix) the extent to which the recipient offers unique
2296 economic, social, cultural or aesthetic attributes to the municipality in
2297 which the recipient is located or to the state, and (x) the amount of
2298 state investment;

2299 (C) A portfolio analysis, including (i) an analysis of the wages paid
2300 by recipients of financial assistance, (ii) the average portfolio wage,
2301 median portfolio wage, highest and lowest portfolio wage, (iii)
2302 portfolio wage data by industry, and (iv) portfolio wage data by
2303 municipality;

2304 (D) An investment analysis, including (i) total portfolio value, (ii)
2305 total investment by industry, (iii) portfolio dollar per job average, (iv)

2306 portfolio leverage ratio, and (v) percentage of financial assistance
2307 which was provided to high performance work organizations in the
2308 preceding state fiscal year; and

2309 (E) An analysis of the estimated economic effects of the
2310 department's economic development investments on the state's
2311 economy, including (i) contribution to gross state product for the total
2312 economic development portfolio and for any investment activity
2313 occurring in the preceding state fiscal year, (ii) direct and indirect
2314 employment created by the investments for the total portfolio and for
2315 any investment activity occurring in the preceding state fiscal year, (iii)
2316 productivity of recipients of financial assistance as a result of the
2317 department's investment occurring in the preceding state fiscal year,
2318 (iv) directly or indirectly increased property values in the
2319 municipalities in which the recipients of assistance are located, and (v)
2320 personal income.

2321 (4) An analysis of the community development portfolio of the
2322 department, including:

2323 (A) A list of the names, addresses and locations of all recipients of
2324 the department's assistance;

2325 (B) The following information concerning each recipient of such
2326 assistance: (i) Amount of state investment, (ii) a summary of the terms
2327 and conditions for the department's assistance, including the type and
2328 amount of state financial assistance, and (iii) the amount of
2329 investments from private and other nonstate sources that have been
2330 leveraged by such assistance;

2331 (C) An investment analysis, including (i) total active portfolio value,
2332 (ii) total investments made in the preceding state fiscal year, (iii) total
2333 portfolio by municipality, (iv) total investments made in the preceding
2334 state fiscal year categorized by municipality, (v) total portfolio
2335 leverage ratio, and (vi) leverage ratio of the total investments made in
2336 the preceding state fiscal year; and

2337 (D) An analysis of the estimated economic effects of the
2338 department's economic development investments on the state's
2339 economy, including (i) contribution to gross state product for the total
2340 portfolio and for any investment activity occurring in the preceding
2341 state fiscal year, (ii) direct and indirect employment created by the
2342 investments for the total portfolio and for any investment activity
2343 occurring in the preceding state fiscal year, (iii) productivity of
2344 recipients of financial assistance as a result of the department's
2345 investment occurring in the preceding state fiscal year, (iv) directly or
2346 indirectly increased property values in the municipalities in which the
2347 recipients are located, and (v) personal income.

2348 (5) A summary of the department's economic and community
2349 development marketing efforts in the preceding state fiscal year, a
2350 summary of the department's business recruitment strategies and
2351 activities in such year, and a summary of the department's efforts to
2352 assist small businesses and minority business enterprises in such year.

2353 (6) A summary of the department's international trade efforts in the
2354 preceding state fiscal year, and, to the extent possible, a summary of
2355 foreign direct investment that occurred in the state in such year.

2356 (7) Identification of existing economic clusters, the formation of new
2357 economic clusters, the measures taken by the commissioner during the
2358 preceding state fiscal year to encourage the growth of economic
2359 clusters and the amount of bond funds expended by the department
2360 during the previous fiscal year on each economic cluster.

2361 (8) (A) A summary of the department's brownfield-related efforts
2362 and activities within the Office of Brownfield Remediation and
2363 Development established pursuant to subsections (a) to (f), inclusive,
2364 of section 32-9cc in the preceding state fiscal year, except for activity
2365 under the Special Contaminated Property Remediation and Insurance
2366 Fund program. Such efforts shall include, but not be limited to, (i) total
2367 portfolio investment in brownfield remediation projects, (ii) total

investment in brownfield remediation projects in the preceding state fiscal year, (iii) total number of brownfield remediation projects, (iv) total number of brownfield remediation projects in the preceding state fiscal year, (v) total of reclaimed and remediated acreage, (vi) total of reclaimed and remediated acreage in the preceding state fiscal year, (vii) leverage ratio for the total portfolio investment in brownfield remediation projects, and (viii) leverage ratio for the total portfolio investment in brownfield remediation projects in the preceding state fiscal year. Such summary shall include a list of such brownfield remediation projects and, for each such project, the name of the developer and the location by street address and municipality and a tracking of all funds administered through or by said office;

(B) A summary of the department's efforts with regard to the Special Contaminated Property Remediation and Insurance Fund, including, but not limited to, (i) the number of applications received in the preceding state fiscal year, (ii) the number and amounts of loans made in such year, (iii) the names of the applicants for such loans, (iv) the average time period between submission of application and the decision to grant or deny the loan, (v) a list of the applications approved and the applications denied and the reasons for such denials, and (vi) for each project, the location by street address and municipality; and

(C) A summary of the department's efforts with regard to the dry cleaning grant program, established pursuant to section 12-263m, including, but not limited to, (i) information as to the number of applications received, (ii) the number and amounts of grants made since the inception of the program, (iii) the names of the applicants, (iv) the time period between submission of application and the decision to grant or deny the loan, (v) which applications were approved and which applications were denied and the reasons for any denials, and (vi) a recommendation as to whether the surcharge and grant program established pursuant to section 12-263m should continue.

2401 (9) The following information concerning enterprise zones
2402 designated under section 32-70:

2403 (A) A statement of the current goals for enterprise zones;

2404 (B) A statement of the current performance standards to measure
2405 the progress of municipalities that have enterprise zones in attaining
2406 the goals for such zones;

2407 (C) A report from each municipality that has an enterprise zone,
2408 which evaluates the progress of the municipality in meeting the
2409 performance standards established under section 32-70a; and

2410 (D) An assessment of the performance of each enterprise zone based
2411 on information collected under subparagraph (C) of this subdivision.

2412 (10) With regard to the grant program designated pursuant to
2413 sections 32-324a to 32-324e, inclusive, an assessment of program
2414 performance.

2415 (11) With regard to the fuel diversification program designated
2416 pursuant to section 32-324g, an assessment of program performance.

2417 **[**(12) With regard to the department's housing-development-related
2418 functions and activities:

2419 (A) A brief description and assessment of the state's housing market
2420 during the preceding state fiscal year, utilizing the most recent and
2421 reasonably available data, and including, but not limited to, (i) a brief
2422 description of the significant characteristics of such market, including
2423 supply, demand and condition and cost of housing, and (ii) any other
2424 information that the commissioner deems appropriate;

2425 (B) A comprehensive assessment of current and future needs for
2426 rental assistance under section 8-119kk for housing projects for the
2427 elderly and disabled, in consultation with the Connecticut Housing
2428 Finance Authority;

2429 (C) An analysis of the progress of the public and private sectors
2430 toward meeting housing needs in the state, using building permit data
2431 from the United States Census Bureau and demolition data from
2432 Connecticut municipalities;

2433 (D) A list of municipalities that meet the affordable housing criteria
2434 set forth in subsection (k) of section 8-30g, pursuant to regulations that
2435 the Commissioner of Economic and Community Development shall
2436 adopt pursuant to the provisions of chapter 54. For the purpose of
2437 determining the percentage required by subsection (k) of said section
2438 8-30g, the commissioner shall use as the denominator the number of
2439 dwelling units in the municipality, as reported in the most recent
2440 United States decennial census; and

2441 (E) A statement of the department's housing development
2442 objectives, measures of program success and standards for granting
2443 financial and nonfinancial assistance under programs administered by
2444 said commissioner.

2445 (13) A presentation of the state-funded housing development
2446 portfolio of the department, including:

2447 (A) A list of the names, addresses and locations of all recipients of
2448 such assistance; and

2449 (B) For each such recipient, (i) a summary of the terms and
2450 conditions for the assistance, including the type and amount of state
2451 financial assistance, (ii) the amount of investments from private and
2452 other nonstate sources that have been leveraged by the assistance, (iii)
2453 the number of new units to be created and the number of units to be
2454 preserved at the time of the application, and (iv) the number of actual
2455 new units created and number of units preserved.

2456 (14) An analysis of the state-funded housing development portfolio
2457 of the department, including:

2458 (A) An investment analysis, including the (i) total active portfolio
2459 value, (ii) total investment made in the preceding state fiscal year, (iii)
2460 portfolio dollar per new unit created, (iv) estimated dollars per new
2461 unit created for projects receiving an assistance award in the preceding
2462 state fiscal year, (v) portfolio dollars per unit preserved, (vi) estimated
2463 dollar per unit preserved for projects receiving an assistance award in
2464 the preceding state fiscal year, (vii) portfolio leverage ratio, and (viii)
2465 leverage ratio for housing development investments made in the
2466 preceding state fiscal year; and

2467 (B) A production and preservation analysis, including (i) the total
2468 number of units created, itemized by municipality, for the total
2469 portfolio and projects receiving an assistance award in the preceding
2470 state fiscal year, (ii) the total number of elderly units created for the
2471 total portfolio and for projects receiving an assistance award in the
2472 preceding state fiscal year, (iii) the total number of family units created
2473 for the total portfolio and for projects receiving an assistance award in
2474 the preceding state fiscal year, (iv) the total number of units preserved,
2475 itemized by municipality, for the total portfolio and projects receiving
2476 an assistance award in the preceding state fiscal year, (v) the total
2477 number of elderly units preserved for the total portfolio and for
2478 projects receiving an assistance award in the preceding state fiscal
2479 year, (vi) the total number of family units preserved for the total
2480 portfolio and for projects receiving an assistance award in the
2481 preceding state fiscal year, (vii) an analysis by income group of
2482 households served by the department's housing construction,
2483 substantial rehabilitation, purchase and rental assistance programs, for
2484 each housing development, if applicable, and for each program,
2485 including number of households served under each program by race
2486 and data for all households, and (viii) a summary of the department's
2487 efforts in promoting fair housing choice and racial and economic
2488 integration, including data on the racial composition of the occupants
2489 and persons on the waiting list of each housing project that is assisted
2490 under any housing program established by the general statutes or a

2491 special act or that is supervised by the department, provided no
2492 information shall be required to be disclosed by any occupant or
2493 person on a waiting list for the preparation of such summary. As used
2494 in this subparagraph, "elderly units" means dwelling units for which
2495 occupancy is restricted by age, and "family units" means dwelling
2496 units for which occupancy is not restricted by age.

2497 (15) An economic impact analysis of the department's housing
2498 development efforts and activities, including, but not limited to:

2499 (A) The contribution of such efforts and activities to the gross state
2500 product;

2501 (B) The direct and indirect employment created by the investments
2502 for the total housing development portfolio and for any investment
2503 activity for such portfolio occurring in the preceding state fiscal year;
2504 and

2505 (C) Personal income in the state.

2506 (16) With regard to the Housing Trust Fund and Housing Trust
2507 Fund program, as those terms are defined in section 8-336m:

2508 (A) Activities for the prior fiscal year of the Housing Trust Fund and
2509 the Housing Trust Fund program; and

2510 (B) The efforts of the department to obtain private support for the
2511 Housing Trust Fund and the Housing Trust Fund program.

2512 (17) With regard to the department's energy conservation loan
2513 program:

2514 (A) The number of loans or deferred loans made during the
2515 preceding fiscal year under each component of such program and the
2516 total amount of the loans or deferred loans made during such fiscal
2517 year under each such component;

2518 (B) A description of each step of the loan or deferred loan
2519 application and review process;

2520 (C) The location of each loan or deferred loan application intake site
2521 for such program;

2522 (D) The average time period for the processing of loan or deferred
2523 loan applications during such fiscal year; and

2524 (E) The total administrative expenses of such program for such
2525 fiscal year.]

2526 [(18)] (12) An assessment of the performance of the Connecticut
2527 qualified biodiesel producer incentive account grant program
2528 established pursuant to sections 32-324a to 32-324e, inclusive.

2529 [(19)] (13) An assessment of the performance of the fuel
2530 diversification grant program established pursuant to section 32-324g.

2531 [(20)] (14) A summary of the total social and economic impact of the
2532 department's efforts and activities in the areas of economic,
2533 community and housing development, and an assessment of the
2534 department's performance in terms of meeting its stated goals and
2535 objectives.

2536 [(21)] (15) With regard to the Connecticut Credit Consortium
2537 established pursuant to section 32-9yy, a summary of the activity of
2538 such program, including, but not limited to, the number of loans and
2539 lines of credit applied for and approved, the size of the businesses, the
2540 amount of the loans or lines of credit, and the amount repaid to date.

2541 [(22)] (16) With regard to the office of the permit ombudsman,
2542 established pursuant to section 32-726:

2543 (A) The names of applicants for expedited review;

2544 (B) The date of request for expedited review;

2545 (C) The basis upon which the applicant claimed eligibility for
2546 expedited review;

2547 (D) State agencies that participated in the permit review process;

2548 (E) The dates on which the permit was granted or denied via the
2549 expedited review process or the date the applicant was determined not
2550 to be eligible for expedited review; and

2551 (F) If applicable, the reason the applicant was determined not to be
2552 eligible for the expedited review process.

2553 **[**(23)**]** (17) With regard to the Small Business Express program
2554 established pursuant to section 32-7g, data on (A) the number of small
2555 businesses that applied to the Small Business Express program, (B) the
2556 number of small businesses that received assistance under said
2557 program and the general categories of such businesses, (C) the
2558 amounts and types of assistance provided, (D) the total number of jobs
2559 on the date of application and the number proposed to be created or
2560 retained, and (E) the most recent employment figures of the small
2561 businesses receiving assistance.

2562 **[**(24)**]** (18) With regard to airport development zones established
2563 pursuant to section 32-75d, a summary of the economic and cost
2564 benefits of each zone and, in consultation with the Connecticut Airport
2565 Authority, any recommended revisions to any such zones.

2566 (b) Any annual report that is required from the department by any
2567 provision of the general statutes shall be incorporated into the annual
2568 report provided pursuant to subsection (a) of this section.

2569 Sec. 55. (NEW) (*Effective July 1, 2013*) (a) Annually, on or before
2570 March thirty-first, the Commissioner of Housing shall submit a report
2571 to the Governor and the General Assembly, in accordance with the
2572 provisions of section 11-4a of the general statutes. Not later than thirty
2573 days after submission of the report to the Governor and the General

2574 Assembly, said commissioner shall post the report on the Department
2575 of Housing's Internet web site. Said report shall include, but not be
2576 limited to, the following information with regard to the activities of the
2577 Department of Housing during the preceding state fiscal year:

2578 (1) An analysis of the community development portfolio of the
2579 department, including:

2580 (A) A list of the names, addresses and locations of all recipients of
2581 the department's assistance;

2582 (B) The following information concerning each recipient of such
2583 assistance: (i) Amount of state investment, (ii) a summary of the terms
2584 and conditions for the department's assistance, including the type and
2585 amount of state financial assistance, and (iii) the amount of
2586 investments from private and other nonstate resources that have been
2587 leveraged by such assistance; and

2588 (C) An investment analysis, including (i) total active portfolio value,
2589 (ii) total investments made in the preceding state fiscal year, (iii) total
2590 portfolio by municipality, (iv) total investments made in the preceding
2591 state fiscal year categorized by municipality, (v) total portfolio
2592 leverage ratio, and (vi) leverage ratio of the total investments made in
2593 the preceding state fiscal year.

2594 (2) With regard to the department's housing-development-related
2595 functions and activities:

2596 (A) A brief description and assessment of the state's housing market
2597 during the preceding state fiscal year, utilizing the most recent and
2598 reasonably available data, including, but not limited to, (i) a brief
2599 description of the significant characteristics of such market, including
2600 supply, demand and condition and cost of housing, and (ii) any other
2601 information that the commissioner deems appropriate;

2602 (B) A comprehensive assessment of current and future needs for

2603 rental assistance under section 8-119kk of the general statutes, as
2604 amended by this act, for housing projects for the elderly and disabled,
2605 in consultation with the Connecticut Housing Finance Authority;

2606 (C) An analysis of the progress of the public and private sectors
2607 toward meeting housing needs in the state, using building permit data
2608 from the United States Census Bureau and demolition data from
2609 Connecticut municipalities;

2610 (D) A list of municipalities that meet the affordable housing criteria
2611 set forth in subsection (k) of section 8-30g of the general statutes and in
2612 regulations adopted by the commissioner pursuant to said section. For
2613 the purpose of determining the percentage required by subsection (k)
2614 of said section, the commissioner shall use as the denominator the
2615 number of dwelling units in the municipality, as reported in the most
2616 recent United States decennial census; and

2617 (E) A statement of the department's housing development
2618 objectives, measures of program success and standards for granting
2619 financial and nonfinancial assistance under programs administered by
2620 said commissioner.

2621 (3) A presentation of the state-funded housing development
2622 portfolio of the department, including:

2623 (A) A list of the names, addresses and locations of all recipients of
2624 such assistance; and

2625 (B) For each such recipient, (i) a summary of the terms and
2626 conditions for the assistance, including the type and amount of state
2627 financial assistance, (ii) the amount of investments from private and
2628 other nonstate sources that have been leveraged by the assistance, (iii)
2629 the number of new units to be created and the number of units to be
2630 preserved at the time of the application, and (iv) the number of actual
2631 new units created and number of units preserved.

2632 (4) An analysis of the state-funded housing development portfolio
2633 of the department, including:

2634 (A) An investment analysis, including the (i) total active portfolio
2635 value, (ii) total investment made in the preceding state fiscal year, (iii)
2636 portfolio dollar per new unit created, (iv) estimated dollars per new
2637 unit created for projects receiving an assistance award in the preceding
2638 state fiscal year, (v) portfolio dollars per unit preserved, (vi) estimated
2639 dollar per unit preserved for projects receiving an assistance award in
2640 the preceding state fiscal year, (vii) portfolio leverage ratio, and (viii)
2641 leverage ratio for housing development investments made in the
2642 preceding state fiscal year; and

2643 (B) A production and preservation analysis, including (i) the total
2644 number of units created, itemized by municipality, for the total
2645 portfolio and projects receiving an assistance award in the preceding
2646 state fiscal year, (ii) the total number of elderly units created for the
2647 total portfolio and for projects receiving an assistance award in the
2648 preceding state fiscal year, (iii) the total number of family units created
2649 for the total portfolio and for projects receiving an assistance award in
2650 the preceding state fiscal year, (iv) the total number of units preserved,
2651 itemized by municipality, for the total portfolio and projects receiving
2652 an assistance award in the preceding state fiscal year, (v) the total
2653 number of elderly units preserved for the total portfolio and for
2654 projects receiving an assistance award in the preceding state fiscal
2655 year, (vi) the total number of family units preserved for the total
2656 portfolio and for projects receiving an assistance award in the
2657 preceding state fiscal year, (vii) an analysis by income group of
2658 households served by the department's housing construction,
2659 substantial rehabilitation, purchase and rental assistance programs, for
2660 each housing development, if applicable, and for each program,
2661 including number of households served under each program by race
2662 and data for all households, and (viii) a summary of the department's
2663 efforts in promoting fair housing choice and racial and economic
2664 integration, including data on the racial composition of the occupants

2665 and persons on the waiting list of each housing project that is assisted
2666 under any housing program established by the general statutes or a
2667 special act or that is supervised by the department, provided no
2668 information shall be required to be disclosed by any occupant or
2669 person on a waiting list for the preparation of such summary. As used
2670 in this subparagraph, "elderly units" means dwelling units for which
2671 occupancy is restricted by age, and "family units" means dwelling
2672 units for which occupancy is not restricted by age.

2673 (5) An economic impact analysis of the department's housing
2674 development efforts and activities, including, but not limited to:

2675 (A) The contribution of such efforts and activities to the gross state
2676 product;

2677 (B) The direct and indirect employment created by the investments
2678 for the total housing development portfolio and for any investment
2679 activity for such portfolio occurring in the preceding state fiscal year;
2680 and

2681 (C) Personal income in the state.

2682 (6) With regard to the Housing Trust Fund and Housing Trust Fund
2683 program, as those terms are defined in section 8-336m of the general
2684 statutes:

2685 (A) Activities for the prior fiscal year of the Housing Trust Fund and
2686 the Housing Trust Fund program; and

2687 (B) The efforts of the department to obtain private support for the
2688 Housing Trust Fund and the Housing Trust Fund program.

2689 (7) With regard to the department's energy conservation loan
2690 program:

2691 (A) The number of loans or deferred loans made during the
2692 preceding fiscal year under each component of such program and the

2693 total amount of the loans or deferred loans made during such fiscal
2694 year under each such component;

2695 (B) A description of each step of the loan or deferred loan
2696 application and review process;

2697 (C) The location of each loan or deferred loan application intake site
2698 for such program;

2699 (D) The average time period for the processing of loan or deferred
2700 loan applications during such fiscal year; and

2701 (E) The total administrative expenses of such program for such
2702 fiscal year.

2703 (8) A summary of the total social and economic impact of the
2704 department's efforts and activities in the areas of community and
2705 housing development, and an assessment of the department's
2706 performance in terms of meeting its stated goals and objectives.

2707 (9) With regard to the department's state program of grants to
2708 elderly renters under sections 12-170d and 12-170e of the general
2709 statutes, as amended by this act, which shall be submitted annually by
2710 the Commissioner of Housing to the joint standing committee of the
2711 General Assembly having cognizance of matters relating to finance,
2712 revenue and bonding:

2713 (A) The total number of qualified participants and total benefits
2714 allowed, subdivided to reflect such totals with respect to each of the
2715 income brackets as included in the schedule of benefits and married
2716 and unmarried participants;

2717 (B) Applicable to the preceding calendar year, the total number of
2718 persons in the state program of grants for elderly renters who received
2719 benefits within the limits of each bracket in the following schedule,
2720 including the number of persons receiving the maximum and the
2721 minimum amount of grant:

T38 Amount of State Grant Allowed

	Married Renters		Unmarried Renters	
T40	Over	Not Exceeding	Over	Not Exceeding
T41	$	$ 100 (Minimum)	$	$ 100 (Minimum)
T42	100	200	100	200
T43	200	300	200	300
T44	300	400	300	400
T45	400	500	400	500
T46	500	600	500	600
T47	600	700	600	699
T48	700	800		700 (Maximum)
T49	800	899		
T50		900 (Maximum)		

2722 (b) Any annual report that is required from the department by any
2723 provision of the general statutes shall be incorporated into the annual
2724 report provided pursuant to subsection (a) of this section.

2725 Sec. 56. Section 13b-79s of the general statutes is repealed and the
2726 following is substituted in lieu thereof (*Effective July 1, 2013*):

2727 The Secretary of the Office of Policy and Management shall (1) in
2728 consultation with the Commissioner of Transportation, the
2729 Commissioner of Economic and Community Development, the
2730 Commissioner of Housing and the Commissioner of Energy and
2731 Environmental Protection, ensure the coordination of state and
2732 regional transportation planning with other state planning efforts,
2733 including, but not limited to, economic development and housing
2734 plans; (2) coordinate interagency policy and initiatives concerning
2735 transportation; and (3) in consultation with the Commissioner of
2736 Transportation, evaluate transportation initiatives and proposed
2737 expenditures.

2738 Sec. 57. Subsection (a) of section 10-16nn of the general statutes is

2739 repealed and the following is substituted in lieu thereof (*Effective July*
2740 *1, 2013*):

2741 (a) There is established an Interagency Council for Ending the
2742 Achievement Gap. The council shall consist of: (1) The Lieutenant
2743 Governor, or the Lieutenant Governor's designee, (2) the
2744 Commissioner of Education, or the commissioner's designee, (3) the
2745 Commissioner of Children and Families, or the commissioner's
2746 designee, (4) the Commissioner of Social Services, or the
2747 commissioner's designee, (5) the Commissioner of Public Health, or the
2748 commissioner's designee, (6) the president of the Board of Regents for
2749 Higher Education, or the president's designee, (7) the Commissioner of
2750 Economic and Community Development, or the commissioner's
2751 designee, (8) the Commissioner of Administrative Services, or the
2752 commissioner's designee, **[**and**]** (9) the Secretary of the Office of Policy
2753 and Management, or the secretary's designee<u>, and (10) the</u>
2754 <u>Commissioner of Housing, or the commissioner's designee</u>. The
2755 chairperson of the council shall be the Lieutenant Governor, or the
2756 Lieutenant Governor's designee. The council shall meet at least
2757 quarterly.

2758 Sec. 58. Subsection (c) of section 8-336f of the general statutes is
2759 repealed and the following is substituted in lieu thereof (*Effective July*
2760 *1, 2013*):

2761 (c) The Commissioner of Economic and Community Development
2762 may provide a local housing partnership with an initial designation
2763 under the Connecticut housing partnership program upon receipt of
2764 evidence satisfactory to the commissioner that the local housing
2765 partnership has been formed in accordance with the provisions of
2766 subsection (b) of this section and that sufficient local resources have
2767 been committed to the local housing partnership. Upon such initial
2768 designation, the commissioner shall provide technical assistance to the
2769 local housing partnership which assistance shall include, but shall not
2770 be limited to, the following: (1) The assignment of a primary contact

2771 person in the Department of Economic and Community Development
2772 to work directly with the local housing partnership, (2) obtaining
2773 assistance from other state agencies, regional planning agencies **[**,**]** and
2774 regional housing councils **[**and the Housing Advisory Committee,
2775 provided for under section 8-385,**]** on behalf of the local housing
2776 partnership when necessary, (3) assisting the local housing partnership
2777 in developing a comprehensive local housing strategy, (4) assisting the
2778 local housing partnership in identifying available local resources, (5)
2779 discussing possible ways to create affordable housing through the use
2780 of conventional and alternative financing and through public and
2781 private land use controls, (6) explaining the requirements of and the
2782 types of assistance available under state housing programs, and (7)
2783 providing information and advice concerning available federal and
2784 private financial assistance for all aspects of housing development.

2785 Sec. 59. Section 21-84a of the general statutes is repealed and the
2786 following is substituted in lieu thereof (*Effective July 1, 2013*):

2787 (a) There is established, within the Department of Consumer
2788 Protection, a Mobile Manufactured Home Advisory Council composed
2789 of **[**fifteen**]** fourteen members as follows: One member of the
2790 Connecticut Real Estate Commission, one employee of the Department
2791 of Economic and Community Development and one employee of the
2792 Connecticut Housing Finance Authority to be appointed by the
2793 Governor; an attorney-at-law specializing in mobile manufactured
2794 home matters to be appointed by the speaker of the House of
2795 Representatives; one town planner and one representative of the
2796 banking industry to be appointed by the Governor; three mobile
2797 manufactured home park owners, one to be appointed by the
2798 Governor, one to be appointed by the minority leader of the Senate
2799 and one to be appointed by the minority leader of the House of
2800 Representatives; a representative of the mobile manufactured home
2801 industry to be appointed by the majority leader of the House of
2802 Representatives; three mobile manufactured home park tenants or
2803 representatives of such tenants, each from different geographic areas

of the state, one to be appointed by the Governor, one to be appointed by the president pro tempore of the Senate and one to be appointed by the majority leader of the Senate; and a senior citizen, who is either a resident of a mobile manufactured home park or a representative of other senior citizens who reside in mobile manufactured home parks, [and a representative of the Housing Advisory Committee] to be appointed by the Governor. The mobile manufactured home park owners and the representative of the mobile manufactured home industry shall be appointed from a list submitted to the appointing authorities by the Connecticut Manufactured Housing Association or its successor, if such organization or successor exists. The mobile manufactured home park tenants or tenant representatives and the senior citizen shall be appointed from a list submitted to the appointing authorities by the Connecticut Manufactured Home Owners Alliance or its successor, if such organization or successor exists. The Governor shall appoint a chairperson from among the members of the council. Members shall serve for a term coterminous with the term of the Governor or until their successors are appointed, whichever is later. Any vacancy shall be filled by the appointing authority for the position which has become vacant. Members of the council shall not be compensated for their services. Any council member who fails to attend three consecutive meetings or who fails to attend fifty per cent of all meetings held during any calendar year shall be deemed to have resigned from office.

(b) The advisory council shall: Monitor the implementation of statutes and regulations affecting mobile manufactured homes, promote mobile manufactured homes in the state, conduct a public education program to improve public perception and local acceptance of mobile manufactured homes and promote them as affordable, decent, safe and sanitary housing, and study additional issues related to mobile manufactured homes.

Sec. 60. Section 8-37qq of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

2837 (a) For the purposes of this section and sections 8-44a, 8-70, 8-78, 8-
2838 80, 8-114a, 8-117b, 8-119a, 8-119b, 8-119h, 8-119i, 8-119ee, 8-119hh, 8-
2839 119ii, 8-119jj, 8-169w, 8-214g, 8-216b, 8-218b, 8-219b, 8-387, 8-405, 8-410,
2840 **[**8-415,**]** 8-420, 16a-40b, as amended by this act, and 16a-40j, as
2841 amended by this act, the following terms shall have the following
2842 meanings:

2843 (1) "Bond-financed state housing program" means any program
2844 administered by the Commissioner of Economic and Community
2845 Development which provides financial assistance for housing
2846 acquisition, development, rehabilitation or support services, and
2847 which may be financed in whole or in part from the proceeds of the
2848 state's general obligation bonds, including: Acquisition of surplus land
2849 pursuant to section 8-37y, affordable housing projects pursuant to
2850 section 8-37pp, housing authority programs for social and
2851 supplementary services, project rehabilitation and improvement and
2852 energy conservation pursuant to section 8-44a, moderate rental
2853 housing pursuant to section 8-70, moderate cost housing pursuant to
2854 section 8-82, housing for elderly persons pursuant to section 8-114a,
2855 congregate housing for the elderly pursuant to section 8-119h, housing
2856 for low-income persons pursuant to section 8-119dd, financial
2857 assistance for redevelopment or urban renewal projects pursuant to
2858 section 8-154a, housing and community development pursuant to
2859 sections 8-169*l* and 8-216b, urban homesteading pursuant to subsection
2860 (a) of section 8-169w, community housing land bank and land trust
2861 program pursuant to section 8-214d, as amended by this act, financial
2862 assistance for development of limited equity cooperatives and mutual
2863 housing pursuant to section 8-214f, community housing development
2864 corporations pursuant to sections 8-218 and 8-218a, financial assistance
2865 to elderly homeowners for emergency repairs or rehabilitation
2866 pursuant to section 8-219b, financial assistance for removal of lead-
2867 based paint and asbestos pursuant to section 8-219e, home ownership
2868 loans pursuant to subsection (a) of section 8-286, housing programs for
2869 homeless persons pursuant to sections 8-356 and 8-357, grants to

2870 municipalities for financing low and moderate income rental housing
2871 pursuant to section 8-365, housing infrastructure grants and loans
2872 pursuant to section 8-387, private rental investment mortgage and
2873 equity program pursuant to sections 8-401 and 8-403, assistance for
2874 housing predevelopment costs pursuant to sections 8-410 and 8-411,
2875 residential subsurface sewage disposal system repair program
2876 pursuant to [sections 8-415 and] section 8-420, energy conservation
2877 loans pursuant to section 16a-40b, as amended by this act, rent
2878 receivership pursuant to section 47a-56j, and any other such program
2879 now, heretofore or hereafter existing, and any additions or
2880 amendments to such programs.

2881 (2) "Administrative expense" means any administrative or other cost
2882 or expense incurred by the state in carrying out the provisions of any
2883 of the following bond-financed state housing programs, including the
2884 hiring of necessary employees and the entering of necessary contracts:
2885 Housing authority programs for social and supplementary services,
2886 project rehabilitation and improvement, and energy conservation
2887 pursuant to section 8-44a, moderate rental housing pursuant to section
2888 8-70, moderate cost housing pursuant to section 8-82, housing for
2889 elderly persons pursuant to section 8-114a, congregate housing for the
2890 elderly pursuant to section 8-119h, housing for low-income persons
2891 pursuant to section 8-119dd, urban homesteading pursuant to
2892 subsection (a) of section 8-169w, financial assistance for development
2893 of limited equity cooperatives and mutual housing pursuant to section
2894 8-214f, financial assistance to elderly homeowners for emergency
2895 repairs or rehabilitation pursuant to section 8-219b, home ownership
2896 loans pursuant to subsection (a) of section 8-286, housing programs for
2897 homeless persons pursuant to sections 8-356 and 8-357, private rental
2898 investment mortgage and equity program pursuant to sections 8-401
2899 and 8-403, assistance for housing predevelopment costs pursuant to
2900 sections 8-410 and 8-411, residential subsurface sewage disposal
2901 system repair pursuant to [section 8-415 and] section 8-420, and energy
2902 conservation loans pursuant to section 16a-40b, as amended by this act.

2903 (3) "State service fee" means any fee or charge assessed or collected
2904 by the state for the purpose of paying for any administrative expense,
2905 pursuant to subsections (f) and (g) of section 8-44a with respect to
2906 housing authority programs for social and supplementary services,
2907 project rehabilitation and improvement, and energy conservation,
2908 subsection (c) of section 8-70 and section 8-72 with respect to moderate
2909 rental housing, subsection (b) of section 8-114a and subsection (a) of
2910 section 8-115a with respect to housing for elderly persons, section 8-
2911 119h and subsection (a) of section 8-115a with respect to congregate
2912 housing for the elderly, section 8-119jj and section 8-72 with respect to
2913 housing for low-income persons, subsection (c) of section 8-218b with
2914 respect to community housing development corporations, subsection
2915 (b) of section 8-219b with respect to financial assistance to elderly
2916 homeowners for emergency repairs and rehabilitation, and subsection
2917 (a) of section 8-405 with respect to the private rental mortgage and
2918 equity program.

2919 (b) Notwithstanding any provision of the general statutes or any
2920 public or special act to the contrary, any administrative expense may
2921 be paid from the proceeds from the sale of the state's general
2922 obligation bonds for the bond-financed state housing program for
2923 which the administrative expense is incurred, to the extent approved
2924 by the State Bond Commission and allotted by the Governor for such
2925 purpose.

2926 (c) Notwithstanding any provision of the general statutes or any
2927 public or special act to the contrary, no service fee shall be assessed or
2928 collected out of financial assistance financed with the proceeds of the
2929 state's general obligation bonds initially authorized, allocated or
2930 approved by the State Bond Commission on or after July 1, 1990.

2931 (d) (1) There is established a fund to be known as the "Housing
2932 Assistance Bond Fund". The fund shall contain any moneys required
2933 by law to be deposited in the fund.

2934 (2) (A) The proceeds from the sale of bonds and any bond
2935 anticipation notes issued for any bond-financed state housing program
2936 shall be deposited in the Housing Assistance Bond Fund, except for: (i)
2937 The proceeds of bonds and bond anticipation notes initially
2938 authorized, allocated or approved by the State Bond Commission for
2939 the purpose of any bond-financed state housing program prior to July
2940 1, 1990, and any reuse thereof approved by the commission; and (ii)
2941 any refunding bonds and bonds issued to refund bond anticipation
2942 notes.

2943 (B) Notwithstanding any provision of the general statutes or any
2944 public or special act to the contrary, on or after July 1, 1990, the State
2945 Bond Commission shall not authorize, allocate or approve the issuance
2946 of bonds not previously authorized, allocated or approved by the
2947 commission for the purpose of any bond-financed state housing
2948 program pursuant to any general statute or public or special act
2949 enacted prior to 1990, except pursuant to sections 4-66c and 47a-56k or
2950 special act 87-77 or 89-52 as either may be amended from time to time.
2951 Nothing in this section shall impair the power of the commission to
2952 authorize the reuse of the proceeds of bonds authorized, allocated or
2953 approved by the commission prior to July 1, 1990.

2954 (C) The proceeds of bonds and bond anticipation notes deposited in
2955 the Housing Assistance Bond Fund shall be applied to pay the costs of
2956 financial assistance and administrative expense for bond-financed state
2957 housing programs as authorized by the State Bond Commission in
2958 accordance with section 3-20 and the act or acts pursuant to which
2959 such bonds and bond anticipation notes were issued.

2960 (e) (1) There is established a fund to be known as the "Housing
2961 Repayment and Revolving Loan Fund". The fund shall contain any
2962 moneys required by law to be deposited in the fund and shall be held
2963 separate and apart from all other money, funds and accounts.
2964 Investment earnings credited to the fund shall become part of the
2965 assets of the fund. Any required rebates to the federal government of

such investment earnings shall be paid from the fund. Any balance remaining in said fund at the end of any fiscal year shall be carried forward in the fund for the next fiscal year.

