



# OLR RESEARCH REPORT

October 4, 2013

2013-R-0385

## **2013 LEGISLATION IMPACTING CHILDREN WITH SPECIAL NEEDS**

By: Katherine Dwyer, Legislative Analyst II

You asked for new laws and law updates from the 2013 legislative session that impact children with special needs.

### **SUMMARY**

In 2013, the legislature passed several laws impacting children with special needs, including laws that:

1. establish a mental health first aid training program;
2. establish regional behavioral health consultation and care coordination program for primary care providers who serve children;
3. address insurance coverage for autism spectrum disorder;
4. expand the definition of “physically helpless” in cases of 2<sup>nd</sup> and 4<sup>th</sup> degree sexual assault to include someone physically unable to resist an act of sexual intercourse or sexual contact;
5. address children’s mental, emotional, and behavioral health;
6. establish a Department of Public Health (DPH) advisory council on pediatric autoimmune neuropsychiatric disorder associated with streptococcal infections (PANDAS) and pediatric acute neuropsychiatric syndrome (PANS);

7. change the fund allocation requirements for the Department of Rehabilitative Services' (DORS) educational services to blind and visually impaired children; and
8. require the Department of Children and Families (DCF) to screen certain children under age three for developmental and social-emotional delays.

## **MENTAL HEALTH FIRST AID TRAINING**

### ***Department of Mental Health and Addiction Services (DMHAS) Requirements***

The law requires the DMHAS commissioner, in consultation with the education commissioner, to administer a mental health first aid training program. Participants must include all district safe school climate coordinators and may include teachers, school nurses, counselors, and other school employees at the discretion of each local or regional board of education.

DMHAS must provide training for individuals appointed to serve as district safe school climate coordinators for the 2014-15 school year. These individuals must successfully complete the training. For the 2015-16 school year, only district safe school climate coordinators who did not yet successfully complete the training or serve in the position during the prior school year must successfully complete the training. Coordinators only have to successfully complete the training once.

Training must teach participants how to (1) recognize signs of mental disorders in children and young adults and (2) connect such children and youth with professionals who can provide suitable mental health services. The commissioners administering this training may seek funding from the federal or state government, as well as from private donors.

### ***State Board of Education (SBE) Requirements***

The law requires the SBE, within available appropriations and material, to help and encourage school boards to include mental health first aid training as part of their in-service training programs for certified teachers, administrators, and other pupil personnel.

## ***State Department of Education (SDE) Requirements***

The law also requires the SDE commissioner to consider whether to require mental health first aid training as part of teacher education programs leading to professional certification. By January 1, 2014, he must report his recommendation on this matter to the Appropriations, Education, and Public Health committees.

[PA 13-3 §§ 64, 65, & 90](#), effective upon passage.

## **CHILD PRIMARY CARE PROVIDER REGIONAL CONSULTATION AND CARE COORDINATION**

Under a new law, the DCF commissioner, by January 1, 2014, must establish and implement a regional behavioral health consultation and care coordination program for primary care providers who serve children. The program must provide the providers with:

1. timely access to a consultation team that includes a child psychiatrist, social worker, and care coordinator;
2. patient care coordination and transitional services for behavioral health care; and
3. training and education on patient access to behavioral health services.

The DCF commissioner must submit a program plan by October 1, 2013 to the Appropriations, Children's, Human Services, and Public Health committees.

[PA 13-3 § 69](#), effective upon passage.

## **AUTISM SPECTRUM DISORDER LEGISLATION**

A new law creates a 23-member Autism Spectrum Disorder Advisory Council to advise the Department of Developmental Services on autism issues. This council is a successor to an independent council previously established.

[PA 13-20](#), effective July 1, 2013.

Under another new law, certain health insurance policies must at least maintain current levels of benefits for insureds diagnosed with autism spectrum disorder before the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM) was released (i.e., May 2013).

