



General Assembly

January Session, 2015

***Raised Bill No. 1089***

LCO No. 5114



Referred to Committee on PUBLIC HEALTH

Introduced by:  
(PH)

***AN ACT CONCERNING MENTAL HEALTH SERVICES.***

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

1 Section 1. Subsection (a) of section 10-220a of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective July*  
3 *1, 2015*):

4 (a) Each local or regional board of education shall provide an in-  
5 service training program for its teachers, administrators and pupil  
6 personnel who hold the initial educator, provisional educator or  
7 professional educator certificate. Such program shall provide such  
8 teachers, administrators and pupil personnel with information on (1)  
9 the nature and the relationship of drugs, as defined in subdivision (17)  
10 of section 21a-240, and alcohol to health and personality development,  
11 and procedures for discouraging their abuse, (2) health and mental  
12 health risk reduction education which includes, but need not be  
13 limited to, the prevention of risk-taking behavior by children and the  
14 relationship of such behavior to substance abuse, pregnancy, sexually  
15 transmitted diseases, including HIV-infection and AIDS, as defined in  
16 section 19a-581, violence, teen dating violence, domestic violence, child

17 abuse and youth suicide, (3) the growth and development of  
18 exceptional children, including handicapped and gifted and talented  
19 children and children who may require special education, including,  
20 but not limited to, children with attention-deficit hyperactivity  
21 disorder or learning disabilities, and methods for identifying, planning  
22 for and working effectively with special needs children in a regular  
23 classroom, including, but not limited to, implementation of student  
24 individualized education programs, (4) school violence prevention,  
25 conflict resolution, the prevention of and response to youth suicide  
26 and the identification and prevention of and response to bullying, as  
27 defined in subsection (a) of section 10-222d, except that those boards of  
28 education that implement any evidence-based model approach that is  
29 approved by the Department of Education and is consistent with  
30 subsection (d) of section 10-145a, sections 10-222d, 10-222g and 10-  
31 222h, subsection (g) of section 10-233c and sections 1 and 3 of public  
32 act 08-160, shall not be required to provide in-service training on the  
33 identification and prevention of and response to bullying, (5)  
34 cardiopulmonary resuscitation and other emergency life saving  
35 procedures, (6) computer and other information technology as applied  
36 to student learning and classroom instruction, communications and  
37 data management, (7) the teaching of the language arts, reading and  
38 reading readiness for teachers in grades kindergarten to three,  
39 inclusive, (8) second language acquisition in districts required to  
40 provide a program of bilingual education pursuant to section 10-17f,  
41 (9) the requirements and obligations of a mandated reporter, [and] (10)  
42 the teacher evaluation and support program adopted pursuant to  
43 subsection (b) of section 10-151b, and (11) mental health first aid  
44 training, as described in section 17a-453h, as amended by this act. Each  
45 local and regional board of education may allow any paraprofessional  
46 or noncertified employee to participate, on a voluntary basis, in any  
47 in-service training program provided pursuant to this section. The State  
48 Board of Education, within available appropriations and utilizing  
49 available materials, shall assist and encourage local and regional  
50 boards of education to include: (A) Holocaust and genocide education

51 and awareness; (B) the historical events surrounding the Great Famine  
52 in Ireland; (C) African-American history; (D) Puerto Rican history; (E)  
53 Native American history; (F) personal financial management; (G)  
54 domestic violence and teen dating violence; and (H) [mental health  
55 first aid training; and (I)] topics approved by the state board upon the  
56 request of local or regional boards of education as part of in-service  
57 training programs pursuant to this subsection.

58 Sec. 2. Section 17a-453h of the general statutes is repealed and the  
59 following is substituted in lieu thereof (*Effective July 1, 2015*):

60 (a) The Commissioner of Mental Health and Addiction Services, in  
61 consultation with the Commissioner of Education, shall administer a  
62 mental health first aid training program. Said program shall: (1) Help  
63 persons attending the training program recognize the signs of mental  
64 disorders in children and young adults; and (2) connect children and  
65 young adults who show signs of having a mental disorder with a  
66 professional who offers the appropriate services.

67 (b) Said commissioners may seek federal and state funding and may  
68 accept private donations for the administration of, and providing for  
69 persons to participate in, the mental health first aid training program.

70 (c) (1) For the school year commencing July 1, 2014, the  
71 Commissioner of Mental Health and Addiction Services shall provide  
72 mental health first aid training to any person appointed to serve as the  
73 district safe school climate coordinator, pursuant to section 10-222k.  
74 Each such district safe school climate coordinator shall successfully  
75 complete such mental health first aid training.

