



General Assembly

February Session, 2014

Raised Bill No. 5580

LCO No. 2603



Referred to Committee on PLANNING AND DEVELOPMENT

Introduced by:
(PD)

***AN ACT CONCERNING THE PESTICIDE ADVISORY COUNCIL, THE
RECOMMENDATIONS OF THE EMERGENCY MEDICAL SERVICES
PRIMARY SERVICE AREA TASK FORCE AND THE ELIMINATION OF
A MUNICIPAL MANDATE.***

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

1 Section 1. Subsection (d) of section 22a-65 of the general statutes is
2 repealed and the following is substituted in lieu thereof (*Effective*
3 *October 1, 2014*):

4 (d) The commissioner shall establish a Pesticide Advisory Council
5 consisting of, but not limited to, the director of the Agricultural
6 Experiment Station, the Commissioner of Agriculture, the
7 Commissioner of Public Health, and the dean of the college of
8 agriculture of The University of Connecticut or their respective
9 designees. The council shall meet at least annually and the
10 commissioner may consult with the Pesticide Advisory Council on
11 technical matters involving the application and use of pesticides, the
12 determination of imminent hazards and the unreasonable adverse
13 effects on the environment before promulgating regulations or orders

14 in carrying out this part, subsection (a) of section 23-61a and sections
15 23-61b and 23-61f. The council shall, on an ongoing basis, review all
16 new pesticides for safety and effectiveness and report the results of
17 such review to the commissioner for consideration in making
18 regulations. The commissioner shall, in consultation with the Pesticide
19 Advisory Council, create, publish and regularly update a report on
20 best practices regarding the safe and effective use of synthetic and
21 organic pesticides for use by municipalities.

22 Sec. 2. Section 22a-65 of the general statutes is amended by adding
23 subsection (e) as follows (*Effective October 1, 2014*):

24 (NEW) (e) The commissioner shall establish a regional purchasing
25 program through which municipalities may purchase pesticides for a
26 reduced price.

27 Sec. 3. (*Effective October 1, 2014*) The Commissioner of Energy and
28 Environmental Protection shall, in consultation with the Pesticide
29 Advisory Council established pursuant to section 22a-65 of the general
30 statutes, as amended by this act, review the integrated pest
31 management monitoring web site maintained by the state of
32 Massachusetts for the purpose of determining whether to create a
33 similar resource in the state of Connecticut.

34 Sec. 4. Section 19a-181b of the general statutes is repealed and the
35 following is substituted in lieu thereof (*Effective October 1, 2014*):

36 (a) Not later than July 1, 2002, each municipality shall establish a
37 local emergency medical services plan. Such plan shall include the
38 written agreements or contracts developed between the municipality,
39 its emergency medical services providers and the public safety
40 answering point, as defined in section 28-25, that covers the
41 municipality. The plan shall also include, but not be limited to, the
42 following:

43 (1) The identification of levels of emergency medical services,

44 including, but not limited to: (A) The public safety answering point
45 responsible for receiving emergency calls and notifying and assigning
46 the appropriate provider to a call for emergency medical services; (B)
47 the emergency medical services provider that is notified for initial
48 response; (C) basic ambulance service; (D) advanced life support level;
49 and (E) mutual aid call arrangements;

50 (2) The name of the person or entity responsible for carrying out
51 each level of emergency medical services that the plan identifies;

52 (3) The establishment of performance standards for each segment of
53 the municipality's emergency medical services system; and

54 (4) Any subcontracts, written agreements or mutual aid call
55 agreements that emergency medical services providers may have with
56 other entities to provide services identified in the plan.

57 (b) In developing the plan required by subsection (a) of this section,
58 each municipality: (1) May consult with and obtain the assistance of its
59 regional emergency medical services council established pursuant to
60 section 19a-183, its regional emergency medical services coordinator
61 appointed pursuant to section 19a-186a, its regional emergency
62 medical services medical advisory committees and any sponsor
63 hospital, as defined in regulations adopted pursuant to section 19a-179,
64 located in the area identified in the plan; and (2) shall submit the plan
65 to its regional emergency medical services council for the council's
66 review and comment.