(2) (A) Notwithstanding any provision of the general statutes or any public or special act to the contrary, except sections 8-76, as amended by this act, and 8-80, the following shall be paid to the State Treasurer for deposit in the Housing Repayment and Revolving Loan Fund: (i) All payments to the state of principal or interest on loans that the ultimate recipient is obligated to repay to the state, with or without interest, made pursuant to section 8-114a with respect to loans for housing for elderly persons, section 8-119h with respect to loans for congregate housing for the elderly, subsection (a) of section 8-169w with respect to urban homesteading loans, sections 8-218 and 8-218a with respect to community housing development corporation loans, section 8-337 with respect to security deposit revolving loans, section 8-410 with respect to housing predevelopment cost loans, **[**section 8-415 and**]** section 8-420 with respect to subsurface sewage disposal system repair loans, and section 8-37pp with respect to loans for affordable housing; (ii) all payments of principal with respect to energy conservation loans pursuant to section 16a-40b; (iii) all payments made to the state constituting the liquidation of an equity interest pursuant to section 8-404 with respect to the private rental investment mortgage and equity program; (iv) all payments made to the state constituting the liquidation of any other security interest or lien taken or granted pursuant to a bond-financed state housing program or assistance or related agreement, except liquidations constituting principal or interest on loans not mentioned in subparagraph (A)(i) or (A)(ii) of this subdivision and the liquidation of security interests or liens with respect to rent receivership pursuant to subsection (c) of section 47a-56i; (v) all other return or recapture of state financial assistance made pursuant to the provisions of any bond-financed state housing program or assistance or related agreement, except principal or interest on loans not mentioned in subparagraph

2999 (A)(i) or (A)(ii) of this subdivision and payments received with respect
3000 to rent receivership pursuant to subsection (c) of section 47a-56i; (vi) all
3001 payments of state service fees and administrative oversight charges
3002 rendered in accordance with the provisions of any bond-financed state
3003 housing program other than state service fees financed from the
3004 proceeds of the state's general obligation bonds; and (vii) all other
3005 compensation or reimbursement paid to the Department of Economic
3006 and Community Development with respect to bond-financed state
3007 housing programs other than from the federal government.

3008 (B) Notwithstanding any provision of the general statutes or any
3009 public or special act to the contrary, except as provided in this
3010 subsection, loans for any bond-financed state housing program which
3011 the ultimate recipient is obligated to repay to the state, with or without
3012 interest, may be paid out of moneys deposited in the Housing
3013 Repayment and Revolving Loan Fund without the prior approval of
3014 the State Bond Commission, subject to the approval of the Governor of
3015 an allotment.

3016 (C) Notwithstanding any provision of the general statutes or any
3017 public or special act, payment of any administrative expense may be
3018 made out of the Housing Repayment and Revolving Loan Fund
3019 subject to the approval of the Governor of an allotment for such
3020 purpose.

3021 Sec. 61. Section 13b-69 of the general statutes is repealed and the
3022 following is substituted in lieu thereof (*Effective July 1, 2013*):

3023 (a) The Treasurer shall apply the resources in the Special
3024 Transportation Fund, upon their receipt, first, to pay or provide for the
3025 payment of debt service requirements, as defined in section 13b-75, at
3026 such time or times, in such amount or amounts and in such manner, as
3027 provided by the proceedings authorizing the issuance of special tax
3028 obligation bonds pursuant to sections 13b-74 to 13b-77, inclusive, and
3029 then to pay from the Transportation Strategy Board projects account of

3030 the Special Transportation Fund, established under section 13b-57r, the
3031 incremental revenues identified in approved annual financing plans
3032 for cash funding in accordance with the provisions of section 13b-57q.

3033 (b) The remaining resources of the Special Transportation Fund
3034 shall, pursuant to appropriation thereof in accordance with chapter 50
3035 and subject to approval by the Governor of allotment thereof, be
3036 applied and expended for (1) payment of the principal of and interest
3037 on "general obligation bonds of the state issued for transportation
3038 purposes", as defined in subsection (c) of this section, or any
3039 obligations refunding the same, (2) payment of state budget
3040 appropriations made to or for the Department of Transportation and
3041 the Department of Motor Vehicles, and (3) payment of state budget
3042 appropriations made to or for the Department of Emergency Services
3043 and Public Protection for members of the Division of State Police
3044 designated by the Commissioner of Emergency Services and Public
3045 Protection for motor patrol work pursuant to section 29-4, except that
3046 (A) for the fiscal years commencing on or after July 1, 1998, excluding
3047 the highway motor patrol budgeted expenses, and (B) for the fiscal
3048 years commencing on or after July 1, 1999, excluding the highway
3049 motor patrol fringe benefits.

3050 (c) As used in this section, "general obligation bonds of the state
3051 issued for transportation purposes" means the aggregate principal
3052 amount, as determined by the Secretary of the Office of Policy and
3053 Management, of state general obligation bonds authorized for
3054 transportation purposes pursuant to the following authorizations
3055 issued and outstanding at any time: Special acts 406 of the 1959
3056 session; 328 of the 1961 session, as amended; 362 of the 1963 session, as
3057 amended; 245 of the February 1965 special session, as amended; 276
3058 and 315 of the 1967 session, as amended; 255 and 281 of the 1969
3059 session; 31 of the 1972 session, as amended; 73-74, as amended; 74-43;
3060 74-102, as amended; 75-101; 76-84, as amended; 77-47; 78-70; 78-71, as
3061 amended; 78-81, as amended; 79-95; 80-41; 81-71; 82-46, as amended;
3062 83-17 of the June special session; and 83-2 and 83-3 of the October

special session; sections 4-66c; 13a-20; 13a-29; 13a-32 to 13a-35, inclusive; 13a-157; 13a-165; 13a-166; 13a-176 to 13a-192, inclusive; 13a-197; 13a-198a to 13a-198j, inclusive; 13a-239 to 13a-246, inclusive; 16-338; 16a-40j, as amended by this act; **[**and 16a-40k;**]** and section 28 of public act 132 of 1959, sections 8 and 13 of public act 325 of the February 1965 special session, as amended; sections 4 and 5 of public act 755 of 1969, as amended; and section 1 of public act 80-392.

Sec. 62. Section 16a-40a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

The commissioner shall establish an "Energy Conservation Loan Fund". Such fund shall be used for the purposes of making and guaranteeing loans or deferred loans authorized under section 16a-40b, as amended by this act, and may be used for expenses incurred by the commissioner in the implementation of the program of loans, deferred loans and loan guarantees under said section. **[**and in the servicing of loans made before July 1, 1985, under section 16a-40k.**]**

Sec. 63. Subsection (f) of section 16a-40b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(f) Not later than August first, annually, the commissioner shall calculate the difference between (1) the weighted average of the percentage rates of interest payable on all subsidized loans made (A) after July 1, 1982, from the Energy Conservation Loan Fund, and (B) **[**from the Home Heating System Loan Fund established under section 16a-40k, and (C)**]** from the Housing Repayment and Revolving Loan Fund pursuant to this section, and (2) the average of the percentage rates of interest on any bonds and notes issued pursuant to section 3-20, which have been dedicated to the energy conservation loan program and used to fund such loans, and multiply such difference by the outstanding amount of all such loans, or such lesser amount as may be required under Section 103(c) of the Internal Revenue Code of

1986, or any subsequent corresponding internal revenue code of the United States, as from time to time amended. The product of such difference and such applicable amount shall not exceed six per cent of the sum of the outstanding principal amount at the end of each fiscal year of all loans or deferred loans made (A) on or after July 1, 1982, from the Energy Conservation Loan Fund, and (B) **[**from the Home Heating System Loan Fund established under section 16a-40k, and (C)**]** from the Housing Repayment and Revolving Loan Fund pursuant to this section, and the balance remaining in the Energy Conservation Loan Fund and the balance of energy conservation loan repayments in the Housing Repayment and Revolving Loan Fund. Not later than September first, annually, the Public Utilities Regulatory Authority shall allocate such product among each electric and gas company having at least seventy-five thousand customers, in accordance with a formula taking into account, without limitation, the average number of residential customers of each company. Not later than October first, annually, each such company shall pay its assessed amount to the commissioner. The commissioner shall pay to the State Treasurer for deposit in the General Fund all such payments from electric and gas companies, and shall adopt procedures to assure that such payments are not used for purposes other than those specifically provided in this section. The authority shall include each company's payment as an operating expense of the company for the purposes of rate-making under section 16-19.

Sec. 64. Subsection (d) of section 16a-40j of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(d) All proceeds from the repayments of interest and principal on any loan authorized under this section and section 16a-40b, as amended by this act, **[**or 16a-40k,**]** after payment therefrom of any loan correspondent's service fees properly chargeable thereto, shall be paid to the State Treasurer for deposit in the fund established under section 16a-40a, as amended by this act, except as provided in section 16a-40b,

as amended by this act.

Sec. 65. Subsection (e) of section 22a-2d of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(e) Wherever the words "Department of Public Utility Control" are used or referred to in the following sections of the general statutes, the words "Public Utilities Regulatory Authority" shall be substituted in lieu thereof: 1-84, 1-84b, 2-20a, 2-71p, 4-38c, 4a-57, 4a-74, 4d-2, 4d-80, 7-223, 7-233t, 7-233ii, 8-387, 12-81q, 12-94d, 12-264, 12-265, 12-408b, 12-412, 12-491, 13a-82, 13a-126a, 13b-10a, 13b-43, 13b-44, 13b-387a, 15-96, 16-1, 16-2, 16-2a, 16-6, 16-6a, 16-6b, 16-7, 16-8, 16-8b, 16-8c, 16-8d, 16-9, 16-9a, 16-10, 16-10a, 16-11, 16-12, 16-13, 16-14, 16-15, 16-16, 16-17, 16-18, 16-19, 16-19a, 16-19b, 16-19d, 16-19f, 16-19k, 16-19n, 16-19o, 16-19u, 16-19w, 16-19x, 16-19z, 16-19aa, 16-19bb, 16-19cc, 16-19dd, 16-19ee, 16-19ff, 16-19gg, 16-19jj, 16-19kk, 16-19mm, 16-19nn, 16-19oo, 16-19pp, 16-19qq, 16-19tt, 16-19uu, 16-19vv, 16-20, 16-21, 16-23, 16-24, 16-25, 16-25a, 16-26, 16-27, 16-28, 16-29, 16-32, 16-32a, 16-32b, 16-32c, 16-32e, 16-32f, 16-32g, 16-33, 16-35, 16-41, 16-42, 16-43, 16-43a, 16-43d, 16-44, 16-44a, 16-45, 16-46, 16-47, 16-47a, 16-48, 16-49e, 16-50c, 16-50d, 16-50f, 16-50k, 16-50aa, 16-216, 16-227, 16-231, 16-233, 16-234, 16-235, 16-238, 16-243, 16-243a, 16-243b, 16-243c, 16-243f, 16-243i, 16-243j, 16-243k, 16-243m, 16-243n, 16-243p, 16-243q, 16-243r, 16-243s, 16-243t, 16-243u, 16-243v, 16-243w, 16-244a, 16-244b, 16-244c, 16-244d, 16-244e, 16-244f, 16-244g, 16-244h, 16-244i, 16-244k, 16-244*l*, 16-245, 16-245a, 16-245b, 16-245c, 16-245e, 16-245g, 16-245*l*, 16-245p, 16-245q, 16-245s, 16-245t, 16-245u, 16-245v, 16-245w, 16-245x, 16-245aa, 16-246, 16-246e, 16-246g, 16-247c, 16-247j, 16-247*l*, 16-247m, 16-247o, 16-247p, 16-247t, 16-249, 16-250, 16-250a, 16-250b, 16-256b, 16-256c, 16-256h, 16-256k, 16-258a, 16-258b, 16-258c, 16-259, 16-261, 16-262a, 16-262c, 16-262d, 16-262i, 16-262j, 16-262k, 16-262*l*, 16-262m, 16-262n, 16-262o, 16-262q, 16-262r, 16-262s, 16-262v, 16-262w, 16-262x, 16-265, 16-269, 16-271, 16-272, 16-273, 16-274, 16-275, 16-276, 16-278, 16-280a, 16-280b, 16-280d, 16-280e, 16-280f, 16-280h, 16-281a, 16-331, 16-331c, 16-331e, 16-331f, 16-331g, 16-331h, 16-331i, 16-

331j, 16-331k, 16-331n, 16-331o, 16-331p, 16-331q, 16-331r, 16-331t, 16-331u, 16-331v, 16-331y, 16-331z, 16-331aa, 16-331cc, 16-331dd, 16-331ff, 16-331gg, 16-332, 16-333, 16-333a, 16-333b, 16-333e, 16-333f, 16-333g, 16-333h, 16-333i, 16-333*l*, 16-333n, 16-333o, 16-333p, 16-347, 16-348, 16-356, 16-357, 16-358, 16-359, 16a-3b, 16a-3c, 16a-7b, 16a-7c, 16a-13b, 16a-37c, subsection (b) of section 16a-38n, 16a-38o, 16a-40b, as amended by this act, **[**16a-40k,**]** 16a-41, 16a-46, 16a-46b, 16a-46c, 16a-47a, 16a-47b, 16a-47c, 16a-47d, 16a-47e, 16a-48, 16a-49, 16a-103, 20-298, 20-309, 20-340, 20-340a, 20-341k, 20-341z, 20-357, 20-541, 22a-174*l*, 22a-256dd, 22a-266, 22a-358, 22a-475, 22a-478, 22a-479, 23-8b, 23-65, 25-33a, 25-33h, 25-33k, 25-33*l*, 25-33p, 25-37d, 25-37e, 26-141b, 28-1b, 28-24, 28-26, 28-27, 28-31, 29-282, 29-415, 32-80a, 32-222, 33-219, 33-221, 33-241, 33-951, 42-287, 43-44, 49-4c and 52-259a.

Sec. 66. Subsection (a) of section 8-252a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2013*):

(a) The Connecticut Housing Finance Authority is authorized to issue bonds secured by a pledge of principal and interest payments and other revenues to be received by the state with respect to any loans made by the state under any bond-financed housing program, as defined in section 8-37qq, as amended by this act. Except as otherwise provided in this section, the issuance of such bonds shall be governed by the provisions of section 8-252. Such bonds may be guaranteed by the authority, which guarantee may be a general obligation of the authority. Such bonds whether or not a general obligation of the authority may be secured by revenues or other assets of the authority which are not subject to the lien of the general housing mortgage program bond resolution of the authority adopted September 27, 1972, as amended, or subject to a lien created by any other existing bond resolution of the authority. The state, acting through the State Treasurer, is authorized to pledge such principal and interest payments and other revenues, and to make such agreements, covenants and representations as may be required for issuance of the

3193 bonds. The provisions of subdivision **[**(3)**]** (2) of section 32-1*l*, as
3194 amended by this act, shall not apply to any pledge under this section,
3195 nor to any transfer of revenues to the Connecticut Housing Finance
3196 Authority or to a trustee incident to the issuance of bonds under this
3197 section, but such a pledge or transfer of revenues from bond-financed
3198 state housing programs, as defined in section 8-37qq, to the
3199 Connecticut Housing Finance Authority or to a trustee incident to the
3200 issuance of bonds under this section is hereby authorized. Any pledges
3201 made pursuant to this section shall be valid and binding from the time
3202 such pledge is made, and are not subject to further appropriation by
3203 the state. The proceeds of any bonds issued pursuant to this section
3204 shall, after payment of all costs of issuance and sale, including, without
3205 limitation, the costs of credit facilities and the establishment of any
3206 reserves as security for such bonds, be deposited in the General Fund.

3207 Sec. 67. Section 8-206f of the general statutes is repealed and the
3208 following is substituted in lieu thereof (*Effective July 1, 2013*):

3209 Notwithstanding the provisions of section 8-206e, the Commissioner
3210 of **[**Economic and Community Development**]** Housing, in consultation
3211 with the Commissioner of Social Services and the Secretary of the
3212 Office of Policy and Management, may designate as a demonstration
3213 program **[**an**]** one or more established United States Department of
3214 Housing and Urban Development Section 202 or Section 236 elderly
3215 housing development that is licensed to provide assisted living
3216 services, for the purpose of qualifying otherwise eligible residents for
3217 payment for such services as authorized under a 1915c Medicaid
3218 waiver or the state-funded portion of the Connecticut Home Care
3219 Program for the Elderly established pursuant to section 17b-342.

3220 Sec. 68. Subsection (g) of section 8-336p of the general statutes is
3221 repealed and the following is substituted in lieu thereof (*Effective July*
3222 *1, 2013*):

3223 (g) The commissioner shall include in the report required pursuant

3224 to section [32-1m,] 55 of this act an annual report concerning the
3225 activities for the prior fiscal year of the Housing Trust Fund and the
3226 Housing Trust Fund program and the efforts of the department to
3227 obtain private support for the Housing Trust Fund and the Housing
3228 Trust Fund program.

3229 Sec. 69. (NEW) (*Effective July 1, 2013*) Not later than January 1, 2014,
3230 and annually thereafter, the Commissioner of Housing, in consultation
3231 with the Commissioners of Social Services, Children and Families,
3232 Mental Health and Addiction Services and the Department of
3233 Developmental Services, shall submit a report, in accordance with the
3234 requirements of section 11-4a of the general statutes, on the number of
3235 departmental clients and the number who have been recipients of
3236 rental assistance certificates to the joint standing committees of the
3237 General Assembly having cognizance of matters relating to
3238 appropriations, housing, human services and public health. Such
3239 report shall detail the utilization of the rental assistance vouchers
3240 issued pursuant to sections 17b-811a to 17b-815, inclusive, of the
3241 general statutes and establish targets to ensure that rental assistance
3242 program resources are allocated in accordance with legislative intent.

3243 Sec. 70. Subsection (b) of section 10-295 of the general statutes is
3244 repealed and the following is substituted in lieu thereof (*Effective July*
3245 *1, 2013*):

3246 (b) The Commissioner of Rehabilitation Services shall expend funds
3247 for the services made available pursuant to subsection (a) of this
3248 section from the educational aid for blind and visually handicapped
3249 children account in accordance with the provisions of this subsection.
3250 [The expense of such services shall be paid by the state in an amount
3251 not to exceed six thousand four hundred dollars in any one fiscal year
3252 for each child who is blind or visually impaired.] The Commissioner of
3253 Rehabilitation Services may adopt, in accordance with the provisions
3254 of chapter 54, such regulations as the commissioner deems necessary
3255 to carry out the purpose and intent of this subsection.

3256 (1) The Commissioner of Rehabilitation Services shall provide, upon
3257 written request from any interested school district, the services of
3258 teachers of the visually impaired, based on the levels established in the
3259 individualized education or service plan. The Commissioner of
3260 Rehabilitation Services shall also make available resources, including,
3261 but not limited to, the Braille and large print library, to all teachers of
3262 public and nonpublic school children. The commissioner may also
3263 provide vision-related professional development and training to all
3264 school districts and cover the actual cost for paraprofessionals from
3265 school districts to participate in agency-sponsored Braille training
3266 programs. The commissioner shall utilize education consultant
3267 positions, funded by moneys appropriated from the General Fund, to
3268 supplement new staffing that will be made available through the
3269 educational aid for the blind and visually handicapped children
3270 account, which shall be governed by formal written policies
3271 established by the commissioner.

3272 (2) The Commissioner of Rehabilitation Services shall use funds
3273 appropriated to said account, first to provide specialized books,
3274 materials, equipment, supplies, adaptive technology services and
3275 devices, specialist examinations and aids, preschool programs and
3276 vision-related independent living services, excluding primary
3277 educational placement, for eligible children without regard to a per
3278 child statutory maximum.

3279 (3) The Commissioner of Rehabilitation Services may, within
3280 available appropriations, employ certified teachers of the visually
3281 impaired in sufficient numbers to meet the requests for services
3282 received from school districts. In responding to such requests, the
3283 commissioner shall utilize a formula for determining the number of
3284 teachers needed to serve the school districts, crediting six points for
3285 each Braille-learning child and one point for each other child, with one
3286 full-time certified teacher of the visually impaired assigned for every
3287 twenty-five points credited. The commissioner shall exercise due
3288 diligence to employ the needed number of certified teachers of the

visually impaired, but shall not be liable for lack of resources. Funds appropriated to said account may also be utilized to employ rehabilitation teachers, rehabilitation technologists and orientation and mobility teachers in numbers sufficient to provide compensatory skills evaluations and training to blind and visually impaired children. In addition, up to five per cent of such appropriation may also be utilized to employ special assistants to the blind and other support staff necessary to ensure the efficient operation of service delivery. Not later than October first of each year, the Commissioner of Rehabilitation Services shall determine the number of teachers needed based on the formula provided in this subdivision. Based on such determination, the Commissioner of Rehabilitation Services shall estimate the funding needed to pay such teachers' salaries, benefits and related expenses.

(4) In any fiscal year, when funds appropriated to cover the combined costs associated with providing the services set forth in subdivisions (2) and (3) of this subsection are projected to be insufficient, the Commissioner of Rehabilitation Services **[**shall be authorized to**]** <u>may</u> collect revenue from all school districts that have requested such services on a per student pro rata basis, in the sums necessary to cover the projected portion of these services for which there are insufficient appropriations.

[(5) Remaining funds in said account, not expended to fund the services set forth in subdivisions (2) and (3) of this subsection, shall be used to cover on a pro rata basis, the actual cost with benefits of retaining a teacher of the visually impaired, directly hired or contracted by the school districts which opt to not seek such services from the Commissioner of Rehabilitation Services, provided such teacher has participated in not less than five hours of professional development training on vision impairment or blindness during the school year. Reimbursement shall occur at the completion of the school year, using the caseload formula denoted in subdivision (3) of this section, with twenty-five points allowed for the maximum reimbursable amount as established by the commissioner annually.

3322 (6) Remaining funds in such account, not expended to fund the
3323 services set forth in subdivisions (2), (3) and (5) of this subsection, shall
3324 be distributed to the school districts on a pro rata formula basis with a
3325 two-to-one credit ratio for Braille-learning students to non-Braille-
3326 learning students in the school district based upon the annual child
3327 count data provided pursuant to subdivision (1) of this subsection,
3328 provided the school district submits an annual progress report in a
3329 format prescribed by the commissioner for each eligible child.**]**

3330 Sec. 71. Subdivisions (4) to (6), inclusive, of subsection (j) of section
3331 46b-129 of the general statutes are repealed and the following is
3332 substituted in lieu thereof (*Effective October 1, 2013*):

3333 (4) The commissioner shall be the guardian of such child or youth
3334 for the duration of the commitment, provided the child or youth has
3335 not reached the age of eighteen years, **[**or, in the case of a child or
3336 youth in full-time attendance in a secondary school, a technical school,
3337 a college or a state-accredited job training program, provided such
3338 child or youth has not reached the age of twenty-one years, by consent
3339 of such child or youth,**]** or until another guardian has been legally
3340 appointed, and in like manner, upon such vesting of the care of such
3341 child or youth, such other public or private agency or individual shall
3342 be the guardian of such child or youth until such child or youth has
3343 reached the age of eighteen years or, in the case of a child or youth in
3344 full-time attendance in a secondary school, a technical school, a college
3345 or a state-accredited job training program, until such child or youth
3346 has reached the age of twenty-one years or until another guardian has
3347 been legally appointed. The commissioner may place any child or
3348 youth so committed to the commissioner in a suitable foster home or in
3349 the home of a person related by blood or marriage to such child or
3350 youth or in a licensed child-caring institution or in the care and
3351 custody of any accredited, licensed or approved child-caring agency,
3352 within or without the state, provided a child shall not be placed
3353 outside the state except for good cause and unless the parents or
3354 guardian of such child are notified in advance of such placement and

3355 given an opportunity to be heard, or in a receiving home maintained
3356 and operated by the Commissioner of Children and Families. In
3357 placing such child or youth, the commissioner shall, if possible, select a
3358 home, agency, institution or person of like religious faith to that of a
3359 parent of such child or youth, if such faith is known or may be
3360 ascertained by reasonable inquiry, provided such home conforms to
3361 the standards of said commissioner and the commissioner shall, when
3362 placing siblings, if possible, place such children together. Upon the
3363 issuance of an order committing the child or youth to the
3364 Commissioner of Children and Families, or not later than sixty days
3365 after the issuance of such order, the court shall determine whether the
3366 Department of Children and Families made reasonable efforts to keep
3367 the child or youth with his or her parents or guardian prior to the
3368 issuance of such order and, if such efforts were not made, whether
3369 such reasonable efforts were not possible, taking into consideration the
3370 child's or youth's best interests, including the child's or youth's health
3371 and safety.

3372 (5) A youth who is committed to the commissioner pursuant to this
3373 subsection and has reached eighteen years of age may remain in the
3374 care of the commissioner, by consent of the youth and provided the
3375 youth has not reached the age of twenty-one years of age, if the youth
3376 is (A) enrolled in a full-time approved secondary education program
3377 or an approved program leading to an equivalent credential; (B)
3378 enrolled full time in an institution which provides postsecondary or
3379 vocational education; or (C) participating full time in a program or
3380 activity approved by said commissioner that is designed to promote or
3381 remove barriers to employment. The commissioner, in his or her
3382 discretion, may waive the provision of full-time enrollment or
3383 participation based on compelling circumstances. Not more than one
3384 hundred twenty days after the youth's eighteenth birthday, the
3385 department shall file a motion in the superior court for juvenile
3386 matters that had jurisdiction over the youth's case prior to the youth's
3387 eighteenth birthday for a determination as to whether continuation in

3388 care is in the youth's best interest and, if so, whether there is an
3389 appropriate permanency plan. The court, in its discretion, may hold a
3390 hearing on said motion.

3391 **[**(5)**]** (6) Prior to issuing an order for permanent legal guardianship,
3392 the court shall provide notice to each parent that the parent may not
3393 file a motion to terminate the permanent legal guardianship, or the
3394 court shall indicate on the record why such notice could not be
3395 provided, and the court shall find by clear and convincing evidence
3396 that the permanent legal guardianship is in the best interests of the
3397 child or youth and that the following have been proven by clear and
3398 convincing evidence:

3399 (A) One of the statutory grounds for termination of parental rights
3400 exists, as set forth in subsection (j) of section 17a-112, or the parents
3401 have voluntarily consented to the establishment of the permanent legal
3402 guardianship;

3403 (B) Adoption of the child or youth is not possible or appropriate;

3404 (C) (i) If the child or youth is as least twelve years of age, such child
3405 or youth consents to the proposed permanent legal guardianship, or
3406 (ii) if the child is under twelve years of age, the proposed permanent
3407 legal guardian is: (I) A relative, or (II) already serving as the
3408 permanent legal guardian of at least one of the child's siblings, if any;

3409 (D) The child or youth has resided with the proposed permanent
3410 legal guardian for at least a year; and

3411 (E) The proposed permanent legal guardian is (i) a suitable and
3412 worthy person, and (ii) committed to remaining the permanent legal
3413 guardian and assuming the right and responsibilities for the child or
3414 youth until the child or youth attains the age of majority.

3415 **[**(6)**]** (7) An order of permanent legal guardianship may be reopened
3416 and modified and the permanent legal guardian removed upon the

3417 filing of a motion with the court, provided it is proven by a fair
3418 preponderance of the evidence that the permanent legal guardian is no
3419 longer suitable and worthy. A parent may not file a motion to
3420 terminate a permanent legal guardianship. If, after a hearing, the court
3421 terminates a permanent legal guardianship, the court, in appointing a
3422 successor legal guardian or permanent legal guardian for the child or
3423 youth shall do so in accordance with this subsection.

3424 Sec. 72. Subdivision (1) of subsection (k) of section 46b-129 of the
3425 general statutes is repealed and the following is substituted in lieu
3426 thereof (*Effective October 1, 2013*):

3427 (k) (1) Nine months after placement of the child or youth in the care
3428 and custody of the commissioner pursuant to a voluntary placement
3429 agreement, or removal of a child or youth pursuant to section 17a-101g
3430 or an order issued by a court of competent jurisdiction, whichever is
3431 earlier, the commissioner shall file a motion for review of a
3432 permanency plan <u>if the child or youth has not reached his or her</u>
3433 <u>eighteenth birthday</u>. Nine months after a permanency plan has been
3434 approved by the court pursuant to this subsection <u>or subdivision (5) of</u>
3435 <u>subsection (j) of this section</u>, the commissioner shall file a motion for
3436 review of the permanency plan. Any party seeking to oppose the
3437 commissioner's permanency plan, including a relative of a child or
3438 youth by blood or marriage who has intervened pursuant to
3439 subsection (d) of this section and is licensed as a foster parent for such
3440 child or youth or is vested with such child's or youth's temporary
3441 custody by order of the court, shall file a motion in opposition not later
3442 than thirty days after the filing of the commissioner's motion for
3443 review of the permanency plan, which motion shall include the reason
3444 therefor. A permanency hearing on any motion for review of the
3445 permanency plan shall be held not later than ninety days after the
3446 filing of such motion. The court shall hold evidentiary hearings in
3447 connection with any contested motion for review of the permanency
3448 plan and credible hearsay evidence regarding any party's compliance
3449 with specific steps ordered by the court shall be admissible at such

3450 evidentiary hearings. The commissioner shall have the burden of
3451 proving that the proposed permanency plan is in the best interests of
3452 the child or youth. After the initial permanency hearing, subsequent
3453 permanency hearings shall be held not less frequently than every
3454 twelve months while the child or youth remains in the custody of the
3455 Commissioner of Children and Families <u>or, if the youth is over</u>
3456 <u>eighteen years of age, while the youth remains in voluntary placement</u>
3457 <u>with the department</u>. The court shall provide notice to the child or
3458 youth, the parent or guardian of such child or youth, and any
3459 intervenor of the time and place of the court hearing on any such
3460 motion not less than fourteen days prior to such hearing.

3461 Sec. 73. Subdivision (1) of subsection (h) of section 17b-340 of the
3462 general statutes is repealed and the following is substituted in lieu
3463 thereof (*Effective July 1, 2013*):

3464 (h) (1) For the fiscal year ending June 30, 1993, any residential care
3465 home with an operating cost component of its rate in excess of one
3466 hundred thirty per cent of the median of operating cost components of
3467 rates in effect January 1, 1992, shall not receive an operating cost
3468 component increase. For the fiscal year ending June 30, 1993, any
3469 residential care home with an operating cost component of its rate that
3470 is less than one hundred thirty per cent of the median of operating cost
3471 components of rates in effect January 1, 1992, shall have an allowance
3472 for real wage growth equal to sixty-five per cent of the increase
3473 determined in accordance with subsection (q) of section 17-311-52 of
3474 the regulations of Connecticut state agencies, provided such operating
3475 cost component shall not exceed one hundred thirty per cent of the
3476 median of operating cost components in effect January 1, 1992.
3477 Beginning with the fiscal year ending June 30, 1993, for the purpose of
3478 determining allowable fair rent, a residential care home with allowable
3479 fair rent less than the twenty-fifth percentile of the state-wide
3480 allowable fair rent shall be reimbursed as having allowable fair rent
3481 equal to the twenty-fifth percentile of the state-wide allowable fair
3482 rent. Beginning with the fiscal year ending June 30, 1997, a residential

3483 care home with allowable fair rent less than three dollars and ten cents
3484 per day shall be reimbursed as having allowable fair rent equal to
3485 three dollars and ten cents per day. Property additions placed in
3486 service during the cost year ending September 30, 1996, or any
3487 succeeding cost year shall receive a fair rent allowance for such
3488 additions as an addition to three dollars and ten cents per day if the
3489 fair rent for the facility for property placed in service prior to
3490 September 30, 1995, is less than or equal to three dollars and ten cents
3491 per day. For the fiscal year ending June 30, 1996, and any succeeding
3492 fiscal year, the allowance for real wage growth, as determined in
3493 accordance with subsection (q) of section 17-311-52 of the regulations
3494 of Connecticut state agencies, shall not be applied. For the fiscal year
3495 ending June 30, 1996, and any succeeding fiscal year, the inflation
3496 adjustment made in accordance with subsection (p) of section 17-311-
3497 52 of the regulations of Connecticut state agencies shall not be applied
3498 to real property costs. Beginning with the fiscal year ending June 30,
3499 1997, minimum allowable patient days for rate computation purposes
3500 for a residential care home with twenty-five beds or less shall be
3501 eighty-five per cent of licensed capacity. Beginning with the fiscal year
3502 ending June 30, 2002, for the purposes of determining the allowable
3503 salary of an administrator of a residential care home with sixty beds or
3504 less the department shall revise the allowable base salary to thirty-
3505 seven thousand dollars to be annually inflated thereafter in accordance
3506 with section 17-311-52 of the regulations of Connecticut state agencies.
3507 The rates for the fiscal year ending June 30, 2002, shall be based upon
3508 the increased allowable salary of an administrator, regardless of
3509 whether such amount was expended in the 2000 cost report period
3510 upon which the rates are based. Beginning with the fiscal year ending
3511 June 30, 2000, and until the fiscal year ending June 30, 2009, inclusive,
3512 the inflation adjustment for rates made in accordance with subsection
3513 (p) of section 17-311-52 of the regulations of Connecticut state agencies
3514 shall be increased by two per cent, and beginning with the fiscal year
3515 ending June 30, 2002, the inflation adjustment for rates made in
3516 accordance with subsection (c) of said section shall be increased by one

3517 per cent. Beginning with the fiscal year ending June 30, 1999, for the
3518 purpose of determining the allowable salary of a related party, the
3519 department shall revise the maximum salary to twenty-seven
3520 thousand eight hundred fifty-six dollars to be annually inflated
3521 thereafter in accordance with section 17-311-52 of the regulations of
3522 Connecticut state agencies and beginning with the fiscal year ending
3523 June 30, 2001, such allowable salary shall be computed on an hourly
3524 basis and the maximum number of hours allowed for a related party
3525 other than the proprietor shall be increased from forty hours to forty-
3526 eight hours per work week. For the fiscal year ending June 30, 2005,
3527 each facility shall receive a rate that is two and one-quarter per cent
3528 more than the rate the facility received in the prior fiscal year, except
3529 any facility that would have been issued a lower rate effective July 1,
3530 2004, than for the fiscal year ending June 30, 2004, due to interim rate
3531 status or agreement with the department shall be issued such lower
3532 rate effective July 1, 2004. Effective upon receipt of all the necessary
3533 federal approvals to secure federal financial participation matching
3534 funds associated with the rate increase provided in subdivision (4) of
3535 subsection (f) of this section, but in no event earlier than October 1,
3536 2005, and provided the user fee imposed under section 17b-320 is
3537 required to be collected, each facility shall receive a rate that is
3538 determined in accordance with applicable law and subject to
3539 appropriations, except any facility that would have been issued a
3540 lower rate effective October 1, 2005, than for the fiscal year ending June
3541 30, 2005, due to interim rate status or agreement with the department,
3542 shall be issued such lower rate effective October 1, 2005. Such rate
3543 increase shall remain in effect unless: (A) The federal financial
3544 participation matching funds associated with the rate increase are no
3545 longer available; or (B) the user fee created pursuant to section 17b-320
3546 is not in effect. For the fiscal year ending June 30, 2007, rates in effect
3547 for the period ending June 30, 2006, shall remain in effect until
3548 September 30, 2006, except any facility that would have been issued a
3549 lower rate effective July 1, 2006, than for the fiscal year ending June 30,
3550 2006, due to interim rate status or agreement with the department,

3551 shall be issued such lower rate effective July 1, 2006. Effective October
3552 1, 2006, no facility shall receive a rate that is more than four per cent
3553 greater than the rate in effect for the facility on September 30, 2006,
3554 except for any facility that would have been issued a lower rate
3555 effective October 1, 2006, due to interim rate status or agreement with
3556 the department, shall be issued such lower rate effective October 1,
3557 2006. For the fiscal years ending June 30, 2010, and June 30, 2011, rates
3558 in effect for the period ending June 30, 2009, shall remain in effect until
3559 June 30, 2011, except any facility that would have been issued a lower
3560 rate for the fiscal year ending June 30, 2010, or the fiscal year ending
3561 June 30, 2011, due to interim rate status or agreement with the
3562 department, shall be issued such lower rate, except (i) any facility that
3563 would have been issued a lower rate for the fiscal year ending June 30,
3564 2010, or the fiscal year ending June 30, 2011, due to interim rate status
3565 or agreement with the Commissioner of Social Services shall be issued
3566 such lower rate; and (ii) the commissioner may increase a facility's rate
3567 for reasonable costs associated with such facility's compliance with the
3568 provisions of section 19a-495a concerning the administration of
3569 medication by unlicensed personnel. For the fiscal year ending June 30,
3570 2012, rates in effect for the period ending June 30, 2011, shall remain in
3571 effect until June 30, 2012, except that (I) any facility that would have
3572 been issued a lower rate for the fiscal year ending June 30, 2012, due to
3573 interim rate status or agreement with the Commissioner of Social
3574 Services shall be issued such lower rate; and (II) the commissioner may
3575 increase a facility's rate for reasonable costs associated with such
3576 facility's compliance with the provisions of section 19a-495a
3577 concerning the administration of medication by unlicensed personnel.
3578 For the fiscal year ending June 30, 2013, the Commissioner of Social
3579 Services may, within available appropriations, provide a rate increase
3580 to a residential care home. Any facility that would have been issued a
3581 lower rate for the fiscal year ending June 30, 2013, due to interim rate
3582 status or agreement with the Commissioner of Social Services shall be
3583 issued such lower rate. For the fiscal years ending June 30, 2012, and
3584 June 30, 2013, the Commissioner of Social Services may provide fair

3585 rent increases to any facility that has undergone a material change in
3586 circumstances related to fair rent and has an approved certificate of
3587 need pursuant to section 17b-352, 17b-353, 17b-354 or 17b-355. Any
3588 facility that would have been issued a lower rate for the fiscal year
3589 ending June 30, 2014, or the fiscal year ending June 30, 2015, due to
3590 interim rate status or agreement with the commissioner, shall be issued
3591 such lower rate. For the fiscal years ending June 30, 2014, and June 30,
3592 2015, the commissioner shall not consider rebasing in determining
3593 rates. For the fiscal years ending June 30, 2014, and June 30, 2015, for
3594 those facilities that have a calculated rate greater than the rate in effect
3595 for the fiscal year ending June 30, 2013, the commissioner may increase
3596 facility rates based upon available appropriations up to a stop gain as
3597 determined by the commissioner. No facility shall be issued a rate that
3598 is lower than the rate in effect on June 30, 2013. Any facility that would
3599 have been issued a lower rate for the fiscal year ending June 30, 2014,
3600 or the fiscal year ending June 30, 2015, due to interim rate status or
3601 agreement with the commissioner, shall be issued such lower rate.