76 (2) For the school year commencing July 1, 2015, the Commissioner  
77 of Mental Health and Addiction Services shall provide mental health  
78 [and] first aid training to any person appointed to serve as the district  
79 safe school climate coordinator for such school year and who did not  
80 serve as the district safe school climate coordinator for the prior school  
81 year or did not otherwise successfully complete such training. Each

82 such district safe school climate coordinator shall successfully  
83 complete such mental health first aid training.

84 (3) No district safe school climate coordinator shall be required to  
85 successfully complete such mental health first aid training more than  
86 once.

87 (d) Each local and regional board of education [may] shall require  
88 teachers, school nurses, counselors and all other school employees to  
89 participate in mental health first aid training.

90 (e) On and after October 1, 2015, the Commissioner of Mental  
91 Health and Addiction Services shall provide mental health first aid  
92 training to each peace officer and employee of an emergency medical  
93 services organization, as both terms are defined in section 53a-3.

94 Sec. 3. Section 7-294r of the general statutes is repealed and the  
95 following is substituted in lieu thereof (*Effective July 1, 2015*):

96 (a) On and after October 1, 2014, (1) each police basic training  
97 program conducted or administered by the Division of State Police  
98 within the Department of Emergency Services and Public Protection,  
99 the Police Officer Standards and Training Council, established under  
100 section 7-294b, or a municipal police department in the state shall  
101 include a course on handling incidents involving an individual  
102 affected with a serious mental illness, and (2) each review training  
103 program conducted by such agencies shall make provisions for such a  
104 course.

105 (b) On and after October 1, 2015, each police basic training program  
106 described in subsection (a) of this section or a municipal police  
107 department in the state shall include mental health first aid training, in  
108 accordance with section 17a-453h, as amended by this act.

109 Sec. 4. (NEW) (*Effective July 1, 2015*) (a) There is established a  
110 behavioral health professional incentive program to be administered

111 by the Department of Public Health.

112 (b) Such program shall provide a grant to any person (1) who is a  
113 (A) psychiatrist licensed under chapter 370 of the general statutes, (B)  
114 psychologist licensed under chapter 383 of the general statutes, who  
115 holds a doctorate degree, (C) licensed clinical social worker or licensed  
116 master social worker licensed under chapter 383b of the general  
117 statutes, (D) advanced practice registered nurse licensed under chapter  
118 378 of the general statutes, who provides psychiatric services, or (E)  
119 marital and family therapist licensed under chapter 383a of the general  
120 statutes; (2) whose patients consist of not less than (A) fifty per cent  
121 children, adolescents or families, (B) twenty-five per cent Medicaid  
122 recipients, and (C) twenty-five per cent who use health insurance to  
123 pay for services; (3) who is not participating in the United States  
124 Department of Health and Human Services' National Health Service  
125 Corps program; and (4) who practices in any of the counties or  
126 municipalities designated as professional shortage areas by the United  
127 States Department of Health and Human Services' Health Resources  
128 and Services Administration.

129 (c) A person who is a psychiatrist and receives a grant under this  
130 section shall be eligible for reimbursement of federal or state  
131 educational loans up to a maximum of seventy-five thousand dollars.  
132 Any person other than a psychiatrist who receives a grant under this  
133 section shall be eligible for reimbursement of federal or state  
134 educational loans up to a maximum of fifty thousand dollars. The  
135 department shall distribute such grants over a five-year period and the  
136 amount shall increase each year during the five-year period.

137 Sec. 5. (*Effective July 1, 2015*) (a) For the purposes described in  
138 subsection (b) of this section, the State Bond Commission shall have  
139 the power from time to time to authorize the issuance of bonds of the  
140 state in one or more series and in principal amounts not exceeding in  
141 the aggregate two million dollars.

142 (b) The proceeds of the sale of such bonds, to the extent of the  
143 amount stated in subsection (a) of this section, shall be used by the  
144 Department of Public Health for the purpose of the behavioral health  
145 professional incentive program established pursuant to section 4 of  
146 this act.

