



House of Representatives

General Assembly

File No. 579

January Session, 2017

Substitute House Bill No. 6155

House of Representatives, April 13, 2017

The Committee on Government Administration and Elections reported through REP. FOX of the 148th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT AUTHORIZING DEEMED STATUS LICENSE RENEWALS FOR CERTAIN NONPROFIT COMMUNITY SERVICE PROVIDERS.

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

1 Section 1. Section 17a-20 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2017, and*
3 *applicable to applications for renewal submitted after the adoption of*
4 *regulations in accordance with this section*):

5 (a) For the purposes of this section, "psychiatric clinic" means an
6 organization licensed by the Department of Children and Families and
7 staffed by psychiatrists, psychologists, social workers and such other
8 professional, paraprofessional and clerical personnel as local
9 circumstances may require, working in collaboration with other social
10 service agencies, to provide mental health services that are designed to
11 (1) effectively decrease the prevalence and incidence of mental illness,
12 emotional disturbance and social [disfunctioning] dysfunction, and (2)
13 promote mental health in individuals, groups and institutions, and

14 includes a general hospital with such clinic services. The Department
15 of Children and Families shall develop and maintain a program of
16 outpatient psychiatric clinics for children and youths and their
17 families.

18 (b) For the purposes of this section, "child guidance clinic" means a
19 subset of psychiatric clinics for children designated by the Department
20 of Children and Families pursuant to this section to receive grant
21 funds for the purpose of assisting the department to provide
22 community-based psychiatric services for children, youths and
23 families. In order to meet such mandate, the department shall
24 designate a subset of outpatient psychiatric clinics for children to be
25 known as child guidance clinics. The department shall provide grants
26 to such child guidance clinics in accordance with the provisions of this
27 section. Any town having a population of not less than forty thousand,
28 as most recently determined by the Secretary of the Office of Policy
29 and Management, or any combination of towns with a combined
30 population of not less than forty thousand as similarly determined, or
31 any nonprofit corporation organized or existing for the purpose of
32 establishing or maintaining a psychiatric clinic for children and youths
33 or for children and youths and their families, or any clinic designated
34 by the Department of Children and Families as of January 1, 1995, may
35 apply to the Department of Children and Families for funds to be used
36 to assist in establishing, maintaining or expanding a psychiatric clinic.
37 The applications, and any grant of funds pursuant thereto, shall not be
38 subject to the provisions of section 17a-476, except to the extent
39 required by federal law. The department shall base any grant of funds
40 on the services provided to children and youths under eighteen years
41 of age and on the effectiveness of the services. No grant shall exceed
42 two-thirds of the ordinary recurring operating expenses of the clinic,
43 nor shall any grant be made to pay for any portion of capital
44 expenditures for the clinic. No clinic in existence as of October 1, 1995,
45 shall be eligible for grants of any funds under this section unless it has
46 obtained a license within six months of the adoption of regulations
47 under subsection (c) of this section. No clinic receiving funds under
48 this section shall refuse services to any resident of this state solely

49 because of his or her place of residence.

50 (c) The Department of Children and Families shall adopt
51 regulations, in accordance with the provisions of chapter 54, defining
52 the minimum requirements for outpatient psychiatric clinics for
53 children to be eligible for licensure under this section in regard to (1)
54 qualification and number of staff members, (2) clinic operation,
55 including, but not limited, to physical plant, governing body and
56 recordkeeping, (3) effectiveness of services, [and] (4) populations
57 targeted for priority access, (5) national accrediting organizations that
58 the department finds have standards that are more or at least as
59 stringent for obtaining accreditation as the state requirements for
60 obtaining a license under this section, and (6) any other provisions
61 necessary to implement the provisions of subsection (d) of this section.
62 The regulations shall also govern the granting of the funds to assist in
63 establishing, maintaining and expanding psychiatric clinics. The
64 regulations may also set an administrative fee sufficient to pay for the
65 costs to the department of processing an application for a deemed
66 status license under subsection (d) of this section. The department
67 shall, upon payment of a fee of three hundred dollars, issue to any
68 qualifying clinic a license that shall be in force for twenty-four months
69 from the date of issue and, except as provided in subsection (d) of this
70 section, shall be renewable for additional twenty-four-month periods,
71 upon payment of a fee of three hundred dollars for each such period,
72 provided the clinic continues to meet conditions satisfactory to the
73 department.