67 (c) Each municipality shall update the plan required by subsection
68 (a) of this section as the municipality determines is necessary. The
69 municipality shall consult with the municipality's primary service area
70 responder concerning any updates to the plan. The Department of
71 Public Health shall assist each municipality in the process of updating
72 the plan by providing technical assistance and helping to resolve any
73 disagreements concerning the provisions of the plan.

74 (d) Not less than once every five years, the department shall review
75 a municipality's plan and the primary service area responder's
76 provision of services under the plan. Such review shall include an
77 evaluation of such responder's compliance with applicable laws and
78 regulations. Upon the conclusion of such evaluation, the department
79 shall assign a rating of "meets performance standards", "exceeds
80 performance standards" or "fails to comply with performance
81 standards" for the primary service area responder. The Commissioner
82 of Public Health may require any primary service area responder that
83 is assigned a rating of "fails to comply with performance standards" to
84 meet the requirements of a performance improvement plan developed
85 by the department. Such primary service area responder may be
86 subject to subsequent performance reviews or removal as the
87 municipality's primary service area responder for a failure to improve
88 performance in accordance with section 19a-181c, as amended by this
89 act.

90 Sec. 5. Section 19a-181c of the general statutes is repealed and the
91 following is substituted in lieu thereof (*Effective October 1, 2014*):

92 (a) As used in this section: [, "responder"]

93 (1) "Responder" means any primary service area responder that [(1)]
94 (A) is notified for initial response, [(2)] (B) is responsible for the
95 provision of basic life support service, or [(3)] (C) is responsible for the
96 provision of service above basic life support that is intensive and
97 complex prehospital care consistent with acceptable emergency
98 medical practices under the control of physician and hospital
99 protocols;

100 (2) "Emergency" means (A) the primary service area responder has
101 failed to respond to fifty per cent or more first call responses in any
102 three-month period and has failed to comply with the requirements of
103 any corrective action plan agreement between the municipality and the
104 responder, or (B) the sponsor hospital refuses to endorse or provide a

105 recommendation for the responder due to unresolved issues relating to
106 the quality of patient care provided by the responder; and

107 (3) "Unsatisfactory performance" means a responder failed to (A)
108 respond to eighty per cent or more first call responses, excluding those
109 responses excused by the municipality, (B) meet defined response time
110 standards agreed to between the municipality and responder,
111 excluding those responses excused by the municipality, and the
112 responder failed to comply with the requirements of any corrective
113 action plan, (C) investigate and adequately respond to complaints
114 related to the quality of emergency care or response times, on a
115 repeated basis, (D) report adverse events as required by the
116 Commissioner of Public Health or as required under the local
117 emergency medical services plan, on a repeated basis, (E)
118 communicate changes to the level of service or coverage patterns that
119 materially affect the delivery of service as required under the local
120 emergency medical services plan or communicates an intent to change
121 such service that is inconsistent with such plan, or (F) communicate
122 changes in its organizational structure that is likely to negatively affect
123 the responder's delivery of service.

124 (b) Any municipality may petition the commissioner for the
125 removal of a responder. A petition may be made (1) at any time if
126 based on an allegation that an emergency exists and that the safety,
127 health and welfare of the citizens of the affected primary service area
128 are jeopardized by the responder's performance, or (2) not more often
129 than once every three years, if based on the unsatisfactory performance
130 of the responder. [as determined based on the local emergency medical
131 services plan established by the municipality pursuant to section 19a-
132 181b and associated agreements or contracts.] A hearing on a petition
133 under this section shall be deemed to be a contested case and held in
134 accordance with the provisions of chapter 54.

135 (c) If, after a hearing authorized by this section, the commissioner
136 determines that (1) an emergency exists and the safety, health and

137 welfare of the citizens of the affected primary service area are
138 jeopardized by the responder's performance, (2) the [performance of
139 the responder is unsatisfactory based on the local emergency medical
140 services plan established by the municipality pursuant to section 19-
141 181b and associated agreements or contracts] responder has
142 demonstrated unsatisfactory performance, or (3) it is in the best
143 interests of patient care, the commissioner may revoke the primary
144 service area responder's primary service area assignment and require
145 the chief administrative official of the municipality in which the
146 primary service area is located to submit a plan acceptable to the
147 commissioner for the alternative provision of primary service area
148 responder responsibilities, or may issue an order for the alternative
149 provision of emergency medical services, or both.