147 (c) All provisions of section 3-20 of the general statutes, or the  
148 exercise of any right or power granted thereby, that are not  
149 inconsistent with the provisions of this section are hereby adopted and  
150 shall apply to all bonds authorized by the State Bond Commission  
151 pursuant to this section. Temporary notes in anticipation of the money  
152 to be derived from the sale of any such bonds so authorized may be  
153 issued in accordance with section 3-20 of the general statutes and from  
154 time to time renewed. Such bonds shall mature at such time or times  
155 not exceeding twenty years from their respective dates as may be  
156 provided in or pursuant to the resolution or resolutions of the State  
157 Bond Commission authorizing such bonds. None of such bonds shall  
158 be authorized except upon a finding by the State Bond Commission  
159 that there has been filed with it a request for such authorization that is  
160 signed by or on behalf of the Secretary of the Office of Policy and  
161 Management and states such terms and conditions as said commission,  
162 in its discretion, may require. Such bonds issued pursuant to this  
163 section shall be general obligations of the state and the full faith and  
164 credit of the state of Connecticut are pledged for the payment of the  
165 principal of and interest on such bonds as the same become due, and  
166 accordingly and as part of the contract of the state with the holders of  
167 such bonds, appropriation of all amounts necessary for punctual  
168 payment of such principal and interest is hereby made, and the State  
169 Treasurer shall pay such principal and interest as the same become  
170 due.

171 Sec. 6. (NEW) (*Effective July 1, 2015*) (a) The Department of Public  
172 Health shall establish a behavioral health grant program for the  
173 purpose of assisting local and regional boards of education with  
174 employing or contracting for the services of a licensed clinical social

175 worker or a licensed master social worker, licensed under chapter 383b  
176 of the general statutes, or a psychologist, licensed under chapter 383 of  
177 the general statutes. To be eligible for a grant under the program, the  
178 local or regional board of education shall be located in a health  
179 professional shortage area designated by the United States Department  
180 of Health and Human Services' Health Resources and Services  
181 Administration and shall partner with one or more other such boards  
182 in applying for such grant. The commissioner shall award grants to  
183 fund up to five full-time social worker or psychologist positions for a  
184 two-year period.

185 (b) The Commissioner of Public Health shall solicit grant  
186 applications from local and regional boards of education located in the  
187 health professional shortage areas, which shall be submitted annually  
188 to the commissioner at such time and on such forms as the  
189 commissioner prescribes. Applications shall be submitted jointly by  
190 two or more boards of education. In determining whether the boards  
191 of education submitting applications shall be granted funds pursuant  
192 to this section, the commissioner shall consider the following factors:  
193 (1) The local or regional boards of education's ratio of school  
194 psychologists or social workers to students; and (2) evidence of the  
195 need for behavioral health services by children and adolescents in the  
196 local communities served by the boards of education.

197 (c) If the commissioner finds that any board of education uses a  
198 grant received under this section for purposes other than those which  
199 are in conformity with the purposes of this section, the commissioner  
200 may require repayment of such grant to the state.

201 Sec. 7. (NEW) (*Effective July 1, 2015*) The Commissioner of Mental  
202 Health and Addiction Services shall, within available appropriations,  
203 make the Department of Mental Health and Addiction Services'  
204 emergency mobile crisis intervention services accessible through the 2-  
205 1-1 Infoline program.

206 Sec. 8. Section 17a-20a of the general statutes is repealed and the  
207 following is substituted in lieu thereof (*Effective July 1, 2015*):

208 (a) Not later than January 1, 2014, the Commissioner of Children  
209 and Families shall establish and implement, in consultation with the  
210 Commissioner of Mental Health and Addiction Services, a regional  
211 behavioral health consultation and care coordination program for  
212 primary care providers who serve children and young adults up to age  
213 twenty-five. Such program shall provide to such primary care  
214 providers: (1) Timely access to a consultation team that includes a child  
215 psychiatrist, social worker and a care coordinator; (2) patient care  
216 coordination and transitional services for behavioral health care; and  
217 (3) training and education concerning patient access to behavioral  
218 health services. [Said commissioner] The Commissioner of Children  
219 and Families may enter into a contract for services to administer such  
220 program.

221 (b) Not later than October 1, 2013, [said commissioner] the  
222 Commissioner of Children and Families shall submit a plan, in  
223 accordance with the provisions of section 11-4a, to the joint standing  
224 committees of the General Assembly having cognizance of matters  
225 relating to public health, children, human services and appropriations  
226 concerning the program to be established pursuant to subsection (a) of  
227 this section.

228 (c) The Commissioner of Children and Families may adopt  
229 regulations, in accordance with the provisions of chapter 54, to  
230 implement the provisions of this section.

231 Sec. 9. (NEW) (*Effective July 1, 2015*) The Commissioner of Mental  
232 Health and Addiction Services shall, in consultation with the  
233 Commissioners of Children and Families and Public Health, annually  
234 publish an informational notice for providers of behavioral health  
235 services concerning the communication of health care information to  
236 other providers of behavioral health and other health care services to

237 ensure a continuity of health care services and compliance with state  
238 and federal laws to protect patient privacy. Such informational notice  
239 shall be posted on the Internet web sites of the Department of Mental  
240 Health and Addiction Services, the Department of Children and  
241 Families and the Department of Public Health. The Commissioner of  
242 Mental Health and Addiction Services shall also distribute such  
243 informational notices to providers of mental health services by  
244 facsimile or electronic mail.