3602 Sec. 74. Subdivision (4) of subsection (f) of section 17b-340 of the
3603 general statutes is repealed and the following is substituted in lieu
3604 thereof (*Effective July 1, 2013*):

3605 (4) For the fiscal year ending June 30, 1992, (A) no facility shall
3606 receive a rate that is less than the rate it received for the rate year
3607 ending June 30, 1991; (B) no facility whose rate, if determined pursuant
3608 to this subsection, would exceed one hundred twenty per cent of the
3609 state-wide median rate, as determined pursuant to this subsection,
3610 shall receive a rate which is five and one-half per cent more than the
3611 rate it received for the rate year ending June 30, 1991; and (C) no
3612 facility whose rate, if determined pursuant to this subsection, would be
3613 less than one hundred twenty per cent of the state-wide median rate,
3614 as determined pursuant to this subsection, shall receive a rate which is
3615 six and one-half per cent more than the rate it received for the rate year
3616 ending June 30, 1991. For the fiscal year ending June 30, 1993, no
3617 facility shall receive a rate that is less than the rate it received for the

3618 rate year ending June 30, 1992, or six per cent more than the rate it
3619 received for the rate year ending June 30, 1992. For the fiscal year
3620 ending June 30, 1994, no facility shall receive a rate that is less than the
3621 rate it received for the rate year ending June 30, 1993, or six per cent
3622 more than the rate it received for the rate year ending June 30, 1993.
3623 For the fiscal year ending June 30, 1995, no facility shall receive a rate
3624 that is more than five per cent less than the rate it received for the rate
3625 year ending June 30, 1994, or six per cent more than the rate it received
3626 for the rate year ending June 30, 1994. For the fiscal years ending June
3627 30, 1996, and June 30, 1997, no facility shall receive a rate that is more
3628 than three per cent more than the rate it received for the prior rate
3629 year. For the fiscal year ending June 30, 1998, a facility shall receive a
3630 rate increase that is not more than two per cent more than the rate that
3631 the facility received in the prior year. For the fiscal year ending June
3632 30, 1999, a facility shall receive a rate increase that is not more than
3633 three per cent more than the rate that the facility received in the prior
3634 year and that is not less than one per cent more than the rate that the
3635 facility received in the prior year, exclusive of rate increases associated
3636 with a wage, benefit and staffing enhancement rate adjustment added
3637 for the period from April 1, 1999, to June 30, 1999, inclusive. For the
3638 fiscal year ending June 30, 2000, each facility, except a facility with an
3639 interim rate or replaced interim rate for the fiscal year ending June 30,
3640 1999, and a facility having a certificate of need or other agreement
3641 specifying rate adjustments for the fiscal year ending June 30, 2000,
3642 shall receive a rate increase equal to one per cent applied to the rate the
3643 facility received for the fiscal year ending June 30, 1999, exclusive of
3644 the facility's wage, benefit and staffing enhancement rate adjustment.
3645 For the fiscal year ending June 30, 2000, no facility with an interim rate,
3646 replaced interim rate or scheduled rate adjustment specified in a
3647 certificate of need or other agreement for the fiscal year ending June
3648 30, 2000, shall receive a rate increase that is more than one per cent
3649 more than the rate the facility received in the fiscal year ending June
3650 30, 1999. For the fiscal year ending June 30, 2001, each facility, except a
3651 facility with an interim rate or replaced interim rate for the fiscal year

3652 ending June 30, 2000, and a facility having a certificate of need or other
3653 agreement specifying rate adjustments for the fiscal year ending June
3654 30, 2001, shall receive a rate increase equal to two per cent applied to
3655 the rate the facility received for the fiscal year ending June 30, 2000,
3656 subject to verification of wage enhancement adjustments pursuant to
3657 subdivision (14) of this subsection. For the fiscal year ending June 30,
3658 2001, no facility with an interim rate, replaced interim rate or
3659 scheduled rate adjustment specified in a certificate of need or other
3660 agreement for the fiscal year ending June 30, 2001, shall receive a rate
3661 increase that is more than two per cent more than the rate the facility
3662 received for the fiscal year ending June 30, 2000. For the fiscal year
3663 ending June 30, 2002, each facility shall receive a rate that is two and
3664 one-half per cent more than the rate the facility received in the prior
3665 fiscal year. For the fiscal year ending June 30, 2003, each facility shall
3666 receive a rate that is two per cent more than the rate the facility
3667 received in the prior fiscal year, except that such increase shall be
3668 effective January 1, 2003, and such facility rate in effect for the fiscal
3669 year ending June 30, 2002, shall be paid for services provided until
3670 December 31, 2002, except any facility that would have been issued a
3671 lower rate effective July 1, 2002, than for the fiscal year ending June 30,
3672 2002, due to interim rate status or agreement with the department shall
3673 be issued such lower rate effective July 1, 2002, and have such rate
3674 increased two per cent effective June 1, 2003. For the fiscal year ending
3675 June 30, 2004, rates in effect for the period ending June 30, 2003, shall
3676 remain in effect, except any facility that would have been issued a
3677 lower rate effective July 1, 2003, than for the fiscal year ending June 30,
3678 2003, due to interim rate status or agreement with the department shall
3679 be issued such lower rate effective July 1, 2003. For the fiscal year
3680 ending June 30, 2005, rates in effect for the period ending June 30, 2004,
3681 shall remain in effect until December 31, 2004, except any facility that
3682 would have been issued a lower rate effective July 1, 2004, than for the
3683 fiscal year ending June 30, 2004, due to interim rate status or
3684 agreement with the department shall be issued such lower rate
3685 effective July 1, 2004. Effective January 1, 2005, each facility shall

3686 receive a rate that is one per cent greater than the rate in effect
3687 December 31, 2004. Effective upon receipt of all the necessary federal
3688 approvals to secure federal financial participation matching funds
3689 associated with the rate increase provided in this subdivision, but in
3690 no event earlier than July 1, 2005, and provided the user fee imposed
3691 under section 17b-320 is required to be collected, for the fiscal year
3692 ending June 30, 2006, the department shall compute the rate for each
3693 facility based upon its 2003 cost report filing or a subsequent cost year
3694 filing for facilities having an interim rate for the period ending June 30,
3695 2005, as provided under section 17-311-55 of the regulations of
3696 Connecticut state agencies. For each facility not having an interim rate
3697 for the period ending June 30, 2005, the rate for the period ending June
3698 30, 2006, shall be determined beginning with the higher of the
3699 computed rate based upon its 2003 cost report filing or the rate in
3700 effect for the period ending June 30, 2005. Such rate shall then be
3701 increased by eleven dollars and eighty cents per day except that in no
3702 event shall the rate for the period ending June 30, 2006, be thirty-two
3703 dollars more than the rate in effect for the period ending June 30, 2005,
3704 and for any facility with a rate below one hundred ninety-five dollars
3705 per day for the period ending June 30, 2005, such rate for the period
3706 ending June 30, 2006, shall not be greater than two hundred seventeen
3707 dollars and forty-three cents per day and for any facility with a rate
3708 equal to or greater than one hundred ninety-five dollars per day for
3709 the period ending June 30, 2005, such rate for the period ending June
3710 30, 2006, shall not exceed the rate in effect for the period ending June
3711 30, 2005, increased by eleven and one-half per cent. For each facility
3712 with an interim rate for the period ending June 30, 2005, the interim
3713 replacement rate for the period ending June 30, 2006, shall not exceed
3714 the rate in effect for the period ending June 30, 2005, increased by
3715 eleven dollars and eighty cents per day plus the per day cost of the
3716 user fee payments made pursuant to section 17b-320 divided by
3717 annual resident service days, except for any facility with an interim
3718 rate below one hundred ninety-five dollars per day for the period
3719 ending June 30, 2005, the interim replacement rate for the period

3720 ending June 30, 2006, shall not be greater than two hundred seventeen
3721 dollars and forty-three cents per day and for any facility with an
3722 interim rate equal to or greater than one hundred ninety-five dollars
3723 per day for the period ending June 30, 2005, the interim replacement
3724 rate for the period ending June 30, 2006, shall not exceed the rate in
3725 effect for the period ending June 30, 2005, increased by eleven and one-
3726 half per cent. Such July 1, 2005, rate adjustments shall remain in effect
3727 unless (i) the federal financial participation matching funds associated
3728 with the rate increase are no longer available; or (ii) the user fee
3729 created pursuant to section 17b-320 is not in effect. For the fiscal year
3730 ending June 30, 2007, each facility shall receive a rate that is three per
3731 cent greater than the rate in effect for the period ending June 30, 2006,
3732 except any facility that would have been issued a lower rate effective
3733 July 1, 2006, than for the rate period ending June 30, 2006, due to
3734 interim rate status or agreement with the department, shall be issued
3735 such lower rate effective July 1, 2006. For the fiscal year ending June
3736 30, 2008, each facility shall receive a rate that is two and nine-tenths
3737 per cent greater than the rate in effect for the period ending June 30,
3738 2007, except any facility that would have been issued a lower rate
3739 effective July 1, 2007, than for the rate period ending June 30, 2007, due
3740 to interim rate status or agreement with the department, shall be
3741 issued such lower rate effective July 1, 2007. For the fiscal year ending
3742 June 30, 2009, rates in effect for the period ending June 30, 2008, shall
3743 remain in effect until June 30, 2009, except any facility that would have
3744 been issued a lower rate for the fiscal year ending June 30, 2009, due to
3745 interim rate status or agreement with the department shall be issued
3746 such lower rate. For the fiscal years ending June 30, 2010, and June 30,
3747 2011, rates in effect for the period ending June 30, 2009, shall remain in
3748 effect until June 30, 2011, except any facility that would have been
3749 issued a lower rate for the fiscal year ending June 30, 2010, or the fiscal
3750 year ending June 30, 2011, due to interim rate status or agreement with
3751 the department, shall be issued such lower rate. For the fiscal years
3752 ending June 30, 2012, and June 30, 2013, rates in effect for the period
3753 ending June 30, 2011, shall remain in effect until June 30, 2013, except

3754 any facility that would have been issued a lower rate for the fiscal year
3755 ending June 30, 2012, or the fiscal year ending June 30, 2013, due to
3756 interim rate status or agreement with the department, shall be issued
3757 such lower rate. For the fiscal year ending June 30, 2014, the
3758 department shall determine facility rates based upon 2011 cost report
3759 filings subject to the provisions of this section and applicable
3760 regulations except: (1) A ninety per cent minimum occupancy standard
3761 shall be applied; (2) no facility shall receive a rate that is higher than
3762 the rate in effect on June 30, 2013; (3) no facility shall receive a rate that
3763 is four per cent lower than the rate in effect on June 30, 2013; and (4)
3764 any facility that would have been issued a lower rate effective July 1,
3765 2013, than for the rate period ending June 30, 2013, due to interim rate
3766 status or agreement with the department, shall be issued such lower
3767 rate effective July 1, 2013. For the fiscal year ending June 30, 2015, rates
3768 in effect for the period ending June 30, 2014, shall remain in effect until
3769 June 30, 2015, except any facility that would have been issued a lower
3770 rate effective July 1, 2014, than for the rate period ending June 30, 2014,
3771 due to interim rate status or agreement with the department, shall be
3772 issued such lower rate effective July 1, 2014. The Commissioner of
3773 Social Services shall add fair rent increases to any other rate increases
3774 established pursuant to this subdivision for a facility which has
3775 undergone a material change in circumstances related to fair rent,
3776 except for the fiscal years ending June 30, 2010, June 30, 2011, and June
3777 30, 2012, such fair rent increases shall only be provided to facilities
3778 with an approved certificate of need pursuant to section 17b-352, 17b-
3779 353, 17b-354 or 17b-355. For the fiscal year ending June 30, 2013, the
3780 commissioner may, within available appropriations, provide pro rata
3781 fair rent increases for facilities which have undergone a material
3782 change in circumstances related to fair rent additions placed in service
3783 in cost report years ending September 30, 2008, to September 30, 2011,
3784 inclusive, and not otherwise included in rates issued. **[**For the fiscal
3785 year ending June 30, 2013, the**]** For the fiscal years ending June 30,
3786 2014, and June 30, 2015, the commissioner may, within available
3787 appropriations, provide pro rata fair rent increases, which may include

3788 moveable equipment at the discretion of the commissioner, for
3789 facilities which have undergone a material change in circumstances
3790 related to fair rent additions or moveable equipment placed in service
3791 in cost report years ending September 30, 2012, and September 30,
3792 2013, and not otherwise included in rates issued. The commissioner
3793 shall add fair rent increases associated with an approved certificate of
3794 need pursuant to section 17b-352, 17b-353, 17b-354 or 17b-355. Interim
3795 rates may take into account reasonable costs incurred by a facility,
3796 including wages and benefits. Notwithstanding the provisions of this
3797 section, the Commissioner of Social Services may, **[**within**]** subject to
3798 available appropriations, increase or decrease rates issued to licensed
3799 chronic and convalescent nursing homes and licensed rest homes with
3800 nursing supervision.

3801 Sec. 75. Subsection (g) of section 17b-340 of the general statutes is
3802 repealed and the following is substituted in lieu thereof (*Effective July*
3803 *1, 2013*):

3804 (g) For the fiscal year ending June 30, 1993, any intermediate care
3805 facility for the mentally retarded with an operating cost component of
3806 its rate in excess of one hundred forty per cent of the median of
3807 operating cost components of rates in effect January 1, 1992, shall not
3808 receive an operating cost component increase. For the fiscal year
3809 ending June 30, 1993, any intermediate care facility for the mentally
3810 retarded with an operating cost component of its rate that is less than
3811 one hundred forty per cent of the median of operating cost
3812 components of rates in effect January 1, 1992, shall have an allowance
3813 for real wage growth equal to thirty per cent of the increase
3814 determined in accordance with subsection (q) of section 17-311-52 of
3815 the regulations of Connecticut state agencies, provided such operating
3816 cost component shall not exceed one hundred forty per cent of the
3817 median of operating cost components in effect January 1, 1992. Any
3818 facility with real property other than land placed in service prior to
3819 October 1, 1991, shall, for the fiscal year ending June 30, 1995, receive a
3820 rate of return on real property equal to the average of the rates of

3821 return applied to real property other than land placed in service for the
3822 five years preceding October 1, 1993. For the fiscal year ending June 30,
3823 1996, and any succeeding fiscal year, the rate of return on real property
3824 for property items shall be revised every five years. The commissioner
3825 shall, upon submission of a request, allow actual debt service,
3826 comprised of principal and interest, in excess of property costs allowed
3827 pursuant to section 17-311-52 of the regulations of Connecticut state
3828 agencies, provided such debt service terms and amounts are
3829 reasonable in relation to the useful life and the base value of the
3830 property. For the fiscal year ending June 30, 1995, and any succeeding
3831 fiscal year, the inflation adjustment made in accordance with
3832 subsection (p) of section 17-311-52 of the regulations of Connecticut
3833 state agencies shall not be applied to real property costs. For the fiscal
3834 year ending June 30, 1996, and any succeeding fiscal year, the
3835 allowance for real wage growth, as determined in accordance with
3836 subsection (q) of section 17-311-52 of the regulations of Connecticut
3837 state agencies, shall not be applied. For the fiscal year ending June 30,
3838 1996, and any succeeding fiscal year, no rate shall exceed three
3839 hundred seventy-five dollars per day unless the commissioner, in
3840 consultation with the Commissioner of Developmental Services,
3841 determines after a review of program and management costs, that a
3842 rate in excess of this amount is necessary for care and treatment of
3843 facility residents. For the fiscal year ending June 30, 2002, rate period,
3844 the Commissioner of Social Services shall increase the inflation
3845 adjustment for rates made in accordance with subsection (p) of section
3846 17-311-52 of the regulations of Connecticut state agencies to update
3847 allowable fiscal year 2000 costs to include a three and one-half per cent
3848 inflation factor. For the fiscal year ending June 30, 2003, rate period, the
3849 commissioner shall increase the inflation adjustment for rates made in
3850 accordance with subsection (p) of section 17-311-52 of the regulations
3851 of Connecticut state agencies to update allowable fiscal year 2001 costs
3852 to include a one and one-half per cent inflation factor, except that such
3853 increase shall be effective November 1, 2002, and such facility rate in
3854 effect for the fiscal year ending June 30, 2002, shall be paid for services

3855 provided until October 31, 2002, except any facility that would have
3856 been issued a lower rate effective July 1, 2002, than for the fiscal year
3857 ending June 30, 2002, due to interim rate status or agreement with the
3858 department shall be issued such lower rate effective July 1, 2002, and
3859 have such rate updated effective November 1, 2002, in accordance with
3860 applicable statutes and regulations. For the fiscal year ending June 30,
3861 2004, rates in effect for the period ending June 30, 2003, shall remain in
3862 effect, except any facility that would have been issued a lower rate
3863 effective July 1, 2003, than for the fiscal year ending June 30, 2003, due
3864 to interim rate status or agreement with the department shall be issued
3865 such lower rate effective July 1, 2003. For the fiscal year ending June
3866 30, 2005, rates in effect for the period ending June 30, 2004, shall
3867 remain in effect until September 30, 2004. Effective October 1, 2004,
3868 each facility shall receive a rate that is five per cent greater than the
3869 rate in effect September 30, 2004. Effective upon receipt of all the
3870 necessary federal approvals to secure federal financial participation
3871 matching funds associated with the rate increase provided in
3872 subdivision (4) of subsection (f) of this section, but in no event earlier
3873 than October 1, 2005, and provided the user fee imposed under section
3874 17b-320 is required to be collected, each facility shall receive a rate that
3875 is four per cent more than the rate the facility received in the prior
3876 fiscal year, except any facility that would have been issued a lower rate
3877 effective October 1, 2005, than for the fiscal year ending June 30, 2005,
3878 due to interim rate status or agreement with the department, shall be
3879 issued such lower rate effective October 1, 2005. Such rate increase
3880 shall remain in effect unless: (1) The federal financial participation
3881 matching funds associated with the rate increase are no longer
3882 available; or (2) the user fee created pursuant to section 17b-320 is not
3883 in effect. For the fiscal year ending June 30, 2007, rates in effect for the
3884 period ending June 30, 2006, shall remain in effect until September 30,
3885 2006, except any facility that would have been issued a lower rate
3886 effective July 1, 2006, than for the fiscal year ending June 30, 2006, due
3887 to interim rate status or agreement with the department, shall be
3888 issued such lower rate effective July 1, 2006. Effective October 1, 2006,

no facility shall receive a rate that is more than three per cent greater than the rate in effect for the facility on September 30, 2006, except any facility that would have been issued a lower rate effective October 1, 2006, due to interim rate status or agreement with the department, shall be issued such lower rate effective October 1, 2006. For the fiscal year ending June 30, 2008, each facility shall receive a rate that is two and nine-tenths per cent greater than the rate in effect for the period ending June 30, 2007, except any facility that would have been issued a lower rate effective July 1, 2007, than for the rate period ending June 30, 2007, due to interim rate status, or agreement with the department, shall be issued such lower rate effective July 1, 2007. For the fiscal year ending June 30, 2009, rates in effect for the period ending June 30, 2008, shall remain in effect until June 30, 2009, except any facility that would have been issued a lower rate for the fiscal year ending June 30, 2009, due to interim rate status or agreement with the department, shall be issued such lower rate. For the fiscal years ending June 30, 2010, and June 30, 2011, rates in effect for the period ending June 30, 2009, shall remain in effect until June 30, 2011, except any facility that would have been issued a lower rate for the fiscal year ending June 30, 2010, or the fiscal year ending June 30, 2011, due to interim rate status or agreement with the department, shall be issued such lower rate. For the fiscal year ending June 30, 2012, rates in effect for the period ending June 30, 2011, shall remain in effect until June 30, 2012, except any facility that would have been issued a lower rate for the fiscal year ending June 30, 2012, due to interim rate status or agreement with the department, shall be issued such lower rate. **[**For the fiscal year ending June 30, 2013, any**]** <u>For the fiscal years ending June 30, 2014, and June 30, 2015, rates shall not exceed those in effect for the period ending June 30, 2013, except the rate paid to a facility may be higher than the rate paid to the facility for the period ending June 30, 2013, if a capital improvement approved by the Department of Developmental Services, in consultation with the Department of Social Services, for the health or safety of the residents was made to the facility during the fiscal year ending June 30, 2014, or June 30, 2015, only to the extent such rate</u>

3923 increases are within available appropriations. Any facility that would
3924 have been issued a lower rate for the fiscal year ending June 30, 2014,
3925 or the fiscal year ending June 30, 2015, due to interim rate status or
3926 agreement with the department, shall be issued such lower rate. Any
3927 facility that has a significant decrease in land and building costs shall
3928 receive a reduced rate to reflect such decrease in land and building
3929 costs. For the fiscal years ending June 30, 2012, **[**and**]** June 30, 2013,
3930 June 30, 2014, and June 30, 2015, the Commissioner of Social Services
3931 may provide fair rent increases to any facility that has undergone a
3932 material change in circumstances related to fair rent and has an
3933 approved certificate of need pursuant to section 17b-352, 17b-353, 17b-
3934 354 or 17b-355. Notwithstanding the provisions of this section, the
3935 Commissioner of Social Services may, within available appropriations,
3936 increase or decrease rates issued to intermediate care facilities for the
3937 mentally retarded to reflect a reduction in available appropriations as
3938 provided in subsection (a) of this section. For the fiscal years ending
3939 June 30, 2014, and June 30, 2015, the commissioner shall not consider
3940 rebasing in determining rates.

3941 Sec. 76. Section 17b-239 of the general statutes is repealed and the
3942 following is substituted in lieu thereof (*Effective July 1, 2013*):

3943 (a) **[**The rate to be paid by the state to hospitals receiving
3944 appropriations granted by the General Assembly and to freestanding
3945 chronic disease hospitals, providing services to persons aided or cared
3946 for by the state for routine services furnished to state patients, shall be
3947 based upon reasonable cost to such hospital, or the charge to the
3948 general public for ward services or the lowest charge for semiprivate
3949 services if the hospital has no ward facilities, imposed by such
3950 hospital, whichever is lowest, except to the extent, if any, that the
3951 commissioner determines that a greater amount is appropriate in the
3952 case of hospitals serving a disproportionate share of indigent patients.
3953 Such rate shall be promulgated annually by the Commissioner of
3954 Social Services.**]** On or after July 1, 2013, Medicaid rates paid to acute
3955 care and children's hospitals shall be based on diagnosis–related

3956 groups established and periodically rebased by the Commissioner of
3957 Social Services, provided the Department of Social Services completes
3958 a fiscal analysis of the impact of such rate payment system on each
3959 hospital. The Commissioner of Social Services shall, in accordance with
3960 the provisions of section 11-4a, file a report on the results of the fiscal
3961 analysis not later than six months after implementing the rate payment
3962 system with the joint standing committees of the General Assembly
3963 having cognizance of matters relating to human services and
3964 appropriations and the budgets of state agencies. The Commissioner of
3965 Social Services shall annually determine in-patient rates for each
3966 hospital by multiplying diagnostic-related group relative weights by a
3967 base rate. Within available appropriations, the commissioner may, in
3968 his or her discretion, make additional payments to hospitals based on
3969 criteria to be determined by the commissioner. Nothing contained in
3970 this section shall authorize **[**a**]** Medicaid payment by the state **[**for such
3971 services**]** to any such hospital in excess of the charges made by such
3972 hospital for comparable services to the general public.
3973 **[**Notwithstanding the provisions of this section, for the rate period
3974 beginning July 1, 2000, rates paid to freestanding chronic disease
3975 hospitals and freestanding psychiatric hospitals shall be increased by
3976 three per cent. For the rate period beginning July 1, 2001, a
3977 freestanding chronic disease hospital or freestanding psychiatric
3978 hospital shall receive a rate that is two and one-half per cent more than
3979 the rate it received in the prior fiscal year and such rate shall remain
3980 effective until December 31, 2002. Effective January 1, 2003, a
3981 freestanding chronic disease hospital or freestanding psychiatric
3982 hospital shall receive a rate that is two per cent more than the rate it
3983 received in the prior fiscal year. Notwithstanding the provisions of this
3984 subsection, for the period commencing July 1, 2001, and ending June
3985 30, 2003, the commissioner may pay an additional total of no more
3986 than three hundred thousand dollars annually for services provided to
3987 long-term ventilator patients. For purposes of this subsection, "long-
3988 term ventilator patient" means any patient at a freestanding chronic
3989 disease hospital on a ventilator for a total of sixty days or more in any

3990 consecutive twelve-month period. Effective July 1, 2007, each
3991 freestanding chronic disease hospital shall receive a rate that is four
3992 per cent more than the rate it received in the prior fiscal year.]

3993 (b) Effective October 1, 1991, the rate to be paid by the state for the
3994 cost of special services rendered by such hospitals shall be established
3995 annually by the commissioner for each such hospital based on the
3996 reasonable cost to each hospital of such services furnished to state
3997 patients. Nothing contained in this subsection shall authorize a
3998 payment by the state for such services to any such hospital in excess of
3999 the charges made by such hospital for comparable services to the
4000 general public.

4001 (c) The term "reasonable cost" as used in this section means the cost
4002 of care furnished such patients by an efficient and economically
4003 operated facility, computed in accordance with accepted principles of
4004 hospital cost reimbursement. The commissioner may adjust the rate of
4005 payment established under the provisions of this section for the year
4006 during which services are furnished to reflect fluctuations in hospital
4007 costs. Such adjustment may be made prospectively to cover anticipated
4008 fluctuations or may be made retroactive to any date subsequent to the
4009 date of the initial rate determination for such year or in such other
4010 manner as may be determined by the commissioner. In determining
4011 "reasonable cost" the commissioner may give due consideration to
4012 allowances for fully or partially unpaid bills, reasonable costs
4013 mandated by collective bargaining agreements with certified collective
4014 bargaining agents or other agreements between the employer and
4015 employees, provided "employees" shall not include persons employed
4016 as managers or chief administrators, requirements for working capital
4017 and cost of development of new services, including additions to and
4018 replacement of facilities and equipment. The commissioner shall not
4019 give consideration to amounts paid by the facilities to employees as
4020 salary, or to attorneys or consultants as fees, where the responsibility
4021 of the employees, attorneys or consultants is to persuade or seek to
4022 persuade the other employees of the facility to support or oppose

4023 unionization. Nothing in this subsection shall prohibit the
4024 commissioner from considering amounts paid for legal counsel related
4025 to the negotiation of collective bargaining agreements, the settlement
4026 of grievances or normal administration of labor relations.

4027 (d) [The state shall also pay to such hospitals for each outpatient
4028 clinic and emergency room visit a reasonable rate to be established
4029 annually by the commissioner for each hospital, such rate to be
4030 determined by the reasonable cost of such services. The emergency
4031 room visit rates in effect June 30, 1991, shall remain in effect through
4032 June 30, 1993, except those which would have been decreased effective
4033 July 1, 1991, or July 1, 1992, shall be decreased.] On or after July 1,
4034 2013, hospitals shall be paid for outpatient and emergency room
4035 episodes of care based on prospective rates established by the
4036 commissioner in accordance with the Medicare Ambulatory Payment
4037 Classification system in conjunction with a state conversion factor,
4038 provided the Department of Social Services completes a fiscal analysis
4039 of the impact of such rate payment system on each hospital. The
4040 Commissioner of Social Services shall, in accordance with the
4041 provisions of section 11-4a, file a report on the results of the fiscal
4042 analysis not later than six months after implementing the rate payment
4043 system with the joint standing committees of the General Assembly
4044 having cognizance of matters relating to human services and
4045 appropriations and the budgets of state agencies. The Medicare
4046 Ambulatory Payment Classification system shall be modified to
4047 provide payment for services not generally covered by Medicare,
4048 including, but not limited to, pediatric, obstetric, neonatal and
4049 perinatal services. Nothing contained in this subsection shall authorize
4050 a payment by the state for such [services] episodes of care to any
4051 hospital in excess of the charges made by such hospital for comparable
4052 services to the general public. [For those] Those outpatient hospital
4053 services that do not have an established Ambulatory Payment
4054 Classification code shall be paid on the basis of a ratio of cost to
4055 charges, [the ratios] or the fixed fee in effect [June 30, 1991, shall be

4056 reduced effective July 1, 1991, by the most recent annual increase in the
4057 consumer price index for medical care. For those outpatient hospital
4058 services paid on the basis of a ratio of cost to charges, the ratios
4059 computed to be effective July 1, 1994, shall be reduced by the most
4060 recent annual increase in the consumer price index for medical care.
4061 The emergency room visit rates in effect June 30, 1994, shall remain in
4062 effect through December 31, 1994**]** as of January 1, 2013. The
4063 Commissioner of Social Services shall establish a fee schedule for
4064 outpatient hospital services to be effective on and after January 1, 1995,
4065 and may annually modify such fee schedule if such modification is
4066 needed to ensure that the conversion to an administrative services
4067 organization is cost neutral to hospitals in the aggregate and ensures
4068 patient access. Utilization may be a factor in determining cost
4069 neutrality. **[**for the fiscal year ending June 30, 2013. Except with respect
4070 to the rate periods beginning July 1, 1999, and July 1, 2000, such fee
4071 schedule shall be adjusted annually beginning July 1, 1996, to reflect
4072 necessary increases in the cost of services. Notwithstanding the
4073 provisions of this subsection, the fee schedule for the rate period
4074 beginning July 1, 2000, shall be increased by ten and one-half per cent,
4075 effective June 1, 2001. Notwithstanding the provisions of this
4076 subsection, outpatient rates in effect as of June 30, 2003, shall remain in
4077 effect through June 30, 2005. Effective July 1, 2006, subject to available
4078 appropriations, the commissioner shall increase outpatient service fees
4079 for services that may include clinic, emergency room, magnetic
4080 resonance imaging, and computerized axial tomography.**]**

4081 (e) The commissioner shall adopt regulations, in accordance with
4082 the provisions of chapter 54, establishing criteria for defining
4083 emergency and nonemergency visits to hospital emergency rooms. All
4084 nonemergency visits to hospital emergency rooms shall be paid at the
4085 hospital's outpatient clinic services rate. Nothing contained in this
4086 subsection or the regulations adopted **[**hereunder**]** under this section
4087 shall authorize a payment by the state for such services to any hospital
4088 in excess of the charges made by such hospital for comparable services

4089 to the general public. To the extent permitted by federal law, the
4090 Commissioner of Social Services shall impose cost sharing
4091 requirements under the medical assistance program for nonemergency
4092 use of hospital emergency room services.

4093 (f) **[**On and after October 1, 1984, the state shall pay to an acute care
4094 general hospital for the inpatient care of a patient who no longer
4095 requires acute care a rate determined by the following schedule: For
4096 the first seven days following certification that the patient no longer
4097 requires acute care the state shall pay the hospital at a rate of fifty per
4098 cent of the hospital's actual cost; for the second seven-day period
4099 following certification that the patient no longer requires acute care the
4100 state shall pay seventy-five per cent of the hospital's actual cost; for the
4101 third seven-day period following certification that the patient no
4102 longer requires acute care and for any period of time thereafter, the
4103 state shall pay the hospital at a rate of one hundred per cent of the
4104 hospital's actual cost.**]** On and after July 1, 1995, no payment shall be
4105 made by the state to an acute care general hospital for the inpatient
4106 care of a patient who no longer requires acute care and is eligible for
4107 Medicare unless the hospital does not obtain reimbursement from
4108 Medicare for that stay.

4109 (g) The Commissioner of Social Services may implement policies
4110 and procedures as necessary to carry out the provisions of this section
4111 while in the process of adopting the policies and procedures as
4112 regulations, provided notice of intent to adopt the regulations is
4113 published in the Connecticut Law Journal not later than twenty days
4114 after the date of implementation.

4115 Sec. 77. Subsection (b) of section 17b-239e of the general statutes is
4116 repealed and the following is substituted in lieu thereof (*Effective July*
4117 *1, 2013*):

4118 (b) The commissioner may establish a blended in-patient hospital
4119 case rate that includes services provided to all Medicaid recipients and

4120 may exclude certain diagnoses, as determined by the commissioner, if
4121 the establishment of such rates is needed to ensure that the conversion
4122 to an administrative services organization is cost neutral to hospitals in
4123 the aggregate and ensures patient access. Utilization may be a factor in
4124 determining cost neutrality. [for the fiscal year ending June 30, 2013.]
4125 The Department of Social Services shall establish, within available
4126 appropriations, a supplemental inpatient pool for low-cost hospitals.

4127 Sec. 78. Subsection (a) of section 17b-242 of the general statutes is
4128 repealed and the following is substituted in lieu thereof (*Effective July*
4129 *1, 2013*):

4130 (a) The Department of Social Services shall determine the rates to be
4131 paid to home health care agencies and homemaker-home health aide
4132 agencies by the state or any town in the state for persons aided or
4133 cared for by the state or any such town. For the period from February
4134 1, 1991, to January 31, 1992, inclusive, payment for each service to the
4135 state shall be based upon the rate for such service as determined by the
4136 Office of Health Care Access, except that for those providers whose
4137 Medicaid rates for the year ending January 31, 1991, exceed the median
4138 rate, no increase shall be allowed. For those providers whose rates for
4139 the year ending January 31, 1991, are below the median rate, increases
4140 shall not exceed the lower of the prior rate increased by the most
4141 recent annual increase in the consumer price index for urban
4142 consumers or the median rate. In no case shall any such rate exceed the
4143 eightieth percentile of rates in effect January 31, 1991, nor shall any rate
4144 exceed the charge to the general public for similar services. Rates
4145 effective February 1, 1992, shall be based upon rates as determined by
4146 the Office of Health Care Access, except that increases shall not exceed
4147 the prior year's rate increased by the most recent annual increase in the
4148 consumer price index for urban consumers and rates effective
4149 February 1, 1992, shall remain in effect through June 30, 1993. Rates
4150 effective July 1, 1993, shall be based upon rates as determined by the
4151 Office of Health Care Access except if the Medicaid rates for any
4152 service for the period ending June 30, 1993, exceed the median rate for

4153 such service, the increase effective July 1, 1993, shall not exceed one
4154 per cent. If the Medicaid rate for any service for the period ending June
4155 30, 1993, is below the median rate, the increase effective July 1, 1993,
4156 shall not exceed the lower of the prior rate increased by one and one-
4157 half times the most recent annual increase in the consumer price index
4158 for urban consumers or the median rate plus one per cent. The
4159 Commissioner of Social Services shall establish a fee schedule for home
4160 health services to be effective on and after July 1, 1994. The
4161 commissioner may annually modify such fee schedule if such
4162 modification is needed to ensure that the conversion to an
4163 administrative services organization is cost neutral to home health care
4164 agencies and homemaker-home health aide agencies in the aggregate
4165 and ensures patient access. Utilization may be a factor in determining
4166 cost neutrality. **[**for the fiscal year ending June 30, 2013.**]** The
4167 commissioner shall increase the fee schedule for home health services
4168 provided under the Connecticut home-care program for the elderly
4169 established under section 17b-342, effective July 1, 2000, by two per
4170 cent over the fee schedule for home health services for the previous
4171 year. The commissioner may increase any fee payable to a home health
4172 care agency or homemaker-home health aide agency upon the
4173 application of such an agency evidencing extraordinary costs related to
4174 (1) serving persons with AIDS; (2) high-risk maternal and child health
4175 care; (3) escort services; or (4) extended hour services. In no case shall
4176 any rate or fee exceed the charge to the general public for similar
4177 services. A home health care agency or homemaker-home health aide
4178 agency which, due to any material change in circumstances, is
4179 aggrieved by a rate determined pursuant to this subsection may,
4180 within ten days of receipt of written notice of such rate from the
4181 Commissioner of Social Services, request in writing a hearing on all
4182 items of aggrievement. The commissioner shall, upon the receipt of all
4183 documentation necessary to evaluate the request, determine whether
4184 there has been such a change in circumstances and shall conduct a
4185 hearing if appropriate. The Commissioner of Social Services shall
4186 adopt regulations, in accordance with chapter 54, to implement the

4187 provisions of this subsection. The commissioner may implement
4188 policies and procedures to carry out the provisions of this subsection
4189 while in the process of adopting regulations, provided notice of intent
4190 to adopt the regulations is published in the Connecticut Law Journal
4191 not later than **[**within**]** twenty days after the date of implementing the
4192 policies and procedures. Such policies and procedures shall be valid
4193 for not longer than nine months.