By law, the affected individual and group policies must provide benefits to diagnose and treat “mental or nervous conditions.” These conditions are mental disorders as defined by the most recent edition of the DSM. Prior law required these policies to provide specific services for insureds to treat autism spectrum disorder, as was described in the most recent edition of the DSM, to the extent such services were a covered benefit for other diseases and conditions under the policy. In addition, individual and group policies had to cover medically necessary early intervention services provided as part of an individualized service plan for children up to age three who have, or are at risk of having, developmental delays (birth-to-three programs). The new law instead requires, in each case, that the insurer at least maintain coverage at the level provided immediately before May 2013 for insureds diagnosed with autism spectrum disorder before that date.

[PA 13-84](#), effective upon passage.

### **SEXUAL ASSAULT OF A PHYSICALLY HELPLESS PERSON**

A new law adds to and updates certain factors for determining guilt in cases of 2<sup>nd</sup> and 4<sup>th</sup> degree sexual assault involving someone with a physical or mental disability. Specifically, it expands the definition of “physically helpless” to include someone physically unable to resist an act of sexual intercourse or sexual contact. Existing law includes within the definition someone who is unconscious or otherwise physically unable to communicate unwillingness to engage in the act. The state Supreme Court recently ruled that physical incapacity does not necessarily render someone physically helpless under that provision of the law.

[PA 13-47](#), effective October 1, 2013.

### **CHILDREN'S MENTAL, EMOTIONAL, AND BEHAVIORAL HEALTH**

A new law requires DCF and the Office of Early Childhood (OEC), in consultation and collaboration with various individuals and agencies, to take several steps to address Connecticut children's mental, emotional, and behavioral health needs. DCF must develop a comprehensive plan to (1) meet these needs and (2) prevent or reduce the long-term negative

impact of mental, emotional, and behavioral health issues on children. OEC must (1) design and implement a public information and education campaign on these issues and (2) provide recommendations to several legislative committees on coordinating home visitation programs that offer services to vulnerable families with young children.

The new law requires training for school resource officers, mental health care providers, pediatricians, and child care providers. It also requires the (1) state to seek existing public and private reimbursement for mental, emotional, and behavioral health services and (2) Birth-to-Three program to provide mental health services to children eligible for early intervention services under federal law.

The new law also establishes a 14-member task force to study the effects of nutrition, genetics, complementary and alternative treatments, and psychotropic drugs on children's mental, emotional, and behavioral health.

[PA 13-178](#), effective July 1, 2013, except the OEC provisions are effective on October 1, 2013.

### **DPH ADVISORY COUNCIL ON PANDAS AND PANS**

A new law establishes an advisory council on PANDAS and PANS. This council must advise the DPH commissioner on research, diagnosis, treatment, and education relating to these conditions. Starting January 1, 2014, it must annually report to the Public Health Committee.

According to the National Institute of Mental Health, PANDAS includes cases of children and adolescents with obsessive-compulsive disorder (OCD) or tic disorders, whose symptoms worsen following streptococcal infections. PANS includes all cases of children and adolescents with abrupt onset OCD, not just those associated with such infections.

[PA 13-187](#), effective upon passage.

### **EDUCATION OF BLIND AND VISUALLY IMPAIRED CHILDREN**

DORS uses funds from its Educational Aid for Blind and Visually Handicapped Children account to provide and pay for educational services to blind and visually impaired children. A new law eliminates the \$6,400 per child annual spending limit.

Prior law required DORS to spend funds from the account in the following order: (1) pay for specialized books, equipment, and material; (2) pay for teaching services that school districts request directly from the department; and (3) reimburse local school districts that directly hire teachers instead of using those employed by DORS. Under the new law, DORS no longer provides the school district reimbursements. The new law also eliminates the requirement that DORS give any remaining funds to local school districts on a pro rata basis, with a two-to-one credit ratio for Braille-learning students to non-Braille-learning students.

[PA 13-234 § 70](#), effective July 1, 2013.

### **DEVELOPMENTAL AND SOCIAL-EMOTIONAL DELAY SCREENING**

A new law requires DCF to ensure that children age 36 months or younger are screened for developmental and social-emotional delays if they are (1) substantiated abuse and neglect victims or (2) receiving DCF differential response program services. The department must do this starting October 1, 2013 for the former and July 1, 2015 for the latter.

[PA 13-234 § 154](#), effective October 1, 2013.

KD:ro