245 Sec. 10. (*Effective from passage*) (a) The Commissioner of Public  
246 Health, in consultation with the Commissioner of Education, shall  
247 study the potential advantages of licensing board certified behavior  
248 analysts, as defined in section 20-185i of the general statutes, and  
249 registered behavior technicians, who are credentialed by the Behavior  
250 Analyst Certification Board. Said commissioners shall also study the  
251 inclusion of board certified analysts and behavior technicians in school  
252 special education planning and placement teams, as described in  
253 section 10-76d of the general statutes.

254 (b) Not later than October 1, 2015, the Commissioner of Public  
255 Health shall report, in accordance with the provisions of section 11-4a  
256 of the general statutes, concerning the results of such study to the joint  
257 standing committees of the General Assembly having cognizance of  
258 matters relating to public health and education. Such report shall  
259 include, but need not be limited to, recommendations concerning: (1)  
260 Any new licensure or certification categories relating to behavioral  
261 analysis; (2) inclusion of board certified behavior analysts or registered  
262 behavior technicians on special education planning placement teams;  
263 and (3) incentives for persons to enter the field of behavior analysis.

264 Sec. 11. (NEW) (*Effective July 1, 2015*) (a) There is established within  
265 the Department of Public Health a grant program to provide funds to  
266 local and regional boards of education for the purchase of telemedicine  
267 equipment. A board of education eligible for a grant under the  
268 program shall (1) located in a geographically remote area, (2) enter into

269 a memorandum of understanding with one or more licensed clinical  
270 social workers or licensed master social workers, licensed under  
271 chapter 383b of the general statutes, or psychologists, licensed under  
272 chapter 383 of the general statutes, who are trained and experienced in  
273 the use of telemedicine, to provide behavioral health services through  
274 the use of telemedicine equipment to students in the school district,  
275 and (3) meet any data reporting requirements established by the  
276 Commissioner of Public Health.

277 (b) The Commissioner of Public Health, in consultation with the  
278 Commissioners of Education and Children and Families, shall  
279 establish a streamlined application process for the grant program. Any  
280 board of education meeting the eligibility criteria in subsection (a) of  
281 this section may apply to said program. The Commissioner of Public  
282 Health may establish reporting requirements for boards of education  
283 receiving grants under the program.

284 Sec. 12. (NEW) (*Effective July 1, 2015*) (a) For the purposes described  
285 in subsection (b) of this section, the State Bond Commission shall have  
286 the power, from time to time, to authorize the issuance of bonds of the  
287 state in one or more series and in principal amounts not exceeding in  
288 the aggregate \_\_\_\_ dollars, provided \_\_\_\_ dollars of said authorization  
289 shall be effective July 1, 2016, and \_\_\_\_ dollars of said authorization  
290 shall be effective July 1, 2014.

291 (b) The proceeds of the sale of said bonds, to the extent of the  
292 amount stated in subsection (a) of this section, shall be used by the  
293 Department of Public Health for the purpose of providing grants  
294 under the program established in section 11 of this act.

295 (c) All provisions of section 3-20 of the general statutes, or the  
296 exercise of any right or power granted thereby that are not inconsistent  
297 with the provisions of this section are hereby adopted and shall apply  
298 to all bonds authorized by the State Bond Commission pursuant to this  
299 section, and temporary notes in anticipation of the money to be

300 derived from the sale of any such bonds so authorized may be issued  
301 in accordance with said section 3-20 of the general statutes and from  
302 time to time renewed. Such bonds shall mature at such time or times  
303 not exceeding twenty years from their respective dates as may be  
304 provided in or pursuant to the resolution or resolutions of the State  
305 Bond Commission authorizing such bonds. None of said bonds shall  
306 be authorized except upon a finding by the State Bond Commission  
307 that there has been filed with it a request for such authorization, which  
308 is signed by or on behalf of the Secretary of the Office of Policy and  
309 Management and states such terms and conditions as said commission,  
310 in its discretion, may require. Said bonds issued pursuant to this  
311 section shall be general obligations of the state and the full faith and  
312 credit of the state of Connecticut are pledged for the payment of the  
313 principal of and interest on said bonds as the same become due, and  
314 accordingly and as part of the contract of the state with the holders of  
315 said bonds, appropriation of all amounts necessary for punctual  
316 payment of such principal and interest is hereby made, and the  
317 Treasurer shall pay such principal and interest as the same become  
318 due.