4194 Sec. 79. Subsection (a) of section 17b-261m of the general statutes is
4195 repealed and the following is substituted in lieu thereof (*Effective July*
4196 *1, 2013*):

4197 (a) The Commissioner of Social Services may contract with one or
4198 more administrative services organizations to provide care
4199 coordination, utilization management, disease management, customer
4200 service and review of grievances for recipients of assistance under
4201 Medicaid, HUSKY Plan, Parts A and B, and the Charter Oak Health
4202 Plan. Such organization may also provide network management,
4203 credentialing of providers, monitoring of copayments and premiums
4204 and other services as required by the commissioner. Subject to
4205 approval by applicable federal authority, the Department of Social
4206 Services shall utilize the contracted organization's provider network
4207 and billing systems in the administration of the program. In order to
4208 implement the provisions of this section, the commissioner may
4209 establish rates of payment to providers of medical services under this
4210 section if the establishment of such rates is required to ensure that any
4211 contract entered into with an administrative services organization
4212 pursuant to this section is cost neutral to such providers in the
4213 aggregate and ensures patient access. Utilization may be a factor in
4214 determining cost neutrality. **[**for the fiscal year ending June 30, 2013.**]**

4215 Sec. 80. Section 17b-28e of the general statutes is repealed and the
4216 following is substituted in lieu thereof (*Effective July 1, 2013*):

4217 (a) The Commissioner of Social Services shall amend the Medicaid

4218 state plan to include, on and after January 1, 2009, hospice services as
4219 optional services covered under the Medicaid program. Said state plan
4220 amendment shall supersede any regulations of Connecticut state
4221 agencies concerning such optional services. **[**From January 1, 2013, to
4222 June 30, 2013, inclusive, hospice**]** Hospice services covered under the
4223 Medicaid program for individuals who are residents in long-term care
4224 facilities shall be paid at a rate that is ninety-five per cent of the
4225 facility's per diem rate.

4226 **[**(b) Effective July 1, 2013, the Commissioner of Social Services shall
4227 amend the Medicaid state plan to include foreign language interpreter
4228 services provided to any beneficiary with limited English proficiency
4229 as a covered service under the Medicaid program. Not later than July
4230 1, 2013, the commissioner shall develop and implement the use of
4231 medical billing codes for foreign language interpreter services.

4232 (c) Effective July 1, 2013, the Department of Social Services shall
4233 report, in accordance with the provisions of section 11-4a, semi-
4234 annually, to the Council on Medical Assistance Program Oversight on
4235 the foreign language interpreter services provided to recipients of
4236 benefits under the program.**]**

4237 **[**(d)**]** (b) Not later than October 1, 2011, the Commissioner of Social
4238 Services shall amend the Medicaid state plan to include podiatry as an
4239 optional service under the Medicaid program.

4240 **[**(e) The Commissioner of Social Services shall amend the Medicaid
4241 state plan to provide that chiropractic services shall be covered under
4242 the Medicaid program only to the extent required by federal law.**]**

4243 Sec. 81. Section 17b-280 of the general statutes is repealed and the
4244 following is substituted in lieu thereof (*Effective July 1, 2013*):

4245 (a) The state shall reimburse for all legend drugs provided under
4246 medical assistance programs administered by the Department of Social
4247 Services at the lower of (1) the rate established by the Centers for

4248 Medicare and Medicaid Services as the federal acquisition cost, (2) the
4249 average wholesale price minus sixteen per cent, or (3) an equivalent
4250 percentage as established under the Medicaid state plan.
4251 **[**Notwithstanding the provisions of this section, contingent upon
4252 federal approval, on and after October 1, 2012, for independent
4253 pharmacies, the state shall reimburse for such legend drugs at the
4254 lower of (A) the rate established by the Centers for Medicare and
4255 Medicaid Services as the federal acquisition cost, (B) the average
4256 wholesale price minus fifteen per cent, or (C) an equivalent percentage
4257 as established under the Medicaid state plan.**]** The state shall pay a
4258 professional fee of one dollar and seventy cents to licensed pharmacies
4259 for each prescription dispensed to a recipient of benefits under a
4260 medical assistance program administered by the Department of Social
4261 Services in accordance with federal regulations. On and after
4262 September 4, 1991, payment for legend and nonlegend drugs provided
4263 to Medicaid recipients shall be based upon the actual package size
4264 dispensed. Effective October 1, 1991, reimbursement for over-the-
4265 counter drugs for such recipients shall be limited to those over-the-
4266 counter drugs and products published in the Connecticut Formulary,
4267 or the cross reference list, issued by the commissioner. The cost of all
4268 over-the-counter drugs and products provided to residents of nursing
4269 facilities, chronic disease hospitals, and intermediate care facilities for
4270 the mentally retarded shall be included in the facilities' per diem rate.
4271 Notwithstanding the provisions of this subsection, no dispensing fee
4272 shall be issued for a prescription drug dispensed to a ConnPACE or
4273 Medicaid recipient who is a Medicare Part D beneficiary when the
4274 prescription drug is a Medicare Part D drug, as defined in Public Law
4275 108-173, the Medicare Prescription Drug, Improvement, and
4276 Modernization Act of 2003.

4277 (b) The Department of Social Services may provide an enhanced
4278 dispensing fee to a pharmacy enrolled in the federal Office of
4279 Pharmacy Affairs Section 340B drug discount program established
4280 pursuant to 42 USC 256b or a pharmacy under contract to provide

4281 services under said program.

4282 [(c) For purposes of this section, (1) "independent pharmacy" means
4283 a privately-owned community pharmacy that has five or fewer stores
4284 located in the state; (2) "community pharmacy" has the same meaning
4285 as in section 20-631a; and (3) "legend drug" has the same meaning as in
4286 section 20-571.

4287 (d) The commissioner shall submit a Medicaid state plan
4288 amendment not later than October 1, 2012, to establish the
4289 independent pharmacy rate pursuant to subsection (a) of this section.]

4290 Sec. 82. Section 17b-256f of the general statutes is repealed and the
4291 following is substituted in lieu thereof (*Effective January 1, 2014*):

4292 [Beginning March 1, 2012, and annually thereafter, the] The
4293 Commissioner of Social Services shall increase income disregards used
4294 to determine eligibility by the Department of Social Services for the
4295 federal [Specified Low-Income Medicare Beneficiary, the] Qualified
4296 Medicare Beneficiary, the Specified Low-Income Medicare Beneficiary
4297 and the Qualifying Individual [Programs] programs, administered in
4298 accordance with the provisions of 42 USC 1396d(p), by [an amount that
4299 equalizes the income levels and deductions used to determine
4300 eligibility for said programs with income levels and deductions used
4301 to determine eligibility for the ConnPACE program under subsection
4302 (a) of section 17b-492] such amounts that shall result in persons with
4303 income that is (1) less than two hundred eleven per cent of the federal
4304 poverty level qualifying for the Qualified Medicare Beneficiary
4305 program, (2) at or above two hundred eleven per cent of the federal
4306 poverty level but less than two hundred thirty-one per cent of the
4307 federal poverty level qualifying for the Specified Low-Income
4308 Medicare Beneficiary program, and (3) at or above two hundred thirty-
4309 one per cent of the federal poverty level but less than two hundred
4310 forty-six per cent of the federal poverty level qualifying for the
4311 Qualifying Individual program. The commissioner shall not apply an

4312 asset test for eligibility under the Medicare Savings Program. The
4313 commissioner shall not consider as income Aid and Attendance
4314 pension benefits granted to a veteran, as defined in section 27-103, or
4315 the surviving spouse of such veteran. The Commissioner of Social
4316 Services, pursuant to section 17b-10, may implement policies and
4317 procedures to administer the provisions of this section while in the
4318 process of adopting such policies and procedures in regulation form,
4319 provided the commissioner prints notice of the intent to adopt the
4320 regulations in the Connecticut Law Journal not later than twenty days
4321 after the date of implementation. Such policies and procedures shall be
4322 valid until the time final regulations are adopted.

4323 Sec. 83. Section 17b-551 of the general statutes is repealed and the
4324 following is substituted in lieu thereof (*Effective January 1, 2014*):

4325 Eligibility for participation in the program shall be limited to a
4326 resident who is enrolled in Medicare Part B whose annual income does
4327 not exceed **[**one hundred sixty-five per cent of the qualifying income
4328 level established in the ConnPACE program, pursuant to subsection
4329 (a) of section 17b-492**]** <u>forty-three thousand five hundred sixty dollars</u>
4330 or if such resident has a spouse, the combined income of such resident
4331 and his spouse does not exceed **[**one hundred sixty-five per cent of the
4332 qualifying income level established in the ConnPACE program,
4333 pursuant to subsection (a) of section 17b-492**]** <u>fifty-eight thousand</u>
4334 <u>seven hundred forty dollars. On January 1, 2014, and annually</u>
4335 <u>thereafter, the commissioner shall increase the income limit established</u>
4336 <u>under this subsection over that of the previous fiscal year to reflect the</u>
4337 <u>annual inflation adjustment in Social Security income, if any. Each</u>
4338 <u>such adjustment shall be determined to the nearest one hundred</u>
4339 <u>dollars</u>.

4340 Sec. 84. Section 17b-552 of the general statutes is repealed and the
4341 following is substituted in lieu thereof (*Effective January 1, 2014*):

4342 (a) A health care provider shall limit charges for care, treatment,

4343 service or equipment covered by Medicare Part B under Title XVIII of
4344 the Social Security Act, as amended, provided to a Medicare
4345 beneficiary who meets the eligibility requirements specified in section
4346 17b-551, as amended by this act, to the reasonable charge for the care,
4347 treatment, service or equipment provided as determined by the United
4348 States Secretary of Health and Human Services. No health care
4349 provider shall collect from such qualified beneficiary any amount in
4350 excess of the approved reasonable charge. Any violation of this
4351 subsection shall constitute grounds for the assessment of a civil
4352 penalty in accordance with subdivision (6) of subsection (a) of section
4353 19a-17. Any complaint alleging a violation of this section shall be made
4354 to the Department of Public Health or the appropriate professional
4355 licensing board or commission.

4356 (b) The Commissioner of Social Services shall adopt regulations in
4357 accordance with the provisions of chapter 54, necessary to administer
4358 the program and to determine eligibility in accordance with the
4359 provisions of section 17b-551, as amended by this act.

4360 **[**(c) All health care providers shall accept the identification card
4361 issued for the ConnPACE program pursuant to sections 17b-490 to
4362 17b-498, inclusive, as a substitute for a Medicare assignment card.**]**

4363 Sec. 85. Subsection (a) of section 17b-278i of the general statutes is
4364 repealed and the following is substituted in lieu thereof (*Effective from*
4365 *passage*):

4366 (a) Customized wheelchairs shall be covered under the Medicaid
4367 program only when a standard wheelchair **[**will**]** does not meet an
4368 individual's needs as determined by the Department of Social Services.
4369 **[**Assessment of the need for a customized wheelchair may be
4370 performed by a vendor or nursing facility only if specifically requested
4371 by the department.**]** Wheelchair repairs and parts replacements may be
4372 subject to review and approval by the department. Refurbished
4373 wheelchairs, parts and components shall be utilized whenever

4374 practicable. The Department of Social Services may designate
4375 categories of durable medical equipment in addition to customized
4376 wheelchairs for which reused equipment, parts and components shall
4377 be utilized whenever practicable.

4378 Sec. 86. Section 17b-10a of the general statutes is repealed and the
4379 following is substituted in lieu thereof (*Effective January 1, 2014*):

4380 The Commissioner of Social Services, pursuant to section 17b-10,
4381 may implement policies and procedures necessary to administer
4382 section 17b-197, subsection (d) of section 17b-266, section 17b-280a **[**,**]**
4383 and subsection (a) of section 17b-295, **[**and subsection (c) of section
4384 17b-311,**]** while in the process of adopting such policies and procedures
4385 as regulation, provided the commissioner prints notice of intent to
4386 adopt regulations in the Connecticut Law Journal not later than twenty
4387 days after the date of implementation. Policies and procedures
4388 implemented pursuant to this section shall be valid until the time final
4389 regulations are adopted.

4390 Sec. 87. Subsection (b) of section 38a-556a of the general statutes is
4391 repealed and the following is substituted in lieu thereof (*Effective*
4392 *January 1, 2014*):

4393 (b) Said association shall, in consultation with the Insurance
4394 Commissioner and the Healthcare Advocate, develop, within available
4395 appropriations, a web site, telephone number or other method to serve
4396 as a clearinghouse for information about individual and small
4397 employer health insurance policies and health care plans that are
4398 available to consumers in this state, including, but not limited to, the
4399 Medicaid program, the HUSKY Plan, **[**the Charter Oak Health Plan set
4400 forth in section 17b-311,**]** the Municipal Employee Health Insurance
4401 Plan set forth in subsection (i) of section 5-259, and any individual or
4402 small employer health insurance policies or health care plans an
4403 insurer, health care center or other entity chooses to list with the
4404 Connecticut Clearinghouse.

Sec. 88. Subsection (a) of section 29-1s of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2014*):

(a) (1) Wherever the term "Department of Public Safety" is used in the following general statutes, the term "Department of Emergency Services and Public Protection" shall be substituted in lieu thereof; and (2) wherever the term "Commissioner of Public Safety" is used in the following general statutes, the term "Commissioner of Emergency Services and Public Protection" shall be substituted in lieu thereof: 1-24, 1-84b, 1-217, 2-90b, 3-2b, 4-68m, 4a-2a, 4a-18, 4a-67d, 4b-1, 4b-130, 5-142, 5-146, 5-149, 5-150, 5-169, 5-173, 5-192f, 5-192t, 5-246, 6-32g, 7-169, 7-285, 7-294f to 7-294h, inclusive, 7-294*l*, 7-294n, 7-294y, 7-425, 9-7a, 10-233h, 12-562, 12-564a, 12-586f, 12-586g, 13a-123, 13b-69, 13b-376, 14-10, 14-64, 14-67m, 14-67w, 14-103, 14-108a, 14-138, 14-152, 14-163c, 14-211a, 14-212a, 14-212f, 14-219c, 14-227a, 14-227c, 14-267a, 14-270c to 14-270f, inclusive, 14-283, 14-291, 14-298, 14-315, 15-98, 15-140r, 15-140u, 16-256g, 16a-103, 17a-105a, 17a-106a, 17a-500, 17b-90, <u>as amended by this act,</u> 17b-137, 17b-192, 17b-225, 17b-279, **[**17b-490,**]** 18-87k, 19a-112a, 19a-112f, 19a-179b, 19a-409, 19a-904, 20-12c, 20-327b, 21a-36, 21a-283, 22a-2, 23-8b, 23-18, 26-5, 26-67b, 27-19a, 27-107, 28-25b, 28-27, 28-27a, 28-30a, 29-1c, 29-1e to 29-1h, inclusive, 29-1q, 29-1zz, 29-2, 29-2a, 29-2b, 29-3a, 29-4a, 29-6a, 29-7, 29-7b, 29-7c, 29-7h, 29-7m, 29-7n, 29-8, 29-10, 29-10a, 29-10c, 29-11, 29-12, 29-17a, 29-17b, 29-17c, 29-18 to 29-23a, inclusive, 29-25, 29-26, 29-28, 29-28a, 29-30 to 29-32, inclusive, 29-32b, 29-33, 29-36f to 29-36i, inclusive, 29-36k, 29-36m, 29-36n, 29-37a, 29-37f, 29-38b, 29-38e, 29-38f, 29-108b, 29-143i, 29-143j, 29-145 to 29-151, inclusive, 29-152f to 29-152j, inclusive, 29-152m, 29-152o, 29-152u, 29-153, 29-155d, 29-156a, 29-161g to 29-161i, inclusive, 29-161k to 29-161m, inclusive, 29-161o to 29-161t, inclusive, 29-161v to 29-161z, inclusive, 29-163, 29-164g, 29-166, 29-176 to 29-179, inclusive, 29-179f to 29-179h, 31-275, 38a-18, 38a-356, 45a-63, 46a-4b, 46a-170, 46b-15a, 46b-38d, 46b-38f, 51-5c, 51-10c, 51-51o, 51-277a, 52-11, 53-39a, 53-134, 53-199, 53-202, 53-202b, 53-202c, 53-202g, 53-202*l*, 53-202n, 53-202o, 53-278c, 53-341b, 53a-

3, 53a-30, 53a-54b, 53a-130, 53a-130a, 54-1f, 54-1*l*, 54-36e, 54-36i, 54-36n, 54-47aa, 54-63c, 54-76*l*, 54-86k, 54-102g to 54-102j, inclusive, 54-102m, 54-102pp, 54-142j, 54-222a, 54-240, 54-240m, 54-250 to 54-258, inclusive, 54-259a, 54-260b, and 54-300.

Sec. 89. Subsection (e) of section 12-746 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2014*):

(e) Amounts rebated pursuant to this section shall not be considered income for purposes of sections 8-119*l*, 12-170d, 12-170aa, **[**17b-490,**]** 17b-550, 17b-812, 47-88d and 47-287.

Sec. 90. Subsection (b) of section 10a-132e of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2014*):

(b) The program established pursuant to subsection (a) of this section shall: (1) Arrange for licensed physicians, pharmacists and nurses to conduct in person educational visits with prescribing practitioners, utilizing evidence-based materials, borrowing methods from behavioral science and educational theory and, when appropriate, utilizing pharmaceutical industry data and outreach techniques; (2) inform prescribing practitioners about drug marketing that is designed to prevent competition to brand name drugs from generic or other therapeutically-equivalent pharmaceutical alternatives or other evidence-based treatment options; and (3) provide outreach and education to licensed physicians and other health care practitioners who are participating providers in state-funded health care programs, including, but not limited to, Medicaid, the HUSKY Plan, Parts A and B, **[**the Charter Oak Health Plan, the ConnPACE program,**]** the Department of Correction inmate health services program and the state employees' health insurance plan.

Sec. 91. Subsection (a) of section 17a-22f of the general statutes is repealed and the following is substituted in lieu thereof (*Effective*

4469 *January 1, 2014*):

4470 (a) The Commissioner of Social Services may, with regard to the
4471 provision of behavioral health services provided pursuant to a state
4472 plan under Title XIX or Title XXI of the Social Security Act: **[**, or under
4473 the Charter Oak Health Plan:**]** (1) Contract with one or more
4474 administrative services organizations to provide clinical management,
4475 provider network development and other administrative services; (2)
4476 delegate responsibility to the Department of Children and Families for
4477 the clinical management portion of such administrative contract or
4478 contracts that pertain to HUSKY Plan Parts A and B, and other
4479 children, adolescents and families served by the Department of
4480 Children and Families; and (3) delegate responsibility to the
4481 Department of Mental Health and Addiction Services for the clinical
4482 management portion of such administrative contract or contracts that
4483 pertain to Medicaid recipients who are not enrolled in HUSKY Plan
4484 Part A. **[**and recipients enrolled in the Charter Oak Health Plan.**]**

4485 Sec. 92. Subsection (a) of section 17b-28 of the general statutes is
4486 repealed and the following is substituted in lieu thereof (*Effective*
4487 *January 1, 2014*):

4488 (a) There is established a Council on Medical Assistance Program
4489 Oversight which shall advise the Commissioner of Social Services on
4490 the planning and implementation of the health care delivery system
4491 for the following health care programs: The HUSKY Plan, Parts A and
4492 B **[**, the Charter Oak Health Plan**]** and the Medicaid program,
4493 including, but not limited to, the portions of the program serving low
4494 income adults, the aged, blind and disabled individuals, individuals
4495 who are dually eligible for Medicaid and Medicare and individuals
4496 with preexisting medical conditions. The council shall monitor
4497 planning and implementation of matters related to Medicaid care
4498 management initiatives including, but not limited to, (1) eligibility
4499 standards, (2) benefits, (3) access, (4) quality assurance, (5) outcome
4500 measures, and (6) the issuance of any request for proposal by the

4501 Department of Social Services for utilization of an administrative
4502 services organization in connection with such initiatives.

4503 Sec. 93. Subsection (a) of section 17b-261m of the general statutes, as
4504 amended by section 79 of this act, is repealed and the following is
4505 substituted in lieu thereof (*Effective January 1, 2014*):

4506 (a) The Commissioner of Social Services may contract with one or
4507 more administrative services organizations to provide care
4508 coordination, utilization management, disease management, customer
4509 service and review of grievances for recipients of assistance under
4510 Medicaid **[**,**]** and HUSKY Plan, Parts A and B. **[**, and the Charter Oak
4511 Health Plan.**]** Such organization may also provide network
4512 management, credentialing of providers, monitoring of copayments
4513 and premiums and other services as required by the commissioner.
4514 Subject to approval by applicable federal authority, the Department of
4515 Social Services shall utilize the contracted organization's provider
4516 network and billing systems in the administration of the program. In
4517 order to implement the provisions of this section, the commissioner
4518 may establish rates of payment to providers of medical services under
4519 this section if the establishment of such rates is required to ensure that
4520 any contract entered into with an administrative services organization
4521 pursuant to this section is cost neutral to such providers in the
4522 aggregate and ensures patient access. Utilization may be a factor in
4523 determining cost neutrality.

4524 Sec. 94. Section 17b-274 of the general statutes is repealed and the
4525 following is substituted in lieu thereof (*Effective January 1, 2014*):

4526 (a) The Division of Criminal Justice shall periodically investigate
4527 pharmacies to ensure that the state is not billed for a brand name drug
4528 product when a less expensive generic substitute drug product is
4529 dispensed to a Medicaid recipient. The Commissioner of Social
4530 Services shall cooperate and provide information as requested by such
4531 division.

4532 (b) A licensed medical practitioner may specify in writing or by a
4533 telephonic or electronic communication that there shall be no
4534 substitution for the specified brand name drug product in any
4535 prescription for a Medicaid [or ConnPACE] recipient, provided (1) the
4536 practitioner specifies the basis on which the brand name drug product
4537 and dosage form is medically necessary in comparison to a chemically
4538 equivalent generic drug product substitution, and (2) the phrase
4539 "brand medically necessary" shall be in the practitioner's handwriting
4540 on the prescription form or, if the prohibition was communicated by
4541 telephonic communication, in the pharmacist's handwriting on such
4542 form, and shall not be preprinted or stamped or initialed on such form.
4543 If the practitioner specifies by telephonic communication that there
4544 shall be no substitution for the specified brand name drug product in
4545 any prescription for a Medicaid [or ConnPACE] recipient, written
4546 certification in the practitioner's handwriting bearing the phrase
4547 "brand medically necessary" shall be sent to the dispensing pharmacy
4548 within ten days. A pharmacist shall dispense a generically equivalent
4549 drug product for any drug listed in accordance with the Code of
4550 Federal Regulations Title 42 Part 447.332 for a drug prescribed for a
4551 Medicaid, <u>or</u> state-administered general assistance [, or ConnPACE]
4552 recipient unless the phrase "brand medically necessary" is ordered in
4553 accordance with this subsection and such pharmacist has received
4554 approval to dispense the brand name drug product in accordance with
4555 subsection (c) of this section.

4556 (c) The Commissioner of Social Services shall implement a
4557 procedure by which a pharmacist shall obtain approval from an
4558 independent pharmacy consultant acting on behalf of the Department
4559 of Social Services, under an administrative services only contract,
4560 whenever the pharmacist dispenses a brand name drug product to a
4561 Medicaid [or ConnPACE] recipient and a chemically equivalent
4562 generic drug product substitution is available. The length of
4563 authorization for brand name drugs shall be in accordance with section
4564 17b-491a. In cases where the brand name drug is less costly than the

4565 chemically equivalent generic drug when factoring in manufacturers'
4566 rebates, the pharmacist shall dispense the brand name drug. If such
4567 approval is not granted or denied within two hours of receipt by the
4568 commissioner of the request for approval, it shall be deemed granted.
4569 Notwithstanding any provision of this section, a pharmacist shall not
4570 dispense any initial maintenance drug prescription for which there is a
4571 chemically equivalent generic substitution that is for less than fifteen
4572 days without the department's granting of prior authorization,
4573 provided prior authorization shall not otherwise be required for
4574 atypical antipsychotic drugs if the individual is currently taking such
4575 drug at the time the pharmacist receives the prescription. The
4576 pharmacist may appeal a denial of reimbursement to the department
4577 based on the failure of such pharmacist to substitute a generic drug
4578 product in accordance with this section.

4579 (d) A licensed medical practitioner shall disclose to the Department
4580 of Social Services or such consultant, upon request, the basis on which
4581 the brand name drug product and dosage form is medically necessary
4582 in comparison to a chemically equivalent generic drug product
4583 substitution. The Commissioner of Social Services shall establish a
4584 procedure by which such a practitioner may appeal a determination
4585 that a chemically equivalent generic drug product substitution is
4586 required for a Medicaid **[**or ConnPACE**]** recipient.

4587 Sec. 95. Section 17b-274a of the general statutes is repealed and the
4588 following is substituted in lieu thereof (*Effective January 1, 2014*):

4589 The Commissioner of Social Services may establish maximum
4590 allowable costs to be paid under the Medicaid **[**, ConnPACE**]** and
4591 Connecticut AIDS drug assistance programs for generic prescription
4592 drugs based on, but not limited to, actual acquisition costs. The
4593 department shall implement and maintain a procedure to review and
4594 update the maximum allowable cost list at least annually, and shall
4595 report annually to the joint standing committee of the General
4596 Assembly having cognizance of matters relating to appropriations and

4597 the budgets of state agencies on its activities pursuant to this section.

4598 Sec. 96. Subsection (a) of section 17b-274c of the general statutes is
4599 repealed and the following is substituted in lieu thereof (*Effective*
4600 *January 1, 2014*):

4601 (a) The Commissioner of Social Services may establish a voluntary
4602 mail order option for any maintenance prescription drug covered
4603 under the Medicaid **[**, ConnPACE**]** or Connecticut AIDS drug
4604 assistance programs.

4605 Sec. 97. Subsection (e) of section 17b-274d of the general statutes is
4606 repealed and the following is substituted in lieu thereof (*Effective*
4607 *January 1, 2014*):

4608 (e) The Department of Social Services, in consultation with the
4609 Pharmaceutical and Therapeutics Committee, may adopt a preferred
4610 drug **[**lists**]** list for use in the Medicaid **[**and ConnPACE programs**]**
4611 program. To the extent feasible, the department shall review all drugs
4612 included on the preferred drug **[**lists**]** list at least every twelve months,
4613 and may recommend additions to, and deletions from, the preferred
4614 drug **[**lists**]** list, to ensure that the preferred drug **[**lists provide**]** list
4615 provides for medically appropriate drug therapies for Medicaid **[**and
4616 ConnPACE**]** patients. **[**For the fiscal year ending June 30, 2004, such
4617 drug lists shall be limited to use in the Medicaid and ConnPACE
4618 programs and cover three classes of drugs, including proton pump
4619 inhibitors and two other classes of drugs determined by the
4620 Commissioner of Social Services. Not later than June 30, 2005, the**]** The
4621 Department of Social Services, in consultation with the Pharmaceutical
4622 and **[**Therapeutic**]** Therapeutics Committee, shall expand such drug
4623 **[**lists**]** list to include other classes of drugs, except as provided in
4624 subsection (f) of this section, in order to achieve savings reflected in the
4625 amounts appropriated to the department, for the various components
4626 of the program, in the state budget act.

4627 Sec. 98. Section 17b-274e of the general statutes is repealed and the

4628 following is substituted in lieu thereof (*Effective January 1, 2014*):

4629 A pharmacist, when filling a prescription under the Medicaid **[**,
4630 ConnPACE**]** or Connecticut AIDS drug assistance programs, shall fill
4631 such prescription utilizing the most cost-efficient dosage, consistent
4632 with the prescription of a prescribing practitioner as defined in section
4633 20-571, unless such pharmacist receives permission to do otherwise
4634 pursuant to the prior authorization requirements set forth in sections
4635 17b-274, as amended by this act, and 17b-491a.

4636 Sec. 99. Subsection (a) of section 17b-280 of the general statutes, as
4637 amended by section 81 of this act, is repealed and the following is
4638 substituted in lieu thereof (*Effective January 1, 2014*):

4639 (a) The state shall reimburse for all legend drugs provided under
4640 medical assistance programs administered by the Department of Social
4641 Services at the lower of (1) the rate established by the Centers for
4642 Medicare and Medicaid Services as the federal acquisition cost, (2) the
4643 average wholesale price minus sixteen per cent, or (3) an equivalent
4644 percentage as established under the Medicaid state plan. The state
4645 shall pay a professional fee of one dollar and seventy cents to licensed
4646 pharmacies for each prescription dispensed to a recipient of benefits
4647 under a medical assistance program administered by the Department
4648 of Social Services in accordance with federal regulations. On and after
4649 September 4, 1991, payment for legend and nonlegend drugs provided
4650 to Medicaid recipients shall be based upon the actual package size
4651 dispensed. Effective October 1, 1991, reimbursement for over-the-
4652 counter drugs for such recipients shall be limited to those over-the-
4653 counter drugs and products published in the Connecticut Formulary,
4654 or the cross reference list, issued by the commissioner. The cost of all
4655 over-the-counter drugs and products provided to residents of nursing
4656 facilities, chronic disease hospitals, and intermediate care facilities for
4657 the mentally retarded shall be included in the facilities' per diem rate.
4658 Notwithstanding the provisions of this subsection, no dispensing fee
4659 shall be issued for a prescription drug dispensed to a **[**ConnPACE or**]**

4660 Medicaid recipient who is a Medicare Part D beneficiary when the
4661 prescription drug is a Medicare Part D drug, as defined in Public Law
4662 108-173, the Medicare Prescription Drug, Improvement, and
4663 Modernization Act of 2003.

4664 Sec. 100. Section 17b-491b of the general statutes is repealed and the
4665 following is substituted in lieu thereof (*Effective January 1, 2014*):

4666 The maximum allowable cost paid for Factor VIII pharmaceuticals
4667 under the Medicaid **[**and ConnPACE programs**]** program shall be the
4668 actual acquisition cost plus eight per cent. The Commissioner of Social
4669 Services may designate specific suppliers of Factor VIII
4670 pharmaceuticals from which a dispensing pharmacy shall order the
4671 prescription to be delivered to the pharmacy and billed by the supplier
4672 to the Department of Social Services. If the commissioner so designates
4673 specific suppliers of Factor VIII pharmaceuticals, the department shall
4674 pay the dispensing pharmacy a handling fee equal to eight per cent of
4675 the actual acquisition cost for such prescription.

4676 Sec. 101. Subsection (c) of section 20-619 of the general statutes is
4677 repealed and the following is substituted in lieu thereof (*Effective*
4678 *January 1, 2014*):

4679 (c) A prescribing practitioner may specify in writing or by a
4680 telephonic or other electronic communication that there shall be no
4681 substitution for the specified brand name drug product in any
4682 prescription, provided (1) in any prescription for a Medicaid **[**or
4683 ConnPACE**]** recipient, such practitioner specifies the basis on which
4684 the brand name drug product and dosage form is medically necessary
4685 in comparison to a chemically equivalent generic name drug product
4686 substitution, and (2) the phrase "BRAND MEDICALLY NECESSARY",
4687 shall be in the practitioner's handwriting on the prescription form or
4688 on an electronically produced copy of the prescription form or, if the
4689 prohibition was communicated by telephonic or other electronic
4690 communication that did not reproduce the practitioner's handwriting,

4691 a statement to that effect appears on the form. The phrase "BRAND
4692 MEDICALLY NECESSARY" shall not be preprinted or stamped or
4693 initialed on the form. If the practitioner specifies by telephonic or other
4694 electronic communication that did not reproduce the practitioner's
4695 handwriting that there shall be no substitution for the specified brand
4696 name drug product in any prescription for a Medicaid **[**or ConnPACE**]**
4697 recipient, written certification in the practitioner's handwriting bearing
4698 the phrase "BRAND MEDICALLY NECESSARY" shall be sent to the
4699 dispensing pharmacy not later than ten days after the date of such
4700 communication.

4701 Sec. 102. (NEW) (*Effective July 1, 2013*) Notwithstanding the
4702 provisions of section 17b-8 of the general statutes, the Commissioner of
4703 Social Services shall submit an eligibility and service plan for the
4704 Medicaid Coverage for the Lowest Income Populations program,
4705 established pursuant to Section 1902(a)(10)(A)(i)(VIII) of the Social
4706 Security Act, to the joint standing committees of the General Assembly
4707 having cognizance of matters relating to human services and
4708 appropriations and the budgets of state agencies prior to the
4709 submission of such plan to the federal government. Not later than
4710 fifteen days after the date of their receipt of such plan, the joint
4711 standing committees shall: (1) Hold a public hearing, or (2) notify the
4712 Commissioner of Social Services if such joint standing committees do
4713 not intend to hold a public hearing. The joint standing committees
4714 shall advise the commissioner of their approval or denial of such plan
4715 not later than fifteen days after receipt of such plan. If the joint
4716 standing committees do not agree or fail to take action within fifteen
4717 days, the proposal shall be deemed approved.

4718 Sec. 103. Subsection (b) of section 17b-90 of the general statutes, as
4719 amended by section 45 of this act, is repealed and the following is
4720 substituted in lieu thereof (*Effective January 1, 2014*):

4721 (b) No person shall, except for purposes directly connected with the
4722 administration of programs of the Department of Social Services and in

4723 accordance with the regulations of the commissioner, solicit, disclose,
4724 receive or make use of, or authorize, knowingly permit, participate in
4725 or acquiesce in the use of, any list of the names of, or any information
4726 concerning, persons applying for or receiving assistance from the
4727 Department of Social Services or persons participating in a program
4728 administered by said department, directly or indirectly derived from
4729 the records, papers, files or communications of the state or its
4730 subdivisions or agencies, or acquired in the course of the performance
4731 of official duties. The Commissioner of Social Services shall disclose (1)
4732 to any authorized representative of the Labor Commissioner such
4733 information directly related to unemployment compensation,
4734 administered pursuant to chapter 567 or information necessary for
4735 implementation of sections 17b-688b, 17b-688c and 17b-688h and
4736 section 122 of public act 97-2 of the June 18 special session, (2) to any
4737 authorized representative of the Commissioner of Mental Health and
4738 Addiction Services any information necessary for the implementation
4739 and operation of the basic needs supplement program, **[**or the
4740 Medicaid program for low-income adults, established pursuant to
4741 section 17b-261n**,]** (3) to any authorized representative of the
4742 Commissioner of Administrative Services or the Commissioner of
4743 Emergency Services and Public Protection such information as the
4744 Commissioner of Social Services determines is directly related to and
4745 necessary for the Department of Administrative Services or the
4746 Department of Emergency Services and Public Protection for purposes
4747 of performing their functions of collecting social services recoveries
4748 and overpayments or amounts due as support in social services cases,
4749 investigating social services fraud or locating absent parents of public
4750 assistance recipients, (4) to any authorized representative of the
4751 Commissioner of Children and Families necessary information
4752 concerning a child or the immediate family of a child receiving services
4753 from the Department of Social Services, including safety net services, if
4754 the Commissioner of Children and Families or the Commissioner of
4755 Social Services has determined that imminent danger to such child's
4756 health, safety or welfare exists to target the services of the family

4757 services programs administered by the Department of Children and
4758 Families, (5) to a town official or other contractor or authorized
4759 representative of the Labor Commissioner such information
4760 concerning an applicant for or a recipient of assistance under state-
4761 administered general assistance deemed necessary by the
4762 Commissioner of Social Services and the Labor Commissioner to carry
4763 out their respective responsibilities to serve such persons under the
4764 programs administered by the Labor Department that are designed to
4765 serve applicants for or recipients of state-administered general
4766 assistance, (6) to any authorized representative of the Commissioner of
4767 Mental Health and Addiction Services for the purposes of the
4768 behavioral health managed care program established by section 17a-
4769 453, (7) to any authorized representative of the Commissioner of Public
4770 Health to carry out his or her respective responsibilities under
4771 programs that regulate child day care services or youth camps, (8) to a
4772 health insurance provider, in IV-D support cases, as defined in
4773 subdivision (13) of subsection (b) of section 46b-231, information
4774 concerning a child and the custodial parent of such child that is
4775 necessary to enroll such child in a health insurance plan available
4776 through such provider when the noncustodial parent of such child is
4777 under court order to provide health insurance coverage but is unable
4778 to provide such information, provided the Commissioner of Social
4779 Services determines, after providing prior notice of the disclosure to
4780 such custodial parent and an opportunity for such parent to object,
4781 that such disclosure is in the best interests of the child, (9) to any
4782 authorized representative of the Department of Correction, in IV-D
4783 support cases, as defined in subdivision (13) of subsection (b) of
4784 section 46b-231, information concerning noncustodial parents that is
4785 necessary to identify inmates or parolees with IV-D support cases who
4786 may benefit from Department of Correction educational, training, skill
4787 building, work or rehabilitation programming that will significantly
4788 increase an inmate's or parolee's ability to fulfill such inmate's support
4789 obligation, (10) to any authorized representative of the Judicial Branch,
4790 in IV-D support cases, as defined in subdivision (13) of subsection (b)

of section 46b-231, information concerning noncustodial parents that is necessary to: (A) Identify noncustodial parents with IV-D support cases who may benefit from educational, training, skill building, work or rehabilitation programming that will significantly increase such parent's ability to fulfill such parent's support obligation, (B) assist in the administration of the Title IV-D child support program, or (C) assist in the identification of cases involving family violence, (11) to any authorized representative of the State Treasurer, in IV-D support cases, as defined in subdivision (13) of subsection (b) of section 46b-231, information that is necessary to identify child support obligors who owe overdue child support prior to the Treasurer's payment of such obligors' claim for any property unclaimed or presumed abandoned under part III of chapter 32, or (12) to any authorized representative of the Commissioner of Housing for the purpose of verifying whether an applicant for the renters rebate program established by section 12-170d, as amended by this act, is a recipient of cash assistance from the Department of Social Services and the amount of such assistance. No such representative shall disclose any information obtained pursuant to this section, except as specified in this section. Any applicant for assistance provided through said department shall be notified that, if and when such applicant receives benefits, the department will be providing law enforcement officials with the address of such applicant upon the request of any such official pursuant to section 17b-16a.