150 (d) The commissioner shall act on any petition for the removal of a
151 responder (1) not later than five business days after receipt of a
152 petition where an emergency is alleged and shall issue a determination
153 on such petition not later than thirty days after receipt of such petition,
154 or (2) not later than fifteen business days after receipt of a petition
155 where unsatisfactory performance is alleged and shall issue a
156 determination on such petition not later than ninety days after receipt
157 of such petition. The commissioner may redesignate any petition
158 received pursuant to this section as due to an emergency or
159 unsatisfactory performance based on the facts alleged in the petition
160 and may comply with the time requirements in this subsection that
161 correspond to the redesignated classification.

162 (e) The commissioner may develop and implement procedures to
163 designate a temporary responder for a municipality when such
164 municipality has alleged an emergency in the petition during the time
165 such petition is under the commissioner's consideration.

166 (f) The commissioner may hold a hearing and revoke a responder's
167 primary area assignment in accordance with the provisions of this
168 section, although a petition has not been filed, where the commissioner

169 has assigned a responder a rating of "fails to comply with performance
170 standards" in accordance with section 19a-181b, as amended by this
171 act, and the responder subsequently failed to improve its performance.

172 Sec. 6. Section 19a-181d of the general statutes is repealed and the
173 following is substituted in lieu thereof (*Effective October 1, 2014*):

174 (a) Any municipality may petition the [commissioner]
175 Commissioner of Public Health to hold a hearing if the municipality
176 cannot reach a written agreement with its primary service area
177 responder concerning performance standards or the primary service
178 area responder fails to deliver services in accordance with the
179 municipality's local emergency medical services plan, as described in
180 section 19a-181b, as amended by this act. The commissioner shall
181 conduct such hearing not later than ninety days from the date the
182 commissioner receives the municipality's petition. A hearing on a
183 petition under this section shall not be deemed to be a contested case
184 for purposes of chapter 54.

185 (b) In conducting a hearing authorized by this section, the
186 commissioner shall determine if the performance standards adopted in
187 the municipality's local emergency medical services plan are
188 reasonable based on the state-wide plan for the coordinated delivery of
189 emergency medical services adopted pursuant to subdivision (1) of
190 section 19a-177, model local emergency medical services plans and the
191 standards, contracts and written agreements in use by municipalities
192 of similar population and characteristics.

193 (c) If, after a hearing authorized by this section, the commissioner
194 determines that the performance standards adopted in the
195 municipality's local emergency medical services plan are reasonable,
196 the primary service area responder shall have thirty calendar days in
197 which to agree to such performance standards. If the primary service
198 area responder fails or refuses to agree to such performance standards,
199 the commissioner may revoke the primary service area responder's

200 primary service area assignment and require the chief administrative
201 official of the municipality in which the primary service area is located
202 to submit a plan acceptable to the commissioner for the alternative
203 provision of primary service area responder responsibilities, or may
204 issue an order for the alternative provision of emergency medical
205 services, or both.

206 (d) If, after a hearing authorized by this section, the commissioner
207 determines that the performance standards adopted in the
208 municipality's local emergency medical services plan are unreasonable,
209 the commissioner shall provide performance standards considered
210 reasonable based on the state-wide plan for the coordinated delivery of
211 emergency medical services adopted pursuant to subdivision (1) of
212 section 19a-177, model emergency medical services plans and the
213 standards, contracts and written agreements in use by municipalities
214 of similar population and characteristics. If the municipality refuses to
215 agree to such performance standards, the primary service area
216 responder shall meet the minimum performance standards provided
217 in regulations adopted pursuant to section 19a-179.