319 Sec. 13. (NEW) (*Effective July 1, 2015*) Not later than January 1, 2016,  
320 and annually thereafter, the Commissioner of Public Health shall  
321 submit a report, in accordance with the provisions of section 11-4a of  
322 the general statutes, to the joint standing committees of the General  
323 Assembly having cognizance of matters relating to finance, revenue  
324 and bonding, appropriations, public health and education. Such report  
325 shall include, but need not be limited to, (1) the number of local and  
326 regional boards of education that applied for a grant under the  
327 program described in section 11 of this act, (2) the number of boards of  
328 education that received a grant under such program, and (3) the  
329 amount of each such grant.

330 Sec. 14. (NEW) (*Effective July 1, 2015*) The Commissioners of Social  
331 Services, Children and Families and Mental Health and Addiction  
332 Services shall, in consultation with providers of behavioral health

333 services, including, but not limited to hospitals, develop and  
334 implement a program to (1) improve the provision of behavioral health  
335 services to Medicaid recipients, (2) improve the coordination of such  
336 services among health care providers, and (3) reduce costs to the state.  
337 Said commissioners shall (A) establish qualifications for participation  
338 in the program, (B) identify geographic areas in which the program  
339 shall be implemented, (C) provide payment incentives to health care  
340 providers to improve the quality and decrease the costs of such  
341 behavioral health services, and (D) develop quality standards to  
342 ensure the improvement and coordination of such behavioral health  
343 services.

344       Sec. 15. (NEW) (*Effective July 1, 2015*) The Commissioner of Social  
345 Services shall submit to the federal Centers for Medicare and Medicaid  
346 Services a Medicaid state plan amendment to increase the Medicaid  
347 rates for all providers of behavioral health services to equal the  
348 Medicare rates for providers of such behavioral health services.

349       Sec. 16. (NEW) (*Effective July 1, 2015*) The Commissioner of Mental  
350 Health and Addiction Services, in consultation with the Commissioner  
351 of Social Services, shall submit to the federal Centers for Medicare and  
352 Medicaid Services a Medicaid state plan amendment to expand the  
353 behavioral health homes delivery model to allow hospitals and  
354 federally qualified health centers to be designated as behavioral health  
355 homes.

356       Sec. 17. (NEW) (*Effective July 1, 2015*) The Commissioners of  
357 Children and Families and Mental Health and Addiction Services shall  
358 annually report, in accordance with the provisions of section 11-4a of  
359 the general statutes, to the joint standing committees of the General  
360 Assembly having cognizance of matters relating to children and public  
361 health concerning the provision of behavioral health services. Such  
362 report shall include, but need not be limited to: (1) The admission  
363 criteria, admission process and capacity for each mental health and  
364 substance abuse program administered by the Departments of

365 Children and Families and Mental Health and Addiction Services; (2)  
366 information for each provider of behavioral health services who  
367 receives funding from the state through a program administered by  
368 the Department of Children and Families or the Department of Mental  
369 Health and Addiction Services, including, but not limited to,  
370 deidentified information on: (A) The number of persons served by  
371 level of care, the number of admissions and discharges and the  
372 number of service hours and bed days, (B) the average wait times for  
373 services, (C) the primary diagnoses and demographics for persons  
374 served by such provider, (D) average lengths of stay for persons who  
375 receive inpatient services, (E) client satisfaction scores, (F) discharge  
376 delays and outcomes, and (G) recovery measures.

377 Sec. 18. (NEW) (*Effective July 1, 2015*) (a) There is established within  
378 the Department of Mental Health and Addiction Services a grant  
379 program to provide funds to organizations that provide acute care and  
380 emergency behavioral health services. The Commissioner of Mental  
381 Health and Addiction Services shall establish eligibility criteria for  
382 grants under the program and an application process.

383 (b) Grants shall be issued under the program for the purposes of  
384 providing community-based behavioral health services, including (1)  
385 care coordination services, and (2) access to information on, and  
386 referrals to, available health care and social service programs.

387 Sec. 19. (*Effective July 1, 2015*) The sum of three million dollars is  
388 appropriated to the Department of Mental Health and Addiction  
389 Services, from the General Fund, for the fiscal year ending June 30,  
390 2016, for grants issued under the program established under section 18  
391 of this act to provide community-based behavioral health services.