Sec. 104. Subsection (a) of section 17b-301b of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(a) No person shall:

(1) Knowingly present, or cause to be presented, a false or fraudulent claim for payment or approval; **[**under a medical assistance program administered by the Department of Social Services;**]**

(2) Knowingly make, use or cause to be made or used, a false record or statement material to a false or fraudulent claim; [under a medical assistance program administered by the Department of Social Services;]

(3) Conspire to commit a violation of this section;

(4) Having possession, custody or control of property or money used, or to be used, by the state, [relative to a medical assistance program administered by the Department of Social Services,] and intending to defraud the state or wilfully to conceal the property, deliver or cause to be delivered less property than the amount for which the person receives a certificate or receipt;

(5) Being authorized to make or deliver a document certifying receipt of property used, or to be used, by the state [relative to a medical assistance program administered by the Department of Social Services] and intending to defraud the state, make or deliver such document without completely knowing that the information on the document is true;

(6) Knowingly buy, or receive as a pledge of an obligation or debt, public property from an officer or employee of the state [relative to a medical assistance program administered by the Department of Social Services,] who lawfully may not sell or pledge the property;

(7) Knowingly make, use or cause to be made or used, a false record or statement material to an obligation to pay or transmit money or property to the state; [under a medical assistance program administered by the Department of Social Services;] or

(8) Knowingly conceal or knowingly and improperly avoid or decrease an obligation to pay or transmit money or property to the state. [under a medical assistance program administered by the Department of Social Services.]

4851 Sec. 105. Section 17a-22p of the general statutes is repealed and the
4852 following is substituted in lieu thereof (*Effective July 1, 2013*):

4853 (a) The Departments of Children and Families, Social Services and
4854 Mental Health and Addiction Services shall enter into one or more
4855 joint contracts or agreements with an administrative services
4856 organization or organizations to perform eligibility verification,
4857 utilization management, intensive care management, quality
4858 management, coordination of medical and behavioral health services,
4859 provider network development and management, recipient and
4860 provider services and reporting.

4861 (b) Claims under the Behavioral Health Partnership shall be paid by
4862 the Department of Social Services' Medicaid management information
4863 systems vendor, except that the Department of Children and Families
4864 and the Department of Mental Health and Addiction Services may, at
4865 their discretion, continue to use existing claims payment systems.

4866 (c) **[**Administrative services organizations**]** An administrative
4867 services organization shall authorize services, based solely on medical
4868 necessity, as defined in section 17b-259b. Such organization may use
4869 guidelines established by the clinical management committee,
4870 established pursuant to section 17a-22k, to inform and guide the
4871 authorization decision. **[**Administrative services organizations may
4872 make exceptions to the guidelines when requested by a member, or the
4873 member's legal guardian or service provider, and determined by the
4874 administrative services organization to be in the best interest of the
4875 member.**]** Decisions regarding the interpretation of such guidelines
4876 shall be made by the Departments of Children and Families, Social
4877 Services and Mental Health and Addiction Services. No administrative
4878 services organization shall have any financial incentive to approve,
4879 deny or reduce services. Administrative services organizations shall
4880 ensure that service providers and persons seeking services have timely
4881 access to program information and timely responses to inquiries,
4882 including inquiries concerning the clinical guidelines for services.

4883 (d) [The] An administrative services organization for Medicaid and
4884 HUSKY Plan [Parts A and] Part B shall provide or arrange for on-site
4885 assistance to facilitate the appropriate placement, as soon as
4886 practicable, of children with behavioral health diagnoses who the
4887 administrative services organization knows to have been in an
4888 emergency department for over forty-eight hours. The administrative
4889 services organization shall provide or arrange for on-site assistance to
4890 arrange for the discharge or appropriate placement, as soon as
4891 practicable, for children who the administrative services organization
4892 knows to have remained in an inpatient hospital unit for more than
4893 five days longer than is medically necessary, as agreed by the
4894 administrative services organization and the hospital.

4895 (e) The Departments of Children and Families, Social Services and
4896 Mental Health and Addiction Services shall develop, in consultation
4897 with the Behavioral Health Partnership, a comprehensive plan for
4898 monitoring the performance of administrative services organizations
4899 which shall include data on service authorizations, individual
4900 outcomes, appeals, outreach and accessibility, comments from
4901 program participants compiled from written surveys and face-to-face
4902 interviews.

4903 (f) The Behavioral Health Partnership shall establish policies to
4904 coordinate benefits received under the partnership with other benefits
4905 received under Medicaid. Such policies shall specify a coordinated
4906 delivery of both physical and behavioral health care. The policies shall
4907 be submitted to the Behavioral Health Partnership Oversight Council
4908 for review and comment.

4909 Sec. 106. Section 17a-22h of the general statutes is repealed and the
4910 following is substituted in lieu thereof (*Effective July 1, 2013*):

4911 (a) The Commissioners of Social Services, Children and Families,
4912 and Mental Health and Addiction Services shall develop and
4913 implement an integrated behavioral health service system for

4914 Medicaid and HUSKY Plan [Parts A and] Part B members and children
4915 enrolled in the voluntary services program operated by the
4916 Department of Children and Families and may, at the discretion of the
4917 commissioners, include: (1) Other children, adolescents and families
4918 served by the Department of Children and Families or the Court
4919 Support Services Division of the Judicial Branch; and (2) [Medicaid
4920 recipients who are not enrolled in HUSKY Plan Part A; and (3)]
4921 Charter Oak Health Plan members. The integrated behavioral health
4922 service system shall be known as the Behavioral Health Partnership.
4923 The Behavioral Health Partnership shall seek to increase access to
4924 quality behavioral health services by: (A) Expanding individualized,
4925 family-centered and community-based services; (B) maximizing
4926 federal revenue to fund behavioral health services; (C) reducing
4927 unnecessary use of institutional and residential services for children
4928 and adults; (D) capturing and investing enhanced federal revenue and
4929 savings derived from reduced residential services and increased
4930 community-based services for HUSKY Plan Parts A and B recipients;
4931 (E) improving administrative oversight and efficiencies; and (F)
4932 monitoring individual outcomes and provider performance, taking
4933 into consideration the acuity of the patients served by each provider,
4934 and overall program performance.

4935 (b) The Behavioral Health Partnership shall operate in accordance
4936 with the financial requirements specified in this subsection. Prior to the
4937 conversion of any grant-funded services to a rate-based, fee-for-service
4938 payment system, the Department of Social Services, the Department of
4939 Children and Families and the Department of Mental Health and
4940 Addiction Services shall submit documentation verifying that the
4941 proposed rates seek to cover the reasonable cost of providing services
4942 to the Behavioral Health Partnership Oversight Council, established
4943 pursuant to section 17a-22j, as amended by this act.

4944 Sec. 107. Subsection (a) of section 17b-244 of the general statutes is
4945 repealed and the following is substituted in lieu thereof (*Effective July*
4946 *1, 2013*):

4947 (a) The room and board component of the rates to be paid by the
4948 state to private facilities and facilities operated by regional education
4949 service centers which are licensed to provide residential care pursuant
4950 to section 17a-227, but not certified to participate in the Title XIX
4951 Medicaid program as intermediate care facilities for persons with
4952 mental retardation, shall be determined annually by the Commissioner
4953 of Social Services, except that rates effective April 30, 1989, shall
4954 remain in effect through October 31, 1989. Any facility with real
4955 property other than land placed in service prior to July 1, 1991, shall,
4956 for the fiscal year ending June 30, 1995, receive a rate of return on real
4957 property equal to the average of the rates of return applied to real
4958 property other than land placed in service for the five years preceding
4959 July 1, 1993. For the fiscal year ending June 30, 1996, and any
4960 succeeding fiscal year, the rate of return on real property for property
4961 items shall be revised every five years. The commissioner shall, upon
4962 submission of a request by such facility, allow actual debt service,
4963 comprised of principal and interest, on the loan or loans in lieu of
4964 property costs allowed pursuant to section 17-313b-5 of the regulations
4965 of Connecticut state agencies, whether actual debt service is higher or
4966 lower than such allowed property costs, provided such debt service
4967 terms and amounts are reasonable in relation to the useful life and the
4968 base value of the property. In the case of facilities financed through the
4969 Connecticut Housing Finance Authority, the commissioner shall allow
4970 actual debt service, comprised of principal, interest and a reasonable
4971 repair and replacement reserve on the loan or loans in lieu of property
4972 costs allowed pursuant to section 17-313b-5 of the regulations of
4973 Connecticut state agencies, whether actual debt service is higher or
4974 lower than such allowed property costs, provided such debt service
4975 terms and amounts are determined by the commissioner at the time
4976 the loan is entered into to be reasonable in relation to the useful life
4977 and base value of the property. The commissioner may allow fees
4978 associated with mortgage refinancing provided such refinancing will
4979 result in state reimbursement savings, after comparing costs over the
4980 terms of the existing proposed loans. For the fiscal year ending June 30,

4981 1992, the inflation factor used to determine rates shall be one-half of
4982 the gross national product percentage increase for the period between
4983 the midpoint of the cost year through the midpoint of the rate year. For
4984 fiscal year ending June 30, 1993, the inflation factor used to determine
4985 rates shall be two-thirds of the gross national product percentage
4986 increase from the midpoint of the cost year to the midpoint of the rate
4987 year. For the fiscal years ending June 30, 1996, and June 30, 1997, no
4988 inflation factor shall be applied in determining rates. The
4989 Commissioner of Social Services shall prescribe uniform forms on
4990 which such facilities shall report their costs. Such rates shall be
4991 determined on the basis of a reasonable payment for necessary
4992 services. Any increase in grants, gifts, fund-raising or endowment
4993 income used for the payment of operating costs by a private facility in
4994 the fiscal year ending June 30, 1992, shall be excluded by the
4995 commissioner from the income of the facility in determining the rates
4996 to be paid to the facility for the fiscal year ending June 30, 1993,
4997 provided any operating costs funded by such increase shall not
4998 obligate the state to increase expenditures in subsequent fiscal years.
4999 Nothing contained in this section shall authorize a payment by the
5000 state to any such facility in excess of the charges made by the facility
5001 for comparable services to the general public. The service component
5002 of the rates to be paid by the state to private facilities and facilities
5003 operated by regional education service centers which are licensed to
5004 provide residential care pursuant to section 17a-227, but not certified
5005 to participate in the Title XIX Medicaid programs as intermediate care
5006 facilities for persons with mental retardation, shall be determined
5007 annually by the Commissioner of Developmental Services in
5008 accordance with section 17b-244a. For the fiscal year ending June 30,
5009 2008, no facility shall receive a rate that is more than two per cent
5010 greater than the rate in effect for the facility on June 30, 2007, except
5011 any facility that would have been issued a lower rate effective July 1,
5012 2007, due to interim rate status or agreement with the department,
5013 shall be issued such lower rate effective July 1, 2007. For the fiscal year
5014 ending June 30, 2009, no facility shall receive a rate that is more than

5015 two per cent greater than the rate in effect for the facility on June 30,
5016 2008, except any facility that would have been issued a lower rate
5017 effective July 1, 2008, due to interim rate status or agreement with the
5018 department, shall be issued such lower rate effective July 1, 2008. For
5019 the fiscal years ending June 30, 2010, and June 30, 2011, rates in effect
5020 for the period ending June 30, 2009, shall remain in effect until June 30,
5021 2011, except that (1) the rate paid to a facility may be higher than the
5022 rate paid to the facility for the period ending June 30, 2009, if a capital
5023 improvement required by the Commissioner of Developmental
5024 Services for the health or safety of the residents was made to the
5025 facility during the fiscal years ending June 30, 2010, or June 30, 2011,
5026 and (2) any facility that would have been issued a lower rate for the
5027 fiscal years ending June 30, 2010, or June 30, 2011, due to interim rate
5028 status or agreement with the department, shall be issued such lower
5029 rate. For the fiscal year ending June 30, 2012, rates in effect for the
5030 period ending June 30, 2011, shall remain in effect until June 30, 2012,
5031 except that (A) the rate paid to a facility may be higher than the rate
5032 paid to the facility for the period ending June 30, 2011, if a capital
5033 improvement required by the Commissioner of Developmental
5034 Services for the health or safety of the residents was made to the
5035 facility during the fiscal year ending June 30, 2012, and (B) any facility
5036 that would have been issued a lower rate for the fiscal year ending
5037 June 30, 2012, due to interim rate status or agreement with the
5038 department, shall be issued such lower rate. **[**For the fiscal year ending
5039 June 30, 2013, any**]** Any facility that has a significant decrease in land
5040 and building costs shall receive a reduced rate to reflect such decrease
5041 in land and building costs. The rate paid to a facility may be increased
5042 if a capital improvement approved by the Department of
5043 Developmental Services, in consultation with the Department of Social
5044 Services, for the health or safety of the residents was made to the
5045 facility during the fiscal year ending June 30, 2014, or June 30, 2015,
5046 only to the extent such increases are within available appropriations.

5047 Sec. 108. Subsection (b) of section 17b-403 of the general statutes is

5048 repealed and the following is substituted in lieu thereof (*Effective July*
5049 *1, 2013*):

5050 (b) The State Ombudsman shall serve on a full-time basis, and shall
5051 personally or through representatives of the office:

5052 (1) Identify, investigate and resolve complaints that:

5053 (A) Are made by, or on behalf of, residents or, as to complaints
5054 involving the application for admission to a long-term care facility, by
5055 or on behalf of applicants; and

5056 (B) Relate to action, inaction or decisions that may adversely affect
5057 the health, safety, welfare or rights of the residents, including the
5058 welfare and rights of the residents with respect to the appointment and
5059 activities of guardians and representative payees, of (i) providers or
5060 representatives of providers of long-term care services, (ii) public
5061 agencies, or (iii) health and social service agencies;

5062 (2) Provide services to protect the health, safety, welfare and rights
5063 of the residents;

5064 (3) Inform the residents about means of obtaining services provided
5065 by providers or agencies described in subparagraph (B) of subdivision
5066 (1) of this subsection or services described in subdivision (2) of this
5067 subsection;

5068 (4) Ensure that the residents and, as to issues involving applications
5069 for admission to long-term care facilities, applicants have regular and
5070 timely access to the services provided through the office and that the
5071 residents and complainants receive timely responses from
5072 representatives of the office to complaints;

5073 (5) Represent the interests of the residents, and of applicants in
5074 relation to issues concerning applications to long-term care facilities,
5075 before governmental agencies and seek administrative, legal and other
5076 remedies to protect the health, safety, welfare and rights of the

residents;

(6) Provide administrative and technical assistance to representatives to assist the representatives in participating in the program;

(7) (A) Analyze, comment on and monitor the development and implementation of federal, state and local laws, regulations, and other governmental policies and actions that pertain to the health, safety, welfare and rights of the residents with respect to the adequacy of long-term care facilities and services in this state and to the rights of applicants in relation to applications to long-term care facilities;

(B) Recommend any changes in such laws, regulations, policies and actions as the office determines to be appropriate; and

(C) Facilitate public comment on the laws, regulations, policies and actions;

(8) Advocate for:

(A) Any changes in federal, state and local laws, regulations and other governmental policies and actions that pertain to the health, safety, welfare and rights of residents with respect to the adequacy of long-term care facilities and services in this state and to the health, safety, welfare and rights of applicants which the State Ombudsman determines to be appropriate;

(B) Appropriate action by groups or agencies with jurisdictional authority to deal with problems affecting individual residents and the general resident population and applicants in relation to issues concerning applications to long-term care facilities; and

(C) The enactment of legislative recommendations by the General Assembly and of regulatory recommendations by commissioners of Connecticut state agencies;

5105 (9) (A) Provide for training representatives of the office;

5106 (B) Promote the development of citizen organizations to participate
5107 in the program; and

5108 (C) Provide technical support for the development of resident and
5109 family councils to protect the well-being and rights of residents;

5110 (10) Coordinate ombudsman services with the protection and
5111 advocacy systems for individuals with developmental disabilities and
5112 mental illnesses established under (A) Part A of the Development
5113 Disabilities Assistance and Bill of Rights Act (42 USC 6001, et seq.), and
5114 (B) The Protection and Advocacy for Mentally Ill Individuals Act of
5115 1986 (42 USC 10801 et seq.);

5116 (11) Coordinate, to the greatest extent possible, ombudsman services
5117 with legal assistance provided under Section 306(a)(2)(C) of the federal
5118 Older Americans Act of 1965, (42 USC 3026(a)(2)(C)) as amended from
5119 time to time, through the adoption of memoranda of understanding
5120 and other means;

5121 (12) Provide services described in subdivisions (1) to (11), inclusive,
5122 of this subsection, to residents under age sixty living in a long-term
5123 care facility, if (A) a majority of the residents of the facility where the
5124 younger person resides are over age sixty and (B) such services do not
5125 weaken or decrease service to older individuals covered under this
5126 chapter; **[**and**]**

5127 <u>(13) Implement and administer, on and after July 1, 2014, a pilot</u>
5128 <u>program that serves home and community-based care recipients in</u>
5129 <u>Hartford County; and</u>

5130 **[**(13)**]** <u>(14)</u> Carry out such other activities and duties as may be
5131 required under federal law.

5132 Sec. 109. Section 17b-607 of the general statutes is repealed and the
5133 following is substituted in lieu thereof (*Effective July 1, 2013*):

5134 (a) The Commissioner of [Social] Rehabilitation Services is
5135 authorized to establish and administer a fund to be known as the
5136 Assistive Technology Revolving Fund. Said fund shall be used by said
5137 commissioner to make loans to persons with disabilities, senior
5138 citizens or the family members of persons with disabilities or senior
5139 citizens for the purchase of assistive technology and adaptive
5140 equipment and services. Each such loan shall be made for a term of not
5141 more than [five] ten years. Any loans made under this section after
5142 July 1, 2013, shall bear interest at a [rate to be determined in
5143 accordance with subsection (t) of section 3-20] fixed rate not to exceed
5144 six per cent. Said commissioner is authorized to expend any funds
5145 necessary for the reasonable direct expenses relating to the
5146 administration of said fund. Said commissioner shall adopt
5147 regulations, in accordance with the provisions of chapter 54, to
5148 implement the purposes of this section.

5149 (b) The State Bond Commission shall have power from time to time
5150 to authorize the issuance of bonds of the state in one or more series in
5151 accordance with section 3-20 and in a principal amount necessary to
5152 carry out the purposes of this section, but not in excess of an aggregate
5153 amount of one million dollars. All of said bonds shall be payable at
5154 such place or places as may be determined by the Treasurer pursuant
5155 to section 3-19 and shall bear such date or dates, mature at such time or
5156 times, not exceeding five years from their respective dates, bear
5157 interest at such rate or different or varying rates and payable at such
5158 time or times, be in such denominations, be in such form with or
5159 without interest coupons attached, carry such registration and transfer
5160 privileges, be payable in such medium of payment and be subject to
5161 such terms of redemption with or without premium as, irrespective of
5162 the provisions of said section 3-20, may be provided by the
5163 authorization of the State Bond Commission or fixed in accordance
5164 therewith. The proceeds of the sale of such bonds shall be deposited in
5165 the Assistive Technology Revolving Fund created by this section. Such
5166 bonds shall be general obligations of the state and the full faith and

5167 credit of the state of Connecticut are pledged for the payment of the
5168 principal of and interest on such bonds as the same become due.
5169 Accordingly, and as part of the contract of the state with the holders of
5170 such bonds, appropriation of all amounts necessary for punctual
5171 payment of such principal and interest is hereby made and the
5172 Treasurer shall pay such principal and interest as the same become
5173 due. Net earnings on investments or reinvestments of proceeds,
5174 accrued interest and premiums on the issuance of such bonds, after
5175 payment therefrom of expenses incurred by the Treasurer or State
5176 Bond Commission in connection with their issuance, shall be deposited
5177 in the General Fund of the state.

5178 (c) The Connecticut Tech Act Project, within the Department of
5179 Rehabilitation Services and as authorized by 29 USC 3001, may
5180 provide assistive technology evaluation and training services upon the
5181 request of any person or any public or private entity, to the extent
5182 persons who provide assistive technology services are available. The
5183 project may charge a fee to any person or entity receiving such
5184 assistive technology evaluation and training services to reimburse the
5185 department for its costs. The Commissioner of Rehabilitation Services
5186 shall establish fees at reasonable rates that will cover the department's
5187 direct and indirect costs.

5188 Sec. 110. (*Effective from passage*) Not later than October 1, 2013, the
5189 Commissioner of Children and Families shall publish an independent
5190 cost analysis of full implementation of the Fostering Connections to
5191 Success and Increasing Adoption Act of 2008, P.L. 110-351, as amended
5192 from time to time, on its Internet web site and report, in accordance
5193 with the provisions of section 11-4a of the general statutes, the results
5194 of such analysis to the joint standing committees of the General
5195 Assembly having cognizance of matters relating to children and
5196 human services. The commissioner shall analyze the necessary costs,
5197 federal reimbursements and off-setting savings for the Department of
5198 Children and Families to provide post-majority foster care services to
5199 all youth who (1) are at least eighteen years of age but not yet twenty-

5200 one years of age, (2) were in foster care on their eighteenth birthday or
5201 exited foster care after their eighteenth birthday but wish to reenter
5202 foster care, and (3) are (A) completing secondary education or a
5203 program leading to an equivalent credential, (B) enrolled in an
5204 institution that provides post-secondary or vocational education, (C)
5205 participating in a program or activity designed to promote
5206 employment or remove barriers to employment, (D) employed for at
5207 least eighty hours per month, or (E) incapable of participating in any of
5208 the activities described in subparagraphs (A) to (D), inclusive, of this
5209 section due to a medical condition. Such analysis shall consider all
5210 available reimbursements as well as costs currently borne by other
5211 state agencies for serving foster youth or former foster youth through
5212 age twenty-one.

5213 Sec. 111. Subsection (e) of section 17b-499a of the general statutes is
5214 repealed and the following is substituted in lieu thereof (*Effective July*
5215 *1, 2013*):

5216 (e) The Commissioner of Social Services, **[**shall contract with a
5217 patient-centered medical home, health home or a pharmacy
5218 organization, which may include a school of pharmacy, to**]** in
5219 coordination with the Connecticut Pharmacists Association and a
5220 community health center in the greater New Haven region, shall
5221 provide Medicaid therapy management services **[**, including**]** in a pilot
5222 program to be administered in greater New Haven by the community
5223 health center. Said program shall be operated in cooperation with the
5224 medication therapy management activities of the administrative
5225 services organization and include, but not be limited to, (1) a review of
5226 the medical and prescription history of recipients of benefits under the
5227 Medicaid program, and (2) the development of patient medication
5228 action plans to reduce adverse medication interaction and related
5229 health problems.

5230 Sec. 112. Section 17b-276c of the general statutes is repealed and the
5231 following is substituted in lieu thereof (*Effective July 1, 2013*):

5232 **[**(a)**]** The Commissioner of Social Services shall only authorize
5233 payment for the mode of transportation service that is medically
5234 necessary for a recipient of assistance under a medical assistance
5235 program administered by the Department of Social Services.
5236 **[**Notwithstanding the provisions of this chapter and chapter 368d, a
5237 recipient who requires nonemergency transportation and must be
5238 transported in a prone position but who does not require medical
5239 services during transport may be transported in a stretcher van. The
5240 commissioner shall establish rates for nonemergency transportation
5241 provided by stretcher van.

5242 (b) Notwithstanding the provisions of chapter 368d, the
5243 Commissioner of Transportation, in consultation with the
5244 Commissioner of Public Health, shall adopt regulations, in accordance
5245 with chapter 54, to establish oversight of stretcher vans as a livery
5246 service for which a permit is required. Such regulations shall prescribe
5247 safety standards for stretcher vans, including, but not limited to, a
5248 requirement that an attendant, in addition to the driver, accompany
5249 any person transported in a stretcher van.**]**

5250 Sec. 113. Subsection (b) of section 17b-359 of the general statutes is
5251 repealed and the following is substituted in lieu thereof (*Effective from*
5252 *passage*):

5253 (b) No nursing facility shall admit any person, irrespective of source
5254 of payment, who has not undergone a preadmission screening process
5255 by which the Department of Mental Health and Addiction Services
5256 determines, based upon an independent physical and mental
5257 evaluation performed by or under the auspices of the Department of
5258 Social Services, whether the person is mentally ill and, if so, whether
5259 such person requires the level of services provided by a nursing
5260 facility and, if such person is mentally ill and does require such level of
5261 services, whether the person requires specialized services. A person
5262 who is determined to be mentally ill and not to require nursing facility
5263 level services shall not be admitted to a nursing facility. In order to

5264 implement the preadmission review requirements of this section and
5265 to identify applicants for admission who may be mentally ill and
5266 subject to the requirements of this section, nursing facilities may not
5267 admit any person, irrespective of source of payment, unless an
5268 identification screen developed, or in the case of out-of-state residents
5269 approved, by the Department of Social Services has been completed
5270 and filed in accordance with federal law. The Commissioner of Social
5271 Services may require a nursing facility to notify, within one business
5272 day, the Department of Social Services of the admission of a person
5273 who is mentally ill and meets the admission requirements of this
5274 subsection.

5275 Sec. 114. Subsection (b) of section 17b-263c of the general statutes is
5276 repealed and the following is substituted in lieu thereof (*Effective July*
5277 *1, 2013*):

5278 (b) The commissioner may implement policies and procedures
5279 necessary to (1) establish medical homes as provided for in subsection
5280 (a) of this section, and (2) pursue optional initiatives or policies
5281 authorized pursuant to the Patient Protection and Affordable Care Act,
5282 P.L. 111-148, and the Health Care and Education Reconciliation Act of
5283 2010, **[**relating**]** including, but not limited, to: (A) Coverage of family
5284 planning services; (B) the establishment of a temporary high risk pool
5285 for individuals with preexisting conditions; (C) the establishment of an
5286 incentive program for the prevention of chronic diseases; (D) the
5287 provision of health homes to medical assistance beneficiaries with
5288 chronic conditions; (E) the establishment of Medicaid payments to
5289 institutions for mental disease demonstration project; (F) the
5290 establishment of a dual eligible demonstration program; (G) the
5291 establishment of a balancing incentive payment program for home and
5292 community-based services; (H) the establishment of a "Community
5293 First Choice Option"; (I) the establishment of a demonstration project
5294 to make bundled payments to hospitals; **[**and**]** (J) the establishment of a
5295 demonstration project to allow pediatric medical providers to organize
5296 as accountable care organizations; (K) implementation of modified

5297 adjusted gross income eligibility rules; and (L) coordination of an
5298 integrated eligibility system with the Connecticut Health Insurance
5299 Exchange while in the process of adopting such policies and
5300 procedures in regulation form, provided the commissioner prints
5301 notice of the intention to adopt the regulations in the Connecticut Law
5302 Journal not later than twenty days after the date of implementation of
5303 such policies and procedures. Such policies and procedures shall
5304 remain valid for three years following the date of publication in the
5305 Connecticut Law Journal unless otherwise provided for by the General
5306 Assembly. Notwithstanding the time frames established in subsection
5307 (c) of section 17b-10, the commissioner shall submit such policies and
5308 procedures in proposed regulation form to the legislative regulation
5309 review committee not later than three years following the date of
5310 publication of its intent to adopt regulations as provided for in this
5311 subsection. In the event that the commissioner is unable to submit
5312 proposed regulations prior to the expiration of the three-year time
5313 period as provided for in this subsection, the commissioner shall
5314 submit written notice, not later than thirty-five days prior to the date
5315 of expiration of such time period, to the legislative regulation review
5316 committee and the joint standing committees of the General Assembly
5317 having cognizance of matters relating to human services and
5318 appropriations and the budgets of state agencies indicating that the
5319 department will not be able to submit the proposed regulations on or
5320 before such date and shall include in such notice (i) the reasons why
5321 the department will not submit the proposed regulations by such date,
5322 and (ii) the date by which the department will submit the proposed
5323 regulations. The legislative regulation review committee may require
5324 the department to appear before the committee at a time prescribed by
5325 the committee to further explain such reasons and to respond to any
5326 questions by the committee about the policy. The legislative regulation
5327 review committee may request the joint standing committee of the
5328 General Assembly having cognizance of matters relating to human
5329 services to review the department's policy, the department's reasons
5330 for not submitting the proposed regulations by the date specified in

5331 this section and the date by which the department will submit the
5332 proposed regulations. Said joint standing committee may review the
5333 policy, such reasons and such date, may schedule a hearing thereon
5334 and may make a recommendation to the legislative regulation review
5335 committee.

5336 Sec. 115. (NEW) (*Effective July 1, 2013*) Not later than October 1,
5337 2013, the Department of Correction may initiate, with support from the
5338 Departments of Mental Health and Addiction Services and Public
5339 Health, a pilot treatment program for methadone maintenance and
5340 other drug therapies at facilities including, but not limited to, the New
5341 Haven Community Correctional Center. The pilot program shall be for
5342 eighteen months and shall serve sixty to eighty inmates per month.
5343 The Department of Public Health may waive public health code
5344 regulations that are not applicable to the service model of the pilot
5345 program. Not later than October 1, 2014, and April 1, 2015, the
5346 Department of Correction shall report on the results of the program to
5347 the joint standing committee of the General Assembly having
5348 cognizance of matters relating to human services, the judiciary, and
5349 appropriations and the budgets of state agencies.

5350 Sec. 116. (*Effective January 1, 2014*) Contingent upon federal
5351 approval, the Secretary of the Office of Policy and Management shall
5352 determine the amount of revenue that will be diverted for the
5353 purposes of maximizing supplemental payments for inpatient hospital
5354 services provided by the state's acute care hospitals under Medicaid
5355 for the fiscal years ending June 30, 2014, and June 30, 2015.

5356 Sec. 117. Subsection (a) of section 17b-239c of the general statutes is
5357 repealed and the following is substituted in lieu thereof (*Effective July*
5358 *1, 2013*):

5359 (a) Notwithstanding any provision of the general statutes, on and
5360 after July 1, 2011, the Department of Social Services may, within
5361 available appropriations, make interim **[**monthly**]** <u>quarterly</u> medical

5362 assistance disproportionate share payments to short-term general
5363 hospitals. The total amount of interim payments made to such
5364 hospitals individually and in the aggregate shall maximize federal
5365 matching payments under the medical assistance program as
5366 determined by the Department of Social Services, in consultation with
5367 the Office of Policy and Management. No payments shall be made
5368 under this section to (1) any hospital which, on July 1, 2011, is within
5369 the class of hospitals licensed by the Department of Public Health as a
5370 children's general hospital, or (2) a short-term acute hospital operated
5371 exclusively by the state other than a short-term acute hospital operated
5372 by the state as a receiver pursuant to chapter 920. The **[**monthly**]**
5373 quarterly interim payment amount for each hospital shall be
5374 determined by the Commissioner of Social Services based upon the
5375 information submitted by the hospital pursuant to Section 1001(d) of
5376 Public Law 108-173, the Medicare Prescription Drug, Improvement,
5377 and Modernization Act of 2003.

5378 Sec. 118. Subsection (a) of section 17b-340c of the general statutes is
5379 repealed and the following is substituted in lieu thereof (*Effective from*
5380 *passage*):

5381 (a) The Commissioner of Social Services may, upon the request of a
5382 nursing facility providing services eligible for payment under the
5383 medical assistance program, **[**and after consultation with the Secretary
5384 of the Office of Policy and Management,**]** make a payment to such
5385 nursing facility in advance of normal bill payment processing. Except
5386 as provided in subsection (b) of this section, (1) such advance shall not
5387 exceed estimated amounts due to such nursing facility for services
5388 provided to eligible recipients over the most recent two-month period,
5389 and (2) the commissioner shall recover such payment through
5390 reductions to payments due to such nursing facility or cash receipt not
5391 later than ninety days after issuance of such payment. The
5392 commissioner shall take prudent measures to assure that such advance
5393 payments are not provided to any nursing facility that is at risk of
5394 bankruptcy or insolvency, and may execute agreements appropriate

5395 for the security of repayment.

5396 Sec. 119. Subsection (a) of section 17a-22h of the general statutes, as
5397 amended by section 106 of this act, is repealed and the following is
5398 substituted in lieu thereof (*Effective January 1, 2014*):

5399 (a) The Commissioners of Social Services, Children and Families,
5400 and Mental Health and Addiction Services shall develop and
5401 implement an integrated behavioral health service system for
5402 Medicaid and HUSKY Plan Part B members and children enrolled in
5403 the voluntary services program operated by the Department of
5404 Children and Families and may, at the discretion of the commissioners,
5405 include **[**: (1) Other**]** other children, adolescents and families served by
5406 the Department of Children and Families or the Court Support
5407 Services Division of the Judicial Branch. **[**; and (2) Charter Oak Health
5408 Plan members.**]** The integrated behavioral health service system shall
5409 be known as the Behavioral Health Partnership. The Behavioral Health
5410 Partnership shall seek to increase access to quality behavioral health
5411 services by: **[**(A)**]** (1) Expanding individualized, family-centered and
5412 community-based services; **[**(B)**]** (2) maximizing federal revenue to
5413 fund behavioral health services; **[**(C)**]** (3) reducing unnecessary use of
5414 institutional and residential services for children and adults; **[**(D)**]** (4)
5415 capturing and investing enhanced federal revenue and savings derived
5416 from reduced residential services and increased community-based
5417 services for HUSKY Plan Parts A and B recipients; **[**(E)**]** (5) improving
5418 administrative oversight and efficiencies; and **[**(F)**]** (6) monitoring
5419 individual outcomes and provider performance, taking into
5420 consideration the acuity of the patients served by each provider, and
5421 overall program performance.

5422 Sec. 120. Subdivision (11) of subsection (b) of section 17a-22j of the
5423 general statutes is repealed and the following is substituted in lieu
5424 thereof (*Effective January 1, 2014*):

5425 (11) One representative from each administrative services

5426 organization under contract with the Department of Social Services to
5427 provide such services for recipients of assistance under Medicaid **[**,**]**
5428 and HUSKY Plan, **[**Part A and Part B and the Charter Oak Health
5429 Plan,**]** Part B to be nonvoting ex-officio members.

5430 Sec. 121. Subdivision (7) of subsection (b) of section 8 of substitute
5431 senate bill 972 of the current session, as amended by senate
5432 amendment schedule A, is repealed and the following is substituted in
5433 lieu thereof (*Effective July 1, 2013*):

5434 (7) A complementary and alternative medicine or integrative
5435 therapy expert specializing in the treatment of physical, mental,
5436 emotional and behavioral health issues in children, appointed by the
5437 **[**House chairperson of the joint standing committee of the General
5438 Assembly having cognizance of matters relating to children**]** majority
5439 leader of the House of Representatives;

5440 Sec. 122. Section 17b-370 of the general statutes is amended by
5441 adding subsection (e) as follows. *(Effective July 1, 2013)*:

5442 (NEW) (e) The Commissioner of Social Services may implement
5443 policies and procedures necessary to carry out the provisions of this
5444 section while in the process of adopting such policies and procedures
5445 as regulations, provided notice of intent to adopt the regulations is
5446 published in the Connecticut Law Journal not later than twenty days
5447 after the date of implementation.

5448 Sec. 123. (NEW) (*Effective July 1, 2013*) (a) For purposes of this
5449 section, (1) "Healthy Start" means a service delivery program for
5450 pregnant women with incomes up to two hundred fifty per cent of the
5451 federal poverty level which promotes and supports positive maternal
5452 and neonatal health outcomes; (2) "core Healthy Start services" are (A)
5453 a comprehensive medical and psycho-social risk assessment, (B) the
5454 development of a care plan, and (C) the delivery of care coordination,
5455 including, but not limited to, health education and case management
5456 services; and (3) "venues" means locations that include, but are not

5457 limited to, health departments, hospital clinics and federally qualified
5458 health centers.

5459 (b) The Commissioner of Social Services, acting in consultation with
5460 the Commissioner of Public Health, shall develop a plan to maximize
5461 federal Medicaid reimbursements for Healthy Start in Connecticut to
5462 the extent permissible under federal law and expand services within
5463 available state appropriations. Such plan shall include, but not be
5464 limited to: (1) A venue-based payment and billing system under which
5465 core Healthy Start services provided by nonlicensed staff working with
5466 a licensed Medicaid provider are reimbursed through Medicaid, and
5467 (2) a funding allocation formula that ensures that eligible women
5468 throughout the state have access to core Healthy Start services.

5469 (c) On or before October 1, 2013, and October 1, 2014, the
5470 Commissioners of Social Services and Public Health, within available
5471 appropriations, shall review the effectiveness of the state-funded
5472 Healthy Start program. Such evaluation shall determine (1) whether
5473 the program should continue to be administered through the
5474 Department of Social Services, and (2) whether and how the program
5475 should be expanded to other underserved communities in the state.
5476 The commissioners shall report the results of such studies to the joint
5477 standing committees of the General Assembly having cognizance of
5478 matters relating to human services, public health, and appropriations
5479 and the budgets of state agencies.