218 Sec. 7. (NEW) (*Effective October 1, 2014*) A primary service area
219 responder, as defined in section 19a-175 of the general statutes, shall
220 notify the Department of Public Health not later than sixty days prior
221 to the sale or transfer of more than fifty per cent of its ownership
222 interest or assets. Any person who intends to obtain ownership or
223 control of a primary service area responder in a sale or transfer for
224 which notification is required under this section shall submit an
225 application for approval of such purchase or change in control on a
226 form prescribed by the Commissioner of Public Health. The
227 commissioner shall, in determining whether to grant approval of the
228 sale or transfer, consider: (1) The applicant's performance history in the
229 state or another state; and (2) the applicant's financial ability to
230 perform the responsibilities of the primary service area responder in
231 accordance with the local emergency medical services plan, established
232 in accordance with section 19a-181b of the general statutes, as

233 amended by this act. The commissioner shall approve or reject the
234 application not later than forty-five calendar days after receipt of the
235 application. The commissioner may hold a hearing on such application
236 and may consult with any municipality or sponsor hospital in the
237 primary service area in making a determination on the application.

238 Sec. 8. (NEW) (*Effective October 1, 2014*) (a) For purposes of this
239 section, "primary service area responder" has the same meaning as in
240 section 19a-175 of the general statutes. Any municipality may submit a
241 local emergency medical services plan prepared pursuant to section
242 19a-181b of the general statutes, as amended by this act, to the
243 Department of Public Health for the alternative provision of primary
244 service area responder responsibilities. Such plan may be submitted
245 for any of the following purposes: (1) Providing improved patient care;
246 (2) delivering efficient emergency medical services; (3) allocating
247 resources more efficiently; (4) aligning with a new emergency medical
248 services provider better suited to meet the community's current needs;
249 (5) regionalizing services; or (6) improving response times.

250 (b) The Commissioner of Public Health shall conduct a hearing on
251 any plan for the alternative provision of primary service area
252 responder responsibilities submitted pursuant to subsection (a) of this
253 section. In order to determine whether to approve or disapprove such
254 plan, the commissioner shall consider any relevant factors, including,
255 but not limited to: (1) The impact of the plan on patient care; (2) the
256 impact of the plan on emergency medical services system design,
257 including system sustainability; (3) the impact of the plan on the local,
258 regional and state-wide emergency medical services system; and (4)
259 the recommendation from the medical oversight sponsor hospital. If
260 the commissioner approves the plan, the commissioner shall reassign
261 the primary service area in accordance with such plan. The responder
262 named in such plan must apply for, and the commissioner must
263 approve, primary service area assignment before such assignment
264 becomes effective.

265 Sec. 9. Subsection (a) of section 7-163e of the general statutes is
 266 repealed and the following is substituted in lieu thereof (*Effective*
 267 *October 1, 2014*):

268 (a) The legislative body of a municipality, or in any municipality
 269 where the legislative body is a town meeting or representative town
 270 meeting, the board of selectmen, shall conduct a public hearing on the
 271 sale, lease or transfer of real property owned by the municipality prior
 272 to final approval of such sale, lease or transfer. Notice of the hearing
 273 shall be published on the Internet web site of the municipality or in a
 274 newspaper or other publicly available weekly print publication having
 275 a general circulation in such municipality where the real property that
 276 is the subject of the hearing is located at least twice, at intervals of not
 277 less than two days, the first not more than fifteen days or less than ten
 278 days and the last not less than two days before the date set for the
 279 hearing. The municipality shall also post a sign conspicuously on the
 280 real property that is the subject of the public hearing.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2014</i>	22a-65(d)
Sec. 2	<i>October 1, 2014</i>	22a-65
Sec. 3	<i>October 1, 2014</i>	New section
Sec. 4	<i>October 1, 2014</i>	19a-181b
Sec. 5	<i>October 1, 2014</i>	19a-181c
Sec. 6	<i>October 1, 2014</i>	19a-181d
Sec. 7	<i>October 1, 2014</i>	New section
Sec. 8	<i>October 1, 2014</i>	New section
Sec. 9	<i>October 1, 2014</i>	7-163e(a)

Statement of Purpose:

To require the Pesticide Advisory Council to review pesticides for safety and effectiveness and report such findings; to require the Commissioner of Energy and Environmental Protection (1) to establish a regional program through which municipalities may purchase pesticides, and (2) determine whether to create an integrated pest management Internet web site; to incorporate the recommendations of

the Emergency Medical Services Primary Service Area Task Force and to permit municipalities to notice the sale, lease or transfer of real property on the Internet web site of such municipality or in a publicly available weekly print publication.

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