392 Sec. 20. (*Effective July 1, 2015*) (a) The Commissioner of Mental  
393 Health and Addiction Services shall, in consultation with the  
394 Commissioners of Children and Families and Social Services and  
395 providers of behavioral health services, including, but not limited to,

396 hospitals, study the current utilization of, and the need for, hospital  
397 beds for acute psychiatric care. Such study shall include, but need not  
398 be limited to: (1) A determination of the number of short-term,  
399 intermediate and long-term psychiatric beds needed in each region of  
400 the state, (2) the average wait times for each type of psychiatric beds,  
401 (3) the impact of wait times on persons in need of inpatient psychiatric  
402 services, such persons' families and providers of such inpatient care,  
403 and (4) identification of public and private funding sources to maintain  
404 the number of psychiatric beds needed in the state.

405 (b) Not later than February 1, 2016, the Commissioner of Mental  
406 Health and Addiction Services shall report, in accordance with the  
407 provisions of section 11-4a of the general statutes, to the joint standing  
408 committees of the General Assembly having cognizance of matters  
409 relating to appropriations, public health and human services  
410 concerning the results of the study described in subsection (a) of this  
411 section. Such report shall include, but need not be limited to,  
412 recommendations concerning: (1) Expansion of the utilization criteria  
413 to increase access to acute, inpatient psychiatric services throughout  
414 the state; (2) an increase in the number of long-term, inpatient  
415 hospitalization beds available for persons with recurring needs for  
416 inpatient behavioral health services; (3) funding to increase the  
417 number of psychiatric beds; and (4) placement of additional  
418 psychiatric beds in health care facilities throughout the state.

419 Sec. 21. (NEW) (*Effective July 1, 2015*) (a) There is established within  
420 the Department of Mental Health and Addiction Services a grant  
421 program to provide funds to hospitals for intermediate, acute care  
422 psychiatric services. A hospital eligible for a grant under the program  
423 shall be located in one of the three geographic regions of the state that  
424 lacks intermediate, acute care psychiatric services. The Commissioner  
425 of Mental Health and Addiction Services shall establish an application  
426 process for the grant program. Any hospital meeting the eligibility  
427 criteria described in this section may apply to said program.

428 (b) On or before April 1, 2016, the commissioner shall award a grant  
429 to an eligible hospital in each of the three regions of the state that lacks  
430 intermediate, acute care psychiatric services.

431 Sec. 22. (*Effective July 1, 2015*) The sum of \_\_\_\_ dollars is  
432 appropriated to the Department of Mental Health and Addiction  
433 Services, from the General Fund, for the fiscal year ending June 30,  
434 2016, for grants issued under the program established under section 21  
435 of this act for intermediate, acute care psychiatric services.

436 Sec. 23. (NEW) (*Effective January 1, 2016*) As used in this section and  
437 sections 24 to 29, inclusive, of this act:

438 (1) "Behavior analysis" means the design, implementation and  
439 evaluation of environmental modifications, using behavior stimuli and  
440 consequences, including the use of direct observation, measurement  
441 and functional analysis of the relationship between the environment  
442 and behavior, to produce socially significant improvement in human  
443 behavior but does not include: (A) Psychological testing, (B)  
444 neuropsychology, (C) cognitive therapy, (D) sex therapy, (E)  
445 psychoanalysis, (F) hypnotherapy, (G) cognitive behavioral therapy,  
446 (H) psychotherapy, or (I) long-term counseling as treatment  
447 modalities;

448 (2) "Behavior analyst" means a person who is licensed to practice  
449 behavior analysis under the provisions of sections 24 to 28, inclusive,  
450 of this act;

451 (3) "Assistant behavior analyst" means a person who is licensed to  
452 assist in the practice of behavior analysis under the supervision of, or  
453 in consultation with, a behavior analyst; and

454 (4) "Behavior Analyst Certification Board" has the same meaning as  
455 defined in section 20-185i of the general statutes, or a successor of said  
456 board.

457       Sec. 24. (NEW) (*Effective January 1, 2016*) (a) No person may practice  
458 behavior analysis or assist in the practice of behavior analysis unless  
459 licensed pursuant to sections 25 and 26 of this act.

460       (b) No person may use the title "behavior analyst", "assistant  
461 behavior analyst" or make use of any title, words, letters or  
462 abbreviations that may reasonably be confused with licensure as a  
463 behavior analyst or assistant behavior analyst unless such person is  
464 licensed pursuant to sections 25 or 26 of this act.