5480 Sec. 124. (NEW) (*Effective July 1, 2013*) (a) The Department of
5481 Children and Families, in consultation with the Department of
5482 Education, shall establish the Raise the Grade pilot program, to be
5483 implemented in the cities of Hartford, Bridgeport and New Haven for
5484 a two-year period beginning July 1, 2013, to increase the academic
5485 achievement of children and youth who live in the custody of the
5486 Department of Children and Families or who are being served by the
5487 Court Support Services Division in said cities.

5488 (b) The program shall use full-time coordinators to (1) assist with
5489 the identification of children or youth who are performing below
5490 grade level and are (A) in state custody, or (B) under juvenile justice
5491 supervision, and (2) develop plans, in collaboration with the child's or
5492 youth's legal guardian, educational surrogate or advocate, to improve
5493 the child's academic performance. Coordinators shall help facilitate the
5494 prompt transfer and review of educational records and report to the
5495 Department of Children and Families and the educational surrogate
5496 critical educational information, including, but not limited to, (i)
5497 progress monitoring, (ii) absenteeism, and (iii) discipline. Coordinators
5498 shall also help to support educational stability for children as
5499 described in section 17a-16a of the general statutes.

5500 (c) Upon the conclusion of the pilot program, the Department of
5501 Children and Families, in coordination with the Court Support
5502 Services Division and the State Department of Education, shall report
5503 to the achievement gap task force the number and educational profile
5504 of children served by the program and the impact on their educational
5505 performance, including on (1) achievement, (2) absenteeism, and (3)
5506 adverse disciplinary measures.

5507 Sec. 125. (NEW) (*Effective July 1, 2013*) (a) The Departments of
5508 Education and Children and Families shall be required to annually
5509 track the academic progress of each child and youth in state custody,
5510 from prekindergartners through those in twelfth grade, and submit a
5511 report on such progress to the achievement gap task force established
5512 pursuant to section 10-16mm of the general statutes. The Court
5513 Support Services Division, in collaboration with the State Department
5514 of Education, shall create an annual aggregate report on the academic
5515 progress of youth in its custody.

5516 (b) For each child or youth who is in state custody pursuant to
5517 sections 17a-101 and 46b-129 of the general statutes, the Department of
5518 Children and Families shall include a description of the child's
5519 educational status and academic progress in his or her case plan, as

5520 defined in section 17a-15 of the general statutes. Such description shall
5521 include information regarding the child's current levels of educational
5522 performance, including absenteeism and grade level performance, and
5523 what supports or services will or are being provided to improve
5524 academic performance. For children and youth who are committed to
5525 Department of Children and Families' custody pursuant to section 46b-
5526 129 of the general statutes, the educational status information shall be
5527 included in reports to the Juvenile Court and shall be reviewed by the
5528 court when decisions are made regarding the child's well-being in care.

5529 (c) Each youth who is in a secure facility run or contracted for by the
5530 Court Support Services Division shall have a case plan that describes
5531 the youth's educational needs and grade-level performance and
5532 identifies what supports or services will or are being provided to
5533 support academic performance.

5534 (d) The Department of Children and Families and Court Support
5535 Services Division shall develop a plan to ensure that all facilities and
5536 school programs run or contracted by the department and the division
5537 are able to meet the academic and related service needs of enrolled
5538 children and youth. The plan shall ensure the ability to provide for (1)
5539 the development of effective practices for acquiring and reviewing
5540 students' educational records, including assessment of enrolled youth's
5541 present levels of academic performance; (2) the youth's identified
5542 educational and related service needs; (3) appropriate and ongoing
5543 professional development on providing educational and related
5544 services to abused, neglected and juvenile justice-involved youth; (4)
5545 research-based instruction and standards-based core curriculum for all
5546 enrolled youth; and (5) administrative review of all programs run or
5547 contracted for by the department or division. Such plan shall be
5548 finalized by July 1, 2014, and submitted to the achievement gap task
5549 force established pursuant to section 10-16mm of the general statutes.

5550 Sec. 126. Subsection (a) of section 17b-349 of the general statutes is
5551 repealed and the following is substituted in lieu thereof *(Effective July*

5552 *1, 2013)*:

5553 (a) The rates paid by the state to community health centers and free-
5554 standing medical clinics participating in the Medicaid program may be
5555 adjusted annually on the basis of the cost reports submitted to the
5556 Commissioner of Social Services, except that rates effective July 1, 1989,
5557 shall remain in effect through June 30, 1990. The Department of Social
5558 Services shall distribute funding, within available appropriations, to
5559 federally qualified health centers based on cost reports submitted to
5560 the Commissioner of Social Services, until an alternative payment
5561 methodology is approved by the joint standing committees of the
5562 General Assembly having cognizance of matters relating to human
5563 services and appropriations and the budgets of state agencies. (1)
5564 Beginning with the one-year rate period commencing on October 1,
5565 2012, and annually thereafter, the Commissioner of Social Services may
5566 add to a community health center's rates, if applicable, a capital cost
5567 rate adjustment that is equivalent to the center's actual or projected
5568 year-to-year increase in total allowable depreciation and interest
5569 expenses associated with major capital projects divided by the
5570 projected service visit volume. For the purposes of this subsection,
5571 "capital costs" means expenditures for land or building purchases,
5572 fixed assets, movable equipment, capitalized financing fees and
5573 capitalized construction period interest and "major capital projects"
5574 means projects with costs exceeding two million dollars. The
5575 commissioner may revise such capital cost rate adjustment
5576 retroactively based on actual allowable depreciation and interest
5577 expenses or actual service visit volume for the rate period. (2) The
5578 commissioner shall establish separate capital cost rate adjustments for
5579 each Medicaid service provided by a center. (3) The commissioner
5580 shall not grant a capital cost rate adjustment to a community health
5581 center for any depreciation or interest expenses associated with capital
5582 costs that were disapproved by the federal Department of Health and
5583 Human Services or another federal or state government agency with
5584 capital expenditure approval authority related to health care services.

5585 (4) The commissioner may allow actual debt service in lieu of
5586 allowable depreciation and interest expenses associated with capital
5587 items funded with a debt obligation, provided debt service amounts
5588 are deemed reasonable in consideration of the interest rate and other
5589 loan terms. (5) The commissioner shall implement policies and
5590 procedures necessary to carry out the provisions of this subsection
5591 while in the process of adopting such policies and procedures in
5592 regulation form, provided notice of intent to adopt such regulations is
5593 published in the Connecticut Law Journal not later than twenty days
5594 after implementation. Such policies and procedures shall be valid until
5595 the time final regulations are effective.

5596 Sec. 127. (NEW) (*Effective July 1, 2013*) (a) The Commissioner of
5597 Social Services may establish a step therapy program for prescription
5598 drugs in the Medicaid program. The commissioner may condition
5599 payment for such drugs on a requirement that the drug prescribed be
5600 from the preferred drug list established pursuant to section 17b-274d
5601 of the general statutes prior to any other drug being prescribed,
5602 provided any step therapy program shall: (1) Require that the patient
5603 try and fail on only one prescribed drug on the preferred drug list
5604 before another drug can be prescribed and eligible for payment; (2) not
5605 apply to any mental health–related drugs; and (3) require that the
5606 prescribing practitioner, when medications for the treatment of any
5607 medical condition are restricted due to the step therapy program, has
5608 access to a clear and convenient process to expeditiously request an
5609 override of such restriction from the Department of Social Services.
5610 The department shall expeditiously grant an override of such
5611 restriction whenever the prescribing practitioner demonstrates that:
5612 (A) The preferred treatment required under step therapy has been
5613 ineffective in the treatment of the patient's medical condition in the
5614 past; (B) the drug regimen required under the step therapy program is
5615 expected to be ineffective based on the known relevant physical or
5616 mental characteristics of the patient and the known characteristics of
5617 the drug regimen; (C) the preferred treatment required under the step

5618 therapy program will cause or will likely cause an adverse reaction or
5619 other physical harm to the patient; or (D) it is in the best interest of the
5620 patient to provide the recommended drug regimen based on medical
5621 necessity.

5622 (b) The duration of any step therapy program requirement shall not
5623 be longer than a period of thirty days, after which time the prescribing
5624 practitioner may deem such treatment as clinically ineffective for the
5625 patient. When the prescribing practitioner deems the treatment to be
5626 clinically ineffective, the drug prescribed and recommended by the
5627 practitioner shall be dispensed and covered under the Medicaid
5628 program.

5629 Sec. 128. Section 17b-261 of the general statutes is repealed and the
5630 following is substituted in lieu thereof (*Effective October 1, 2013*):

5631 (a) Medical assistance shall be provided for any otherwise eligible
5632 person whose income, including any available support from legally
5633 liable relatives and the income of the person's spouse or dependent
5634 child, is not more than one hundred forty-three per cent, pending
5635 approval of a federal waiver applied for pursuant to subsection (e) of
5636 this section, of the benefit amount paid to a person with no income
5637 under the temporary family assistance program in the appropriate
5638 region of residence and if such person is an institutionalized
5639 individual as defined in Section **[**1917(c)**]** 1917 of the Social Security
5640 Act, 42 USC **[**1396p(c)**]** 1396p(h)(3), and has not made an assignment or
5641 transfer or other disposition of property for less than fair market value
5642 for the purpose of establishing eligibility for benefits or assistance
5643 under this section. Any such disposition shall be treated in accordance
5644 with Section 1917(c) of the Social Security Act, 42 USC 1396p(c). Any
5645 disposition of property made on behalf of an applicant or recipient or
5646 the spouse of an applicant or recipient by a guardian, conservator,
5647 person authorized to make such disposition pursuant to a power of
5648 attorney or other person so authorized by law shall be attributed to
5649 such applicant, recipient or spouse. A disposition of property ordered

5650 by a court shall be evaluated in accordance with the standards applied
5651 to any other such disposition for the purpose of determining eligibility.
5652 The commissioner shall establish the standards for eligibility for
5653 medical assistance at one hundred forty-three per cent of the benefit
5654 amount paid to a family unit of equal size with no income under the
5655 temporary family assistance program in the appropriate region of
5656 residence. In determining eligibility, the commissioner shall not
5657 consider as income Aid and Attendance pension benefits granted to a
5658 veteran, as defined in section 27-103, or the surviving spouse of such
5659 veteran. Except as provided in section 17b-277, the medical assistance
5660 program shall provide coverage to persons under the age of nineteen
5661 with family income up to one hundred eighty-five per cent of the
5662 federal poverty level without an asset limit and to persons under the
5663 age of nineteen and their parents and needy caretaker relatives, who
5664 qualify for coverage under Section 1931 of the Social Security Act, with
5665 family income up to one hundred eighty-five per cent of the federal
5666 poverty level without an asset limit. Such levels shall be based on the
5667 regional differences in such benefit amount, if applicable, unless such
5668 levels based on regional differences are not in conformance with
5669 federal law. Any income in excess of the applicable amounts shall be
5670 applied as may be required by said federal law, and assistance shall be
5671 granted for the balance of the cost of authorized medical assistance.
5672 The Commissioner of Social Services shall provide applicants for
5673 assistance under this section, at the time of application, with a written
5674 statement advising them of (1) the effect of an assignment or transfer
5675 or other disposition of property on eligibility for benefits or assistance,
5676 (2) the effect that having income that exceeds the limits prescribed in
5677 this subsection will have with respect to program eligibility, and (3)
5678 the availability of, and eligibility for, services provided by the
5679 Nurturing Families Network established pursuant to section 17b-751b.
5680 Persons who are determined ineligible for assistance pursuant to this
5681 section shall be provided a written statement notifying such persons of
5682 their ineligibility and advising such persons of the availability of
5683 HUSKY Plan, Part B health insurance benefits.

5684 (b) For the purposes of the Medicaid program, the Commissioner of
5685 Social Services shall consider parental income and resources as
5686 available to a child under eighteen years of age who is living with his
5687 or her parents and is blind or disabled for purposes of the Medicaid
5688 program, or to any other child under twenty-one years of age who is
5689 living with his or her parents.

5690 (c) For the purposes of determining eligibility for the Medicaid
5691 program, an available asset is one that is actually available to the
5692 applicant or one that the applicant has the legal right, authority or
5693 power to obtain or to have applied for the applicant's general or
5694 medical support. If the terms of a trust provide for the support of an
5695 applicant, the refusal of a trustee to make a distribution from the trust
5696 does not render the trust an unavailable asset. Notwithstanding the
5697 provisions of this subsection, the availability of funds in a trust or
5698 similar instrument funded in whole or in part by the applicant or the
5699 applicant's spouse shall be determined pursuant to the Omnibus
5700 Budget Reconciliation Act of 1993, 42 USC 1396p. The provisions of
5701 this subsection shall not apply to a special needs trust, as defined in 42
5702 USC 1396p(d)(4)(A). For purposes of determining whether a
5703 beneficiary under a special needs trust, who has not received a
5704 disability determination from the Social Security Administration, is
5705 disabled, as defined in 42 USC 1382c(a)(3), the Commissioner of Social
5706 Services, or the commissioner's designee, shall independently make
5707 such determination. The commissioner shall not require such
5708 beneficiary to apply for Social Security disability benefits or obtain a
5709 disability determination from the Social Security Administration for
5710 purposes of determining whether the beneficiary is disabled.

5711 (d) The transfer of an asset in exchange for other valuable
5712 consideration shall be allowable to the extent the value of the other
5713 valuable consideration is equal to or greater than the value of the asset
5714 transferred.

5715 (e) The Commissioner of Social Services shall seek a waiver from

5716 federal law to permit federal financial participation for Medicaid
5717 expenditures for families with incomes of one hundred forty-three per
5718 cent of the temporary family assistance program payment standard.

5719 (f) To the extent permitted by federal law, Medicaid eligibility shall
5720 be extended for one year to a family that becomes ineligible for
5721 medical assistance under Section 1931 of the Social Security Act due to
5722 income from employment by one of its members who is a caretaker
5723 relative or due to receipt of child support income. A family receiving
5724 extended benefits on July 1, 2005, shall receive the balance of such
5725 extended benefits, provided no such family shall receive more than
5726 twelve additional months of such benefits.

5727 (g) An institutionalized spouse applying for Medicaid and having a
5728 spouse living in the community shall be required, to the maximum
5729 extent permitted by law, to divert income to such community spouse
5730 in order to raise the community spouse's income to the level of the
5731 minimum monthly needs allowance, as described in Section 1924 of
5732 the Social Security Act. Such diversion of income shall occur before the
5733 community spouse is allowed to retain assets in excess of the
5734 community spouse protected amount described in Section 1924 of the
5735 Social Security Act. The Commissioner of Social Services, pursuant to
5736 section 17b-10, may implement the provisions of this subsection while
5737 in the process of adopting regulations, provided the commissioner
5738 prints notice of intent to adopt the regulations in the Connecticut Law
5739 Journal within twenty days of adopting such policy. Such policy shall
5740 be valid until the time final regulations are effective.

5741 (h) To the extent permissible under federal law, an institutionalized
5742 individual, as defined in Section 1917 of the Social Security Act, 42
5743 USC 1396p(h)(3), shall not be determined ineligible for Medicaid solely
5744 on the basis of the cash value of a life insurance policy worth less than
5745 ten thousand dollars provided (1) the individual is pursuing the
5746 surrender of the policy, and (2) upon surrendering such policy all
5747 proceeds of the policy are used to pay for the institutionalized

5748 individual's long-term care.

5749 [(h)] (i) Medical assistance shall be provided, in accordance with the
5750 provisions of subsection (e) of section 17a-6, to any child under the
5751 supervision of the Commissioner of Children and Families who is not
5752 receiving Medicaid benefits, has not yet qualified for Medicaid benefits
5753 or is otherwise ineligible for such benefits. Medical assistance shall also
5754 be provided to any child in the voluntary services program operated
5755 by the Department of Developmental Services who is not receiving
5756 Medicaid benefits, has not yet qualified for Medicaid benefits or is
5757 otherwise ineligible for benefits. To the extent practicable, the
5758 Commissioner of Children and Families and the Commissioner of
5759 Developmental Services shall apply for, or assist such child in
5760 qualifying for, the Medicaid program.

5761 [(i)] (j) The Commissioner of Social Services shall provide Early and
5762 Periodic Screening, Diagnostic and Treatment program services, as
5763 required and defined as of December 31, 2005, by 42 USC 1396a(a)(43),
5764 42 USC 1396d(r) and 42 USC 1396d(a)(4)(B) and applicable federal
5765 regulations, to all persons who are under the age of twenty-one and
5766 otherwise eligible for medical assistance under this section.

5767 [(j)] (k) A veteran, as defined in section 27-103, and any member of
5768 his or her family, who applies for or receives assistance under the
5769 Medicaid program, shall apply for all benefits for which he or she may
5770 be eligible through the Veterans' Administration or the United States
5771 Department of Defense.

5772 Sec. 129. (NEW) (*Effective October 1, 2013*) (a) For purposes of this
5773 section and sections 130 and 131 of this act, (1) "nursing home facility"
5774 means a chronic and convalescent nursing home and a rest home with
5775 nursing supervision, and (2) "penalty period" means the period of
5776 Medicaid ineligibility imposed pursuant to 42 USC 1396p(c), as
5777 amended from time to time, on a person whose assets have been
5778 transferred for less than fair market value for the purposes of obtaining

5779 or maintaining Medicaid eligibility.

5780 (b) Any transfer or assignment of assets resulting in the
5781 establishment or imposition of a penalty period shall create a debt, as
5782 defined in section 36a-645 of the general statutes, that shall be due and
5783 owing to a nursing home facility for the unpaid cost of care provided
5784 during the penalty period to a nursing home facility resident who has
5785 been subject to the penalty period. The amount of the debt established
5786 shall not exceed the fair market value of the transferred assets at the
5787 time of transfer that are the subject of the penalty period.

5788 (c) The provisions of this section shall not affect other rights or
5789 remedies of the parties. A nursing home facility may bring an action to
5790 collect a debt for unpaid care given to a resident who has been subject
5791 to a penalty period, provided (1) the debt recovery does not exceed the
5792 fair market value of the transferred asset at the time of transfer, and (2)
5793 the asset transfer that triggered the penalty period took place not
5794 earlier than two years prior to the date of the resident's Medicaid
5795 application. The nursing home facility may bring such action against
5796 (A) the transferor, or (B) the transferee.

5797 (d) In actions brought under subsection (c) of this section, a court of
5798 competent jurisdiction may award actual damages, court costs and
5799 reasonable attorneys' fees to a nursing home facility if such court
5800 determines, based upon clear and convincing evidence, that a
5801 defendant incurred a debt to a nursing home facility by (1) wilfully
5802 transferring assets that are the subject of a penalty period, (2) receiving
5803 such assets with knowledge of such purpose, or (3) making a material
5804 misrepresentation or omission concerning such assets. Court costs and
5805 reasonable attorneys' fees shall be awarded as a matter of law to a
5806 defendant who successfully defends an action or a counterclaim
5807 brought pursuant to this section. Any court, including a probate court
5808 acting under subdivision (3) of subsection (a) of section 45a-98 of the
5809 general statutes or section 45a-364 of the general statutes, may also
5810 order that such assets or proceeds from the transfer of such assets be

5811 held in constructive trust to satisfy such debt.

5812 (e) The provisions of this section shall not apply to a conservator
5813 who transfers income or principal with the approval of the Probate
5814 Court under subsection (d) or (e) of section 45a-655 of the general
5815 statutes.

5816 Sec. 130. (NEW) (*Effective October 1, 2013*) (a) For purposes of this
5817 section, "applied income" means the income of a recipient of medical
5818 assistance, pursuant to section 17b-261 of the general statutes, as
5819 amended by this act, that is required, after the exhaustion of all
5820 appeals and in accordance with state and federal law, to be paid to a
5821 nursing home facility for the cost of care and services.

5822 (b) In determining the amount of applied income, the Department of
5823 Social Services shall take into consideration any modification to the
5824 applied income due to revisions in a medical assistance recipient's
5825 community spouse minimum monthly needs allowance, as described
5826 in Section 1924 of the Social Security Act, and any other modification
5827 to applied income allowed by state or federal law.

5828 (c) A nursing home facility shall provide written notice to a
5829 recipient of medical assistance and any person authorized under law
5830 to be in control of such recipient's applied income (1) of the amount of
5831 applied income due pursuant to subsections (a) and (b) of this section,
5832 (2) of the recipient's legal obligation to pay such applied income to the
5833 nursing home facility, and (3) that the recipient's failure to pay applied
5834 income due to a nursing home facility not later than ninety days after
5835 receiving such notice from the nursing home facility may result in a
5836 civil action in accordance with this section.

5837 (d) Pursuant to the notice provisions of subsections (c) and (f) of this
5838 section, a nursing home facility that is owed applied income may, in
5839 addition to all other remedies authorized under statutory and common
5840 law, bring a civil action to recover the applied income, provided the
5841 nursing home facility shall not commence such action against a

5842 recipient of medical assistance who has asserted that the applied
5843 income is needed to increase the minimum monthly needs allowance
5844 of the recipient's community spouse, pursuant to 42 USC 1396r-
5845 5(e)(2)(B). In such case, the nursing home facility may not commence
5846 such action until the recipient, the recipient's community spouse or the
5847 legal representative of either has exhausted their appeal rights before
5848 the Department of Social Services and in court. A nursing home facility
5849 may bring such action against (1) a medical assistance recipient who
5850 owes the applied income, or (2) a person with legal access to such
5851 recipient's applied income who acted with the intent to (A) deprive
5852 such recipient of the applied income, or (B) appropriate the applied
5853 income for himself, herself or a third person.

5854 (e) If a court of competent jurisdiction determines, based upon clear
5855 and convincing evidence, that a defendant wilfully failed to pay or
5856 withheld applied income due and owing to a nursing home facility for
5857 more than ninety days after receiving notice pursuant to subsection (c)
5858 of this section, the court may award the amount of the debt owed,
5859 court costs and reasonable attorneys' fees to the nursing home facility.
5860 Court costs and reasonable attorneys' fees shall be awarded as a matter
5861 of law to a defendant who successfully defends an action or a
5862 counterclaim brought pursuant to this section. The provisions of this
5863 section shall not apply to a conservator who transfers income or
5864 principal with the approval of the Probate Court under subsection (d)
5865 or (e) of section 45a-655 of the general statutes.

5866 (f) A nursing home facility shall not file any action under this
5867 section until (1) thirty days after it has given written notice of such
5868 action to any person who received notice pursuant to subsection (c) of
5869 this section, or (2) ninety-one days after it has given written notice of
5870 such action and the information required by subsection (c) of this
5871 section to any person who has not received notice pursuant to
5872 subsection (c) of this section.

5873 Sec. 131. (NEW) (*Effective October 1, 2013*) Upon commencement of

5874 any action brought under section 129 or 130 of this act, a nursing home
5875 facility shall mail a copy of the complaint to the Attorney General and
5876 the Commissioner of Social Services and, upon entry of any judgment
5877 or decree in the action, shall mail a copy of such judgment or decree to
5878 the Attorney General and the Commissioner of Social Services.

5879 Sec. 132. (NEW) (*Effective October 1, 2013*) As used in this section and
5880 sections 133 to 137, inclusive, of this act and subsection (c) of section
5881 19a-14 of the general statutes, as amended by this act:

5882 (1) "Commissioner" means the Commissioner of Public Health.

5883 (2) "Department" means the Department of Public Health.

5884 (3) "Tattooing" means marking or coloring, in an indelible manner,
5885 the skin of any person by pricking in coloring matter or by producing
5886 scars.

5887 (4) "Tattoo technician" means a person who is licensed under the
5888 provisions of section 133 of this act.

5889 (5) "Student tattoo technician" means a person studying tattooing
5890 who is registered with the department pursuant to section 133 of this
5891 act.

5892 Sec. 133. (NEW) (*Effective October 1, 2013*) (a) On and after July 1,
5893 2014, no person shall engage in the practice of tattooing unless the
5894 person is eighteen years of age or older and has obtained a license or
5895 temporary permit from the Department of Public Health pursuant to
5896 this section.

5897 (b) (1) Each person seeking licensure as a tattoo technician on or
5898 before July 1, 2014, shall make application on a form prescribed by the
5899 department, pay an application fee of two hundred fifty dollars and
5900 present to the department satisfactory evidence that the applicant: (A)
5901 Is eighteen years of age or older; (B) has successfully completed, within
5902 the three years preceding the date of application, a course on

5903 prevention of disease transmission and blood-borne pathogens that
5904 complies with the standards adopted by the federal Occupational
5905 Safety and Health Administration, as described in 29 CFR 1910.1030 et
5906 seq., as amended from time to time, and that requires the successful
5907 completion of a proficiency examination as part of such course; and (C)
5908 holds current certification by the American Red Cross or the American
5909 Heart Association in basic first aid.

5910 (2) Each person seeking licensure as a tattoo technician after July 1,
5911 2014, shall, in addition to satisfying the requirements of subdivision (1)
5912 of this subsection, provide documentation to the department, in the
5913 form and manner required by the commissioner, of having (A)
5914 completed not less than two thousand hours of practical training and
5915 experience under the personal supervision and instruction of a tattoo
5916 technician, or (B) practiced tattooing continuously in this state for a
5917 period of not less than five years prior to July 1, 2014.

5918 (c) Licenses issued under this section shall be subject to renewal
5919 once every two years. A license to practice tattooing shall be renewed
5920 in accordance with the provisions of section 19a-88 of the general
5921 statutes, as amended by this act, for a fee of two hundred dollars. A
5922 licensee applying for license renewal shall, as a condition of license
5923 renewal, successfully complete a course on prevention of disease
5924 transmission and blood-borne pathogens that complies with the
5925 standards adopted by the federal Occupational Safety and Health
5926 Administration, as described in 29 CFR 1910.1030 et seq., as amended
5927 from time to time, and that requires the successful completion of a
5928 proficiency examination as part of such course. Each licensee applying
5929 for license renewal shall sign a statement attesting that the licensee has
5930 successfully completed such education course within the six months
5931 preceding the expiration of the license on a form prescribed by the
5932 Commissioner of Public Health. Each licensee shall retain certificates
5933 of completion that demonstrate compliance with the requirement for a
5934 minimum of four years after the year in which the course was
5935 completed and shall submit such certificates to the department for

5936 inspection not later than forty-five days after a request by the
5937 department for such certificates.

5938 (d) The provisions of this section shall not apply to a physician, an
5939 advanced practice registered nurse rendering service in collaboration
5940 with a physician, a registered nurse executing the medical regimen
5941 under the direction of a licensed physician, dentist or advanced
5942 practice registered nurse, or a physician assistant rendering service
5943 under the supervision, control and responsibility of a physician.

5944 (e) No person shall use the title "tattoo technician", "tattoo artist",
5945 "tattooist" or other similar titles unless the person holds a license
5946 issued in accordance with this section.

5947 (f) Notwithstanding the provisions of subsection (a) of this section, a
5948 person may practice tattooing if such person has obtained a license or
5949 temporary permit pursuant to this subsection.

5950 (1) The department may grant licensure to any person who is
5951 licensed at the time of application as a tattoo technician, or as a person
5952 entitled to perform similar services under a different designation, in
5953 another state of the United States, the District of Columbia or a
5954 commonwealth or territory subject to the laws of the United States and
5955 who submits evidence satisfactory to the department of (A) a current
5956 license in good standing to practice tattooing from such other state,
5957 commonwealth or territory, (B) documentation of licensed practice in
5958 such state, commonwealth or territory for a period of at least two years
5959 immediately preceding application, (C) successful completion of a
5960 course on prevention of disease transmission and blood-borne
5961 pathogens that complies with the standards adopted by the federal
5962 Occupational Safety and Health Administration, as described in 29
5963 CFR 1910.1030 et seq., as amended from time to time, and (D) current
5964 certification by the American Red Cross or the American Heart
5965 Association in basic first aid. Pending approval of the application for
5966 licensure, the commissioner may issue a temporary permit to such

5967 applicant upon receipt of a completed application form, accompanied
5968 by the fee for licensure, a copy of a current license from such other
5969 state, commonwealth or territory and a notarized affidavit attesting
5970 that the license is valid and belongs to the person requesting
5971 notarization. Such temporary permit shall be valid for a period not to
5972 exceed one hundred twenty calendar days and shall not be renewable.

5973 (2) The commissioner may issue a temporary permit to an applicant
5974 previously licensed in Connecticut whose license has become void
5975 pursuant to section 19a-88 of the general statutes, as amended by this
5976 act. Such applicant for a temporary permit shall submit to the
5977 department a completed application form accompanied by a fee of one
5978 hundred dollars, a copy of a current license in good standing from
5979 another state and a notarized affidavit attesting that such license is
5980 valid and belongs to the person requesting notarization. A temporary
5981 permit for an applicant previously licensed in Connecticut whose
5982 license has become void pursuant to section 19a-88 of the general
5983 statutes, as amended by this act, shall be valid for a period not to
5984 exceed one hundred twenty calendar days and shall not be renewable.

5985 (3) The commissioner may issue a temporary permit to a person
5986 licensed or certified to practice tattooing in another state,
5987 commonwealth or territory for the purpose of attending an educational
5988 event, trade show in the state or participating in a product
5989 demonstration in the state. Such applicant for a temporary permit shall
5990 submit to the department, forty-five business days in advance of the
5991 date of such event, show or demonstration, a completed application
5992 form accompanied by a fee of one hundred dollars. Such applicant for
5993 a temporary permit shall additionally submit a copy of a current
5994 license or certification to practice tattooing from another state of the
5995 United States, the District of Columbia or a commonwealth or territory
5996 subject to the laws of the United States and a notarized affidavit
5997 attesting that the license or certification is valid and belongs to the
5998 person requesting notarization. A temporary permit issued in
5999 accordance with this subparagraph shall be valid for a period not to

6000 exceed fourteen consecutive calendar days, shall not be renewable and
6001 a temporary permit for such applicant shall not be issued more than
6002 once in any calendar year.

6003 (g) Notwithstanding the provisions of subsection (a) of this section,
6004 a student tattoo technician may practice tattooing under the personal
6005 supervision of a tattoo technician for a period not to exceed two years.
6006 A student tattoo technician shall register with the department for
6007 purposes of completing the practical training and experience required
6008 to obtain a license pursuant to this section. An application for
6009 registration shall be submitted to the department on a form prescribed
6010 by the commissioner and shall be accompanied by documentation that
6011 the applicant (1) has successfully completed a course on prevention of
6012 disease transmission and blood-borne pathogens that complies with
6013 the standards adopted by the federal Occupational Safety and Health
6014 Administration, as described in 29 CFR 1910.1030 et seq., as amended
6015 from time to time, and that requires the successful completion of a
6016 proficiency examination as part of such course, and (2) holds current
6017 certification by the American Red Cross or the American Heart
6018 Association in basic first aid. Such application shall include a notarized
6019 statement signed by a tattoo technician providing that such licensee
6020 acknowledges having responsibility for personally supervising the
6021 applicant's practical training and experience in tattooing.

6022 (h) No license or temporary permit shall be issued under this section
6023 to any applicant against whom professional disciplinary action is
6024 pending or who is the subject of an unresolved complaint in any state
6025 or jurisdiction.

6026 (i) The Commissioner of Public Health may, in accordance with
6027 chapter 54 of the general statutes, adopt such regulations as are
6028 necessary to implement the provisions of sections 133 to 137, inclusive,
6029 of this act.

6030 Sec. 134. (NEW) (*Effective October 1, 2013*) On and after July 1, 2014,

no person shall: (1) Buy, sell or fraudulently obtain or furnish any diploma, certificate, license, record or registration purporting to show that any person is qualified or authorized to practice tattooing, as provided in section 133 of this act, or participate in buying, selling, fraudulently obtaining or furnishing any such document; (2) practice or attempt or offer to practice tattooing under cover of any diploma, certificate, license, record or registration illegally or fraudulently obtained or signed, or issued unlawfully or under fraudulent representation or mistake of fact in a material regard; (3) practice or attempt or offer to practice tattooing under a name other than such person's own name or under a false or assumed name; (4) aid or abet practice by a person not lawfully licensed to practice tattooing within this state or by a person whose license to practice has been suspended or revoked; (5) use in such person's advertising the word "tattoo", "tattooing" or any description of services involving marking or coloring, in an indelible manner, the skin of any person, without having obtained a license under the provisions of section 133 of this act; or (6) practice tattooing on a person who is an unemancipated minor under eighteen years of age without the permission of such person's parent or guardian. No person shall, during the time such person's license as a tattoo technician is revoked or suspended, practice or attempt or offer or advertise to practice tattooing or be employed by, work with or assist, in any way, any person licensed to practice tattooing. Any person who violates any provision of this section shall be guilty of a class D misdemeanor.

Sec. 135. (NEW) (*Effective October 1, 2013*) The Department of Public Health may take any action set forth in section 19a-17 of the general statutes if a person issued a license as a tattoo technician pursuant to section 133 of this act fails to conform to the accepted standards of the tattoo profession, or violates any provision of this section or section 133 or 137 of this act or for any of the following reasons: (1) Fraud and deceit in the practice of tattooing; (2) negligent, incompetent or wrongful conduct in professional activities; (3) emotional disorder or

6064 mental illness; (4) physical illness or impairment; (5) abuse or excessive
6065 use of drugs, including alcohol, narcotics or chemicals; and (6) wilful
6066 falsification of entries into any client record pertaining to tattooing.
6067 The Commissioner of Public Health may order a tattoo technician to
6068 submit to a reasonable physical or mental examination if such tattoo
6069 technician's physical or mental capacity to practice safely is the subject
6070 of an investigation. The commissioner may petition the superior court
6071 for the judicial district of Hartford to enforce such order or any action
6072 taken pursuant to section 19a-17 of the general statutes. Notice of any
6073 contemplated action under section 19a-17 of the general statutes, the
6074 cause of the action and the date of a hearing on the action shall be
6075 given to the licensee and an opportunity for hearing afforded in
6076 accordance with the provisions of chapter 54 of the general statutes.

6077 Sec. 136. (NEW) (*Effective October 1, 2013*) The Commissioner of
6078 Public Health shall carry out the commissioner's responsibilities with
6079 respect to enforcement of the provisions of sections 133 to 135,
6080 inclusive, of this act within available appropriations.

6081 Sec. 137. (NEW) (*Effective October 1, 2013*) The director of health for
6082 any town, city, borough or district department of health, or the
6083 director's authorized representative, may, on an annual basis, inspect
6084 establishments where tattooing is practiced within the director's
6085 jurisdiction regarding the establishments' sanitary condition. The
6086 director of health, or the director's authorized representative, shall
6087 have full power to enter and inspect any such tattoo establishment
6088 during usual business hours. If any establishment, upon such
6089 inspection, is found to be in an unsanitary condition, the director of
6090 health shall make written order that such establishment be placed in a
6091 sanitary condition. The director of health may collect from the operator
6092 of any such establishment a reasonable fee, not to exceed one hundred
6093 dollars, for the cost of conducting an inspection of such establishment
6094 pursuant to this section. Notwithstanding any municipal charter, home
6095 rule ordinance or special act, any fee collected by the director of health
6096 pursuant to this section shall be used by the town, city, borough or

6097 district department of health for conducting inspections pursuant to
6098 this section.

6099 Sec. 138. Subsection (c) of section 19a-14 of the general statutes is
6100 repealed and the following is substituted in lieu thereof (*Effective*
6101 *October 1, 2013*):

6102 (c) No board shall exist for the following professions that are
6103 licensed or otherwise regulated by the Department of Public Health:

6104 (1) Speech and language pathologist and audiologist;

6105 (2) Hearing instrument specialist;

6106 (3) Nursing home administrator;

6107 (4) Sanitarian;

6108 (5) Subsurface sewage system installer or cleaner;

6109 (6) Marital and family therapist;

6110 (7) Nurse-midwife;

6111 (8) Licensed clinical social worker;

6112 (9) Respiratory care practitioner;

6113 (10) Asbestos contractor and asbestos consultant;

6114 (11) Massage therapist;

6115 (12) Registered nurse's aide;

6116 (13) Radiographer;

6117 (14) Dental hygienist;

6118 (15) Dietitian-Nutritionist;

6119 (16) Asbestos abatement worker;

6120 (17) Asbestos abatement site supervisor;

6121 (18) Licensed or certified alcohol and drug counselor;

6122 (19) Professional counselor;

6123 (20) Acupuncturist;

6124 (21) Occupational therapist and occupational therapist assistant;

6125 (22) Lead abatement contractor, lead consultant contractor, lead
6126 consultant, lead abatement supervisor, lead abatement worker,
6127 inspector and planner-project designer;

6128 (23) Emergency medical technician, advanced emergency medical
6129 technician, emergency medical responder and emergency medical
6130 services instructor;

6131 (24) Paramedic;

6132 (25) Athletic trainer;

6133 (26) Perfusionist;

6134 (27) Master social worker subject to the provisions of section 20-
6135 195v; **[**and**]**

6136 (28) **[**On and after July 1, 2011, a radiologist**]** Radiologist assistant,
6137 subject to the provisions of section 20-74tt; and

6138 (29) Tattoo technician.

6139 The department shall assume all powers and duties normally vested
6140 with a board in administering regulatory jurisdiction over such
6141 professions. The uniform provisions of this chapter and chapters 368v,
6142 369 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399, 400a
6143 and 400c, including, but not limited to, standards for entry and

6144 renewal; grounds for professional discipline; receiving and processing
6145 complaints; and disciplinary sanctions, shall apply, except as otherwise
6146 provided by law, to the professions listed in this subsection.