465       (c) The provisions of this section shall not apply to a person who (1)  
466 provides behavior analysis or assists in the practice of behavior  
467 analysis while acting within the scope of practice of the person's  
468 license and training, provided the person does not hold himself or  
469 herself out to the public as a behavior analyst or assistant behavior  
470 analyst, (2) is a student enrolled in a behavior analysis educational  
471 program accredited by the Behavior Analyst Certification Board, or a  
472 graduate education program in which behavior analysis is an integral  
473 part of the student's course of study and such student is performing  
474 such behavior analysis or assisting in behavior analysis under the  
475 direct supervision of a licensed behavior analyst, or (3) is an instructor  
476 in a course approved by the Behavior Analyst Certification Board.

477       Sec. 25. (NEW) (*Effective January 1, 2016*) (a) The Commissioner of  
478 Public Health shall grant a license as a behavior analyst to any  
479 applicant who furnishes evidence satisfactory to the commissioner that  
480 such applicant is certified as a behavior analyst by the Behavior  
481 Analyst Certification Board. The commissioner shall develop and  
482 provide application forms. The application fee shall be three hundred  
483 fifty dollars.

484       (b) Licenses issued under this section may be renewed biannually.  
485 The fee for such renewal shall be one hundred seventy-five dollars.  
486 Each behavior analyst applying for license renewal shall furnish  
487 evidence satisfactory to the commissioner of having current

488 certification with the Behavior Analyst Certification Board.

489 Sec. 26. (NEW) (*Effective January 1, 2016*) (a) The Commissioner of  
490 Public Health shall grant a license as an assistant behavior analyst to  
491 any applicant who furnishes evidence satisfactory to the commissioner  
492 that such applicant is certified as an assistant behavior analyst by the  
493 Behavior Analyst Certification Board. The commissioner shall develop  
494 and provide application forms. The application fee shall be three  
495 hundred fifty dollars.

496 (b) Licenses issued under this section may be renewed biannually.  
497 The fee for such renewal shall be one hundred seventy-five dollars.  
498 Each assistant behavior analyst applying for license renewal shall  
499 furnish evidence satisfactory to the commissioner of having current  
500 certification with the Behavior Analyst Certification Board.

501 Sec. 27. (NEW) (*Effective January 1, 2016*) (a) Except as provided in  
502 subsection (b) of this section, an applicant for a license as a behavior  
503 analyst or assistant behavior analyst shall submit evidence satisfactory  
504 to the Commissioner of Public Health of having earned a certification  
505 as a behavior analyst or assistant behavior analyst from the Behavior  
506 Analyst Certification Board.

507 (b) An applicant for licensure by endorsement shall present  
508 evidence satisfactory to the commissioner that the applicant is licensed  
509 or certified as a behavior analyst or assistant behavior analyst, or as a  
510 person entitled to perform similar services under a different  
511 designation, in another state or jurisdiction that has requirements for  
512 practicing in such capacity that are substantially similar to, or higher  
513 than, those of this state and that there are no disciplinary actions or  
514 unresolved complaints pending.

515 Sec. 28. (NEW) (*Effective January 1, 2016*) The Commissioner of  
516 Public Health may take any disciplinary action set forth in section 19a-  
517 17 of the general statutes against a behavior analyst or assistant  
518 behavior analyst for any of the following reasons: (1) Failure to

519 conform to the accepted standards of the profession; (2) conviction of a  
520 felony; (3) fraud or deceit in obtaining or seeking reinstatement of a  
521 license to practice behavior analysis; (4) fraud or deceit in the practice  
522 of behavior analysis; (5) negligent, incompetent or wrongful conduct in  
523 professional activities; (6) physical, mental or emotional illness or  
524 disorder resulting in an inability to conform to the accepted standards  
525 of the profession; (7) alcohol or substance abuse; or (8) wilful  
526 falsification of entries in any hospital, patient or other record  
527 pertaining to behavior analysis. The commissioner may order a license  
528 holder to submit to a reasonable physical or mental examination if his  
529 or her physical or mental capacity to practice safely is the subject of an  
530 investigation. The commissioner may petition the superior court for  
531 the judicial district of Hartford to enforce such order or any action  
532 taken pursuant to section 19a-17 of the general statutes. The  
533 commissioner shall give notice and an opportunity to be heard on any  
534 contemplated action under section 19a-17 of the general statutes.