6147 Sec. 139. Subsection (b) of section 20-9 of the general statutes is
6148 repealed and the following is substituted in lieu thereof (*Effective July*
6149 *1, 2014*):

6150 (b) The provisions of this chapter shall not apply to:

6151 (1) Dentists while practicing dentistry only;

6152 (2) Any person in the employ of the United States government while
6153 acting in the scope of his employment;

6154 (3) Any person who furnishes medical or surgical assistance in cases
6155 of sudden emergency;

6156 (4) Any person residing out of this state who is employed to come
6157 into this state to render temporary assistance to or consult with any
6158 physician or surgeon who has been licensed in conformity with the
6159 provisions of this chapter;

6160 (5) Any physician or surgeon residing out of this state who holds a
6161 current license in good standing in another state and who is employed
6162 to come into this state to treat, operate or prescribe for any injury,
6163 deformity, ailment or disease from which the person who employed
6164 such physician, or the person on behalf of whom such physician is
6165 employed, is suffering at the time when such nonresident physician or
6166 surgeon is so employed, provided such physician or surgeon may
6167 practice in this state without a Connecticut license for a period not to
6168 exceed thirty consecutive days;

6169 (6) Any person rendering service as (A) an advanced practice
6170 registered nurse if such service is rendered in collaboration with a
6171 licensed physician, or (B) an advanced practice registered nurse
6172 maintaining classification from the American Association of Nurse

6173 Anesthetists if such service is under the direction of a licensed
6174 physician;

6175 (7) Any nurse-midwife practicing nurse-midwifery in accordance
6176 with the provisions of chapter 377;

6177 (8) Any podiatrist licensed in accordance with the provisions of
6178 chapter 375;

6179 (9) Any Christian Science practitioner who does not use or prescribe
6180 in his practice any drugs, poisons, medicines, chemicals, nostrums or
6181 surgery;

6182 (10) Any person licensed to practice any of the healing arts named
6183 in section 20-1, who does not use or prescribe in his practice any drugs,
6184 medicines, poisons, chemicals, nostrums or surgery;

6185 (11) Any graduate of any school or institution giving instruction in
6186 the healing arts who has been issued a permit in accordance with
6187 subsection (a) of section 20-11a and who is serving as an intern,
6188 resident or medical officer candidate in a hospital;

6189 (12) Any student participating in a clinical clerkship program who
6190 has the qualifications specified in subsection (b) of section 20-11a;

6191 (13) Any person, otherwise qualified to practice medicine in this
6192 state except that he is a graduate of a medical school located outside of
6193 the United States or the Dominion of Canada which school is
6194 recognized by the American Medical Association or the World Health
6195 Organization, to whom the Connecticut Medical Examining Board,
6196 subject to such regulations as the Commissioner of Public Health, with
6197 advice and assistance from the board, prescribes, has issued a permit
6198 to serve as an intern or resident in a hospital in this state for the
6199 purpose of extending his education;

6200 (14) Any person rendering service as a physician assistant licensed
6201 pursuant to section 20-12b, a registered nurse, a licensed practical

6202 nurse or a paramedic, as defined in subdivision (15) of section 19a-175,
6203 acting within the scope of regulations adopted pursuant to section 19a-
6204 179, if such service is rendered under the supervision, control and
6205 responsibility of a licensed physician;

6206 (15) Any student enrolled in an accredited physician assistant
6207 program or paramedic program approved in accordance with
6208 regulations adopted pursuant to section 19a-179, who is performing
6209 such work as is incidental to his course of study;

6210 (16) Any person who, on June 1, 1993, has worked continuously in
6211 this state since 1979 performing diagnostic radiology services and who,
6212 as of October 31, 1997, continued to render such services under the
6213 supervision, control and responsibility of a licensed physician solely
6214 within the setting where such person was employed on June 1, 1993;

6215 (17) Any person practicing athletic training, as defined in section 20-
6216 65f;

6217 (18) When deemed by the Connecticut Medical Examining Board to
6218 be in the public's interest, based on such considerations as academic
6219 attainments, specialty board certification and years of experience, to a
6220 foreign physician or surgeon whose professional activities shall be
6221 confined within the confines of a recognized medical school;

6222 (19) Any technician engaging in tattooing in accordance with the
6223 provisions of section **[**19a-92a**]** section 133 or 134 of this act and any
6224 regulations adopted thereunder;

6225 (20) Any person practicing perfusion, as defined in section 20-162aa;
6226 or

6227 (21) Any foreign physician or surgeon (A) participating in
6228 supervised clinical training under the direct supervision and control of
6229 a physician or surgeon licensed in accordance with the provisions of
6230 this chapter, and (B) whose professional activities are confined to a

6231 licensed hospital that has a residency program accredited by the
6232 Accreditation Council for Graduate Medical Education or that is a
6233 primary affiliated teaching hospital of a medical school accredited by
6234 the Liaison Committee on Medical Education. Such hospital shall
6235 verify that the foreign physician or surgeon holds a current valid
6236 license in another country.

6237 Sec. 140. Section 19a-88 of the general statutes is repealed and the
6238 following is substituted in lieu thereof (*Effective from passage and*
6239 *applicable to registration periods beginning on and after October 1, 2013*):

6240 (a) Each person holding a license to practice dentistry, optometry,
6241 midwifery or dental hygiene shall, annually, during the month of such
6242 person's birth, register with the Department of Public Health, upon
6243 payment of the professional services fee for class I, as defined in
6244 section 33-182*l*, plus five dollars, in the case of a dentist, except as
6245 provided in sections 19a-88b and 20-113b; **[**,**]** the professional services
6246 fee for class H, as defined in section 33-182*l*, in the case of an
6247 optometrist, fifteen dollars in the case of a midwife; **[**,**]** and one
6248 hundred dollars in the case of a dental hygienist. **[**,**]** Such registration
6249 shall be on blanks to be furnished by the department for such purpose,
6250 giving such person's name in full, such person's residence and
6251 business address and such other information as the department
6252 requests. Each person holding a license to practice dentistry who has
6253 retired from the profession may renew such license, but the fee shall be
6254 ten per cent of the professional services fee for class I, as defined in
6255 section 33-182*l*, or **[**ninety**]** ninety-five dollars, whichever is greater.
6256 Any license provided by the department at a reduced fee pursuant to
6257 this subsection shall indicate that the dentist is retired.

6258 (b) Each person holding a license to practice medicine, surgery,
6259 podiatry, chiropractic or natureopathy shall, annually, during the
6260 month of such person's birth, register with the Department of Public
6261 Health, upon payment of the professional services fee for class I, as
6262 defined in section 33-182*l*. **[**,**]** Each person holding a license to practice

6263 medicine or surgery shall pay five dollars in addition to such services
6264 fee. Such registration shall be on blanks to be furnished by the
6265 department for such purpose, giving such person's name in full, such
6266 person's residence and business address and such other information as
6267 the department requests.

6268 (c) (1) Each person holding a license to practice as a registered
6269 nurse, shall, annually, during the month of such person's birth, register
6270 with the Department of Public Health, upon payment of one hundred
6271 five dollars, on blanks to be furnished by the department for such
6272 purpose, giving such person's name in full, such person's residence
6273 and business address and such other information as the department
6274 requests. Each person holding a license to practice as a registered nurse
6275 who has retired from the profession may renew such license, but the
6276 fee shall be ten per cent of the professional services fee for class B, as
6277 defined in section 33-182*l*, plus five dollars. Any license provided by
6278 the department at a reduced fee shall indicate that the registered nurse
6279 is retired.

6280 (2) Each person holding a license as an advanced practice registered
6281 nurse shall, annually, during the month of such person's birth, register
6282 with the Department of Public Health, upon payment of one hundred
6283 **[**twenty**]** twenty-five dollars, on blanks to be furnished by the
6284 department for such purpose, giving such person's name in full, such
6285 person's residence and business address and such other information as
6286 the department requests. No such license shall be renewed unless the
6287 department is satisfied that the person maintains current certification
6288 as either a nurse practitioner, a clinical nurse specialist or a nurse
6289 anesthetist from one of the following national certifying bodies which
6290 certify nurses in advanced practice: The American Nurses' Association,
6291 the Nurses' Association of the American College of Obstetricians and
6292 Gynecologists Certification Corporation, the National Board of
6293 Pediatric Nurse Practitioners and Associates or the American
6294 Association of Nurse Anesthetists. Each person holding a license to
6295 practice as an advanced practice registered nurse who has retired from

6296 the profession may renew such license, but the fee shall be ten per cent
6297 of the professional services fee for class C, as defined in section 33-182*l*,
6298 plus five dollars. Any license provided by the department at a reduced
6299 fee shall indicate that the advanced practice registered nurse is retired.

6300 (3) Each person holding a license as a licensed practical nurse shall,
6301 annually, during the month of such person's birth, register with the
6302 Department of Public Health, upon payment of **[**sixty**]** sixty-five
6303 dollars, on blanks to be furnished by the department for such purpose,
6304 giving such person's name in full, such person's residence and
6305 business address and such other information as the department
6306 requests. Each person holding a license to practice as a licensed
6307 practical nurse who has retired from the profession may renew such
6308 license, but the fee shall be ten per cent of the professional services fee
6309 for class A, as defined in section 33-182*l*, plus five dollars. Any license
6310 provided by the department at a reduced fee shall indicate that the
6311 licensed practical nurse is retired.

6312 (4) Each person holding a license as a nurse-midwife shall, annually,
6313 during the month of such person's birth, register with the Department
6314 of Public Health, upon payment of one hundred **[**twenty**]** twenty-five
6315 dollars, on blanks to be furnished by the department for such purpose,
6316 giving such person's name in full, such person's residence and
6317 business address and such other information as the department
6318 requests. No such license shall be renewed unless the department is
6319 satisfied that the person maintains current certification from the
6320 American College of Nurse-Midwives.

6321 (5) (A) Each person holding a license to practice physical therapy
6322 shall, annually, during the month of such person's birth, register with
6323 the Department of Public Health, upon payment of the professional
6324 services fee for class B, as defined in section 33-182*l*, on blanks to be
6325 furnished by the department for such purpose, giving such person's
6326 name in full, such person's residence and business address and such
6327 other information as the department requests.

6328 (B) Each person holding a physical therapist assistant license shall,
6329 annually, during the month of such person's birth, register with the
6330 Department of Public Health, upon payment of the professional
6331 services fee for class A, as defined in section 33-182*l*, on blanks to be
6332 furnished by the department for such purpose, giving such person's
6333 name in full, such person's residence and business address and such
6334 other information as the department requests.

6335 (6) Each person holding a license as a physician assistant shall,
6336 annually, during the month of such person's birth, register with the
6337 Department of Public Health, upon payment of a fee of one hundred
6338 fifty dollars, on blanks to be furnished by the department for such
6339 purpose, giving such person's name in full, such person's residence
6340 and business address and such other information as the department
6341 requests. No such license shall be renewed unless the department is
6342 satisfied that the practitioner has met the mandatory continuing
6343 medical education requirements of the National Commission on
6344 Certification of Physician Assistants or a successor organization for the
6345 certification or recertification of physician assistants that may be
6346 approved by the department and has passed any examination or
6347 continued competency assessment the passage of which may be
6348 required by said commission for maintenance of current certification
6349 by said commission.

6350 (d) No provision of this section shall be construed to apply to any
6351 person practicing Christian Science.

6352 (e) (1) Each person holding a license or certificate issued under
6353 section 19a-514, 20-65k, 20-74s, 20-195cc or 20-206*ll* and chapters 370 to
6354 373, inclusive, 375, 378 to 381a, inclusive, 383 to 383c, inclusive, 384,
6355 384b, 384d, 385, 393a, 395, 399 or 400a and section 20-206n or 20-206o
6356 shall, annually, during the month of such person's birth, apply for
6357 renewal of such license or certificate to the Department of Public
6358 Health, giving such person's name in full, such person's residence and
6359 business address and such other information as the department

6360 requests.

6361 (2) Each person holding a license or certificate issued under section
6362 19a-514, section 133 of this act and chapters 384a, 384c, 386, 387, 388
6363 and 398 shall apply for renewal of such license or certificate once every
6364 two years, during the month of such person's birth, giving such
6365 person's name in full, such person's residence and business address
6366 and such other information as the department requests.

6367 (3) Each person holding a license or certificate issued pursuant to
6368 section 20-475 or 20-476 shall, annually, during the month of such
6369 person's birth, apply for renewal of such license or certificate to the
6370 department.

6371 (4) Each entity holding a license issued pursuant to section 20-475
6372 shall, annually, during the anniversary month of initial licensure,
6373 apply for renewal of such license or certificate to the department.

6374 (5) Each person holding a license issued pursuant to section 20-
6375 162bb shall, annually, during the month of such person's birth, apply
6376 for renewal of such license to the Department of Public Health, upon
6377 payment of a fee of three hundred fifteen dollars, giving such person's
6378 name in full, such person's residence and business address and such
6379 other information as the department requests.

6380 (f) Any person or entity which fails to comply with the provisions of
6381 this section shall be notified by the department that such person's or
6382 entity's license or certificate shall become void ninety days after the
6383 time for its renewal under this section unless it is so renewed. Any
6384 such license shall become void upon the expiration of such ninety-day
6385 period.

6386 (g) **[**On or before July 1, 2008, the**]** The Department of Public Health
6387 shall **[**establish and implement**]** administer a secure on-line license
6388 renewal system for persons holding a license to practice medicine or
6389 surgery under chapter 370, dentistry under chapter 379, **[**or**]** nursing

6390 under chapter 378 or nurse-midwifery under chapter 377. The
6391 department shall [allow any such person who renews his or her license
6392 using the on-line license renewal system to pay his or her] require such
6393 persons to renew their licenses using the on-line renewal system and to
6394 pay professional service fees on-line by means of a credit card or
6395 electronic transfer of funds from a bank or credit union account, [and
6396 may charge such person a service fee not to exceed five dollars for any
6397 such on-line payment made by credit card or electronic funds transfer.
6398 On or before January 1, 2009, the department shall submit, in
6399 accordance with section 11-4a, a report on the feasibility and
6400 implications of the implementation of a biennial license renewal
6401 system for persons holding a license to practice nursing under chapter
6402 378 to the joint standing committee of the General Assembly having
6403 cognizance of matters relating to public health] except in extenuating
6404 circumstances, including, but not limited to, circumstances in which a
6405 licensee does not have access to a credit card and submits a notarized
6406 affidavit affirming that fact, the department may allow the licensee to
6407 renew his or her license using a paper form prescribed by the
6408 department and pay professional service fees by check or money
6409 order.

6410 Sec. 141. Section 19a-491 of the general statutes is repealed and the
6411 following is substituted in lieu thereof (*Effective July 1, 2013*):

6412 (a) No person acting individually or jointly with any other person
6413 shall establish, conduct, operate or maintain an institution in this state
6414 without a license as required by this chapter, except for persons issued
6415 a license by the Commissioner of Children and Families pursuant to
6416 section 17a-145 for the operation of (1) a substance abuse treatment
6417 facility, or (2) a facility for the purpose of caring for women during
6418 pregnancies and for women and their infants following such
6419 pregnancies. Application for such license shall be made to the
6420 Department of Public Health upon forms provided by it and shall
6421 contain such information as the department requires, which may
6422 include affirmative evidence of ability to comply with reasonable

6423 standards and regulations prescribed under the provisions of this
6424 chapter. The commissioner may require as a condition of licensure that
6425 an applicant sign a consent order providing reasonable assurances of
6426 compliance with the Public Health Code. The commissioner may issue
6427 more than one chronic disease hospital license to a single institution
6428 until such time as the state offers a rehabilitation hospital license.

6429 (b) If any person acting individually or jointly with any other person
6430 owns real property or any improvements thereon, upon or within
6431 which an institution, as defined in subsection (c) of section 19a-490, is
6432 established, conducted, operated or maintained and is not the licensee
6433 of the institution, such person shall submit a copy of the lease
6434 agreement to the department at the time of any change of ownership
6435 and with each license renewal application. The lease agreement shall,
6436 at a minimum, identify the person or entity responsible for the
6437 maintenance and repair of all buildings and structures within which
6438 such an institution is established, conducted or operated. If a violation
6439 is found as a result of an inspection or investigation, the commissioner
6440 may require the owner to sign a consent order providing assurances
6441 that repairs or improvements necessary for compliance with the
6442 provisions of the Public Health Code shall be completed within a
6443 specified period of time or may assess a civil penalty of not more than
6444 one thousand dollars for each day that such owner is in violation of the
6445 Public Health Code or a consent order. A consent order may include a
6446 provision for the establishment of a temporary manager of such real
6447 property who has the authority to complete any repairs or
6448 improvements required by such order. Upon request of the
6449 Commissioner of Public Health, the Attorney General may petition the
6450 Superior Court for such equitable and injunctive relief as such court
6451 deems appropriate to ensure compliance with the provisions of a
6452 consent order. The provisions of this subsection shall not apply to any
6453 property or improvements owned by a person licensed in accordance
6454 with the provisions of subsection (a) of this section to establish,
6455 conduct, operate or maintain an institution on or within such property

6456 or improvements.

6457 (c) Notwithstanding any regulation to the contrary, the
6458 Commissioner of Public Health shall charge the following fees for the
6459 biennial licensing and inspection of the following institutions: (1)
6460 Chronic and convalescent nursing homes, per site, four hundred forty
6461 dollars; (2) chronic and convalescent nursing homes, per bed, five
6462 dollars; (3) rest homes with nursing supervision, per site, four hundred
6463 forty dollars; (4) rest homes with nursing supervision, per bed, five
6464 dollars; (5) outpatient dialysis units and outpatient surgical facilities,
6465 six hundred twenty-five dollars; (6) mental health residential facilities,
6466 per site, three hundred seventy-five dollars; (7) mental health
6467 residential facilities, per bed, five dollars; (8) hospitals, per site, nine
6468 hundred forty dollars; (9) hospitals, per bed, seven dollars and fifty
6469 cents; (10) nonstate agency educational institutions, per infirmary, one
6470 hundred fifty dollars; **[**and**]** (11) nonstate agency educational
6471 institutions, per infirmary bed, twenty-five dollars; (12) home health
6472 care agencies, except certified home health care agencies described in
6473 subsection (d) of this section, per agency, three hundred dollars; (13)
6474 home health care agencies, except certified home health care agencies
6475 described in subsection (d) of this section, per satellite patient service
6476 office, one hundred dollars; and (14) assisted living services agencies,
6477 except such agencies participating in the congregate housing facility
6478 pilot program described in section 8-119n, per site, five hundred
6479 dollars.

6480 (d) Notwithstanding any regulation, the commissioner shall charge
6481 the following fees for the triennial licensing and inspection of the
6482 following institutions: (1) Residential care homes, per site, five
6483 hundred sixty-five dollars; **[**and**]** (2) residential care homes, per bed,
6484 four dollars and fifty cents; (3) home health care agencies that are
6485 certified as a provider of services by the United States Department of
6486 Health and Human Services under the Medicare or Medicaid program,
6487 three hundred dollars; and (4) certified home health care agencies, as
6488 described in section 19a-493, per satellite patient service office, one

6489 hundred dollars.

6490 (e) The commissioner shall charge one thousand dollars for the
6491 licensing and inspection every four years of outpatient clinics that
6492 provide either medical or mental health service, and well-child clinics,
6493 except those operated by municipal health departments, health
6494 districts or licensed nonprofit nursing or community health agencies.

6495 (f) The commissioner shall charge a fee of five hundred sixty-five
6496 dollars for the technical assistance provided for the design, review and
6497 development of an institution's construction, renovation, building
6498 alteration, sale or change in ownership when the cost of such project is
6499 one million dollars or less and shall charge a fee of one-quarter of one
6500 per cent of the total project cost when the cost of such project is more
6501 than one million dollars. Such fee shall include all department reviews
6502 and on-site inspections. For purposes of this subsection, "institution"
6503 does not include a facility owned by the state.

6504 (g) The commissioner may require as a condition of the licensure of
6505 home health care agencies and homemaker-home health aide agencies
6506 that each agency meet minimum service quality standards. In the
6507 event the commissioner requires such agencies to meet minimum
6508 service quality standards as a condition of their licensure, the
6509 commissioner shall adopt regulations, in accordance with the
6510 provisions of chapter 54, to define such minimum service quality
6511 standards, which shall (1) allow for training of homemaker-home
6512 health aides by adult continuing education, (2) require a registered
6513 nurse to visit and assess each patient receiving homemaker-home
6514 health aide services as often as necessary based on the patient's
6515 condition, but not less than once every sixty days, and (3) require the
6516 assessment prescribed by subdivision (2) of this subsection to be
6517 completed while the homemaker-home health aide is providing
6518 services in the patient's home.

6519 (h) On and after June 15, 2012, until June 30, 2017, the commissioner

6520 shall not issue or renew a license under this chapter for any hospital
6521 certified to participate in the Medicare program as a long-term care
6522 hospital under Section 1886(d)(1)(B)(iv) of the Social Security Act (42
6523 USC 1395ww) unless such hospital was so certified under said federal
6524 act on January 1, 2012.

6525 Sec. 142. (NEW) (*Effective July 1, 2013*) (a) The Commissioner of
6526 Public Health shall, within available appropriations, establish and
6527 administer a program to provide financial assistance to community
6528 health centers. For purposes of this section, "community health center"
6529 means a public or nonprofit private medical care facility that meets the
6530 requirements of section 19a-490a of the general statutes and has been
6531 designated by the United States Department of Health and Human
6532 Services as a federally qualified health center or a federally qualified
6533 health center look-alike.

6534 (b) The commissioner shall develop a formula to disburse program
6535 funds to community health centers. Such formula shall include, but not
6536 be limited to, the following factors: (1) The number of uninsured
6537 patients served by the community health center; and (2) the types of
6538 services provided by the community health center.

6539 (c) (1) On or before October 1, 2013, the commissioner shall report,
6540 in accordance with the provisions of section 11-4a of the general
6541 statutes, to the joint standing committees of the General Assembly
6542 having cognizance of matters relating to public health and
6543 appropriations and the budgets of state agencies concerning the
6544 formula to disburse program funds that is developed in accordance
6545 with subsection (b) of this section.

6546 (2) Not later than thirty days after the date of their receipt of such
6547 report, the joint standing committees shall hold a public hearing on the
6548 proposed formula described in the report. At the conclusion of the
6549 public hearing, the joint standing committees shall advise the
6550 commissioner of their approval or denial of the proposed formula. If

6551 the joint standing committees do not so advise the commissioner
6552 during the thirty-day period, the proposed formula described in the
6553 report shall be deemed approved. Except as provided in this
6554 subdivision, the commissioner shall not implement a formula to
6555 disburse program funds to community health centers unless such
6556 formula is approved by the joint standing committees in accordance
6557 with this subdivision.

6558 (d) The commissioner may establish requirements for participation
6559 in the program, provided the commissioner provides reasonable notice
6560 of such requirements to all community health centers. Community
6561 health centers shall use program funds only for purposes approved by
6562 the commissioner.

6563 Sec. 143. Subsection (a) of section 19a-7j of the general statutes is
6564 repealed and the following is substituted in lieu thereof (*Effective July*
6565 *1, 2013*):

6566 (a) Not later than September first, annually, the Secretary of the
6567 Office of Policy and Management, in consultation with the
6568 Commissioner of Public Health, shall (1) determine the amount
6569 appropriated for the following purposes: (A) To purchase, store and
6570 distribute vaccines for routine immunizations included in the schedule
6571 for active immunization required by section 19a-7f; (B) to purchase,
6572 store and distribute (i) vaccines to prevent hepatitis A and B in persons
6573 of all ages, as recommended by the schedule for immunizations
6574 published by the National Advisory Committee for Immunization
6575 Practices, (ii) antibiotics necessary for the treatment of tuberculosis and
6576 biologics and antibiotics necessary for the detection and treatment of
6577 tuberculosis infections, and (iii) antibiotics to support treatment of
6578 patients in communicable disease control clinics, as defined in section
6579 19a-216a; **[**and**]** (C) <u>to administer the immunization program described</u>
6580 <u>in section 19a-7f; and (D)</u> to provide services needed to collect up-to-
6581 date information on childhood immunizations for all children enrolled
6582 in Medicaid who reach two years of age during the year preceding the

6583 current fiscal year, to incorporate such information into the childhood
6584 immunization registry, as defined in section 19a-7h, and (2) inform the
6585 Insurance Commissioner of such amount.

6586 Sec. 144. (NEW) (*Effective July 1, 2013*) Not later than October 1,
6587 2013, the Department of Public Health, in consultation with the Office
6588 of Policy and Management, shall develop and thereafter annually
6589 implement a reconciliation and expenditure projection process relative
6590 to the state's childhood immunization budget account which includes,
6591 but is not limited to: (1) An accounting of the previous year's
6592 expenditures; (2) the process and factors to be used in determining
6593 each future year's assessment; and (3) the establishment of an
6594 appropriate notification process for the entities assessed under the
6595 account.

6596 Sec. 145. Section 19a-639 of the general statutes is repealed and the
6597 following is substituted in lieu thereof (*Effective October 1, 2013*):

6598 (a) In any deliberations involving a certificate of need application
6599 filed pursuant to section 19a-638, the office shall take into
6600 consideration and make written findings concerning each of the
6601 following guidelines and principles:

6602 (1) Whether the proposed project is consistent with any applicable
6603 policies and standards adopted in regulations by the Department of
6604 Public Health;

6605 (2) The relationship of the proposed project to the state-wide health
6606 care facilities and services plan;

6607 (3) Whether there is a clear public need for the health care facility or
6608 services proposed by the applicant;

6609 (4) Whether the applicant has satisfactorily demonstrated how the
6610 proposal will impact the financial strength of the health care system in
6611 the state or that the proposal is financially feasible for the applicant;

6612 (5) Whether the applicant has satisfactorily demonstrated how the
6613 proposal will improve quality, accessibility and cost effectiveness of
6614 health care delivery in the region, including, but not limited to, (A)
6615 provision of or any change in the access to services for Medicaid
6616 recipients and indigent persons, and (B) the impact upon the cost
6617 effectiveness of providing access to services provided under the
6618 Medicaid program;

6619 (6) The applicant's past and proposed provision of health care
6620 services to relevant patient populations and payer mix, including, but
6621 not limited to, access to services by Medicaid recipients and indigent
6622 persons;

6623 (7) Whether the applicant has satisfactorily identified the population
6624 to be served by the proposed project and satisfactorily demonstrated
6625 that the identified population has a need for the proposed services;

6626 (8) The utilization of existing health care facilities and health care
6627 services in the service area of the applicant; **[**and**]**

6628 (9) Whether the applicant has satisfactorily demonstrated that the
6629 proposed project shall not result in an unnecessary duplication of
6630 existing or approved health care services or facilities; and

6631 (10) Whether an applicant, who has failed to provide or reduced
6632 access to services by Medicaid recipients or indigent persons, has
6633 demonstrated good cause for doing so, which shall not be
6634 demonstrated solely on the basis of differences in reimbursement rates
6635 between Medicaid and other health care payers.

6636 (b) The office, as it deems necessary, may revise or supplement the
6637 guidelines and principles through regulation prescribed in subsection
6638 (a) of this section.

6639 Sec. 146. Subsection (b) of section 19a-323 of the general statutes is
6640 repealed and the following is substituted in lieu thereof (*Effective July*

6641 *1, 2013*):

6642 (b) If death occurred in this state, the death certificate required by
6643 law shall be filed with the registrar of vital statistics for the town in
6644 which such person died, if known, or, if not known, for the town in
6645 which the body was found. The Chief Medical Examiner, Deputy Chief
6646 Medical Examiner, associate medical examiner, an authorized assistant
6647 medical examiner or other authorized designee shall complete the
6648 cremation certificate, stating that such medical examiner or other
6649 authorized designee has made inquiry into the cause and manner of
6650 death and is of the opinion that no further examination or judicial
6651 inquiry is necessary. The cremation certificate shall be submitted to the
6652 registrar of vital statistics of the town in which such person died, if
6653 known, or, if not known, of the town in which the body was found, or
6654 with the registrar of vital statistics of the town in which the funeral
6655 director having charge of the body is located. Upon receipt of the
6656 cremation certificate, the registrar shall authorize such certificate, keep
6657 such certificate on permanent record, and issue a cremation permit,
6658 except that if the cremation certificate is submitted to the registrar of
6659 the town where the funeral director is located, such certificate shall be
6660 forwarded to the registrar of the town where the person died to be
6661 kept on permanent record. If a cremation permit must be obtained
6662 during the hours that the office of the local registrar of the town where
6663 death occurred is closed, a subregistrar appointed to serve such town
6664 may authorize such cremation permit upon receipt and review of a
6665 properly completed cremation permit and cremation certificate. A
6666 subregistrar who is licensed as a funeral director or embalmer
6667 pursuant to chapter 385, or the employee or agent of such funeral
6668 director or embalmer shall not issue a cremation permit to himself or
6669 herself. A subregistrar shall forward the cremation certificate to the
6670 local registrar of the town where death occurred, not later than seven
6671 days after receiving such certificate. The estate of the deceased person,
6672 if any, shall pay the sum of one hundred fifty dollars for the issuance
6673 of the cremation certificate, provided the Office of the Chief Medical

6674 Examiner shall not assess any fees for costs that are associated with the
6675 cremation of a stillborn fetus. Upon request of the Chief Medical
6676 Examiner, the Secretary of the Office of Policy and Management may
6677 waive payment of such cremation certificate fee. No cremation
6678 certificate shall be required for a permit to cremate the remains of
6679 bodies pursuant to section 19a-270a. When the cremation certificate is
6680 submitted to a town other than that where the person died, the
6681 registrar of vital statistics for such other town shall ascertain from the
6682 original removal, transit and burial permit that the certificates required
6683 by the state statutes have been received and recorded, that the body
6684 has been prepared in accordance with the Public Health Code and that
6685 the entry regarding the place of disposal is correct. Whenever the
6686 registrar finds that the place of disposal is incorrect, the registrar shall
6687 issue a corrected removal, transit and burial permit and, after
6688 inscribing and recording the original permit in the manner prescribed
6689 for sextons' reports under section 7-66, shall then immediately give
6690 written notice to the registrar for the town where the death occurred of
6691 the change in place of disposal stating the name and place of the
6692 crematory and the date of cremation. Such written notice shall be
6693 sufficient authorization to correct these items on the original certificate
6694 of death. The fee for a cremation permit shall be three dollars and for
6695 the written notice one dollar. The Department of Public Health shall
6696 provide forms for cremation permits, which shall not be the same as
6697 for regular burial permits and shall include space to record
6698 information about the intended manner of disposition of the cremated
6699 remains, and such blanks and books as may be required by the
6700 registrars.

6701 Sec. 147. Section 10a-109ii of the general statutes is repealed and the
6702 following is substituted in lieu thereof (*Effective October 1, 2013*):

6703 (a) Not later than June 30, 2011, Connecticut Children's Medical
6704 Center and John Dempsey Hospital shall (1) jointly notify the Secretary
6705 of the Office of Policy and Management regarding their agreement to
6706 proceed with the NICU transfer and increase in bed capacity of John

6707 Dempsey Hospital, or (2) notify the secretary, either jointly or
6708 individually, that Connecticut Children's Medical Center, John
6709 Dempsey Hospital, or both, have abandoned their plans to proceed
6710 with the NICU transfer and increase in bed capacity of John Dempsey
6711 Hospital. For purposes of this section, the NICU transfer and increase
6712 in bed capacity of John Dempsey Hospital shall be treated as one
6713 project and shall not be separated for purposes of the certificate of
6714 need approval process without the filing of a new certificate of need
6715 application pursuant to chapter 368z and subsection (b) of this section.

6716 (b) Notwithstanding any provision of the general statutes, the
6717 process for certificate of need approval governed by chapter 368z, to
6718 the extent applicable, shall be expedited for the NICU transfer, The
6719 University of Connecticut Health Center new construction and
6720 renovation and any of the UConn health network initiatives as follows:
6721 No extensions of the ninety-day time period within which the Office of
6722 Health Care Access division within the Department of Public Health
6723 has to issue a decision to grant, deny or modify the request for a
6724 certificate of need following the receipt of a complete certificate of
6725 need application shall be made to any of the applicants or said office,
6726 or any successor office, department or agency.

6727 (c) State employees who provide services in the neonatal intensive
6728 care unit shall continue to negotiate wages, hours and other conditions
6729 of employment through such employees' respective bargaining agents,
6730 in accordance with chapter 68, pursuant to any agreement entered into
6731 by John Dempsey Hospital or The University of Connecticut Health
6732 Center Finance Corporation.

6733 (d) The NICU transfer shall not result in any change in the licensure
6734 or ownership of the transport service currently operated by John
6735 Dempsey Hospital. Employees providing transport services on behalf
6736 of John Dempsey Hospital shall continue to negotiate wages, hours
6737 and other conditions of employment through such employees'
6738 respective bargaining agents, in accordance with chapter 68, pursuant

6739 to any agreement entered into between John Dempsey Hospital or The
6740 University of Connecticut Health Center Finance Corporation.

6741 (e) Nothing in this section shall be construed to preclude The
6742 University of Connecticut Health Center or a constituent unit,
6743 including John Dempsey Hospital, from discontinuing NICU transport
6744 services if such services are provided by another qualified transport
6745 service.

6746 Sec. 148. Section 19a-649 of the general statutes is repealed and the
6747 following is substituted in lieu thereof (*Effective October 1, 2013*):

6748 (a) The office shall review annually the level of uncompensated care
6749 provided by each hospital to the indigent. Each hospital shall file
6750 annually with the office its policies regarding the provision of charity
6751 care and reduced cost services to the indigent, excluding medical
6752 assistance recipients, and its debt collection practices. A hospital shall
6753 file its audited financial statements not later than February twenty-
6754 eighth of each year. Not later than March thirty-first of each year, the
6755 hospital shall file a verification of the hospital's net revenue for the
6756 most recently completed fiscal year in a format prescribed by the
6757 office.

6758 (b) Each hospital shall annually report, along with data submitted
6759 pursuant to subsection (a) of this section, (1) the number of applicants
6760 for charity care and reduced cost services, (2) the number of approved
6761 applicants, and (3) the total and average charges and costs of the
6762 amount of charity care and reduced cost services provided.

6763 (c) Each hospital recognized as a nonprofit organization under
6764 Section 501(c)(3) of the Internal Revenue Code of 1986, or any
6765 subsequent corresponding internal revenue code of the United States,
6766 as amended from time to time, shall, along with data submitted
6767 annually pursuant to subsection (a) of this section, submit to the office
6768 (1) a complete copy of such hospital's most-recently completed Internal
6769 Revenue Service form 990, including all parts and schedules; and (2) in

6770 the form and manner prescribed by the office, data compiled to
6771 prepare such hospital's community health needs assessment, as
6772 required pursuant to Section 501(r) of the Internal Revenue Code of
6773 1986, or any subsequent corresponding internal revenue code of the
6774 United States, as amended from time to time, provided such copy and
6775 data submitted pursuant to this subsection shall not include: (A)
6776 Individual patient information, including, but not limited to, patient-
6777 identifiable information; (B) information that is not owned or
6778 controlled by such hospital; (C) information that such hospital is
6779 contractually required to keep confidential or that is prohibited from
6780 disclosure by a data use agreement; or (D) information concerning
6781 research on human subjects as described in section 45 CFR 46.101 et
6782 seq., as amended from time to time.

6783 Sec. 149. Subsection (a) of section 19a-653 of the general statutes is
6784 repealed and the following is substituted in lieu thereof (*Effective*
6785 *October 1, 2013*):

6786 (a) Any person or health care facility or institution that is required
6787 to file a certificate of need for any of the activities described in section
6788 19a-638, and any person or health care facility or institution that is
6789 required to file data or information under any public or special act or
6790 under this chapter or sections 19a-486 to 19a-486h, inclusive, or any
6791 regulation adopted or order issued under this chapter or said sections,
6792 which wilfully fails to seek certificate of need approval for any of the
6793 activities described in section 19a-638 or to so file within prescribed
6794 time periods, shall be subject to a civil penalty of up to one thousand
6795 dollars a day for each day such person or health care facility or
6796 institution conducts any of the described activities without certificate
6797 of need approval as required by section 19a-638 or for each day such
6798 information is missing, incomplete or inaccurate. **[**Any health care
6799 facility or provider that fails to complete the inventory questionnaire,
6800 as required by section 19a-634, shall not be subject to civil penalties
6801 under this section.**]** Any civil penalty authorized by this section shall
6802 be imposed by the Department of Public Health in accordance with

6803 subsections (b) to (e), inclusive, of this section.

6804 Sec. 150. Section 19a-681 of the general statutes is repealed and the
6805 following is substituted in lieu thereof (*Effective October 1, 2013*):

6806 (a) For purposes of this section: (1) "Detailed patient bill" means a
6807 patient billing statement that includes, in each line item, the hospital's
6808 current pricemaster code, a description of the charge and the billed
6809 amount; and (2) "pricemaster" means a detailed schedule of hospital
6810 charges.

6811 (b) Each hospital shall file with the office its current pricemaster
6812 which shall include each charge in its detailed schedule of charges.

6813 **[**(b)**]** (c) Upon the request of the Department of Public Health or a
6814 patient, a hospital shall provide to the department or the patient a
6815 detailed patient bill. If the billing detail by line item on a detailed
6816 patient bill does not agree with the detailed schedule of charges on file
6817 with the office for the date of service specified on the bill, the hospital
6818 shall be subject to a civil penalty of five hundred dollars per
6819 occurrence payable to the state not later than fourteen days after the
6820 date of notification. The penalty shall be imposed in accordance with
6821 section 19a-653, as amended by this act. The office may issue an order
6822 requiring such hospital, not later than fourteen days after the date of
6823 notification of an overcharge to a patient, to adjust the bill to be
6824 consistent with the detailed schedule of charges on file with the office
6825 for the date of service specified on the detailed patient bill.

6826 Sec. 151. Subsection (k) of section 8-30g of the general statutes is
6827 repealed and the following is substituted in lieu thereof (*Effective July*
6828 *1, 2013*):

6829 (k) Notwithstanding the provisions of subsections (a) to (j),
6830 inclusive, of this section, the affordable housing appeals procedure
6831 established under this section shall not be available if the real property
6832 which is the subject of the application is located in a municipality in

6833 which at least ten per cent of all dwelling units in the municipality are
6834 (1) assisted housing, or (2) currently financed by Connecticut Housing
6835 Finance Authority mortgages, or (3) subject to binding recorded deeds
6836 containing covenants or restrictions which require that such dwelling
6837 units be sold or rented at, or below, prices which will preserve the
6838 units as housing for which persons and families pay thirty per cent or
6839 less of income, where such income is less than or equal to eighty per
6840 cent of the median income, or (4) mobile manufactured homes located
6841 in mobile manufactured home parks or legally-approved accessory
6842 apartments, which homes or apartments are subject to binding
6843 recorded deeds containing covenants or restrictions which require that
6844 such dwelling units be sold or rented at, or below, prices which will
6845 preserve the units as housing for which, for a period of not less than
6846 ten years, persons and families pay thirty per cent or less of income,
6847 where such income is less than or equal to eighty per cent of the
6848 median income. The municipalities meeting the criteria set forth in this
6849 subsection shall be listed in the report submitted under section **[**32-1m**]**
6850 55 of this act. As used in this subsection, "accessory apartment" means
6851 a separate living unit that (A) is attached to the main living unit of a
6852 house, which house has the external appearance of a single-family
6853 residence, (B) has a full kitchen, (C) has a square footage that is not
6854 more than thirty per cent of the total square footage of the house, (D)
6855 has an internal doorway connecting to the main living unit of the
6856 house, (E) is not billed separately from such main living unit for
6857 utilities, and (F) complies with the building code and health and safety
6858 regulations.

6859 Sec. 152. Section 4-28f of the general statutes is repealed and the
6860 following is substituted in lieu thereof (*Effective from passage*):

6861 (a) There is created a Tobacco and Health Trust Fund which shall be
6862 a separate nonlapsing fund. The purpose of the trust fund shall be to
6863 create a continuing significant source of funds to (1) support and
6864 encourage development of programs to reduce tobacco abuse through
6865 prevention, education and cessation programs, (2) support and

6866 encourage development of programs to reduce substance abuse, and
6867 (3) develop and implement programs to meet the unmet physical and
6868 mental health needs in the state.

6869 (b) The trust fund may accept transfers from the Tobacco Settlement
6870 Fund and may apply for and accept gifts, grants or donations from
6871 public or private sources to enable the trust fund to carry out its
6872 objectives.

6873 (c) The trust fund shall be administered by a board of trustees,
6874 except that the board shall suspend its operations from July 1, 2003, to
6875 June 30, 2005, inclusive, and from July 1, 2015, to June 30, 2016,
6876 inclusive. The board shall consist of seventeen trustees. The
6877 appointment of the initial trustees shall be as follows: (1) The Governor
6878 shall appoint four trustees, one of whom shall serve for a term of one
6879 year from July 1, 2000, two of whom shall serve for a term of two years
6880 from July 1, 2000, and one of whom shall serve for a term of three years
6881 from July 1, 2000; (2) the speaker of the House of Representatives and
6882 the president pro tempore of the Senate each shall appoint two
6883 trustees, one of whom shall serve for a term of two years from July 1,
6884 2000, and one of whom shall serve for a term of three years from July 1,
6885 2000; (3) the majority leader of the House of Representatives and the
6886 majority leader of the Senate each shall appoint two trustees, one of
6887 whom shall serve for a term of one year from July 1, 2000, and one of
6888 whom shall serve for a term of three years from July 1, 2000; (4) the
6889 minority leader of the House of Representatives and the minority
6890 leader of the Senate each shall appoint two trustees, one of whom shall
6891 serve for a term of one year from July 1, 2000, and one of whom shall
6892 serve for a term of two years from July 1, 2000; and (5) the Secretary of
6893 the Office of Policy and Management, or the secretary's designee, shall
6894 serve as an ex-officio voting member. Following the expiration of such
6895 initial terms, subsequent trustees shall serve for a term of three years.
6896 The period of suspension of the board's operations from July 1, 2003, to
6897 June 30, 2005, inclusive, and from July 1, 2015, to June 30, 2016,
6898 inclusive, shall not be included in the term of any trustee serving on

6899 July 1, 2003, or July 1, 2015. The trustees shall serve without
6900 compensation except for reimbursement for necessary expenses
6901 incurred in performing their duties. The board of trustees shall
6902 establish rules of procedure for the conduct of its business which shall
6903 include, but not be limited to, criteria, processes and procedures to be
6904 used in selecting programs to receive money from the trust fund. The
6905 trust fund shall be within the Office of Policy and Management for
6906 administrative purposes only. The board of trustees shall meet not less
6907 than biannually, except during the fiscal years ending June 30, 2004,
6908 [and] June 30, 2005, and June 30, 2016, and, not later than January first
6909 of each year, except during the fiscal years ending June 30, 2004, [and]
6910 June 30, 2005, and June 30, 2016, shall submit a report of its activities
6911 and accomplishments to the joint standing committees of the General
6912 Assembly having cognizance of matters relating to public health and
6913 appropriations and the budgets of state agencies, in accordance with
6914 section 11-4a.

6915 (d) (1) During the period commencing July 1, 2000, and ending June
6916 30, 2003, the board of trustees, by majority vote, may recommend
6917 authorization of disbursement from the trust fund for the purposes
6918 described in subsection (a) of this section and section 19a-6c, provided
6919 the board may not recommend authorization of disbursement of more
6920 than fifty per cent of net earnings from the principal of the trust fund
6921 for such purposes. For the fiscal year commencing July 1, 2005, and
6922 each fiscal year thereafter, the board may recommend authorization of
6923 the net earnings from the principal of the trust fund for such purposes.
6924 For the fiscal year ending June 30, 2009, and each fiscal year thereafter,
6925 the board may recommend authorization of disbursement for such
6926 purposes of (A) up to one-half of the annual disbursement from the
6927 Tobacco Settlement Fund to the Tobacco and Health Trust Fund from
6928 the previous fiscal year, pursuant to section 4-28e, up to a maximum of
6929 six million dollars per fiscal year, and (B) the net earnings from the
6930 principal of the trust fund from the previous fiscal year. For the fiscal
6931 years ending June 30, 2014, and June 30, 2015, the board may

6932 recommend authorization of disbursement of up to three million
6933 dollars per fiscal year from the trust fund for such purposes. For the
6934 fiscal year ending June 30, 2017, and each fiscal year thereafter, the
6935 board may recommend authorization of disbursement for such
6936 purposes of (A) up to one-half of the annual disbursement from the
6937 Tobacco Settlement Fund to the Tobacco and Health Trust Fund from
6938 the previous fiscal year, pursuant to section 4-28e, up to a maximum of
6939 six million dollars per fiscal year, and (B) the net earnings from the
6940 principal of the trust fund from the previous fiscal year. The board's
6941 recommendations shall give (i) priority to programs that address
6942 tobacco and substance abuse and serve minors, pregnant women and
6943 parents of young children, and (ii) consideration to the availability of
6944 private matching funds. Recommended disbursements from the trust
6945 fund shall be in addition to any resources that would otherwise be
6946 appropriated by the state for such purposes and programs.

6947 (2) Except during the fiscal years ending June 30, 2004, **[**and**]** June
6948 30, 2005, and June 30, 2016, the board of trustees shall submit such
6949 recommendations for the authorization of disbursement from the trust
6950 fund to the joint standing committees of the General Assembly having
6951 cognizance of matters relating to public health and appropriations and
6952 the budgets of state agencies. Not later than thirty days after receipt of
6953 such recommendations, said committees shall advise the board of their
6954 approval, modifications, if any, or rejection of the board's
6955 recommendations. If said joint standing committees do not concur, the
6956 speaker of the House of Representatives, the president pro tempore of
6957 the Senate, the majority leader of the House of Representatives, the
6958 majority leader of the Senate, the minority leader of the House of
6959 Representatives and the minority leader of the Senate each shall
6960 appoint one member from each of said joint standing committees to
6961 serve as a committee on conference. The committee on conference shall
6962 submit its report to both committees, which shall vote to accept or
6963 reject the report. The report of the committee on conference may not be
6964 amended. If a joint standing committee rejects the report of the

6965 committee on conference, the board's recommendations shall be
6966 deemed approved. If the joint standing committees accept the report of
6967 the committee on conference, the joint standing committee having
6968 cognizance of matters relating to appropriations and the budgets of
6969 state agencies shall advise the board of said joint standing committees'
6970 approval or modifications, if any, of the board's recommended
6971 disbursement. If said joint standing committees do not act within thirty
6972 days after receipt of the board's recommendations for the
6973 authorization of disbursement, such recommendations shall be
6974 deemed approved. Disbursement from the trust fund shall be in
6975 accordance with the board's recommendations as approved or
6976 modified by said joint standing committees.

6977 (3) After such recommendations for the authorization of
6978 disbursement have been approved or modified pursuant to
6979 subdivision (2) of this subsection, any modification in the amount of an
6980 authorized disbursement in excess of fifty thousand dollars or ten per
6981 cent of the authorized amount, whichever is less, shall be submitted to
6982 said joint standing committees and approved, modified or rejected in
6983 accordance with the procedure set forth in subdivision (2) of this
6984 subsection. Notification of all disbursements from the trust fund made
6985 pursuant to this section shall be sent to the joint standing committees
6986 of the General Assembly having cognizance of matters relating to
6987 public health and appropriations and the budgets of state agencies,
6988 through the Office of Fiscal Analysis.

6989 (4) The board of trustees shall, not later than February first of each
6990 year, except during the fiscal years ending June 30, 2004, **[**and**]** June 30,
6991 2005, <u>and June 30, 2016,</u> submit a report to the General Assembly, in
6992 accordance with the provisions of section 11-4a, that includes all
6993 disbursements and other expenditures from the trust fund and an
6994 evaluation of the performance and impact of each program receiving
6995 funds from the trust fund. Such report shall also include the criteria
6996 and application process used to select programs to receive such funds.

6997 Sec. 153. Subsection (a) of section 17b-340 of the general statutes is
6998 repealed and the following is substituted in lieu thereof (*Effective July*
6999 *1, 2013*):

7000 (a) The rates to be paid by or for persons aided or cared for by the
7001 state or any town in this state to licensed chronic and convalescent
7002 nursing homes, to chronic disease hospitals associated with chronic
7003 and convalescent nursing homes, to rest homes with nursing
7004 supervision, to licensed residential care homes, as defined by section
7005 19a-490, and to residential facilities for the mentally retarded which are
7006 licensed pursuant to section 17a-227 and certified to participate in the
7007 Title XIX Medicaid program as intermediate care facilities for the
7008 mentally retarded, for room, board and services specified in licensing
7009 regulations issued by the licensing agency shall be determined
7010 annually, except as otherwise provided in this subsection, after a
7011 public hearing, by the Commissioner of Social Services, to be effective
7012 July first of each year except as otherwise provided in this subsection.
7013 Such rates shall be determined on a basis of a reasonable payment for
7014 such necessary services, which basis shall take into account as a factor
7015 the costs of such services. Cost of such services shall include
7016 reasonable costs mandated by collective bargaining agreements with
7017 certified collective bargaining agents or other agreements between the
7018 employer and employees, provided "employees" shall not include
7019 persons employed as managers or chief administrators or required to
7020 be licensed as nursing home administrators, and compensation for
7021 services rendered by proprietors at prevailing wage rates, as
7022 determined by application of principles of accounting as prescribed by
7023 said commissioner. Cost of such services shall not include amounts
7024 paid by the facilities to employees as salary, or to attorneys or
7025 consultants as fees, where the responsibility of the employees,
7026 attorneys, or consultants is to persuade or seek to persuade the other
7027 employees of the facility to support or oppose unionization. Nothing
7028 in this subsection shall prohibit inclusion of amounts paid for legal
7029 counsel related to the negotiation of collective bargaining agreements,

7030 the settlement of grievances or normal administration of labor
7031 relations. The commissioner may, in his or her discretion, allow the
7032 inclusion of extraordinary and unanticipated costs of providing
7033 services which were incurred to avoid an immediate negative impact
7034 on the health and safety of patients. The commissioner may, in his or
7035 her discretion, based upon review of a facility's costs, direct care staff
7036 to patient ratio and any other related information, revise a facility's
7037 rate for any increases or decreases to total licensed capacity of more
7038 than ten beds or changes to its number of licensed rest home with
7039 nursing supervision beds and chronic and convalescent nursing home
7040 beds. The commissioner may so revise a facility's rate established for
7041 the fiscal year ending June 30, 1993, and thereafter for any bed
7042 increases, decreases or changes in licensure effective after October 1,
7043 1989. Effective July 1, 1991, in facilities which have both a chronic and
7044 convalescent nursing home and a rest home with nursing supervision,
7045 the rate for the rest home with nursing supervision shall not exceed
7046 such facility's rate for its chronic and convalescent nursing home. All
7047 such facilities for which rates are determined under this subsection
7048 shall report on a fiscal year basis ending on the thirtieth day of
7049 September. Such report shall be submitted to the commissioner by the
7050 thirty-first day of December. Each for-profit chronic and convalescent
7051 nursing home and rest home with nursing supervision which receives
7052 state funding pursuant to this section shall include in such annual
7053 report a profit and loss statement from each related party that receives
7054 from such for-profit chronic and convalescent nursing home ten
7055 thousand dollars or more a year for goods, fees and services. Each
7056 chronic and convalescent nursing home and rest home with nursing
7057 supervision which receives state funding pursuant to this section shall
7058 provide in such annual report detailed information on direct care staff,
7059 including, but not limited to: (1) Regular hours and wages, (2)
7060 overtime hours and wages, (3) benefit hours and wages, and (4)
7061 employee health and welfare benefits. Each direct care and
7062 administrative nurse position shall be reported as a separate line item.
7063 For purposes of this subsection, (A) a "related party" includes, but is

7064 not limited to, any company related to such for-profit chronic and
7065 convalescent nursing home through family association, common
7066 ownership, control or business association with any of the owners,
7067 operators or officials of such nursing home; (B) "company" means any
7068 person, partnership, association, company, holding company, limited
7069 liability company or corporation; (C) "family association" means a
7070 relationship by birth, marriage or domestic partnership; and (D) "profit
7071 and loss statement" means the most recent annual statement on profits
7072 and losses finalized by a related party before the annual report
7073 mandated under this subsection. The commissioner may reduce the
7074 rate in effect for a facility which fails to report on or before such date
7075 by an amount not to exceed ten per cent of such rate. The
7076 commissioner shall annually, on or before the fifteenth day of
7077 February, report the data contained in the reports of such facilities to
7078 the joint standing committee of the General Assembly having
7079 cognizance of matters relating to appropriations. For the cost reporting
7080 year commencing October 1, 1985, and for subsequent cost reporting
7081 years, facilities shall report the cost of using the services of any nursing
7082 pool employee by separating said cost into two categories, the portion
7083 of the cost equal to the salary of the employee for whom the nursing
7084 pool employee is substituting shall be considered a nursing cost and
7085 any cost in excess of such salary shall be further divided so that
7086 seventy-five per cent of the excess cost shall be considered an
7087 administrative or general cost and twenty-five per cent of the excess
7088 cost shall be considered a nursing cost, provided if the total nursing
7089 pool costs of a facility for any cost year are equal to or exceed fifteen
7090 per cent of the total nursing expenditures of the facility for such cost
7091 year, no portion of nursing pool costs in excess of fifteen per cent shall
7092 be classified as administrative or general costs. The commissioner, in
7093 determining such rates, shall also take into account the classification of
7094 patients or boarders according to special care requirements or
7095 classification of the facility according to such factors as facilities and
7096 services and such other factors as he or she deems reasonable,
7097 including anticipated fluctuations in the cost of providing such

7098 services. The commissioner may establish a separate rate for a facility
7099 or a portion of a facility for traumatic brain injury patients who require
7100 extensive care but not acute general hospital care. Such separate rate
7101 shall reflect the special care requirements of such patients. If changes
7102 in federal or state laws, regulations or standards adopted subsequent
7103 to June 30, 1985, result in increased costs or expenditures in an amount
7104 exceeding one-half of one per cent of allowable costs for the most
7105 recent cost reporting year, the commissioner shall adjust rates and
7106 provide payment for any such increased reasonable costs or
7107 expenditures within a reasonable period of time retroactive to the date
7108 of enforcement. Nothing in this section shall be construed to require
7109 the Department of Social Services to adjust rates and provide payment
7110 for any increases in costs resulting from an inspection of a facility by
7111 the Department of Public Health. Such assistance as the commissioner
7112 requires from other state agencies or departments in determining rates
7113 shall be made available to **[**him**]** the commissioner at his or her request.
7114 Payment of the rates established hereunder shall be conditioned on the
7115 establishment by such facilities of admissions procedures which
7116 conform with this section, section 19a-533 and all other applicable
7117 provisions of the law and the provision of equality of treatment to all
7118 persons in such facilities. The established rates shall be the maximum
7119 amount chargeable by such facilities for care of such beneficiaries, and
7120 the acceptance by or on behalf of any such facility of any additional
7121 compensation for care of any such beneficiary from any other person
7122 or source shall constitute the offense of aiding a beneficiary to obtain
7123 aid to which he or she is not entitled and shall be punishable in the
7124 same manner as is provided in subsection (b) of section 17b-97. For the
7125 fiscal year ending June 30, 1992, rates for licensed residential care
7126 homes and intermediate care facilities for the mentally retarded may
7127 receive an increase not to exceed the most recent annual increase in the
7128 Regional Data Resources Incorporated McGraw-Hill Health Care
7129 Costs: Consumer Price Index (all urban)-All Items. Rates for newly
7130 certified intermediate care facilities for the mentally retarded shall not
7131 exceed one hundred fifty per cent of the median rate of rates in effect

7132 on January 31, 1991, for intermediate care facilities for the mentally
7133 retarded certified prior to February 1, 1991. Notwithstanding any
7134 provision of this section, the Commissioner of Social Services may,
7135 within available appropriations, provide an interim rate increase for a
7136 licensed chronic and convalescent nursing home or a rest home with
7137 nursing supervision for rate periods no earlier than April 1, 2004, only
7138 if the commissioner determines that the increase is necessary to avoid
7139 the filing of a petition for relief under Title 11 of the United States
7140 Code; imposition of receivership pursuant to sections 19a-541 to 19a-
7141 549, inclusive; or substantial deterioration of the facility's financial
7142 condition that may be expected to adversely affect resident care and
7143 the continued operation of the facility, and the commissioner
7144 determines that the continued operation of the facility is in the best
7145 interest of the state. The commissioner shall consider any requests for
7146 interim rate increases on file with the department from March 30, 2004,
7147 and those submitted subsequently for rate periods no earlier than
7148 April 1, 2004. When reviewing a rate increase request the
7149 commissioner shall, at a minimum, consider: **[**(1)**]** (i) Existing chronic
7150 and convalescent nursing home or rest home with nursing supervision
7151 utilization in the area and projected bed need; **[**(2)**]** (ii) physical plant
7152 long-term viability and the ability of the owner or purchaser to
7153 implement any necessary property improvements; **[**(3)**]** (iii) licensure
7154 and certification compliance history; **[**(4)**]** (iv) reasonableness of actual
7155 and projected expenses; and **[**(5)**]** (v) the ability of the facility to meet
7156 wage and benefit costs. No rate shall be increased pursuant to this
7157 subsection in excess of one hundred fifteen per cent of the median rate
7158 for the facility's peer grouping, established pursuant to subdivision (2)
7159 of subsection (f) of this section, unless recommended by the
7160 commissioner and approved by the Secretary of the Office of Policy
7161 and Management after consultation with the commissioner. Such
7162 median rates shall be published by the Department of Social Services
7163 not later than April first of each year. In the event that a facility
7164 granted an interim rate increase pursuant to this section is sold or
7165 otherwise conveyed for value to an unrelated entity less than five years

after the effective date of such rate increase, the rate increase shall be deemed rescinded and the department shall recover an amount equal to the difference between payments made for all affected rate periods and payments that would have been made if the interim rate increase was not granted. The commissioner may seek recovery from payments made to any facility with common ownership. With the approval of the Secretary of the Office of Policy and Management, the commissioner may waive recovery and rescission of the interim rate for good cause shown that is not inconsistent with this section, including, but not limited to, transfers to family members that were made for no value. The commissioner shall provide written quarterly reports to the joint standing committees of the General Assembly having cognizance of matters relating to aging, human services and appropriations and the budgets of state agencies, **[**and to the select committee of the General Assembly having cognizance of matters relating to aging,**]** that identify each facility requesting an interim rate increase, the amount of the requested rate increase for each facility, the action taken by the commissioner and the secretary pursuant to this subsection, and estimates of the additional cost to the state for each approved interim rate increase. Nothing in this subsection shall prohibit the commissioner from increasing the rate of a licensed chronic and convalescent nursing home or a rest home with nursing supervision for allowable costs associated with facility capital improvements or increasing the rate in case of a sale of a licensed chronic and convalescent nursing home or a rest home with nursing supervision, pursuant to subdivision (15) of subsection (f) of this section, if receivership has been imposed on such home.

Sec. 154. (*Effective from passage*) (a) The Commissioner of Education, in consultation with the Commissioner of Public Health, shall, to the extent that private or federal government funds are available and at no cost to the state, establish a pilot program to study the incidence of injuries, and concussions in particular, to high school students during participation in interscholastic athletic activities. The Commissioner of

7199 Education shall make grants-in-aid from available funds to twenty
7200 high schools for the purpose of monitoring such injuries during a two-
7201 year period and reporting the occurrence of such injuries to the
7202 Commissioner of Education, in the form and manner prescribed by the
7203 Commissioner of Education. Any high school that receives a grant-in-
7204 aid shall monitor and report such injuries with the cooperation of the
7205 school athletic director, licensed athletic trainers that provide services
7206 to the school, any physician associated with the school athletic
7207 program and the Connecticut Interscholastic Athletic Conference. The
7208 Commissioner of Education may accept funds from private and federal
7209 government sources for the purpose of making such grants-in-aid.

7210 (b) Not later than one year after commencement of the pilot
7211 program, described in subsection (a) of this section, the Commissioner
7212 of Education shall report, in accordance with the provisions of section
7213 11-4a of the general statutes, to the joint standing committees of the
7214 General Assembly having cognizance of matters relating to public
7215 health and education. Such report shall include a summary of the
7216 reports submitted to the commissioner in accordance with subsection
7217 (a) of this section and recommendations for decreasing the number
7218 and severity of injuries incurred by students during high school
7219 athletic activities.

7220 Sec. 155. Section 19a-521d of the general statutes is repealed and the
7221 following is substituted in lieu thereof (*Effective July 1, 2013*):

7222 A medical director of a nursing home facility, as defined in section
7223 19a-521, may establish protocols for a prescription drug formulary
7224 system in accordance with guidelines established by the American
7225 Society of Health-System Pharmacists and any applicable collaborative
7226 drug therapy management agreement, as described in section 20-631.
7227 The medical director of a nursing home facility that implements a
7228 prescription drug formulary system may make a substitution for a
7229 drug prescribed to a patient of the facility in accordance with the
7230 provisions of this section. Prior to making any substitution for a drug

7231 prescribed to a patient of the facility in accordance with the facility's
7232 protocols, the medical director, or the medical director's designee, shall
7233 notify the prescribing practitioner of the medical director's intention to
7234 make such substitution. If the prescribing practitioner does not
7235 authorize the medical director or the medical director's designee to
7236 make such substitution or objects to such substitution, the medical
7237 director, or the medical director's designee, shall not make the
7238 substitution. Notwithstanding the provisions of this section, a facility,
7239 when administering prescription drugs to a patient who receives
7240 benefits under a medical assistance program administered by the
7241 Department of Social Services, shall consider and administer
7242 prescription drugs to such patient in accordance with (1) the
7243 department's preferred drug **[**lists**]** list, developed in accordance with
7244 section 17b-274d, (2) prescription drug formularies under Medicare
7245 Part D, or (3) the patient's health insurance policy, as the medical
7246 director of the nursing home facility deems appropriate.

7247 Sec. 156. (NEW) (*Effective October 1, 2013*) (a) (1) On and after the
7248 effective date of this section, the Department of Children and Families
7249 shall, within available appropriations, ensure that each child thirty-six
7250 months of age or younger who has been substantiated as a victim of
7251 abuse or neglect is screened for both developmental and social-
7252 emotional delays using validated assessment tools such as the Ages
7253 and Stages and the Ages and Stages-Social/Emotional Questionnaires,
7254 or their equivalents. The department shall ensure that such screenings
7255 are administered to any such child twice annually, unless such child
7256 has been found to be eligible for the birth-to-three program,
7257 established under section 17a-248b of the general statutes.

7258 (2) On and after July 1, 2015, the department shall ensure that each
7259 child thirty-six months of age or younger who is being served through
7260 the department's differential response program, established under
7261 section 17a-101g of the general statutes, is screened for both
7262 developmental and social-emotional delays using validated
7263 assessment tools such as the Ages and Stages and the Ages and Stages-

7264 Social/Emotional Questionnaires, or their equivalents, unless such
7265 child has been found to be eligible for the birth-to-three program.

7266 (b) The department shall refer any child exhibiting developmental
7267 or social-emotional delays pursuant to such screenings to the birth-to-
7268 three program. The department shall refer any child who is not found
7269 eligible for services under the birth-to-three program to the Help Me
7270 Grow prevention program of the Children's Trust Fund or a similar
7271 program which the department deems appropriate.

7272 (c) Not later than July 1, 2014, and annually thereafter, the
7273 department shall submit, in accordance with the provisions of section
7274 11-4a of the general statutes, a report to the joint standing committee of
7275 the General Assembly having cognizance of matters relating to
7276 children for inclusion in the annual report card prepared pursuant to
7277 section 2-53m of the general statutes on the status of the screening and
7278 referral program authorized pursuant to subsection (a) of this section.
7279 Such report shall include: (1) The number of children thirty-six months
7280 of age or younger within the state who have been substantiated as
7281 victims of abuse or neglect within the preceding twelve months; (2) the
7282 number of children thirty-six months of age or younger within the
7283 state who have been served through the department's differential
7284 response program within the preceding twelve months; (3) the number
7285 of children who were screened for developmental and social-emotional
7286 delays pursuant to subsection (a) of this section by the department or
7287 by a provider contracted by the department within the preceding
7288 twelve months; (4) the number of children in subdivisions (1) and (2)
7289 of this subsection referred for evaluation under the birth-to-three
7290 program within the preceding twelve months, the number of such
7291 children actually evaluated under such program, the number of such
7292 children found eligible for services under such program and the
7293 services for which such children were found eligible under such
7294 program; and (5) the number of children described in subdivisions (1)
7295 and (2) of this subsection receiving evidence-based developmental
7296 support services through the birth-to-three program or through a

7297 provider contracted by the department within the preceding twelve
7298 months.

7299 Sec. 157. Sections 8-45b, 8-81a, 8-385, 8-415 to 8-419, inclusive, 16a-
7300 40k, 17a-54a and 17b-260d of the general statutes are repealed.
7301 (*Effective July 1, 2013*)

7302 Sec. 158. Sections 17a-220, 17b-261n, 17b-311, 17b-490, 17b-491, 17b-
7303 492 and 17b-493 to 17b-498, inclusive, of the general statutes are
7304 repealed. (*Effective January 1, 2014*)

7305 Sec. 159. Section 19a-92a of the general statutes is repealed. (*Effective*
7306 *July 1, 2014*)

This act shall take effect as follows and shall amend the following sections:		
Section 1	*July 1, 2013*	New section
Sec. 2	*from passage*	New section
Sec. 3	*July 1, 2013*	8-37i(c)
Sec. 4	*July 1, 2013*	8-37r(b)
Sec. 5	*July 1, 2013*	8-121(a)
Sec. 6	*July 1, 2013*	8-206a(g)
Sec. 7	*July 1, 2013*	32-1k
Sec. 8	*July 1, 2013*	32-1*l*
Sec. 9	*July 1, 2013*	New section
Sec. 10	*July 1, 2013*	4a-60g(b)
Sec. 11	*July 1, 2013*	8-30g(a)(8)
Sec. 12	*July 1, 2013*	17b-2
Sec. 13	*July 1, 2013*	8-37s
Sec. 14	*July 1, 2013*	8-37t
Sec. 15	*July 1, 2013*	8-37u
Sec. 16	*July 1, 2013*	8-37nnn(b)
Sec. 17	*July 1, 2013*	8-37z
Sec. 18	*July 1, 2013*	8-37bb
Sec. 19	*July 1, 2013*	8-37ff
Sec. 20	*July 1, 2013*	8-37kk
Sec. 21	*July 1, 2013*	8-37*ll*
Sec. 22	*July 1, 2013*	8-37yy

Sec. 23	*July 1, 2013*	8-64a
Sec. 24	*July 1, 2013*	8-68c(b)
Sec. 25	*July 1, 2013*	8-76
Sec. 26	*July 1, 2013*	8-119f
Sec. 27	*July 1, 2013*	8-119n
Sec. 28	*July 1, 2013*	8-119t
Sec. 29	*July 1, 2013*	8-119kk
Sec. 30	*July 1, 2013*	8-119*ll*
Sec. 31	*July 1, 2013*	8-214d
Sec. 32	*July 1, 2013*	8-218h(a)
Sec. 33	*from passage*	8-244(a)
Sec. 34	*July 1, 2013*	8-378
Sec. 35	*July 1, 2013*	10-416b(e) and (f)
Sec. 36	*July 1, 2013, and applicable to assessment years commencing on or after October 1, 2012*	12-120b
Sec. 37	*July 1, 2013*	New section
Sec. 38	*July 1, 2013, and applicable to applications received on and after April 1, 2013*	12-170d
Sec. 39	*July 1, 2013*	12-170f(a)
Sec. 40	*July 1, 2013*	12-170g
Sec. 41	*July 1, 2013*	New section
Sec. 42	*July 1, 2013*	12-170bb
Sec. 43	*July 1, 2013*	16a-35c
Sec. 44	*July 1, 2013*	25-68d(g) and (h)
Sec. 45	*July 1, 2013*	17b-90(b)
Sec. 46	*July 1, 2013*	17b-347e
Sec. 47	*July 1, 2013*	17b-800
Sec. 48	*July 1, 2013*	17b-800a
Sec. 49	*July 1, 2013*	17b-806
Sec. 50	*July 1, 2013*	17b-813
Sec. 51	*July 1, 2013*	32-601(b)
Sec. 52	*July 1, 2013*	32-602(b)
Sec. 53	*July 1, 2013*	32-616(b)
Sec. 54	*July 1, 2013*	32-1m
Sec. 55	*July 1, 2013*	New section
Sec. 56	*July 1, 2013*	13b-79s

Sec. 57	*July 1, 2013*	10-16nn(a)
Sec. 58	*July 1, 2013*	8-336f(c)
Sec. 59	*July 1, 2013*	21-84a
Sec. 60	*July 1, 2013*	8-37qq
Sec. 61	*July 1, 2013*	13b-69
Sec. 62	*July 1, 2013*	16a-40a
Sec. 63	*July 1, 2013*	16a-40b(f)
Sec. 64	*July 1, 2013*	16a-40j(d)
Sec. 65	*July 1, 2013*	22a-2d(e)
Sec. 66	*July 1, 2013*	8-252a(a)
Sec. 67	*July 1, 2013*	8-206f
Sec. 68	*July 1, 2013*	8-336p(g)
Sec. 69	*July 1, 2013*	New section
Sec. 70	*July 1, 2013*	10-295(b)
Sec. 71	*October 1, 2013*	46b-129(j)(4) to (6)
Sec. 72	*October 1, 2013*	46b-129(k)(1)
Sec. 73	*July 1, 2013*	17b-340(h)(1)
Sec. 74	*July 1, 2013*	17b-340(f)(4)
Sec. 75	*July 1, 2013*	17b-340(g)
Sec. 76	*July 1, 2013*	17b-239
Sec. 77	*July 1, 2013*	17b-239e(b)
Sec. 78	*July 1, 2013*	17b-242(a)
Sec. 79	*July 1, 2013*	17b-261m(a)
Sec. 80	*July 1, 2013*	17b-28e
Sec. 81	*July 1, 2013*	17b-280
Sec. 82	*January 1, 2014*	17b-256f
Sec. 83	*January 1, 2014*	17b-551
Sec. 84	*January 1, 2014*	17b-552
Sec. 85	*from passage*	17b-278i(a)
Sec. 86	*January 1, 2014*	17b-10a
Sec. 87	*January 1, 2014*	38a-556a(b)
Sec. 88	*January 1, 2014*	29-1s(a)
Sec. 89	*January 1, 2014*	12-746(e)
Sec. 90	*January 1, 2014*	10a-132e(b)
Sec. 91	*January 1, 2014*	17a-22f(a)
Sec. 92	*January 1, 2014*	17b-28(a)
Sec. 93	*January 1, 2014*	17b-261m(a)
Sec. 94	*January 1, 2014*	17b-274
Sec. 95	*January 1, 2014*	17b-274a

Sec. 96	*January 1, 2014*	17b-274c(a)
Sec. 97	*January 1, 2014*	17b-274d(e)
Sec. 98	*January 1, 2014*	17b-274e
Sec. 99	*January 1, 2014*	17b-280(a)
Sec. 100	*January 1, 2014*	17b-491b
Sec. 101	*January 1, 2014*	20-619(c)
Sec. 102	*July 1, 2013*	New section
Sec. 103	*January 1, 2014*	17b-90(b)
Sec. 104	*from passage*	17b-301b(a)
Sec. 105	*July 1, 2013*	17a-22p
Sec. 106	*July 1, 2013*	17a-22h
Sec. 107	*July 1, 2013*	17b-244(a)
Sec. 108	*July 1, 2013*	17b-403(b)
Sec. 109	*July 1, 2013*	17b-607
Sec. 110	*from passage*	New section
Sec. 111	*July 1, 2013*	17b-499a(e)
Sec. 112	*July 1, 2013*	17b-276c
Sec. 113	*from passage*	17b-359(b)
Sec. 114	*July 1, 2013*	17b-263c(b)
Sec. 115	*July 1, 2013*	New section
Sec. 116	*January 1, 2014*	New section
Sec. 117	*July 1, 2013*	17b-239c(a)
Sec. 118	*from passage*	17b-340c(a)
Sec. 119	*January 1, 2014*	17a-22h(a)
Sec. 120	*January 1, 2014*	17a-22j(b)(11)
Sec. 121	*July 1, 2013*	SB 972 (current session), 8 (b)(7)
Sec. 122	*July 1, 2013*	17b-370
Sec. 123	*July 1, 2013*	New section
Sec. 124	*July 1, 2013*	New section
Sec. 125	*July 1, 2013*	New section
Sec. 126	*July 1, 2013*	17b-349(a)
Sec. 127	*July 1, 2013*	New section
Sec. 128	*October 1, 2013*	17b-261
Sec. 129	*October 1, 2013*	New section
Sec. 130	*October 1, 2013*	New section
Sec. 131	*October 1, 2013*	New section
Sec. 132	*October 1, 2013*	New section
Sec. 133	*October 1, 2013*	New section

Sec. 134	*October 1, 2013*	New section
Sec. 135	*October 1, 2013*	New section
Sec. 136	*October 1, 2013*	New section
Sec. 137	*October 1, 2013*	New section
Sec. 138	*October 1, 2013*	19a-14(c)
Sec. 139	*July 1, 2014*	20-9(b)
Sec. 140	*from passage and applicable to registration periods beginning on and after October 1, 2013*	19a-88
Sec. 141	*July 1, 2013*	19a-491
Sec. 142	*July 1, 2013*	New section
Sec. 143	*July 1, 2013*	19a-7j(a)
Sec. 144	*July 1, 2013*	New section
Sec. 145	*October 1, 2013*	19a-639
Sec. 146	*July 1, 2013*	19a-323(b)
Sec. 147	*October 1, 2013*	10a-109ii
Sec. 148	*October 1, 2013*	19a-649
Sec. 149	*October 1, 2013*	19a-653(a)
Sec. 150	*October 1, 2013*	19a-681
Sec. 151	*July 1, 2013*	8-30g(k)
Sec. 152	*from passage*	4-28f
Sec. 153	*July 1, 2013*	17b-340(a)
Sec. 154	*from passage*	New section
Sec. 155	*July 1, 2013*	19a-521d
Sec. 156	*October 1, 2013*	New section
Sec. 157	*July 1, 2013*	Repealer section
Sec. 158	*January 1, 2014*	Repealer section
Sec. 159	*July 1, 2014*	Repealer section