535 Sec. 29. Subsection (c) of section 19a-14 of the general statutes is  
536 repealed and the following is substituted in lieu thereof (*Effective*  
537 *January 1, 2016*):

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

540 (1) Speech and language pathologist and audiologist;

541 (2) Hearing instrument specialist;

542 (3) Nursing home administrator;

543 (4) Sanitarian;

544 (5) Subsurface sewage system installer or cleaner;

545 (6) Marital and family therapist;

546 (7) Nurse-midwife;

- 547 (8) Licensed clinical social worker;
- 548 (9) Respiratory care practitioner;
- 549 (10) Asbestos contractor and asbestos consultant;
- 550 (11) Massage therapist;
- 551 (12) Registered nurse's aide;
- 552 (13) Radiographer;
- 553 (14) Dental hygienist;
- 554 (15) Dietitian-Nutritionist;
- 555 (16) Asbestos abatement worker;
- 556 (17) Asbestos abatement site supervisor;
- 557 (18) Licensed or certified alcohol and drug counselor;
- 558 (19) Professional counselor;
- 559 (20) Acupuncturist;
- 560 (21) Occupational therapist and occupational therapist assistant;
- 561 (22) Lead abatement contractor, lead consultant contractor, lead  
562 consultant, lead abatement supervisor, lead abatement worker,  
563 inspector and planner-project designer;
- 564 (23) Emergency medical technician, advanced emergency medical  
565 technician, emergency medical responder and emergency medical  
566 services instructor;
- 567 (24) Paramedic;
- 568 (25) Athletic trainer;

569 (26) Perfusionist;

570 (27) Master social worker subject to the provisions of section 20-  
571 195v;

572 (28) Radiologist assistant, subject to the provisions of section 20-74tt;

573 (29) Homeopathic physician;

574 (30) Certified water treatment plant operator, certified distribution  
575 system operator, certified small water system operator, certified  
576 backflow prevention device tester and certified cross connection  
577 survey inspector, including certified limited operators, certified  
578 conditional operators and certified operators in training; [and]

579 (31) Tattoo technician;

580 (32) Behavior analyst; and

581 (33) Assistant behavior analyst.

582 The department shall assume all powers and duties normally vested  
583 with a board in administering regulatory jurisdiction over such  
584 professions. The uniform provisions of this chapter and chapters 368v,  
585 369 to 381a, inclusive, 383 to 388, inclusive, 393a, 395, 398, 399, 400a  
586 and 400c, including, but not limited to, standards for entry and  
587 renewal; grounds for professional discipline; receiving and processing  
588 complaints; and disciplinary sanctions, shall apply, except as otherwise  
589 provided by law, to the professions listed in this subsection.

|   |              |             |
|---|--------------|-------------|
| This act shall take effect as follows and shall amend the following sections: |              |             |
| Section 1   | July 1, 2015 | 10-220a(a)  |
| Sec. 2  | July 1, 2015 | 17a-453h    |
| Sec. 3  | July 1, 2015 | 7-294r      |
| Sec. 4  | July 1, 2015 | New section |
| Sec. 5  | July 1, 2015 | New section |

|         |                        |             |
|---------|------------------------|-------------|
| Sec. 6  | <i>July 1, 2015</i>    | New section |
| Sec. 7  | <i>July 1, 2015</i>    | New section |
| Sec. 8  | <i>July 1, 2015</i>    | 17a-20a     |
| Sec. 9  | <i>July 1, 2015</i>    | New section |
| Sec. 10 | <i>from passage</i>    | New section |
| Sec. 11 | <i>July 1, 2015</i>    | New section |
| Sec. 12 | <i>July 1, 2015</i>    | New section |
| Sec. 13 | <i>July 1, 2015</i>    | New section |
| Sec. 14 | <i>July 1, 2015</i>    | New section |
| Sec. 15 | <i>July 1, 2015</i>    | New section |
| Sec. 16 | <i>July 1, 2015</i>    | New section |
| Sec. 17 | <i>July 1, 2015</i>    | New section |
| Sec. 18 | <i>July 1, 2015</i>    | New section |
| Sec. 19 | <i>July 1, 2015</i>    | New section |
| Sec. 20 | <i>July 1, 2015</i>    | New section |
| Sec. 21 | <i>July 1, 2015</i>    | New section |
| Sec. 22 | <i>July 1, 2015</i>    | New section |
| Sec. 23 | <i>January 1, 2016</i> | New section |
| Sec. 24 | <i>January 1, 2016</i> | New section |
| Sec. 25 | <i>January 1, 2016</i> | New section |
| Sec. 26 | <i>January 1, 2016</i> | New section |
| Sec. 27 | <i>January 1, 2016</i> | New section |
| Sec. 28 | <i>January 1, 2016</i> | New section |
| Sec. 29 | <i>January 1, 2016</i> | 19a-14(c)   |

**Statement of Purpose:**

To amend the general statutes concerning the provision of mental health services.

*[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.]*