74 (d) In lieu of applying for renewal of a license under subsection (c)
75 of this section, a clinic may, at the time when any renewal is due,
76 submit evidence, satisfactory to the department, that such clinic has
77 been accredited as a provider of outpatient psychiatric services within
78 the immediately preceding twelve-month period by a national
79 accrediting organization that the department has listed in regulations
80 adopted pursuant to subsection (c) of this section. The department
81 may waive the inspection and investigation of such clinic required by
82 this section and, in such event, any such clinic shall be deemed to have

83 satisfied the requirements of this section for the purposes of licensure.
84 Such deemed status license shall be valid for two years and shall not
85 be transferable or assignable. The provisions of this subsection shall
86 not be construed to limit the department's authority to inspect any
87 clinic or suspend or revoke any license or deemed status license issued
88 pursuant to this section or to take any other legal action authorized by
89 any provision of the general statutes.

90 (e) The department shall make available to child guidance clinics
91 forms to be used in making application for available funds. Upon
92 receipt of proper application, the department shall grant the funds,
93 provided the plans for financing, the standards of operation and the
94 effectiveness of services of the clinics are approved by the department
95 in accordance with the provisions of this section. The grants shall be
96 made on an annual basis.

97 Sec. 2. Section 17a-145 of the general statutes is repealed and the
98 following is substituted in lieu thereof (*Effective October 1, 2017, and*
99 *applicable to applications for renewal submitted after the adoption of*
100 *regulations in accordance with this section*):

101 (a) No person or entity shall care for or board a child without a
102 license obtained from the Commissioner of Children and Families,
103 except: (1) When a child has been placed by a person or entity holding
104 a license from the commissioner; (2) any residential educational
105 institution exempted by the State Board of Education under the
106 provisions of section 17a-152; (3) residential facilities licensed by the
107 Department of Developmental Services pursuant to section 17a-227, as
108 amended by this act; (4) facilities providing child care services, as
109 defined in section 19a-77; or (5) any home that houses students
110 participating in a program described in subparagraph (B) of
111 subdivision (8) of section 10a-29.

112 (b) The person or entity seeking a child care facility license shall file
113 with the commissioner an application for a license, in such form as the
114 commissioner furnishes, stating the location where it is proposed to
115 care for such child, the number of children to be cared for, in the case

116 of a corporation, the purpose of the corporation and the names of its
117 chief officers and of the actual person responsible for the child. The
118 Commissioner of Children and Families is authorized to fix the
119 maximum number of children to be boarded and cared for in any such
120 home or institution or by any person or entity licensed by the
121 commissioner. If the population served at any facility, institution or
122 home operated by any person or entity licensed under this section
123 changes after such license is issued, such person or entity shall file a
124 new license application with the commissioner, and the commissioner
125 shall notify the chief executive officer of the municipality in which the
126 facility is located of such new license application, except that no
127 confidential client information may be disclosed.

128 (c) In lieu of applying for the renewal of a license under this section,
129 a person or entity may, at the time when any renewal is due, submit
130 evidence, satisfactory to the commissioner, that such person or entity
131 has been accredited as a provider of services within the immediately
132 preceding twelve-month period by a national accrediting organization
133 that the department has listed in regulations adopted pursuant to
134 subsection (f) of this section. The commissioner may waive any
135 inspection and investigation of such person or entity and, in such
136 event, any such person or entity shall be deemed to have satisfied the
137 requirements of this section for the purposes of licensure. Such
138 deemed status license shall be valid for two years and shall not be
139 transferable or assignable. The provisions of this subsection shall not
140 be construed to limit the commissioner's authority to inspect any
141 person or entity, to suspend or revoke any license or deemed status
142 license issued pursuant to this section or to take any other legal action
143 authorized by any provision of the general statutes.

144 [(b)] (d) Each person or entity licensed by the commissioner
145 pursuant to subsection (a) of this section shall designate an on-site staff
146 member who shall apply a reasonable and prudent parent standard, as
147 defined in subsection (a) of section 17a-114d, on behalf of the child.

148 [(c)] (e) The Commissioner of Children and Families shall not be

149 responsible for the licensing of any facility that does not board or care
150 for children or youths under eighteen years of age.

151 (f) The Commissioner of Children and Families shall adopt
152 regulations, in accordance with the provisions of chapter 54, to
153 implement the provisions of subsection (c) of this section. Such
154 regulations shall (1) list any national accrediting organizations that the
155 commissioner finds have standards that are more or at least as
156 stringent for obtaining accreditation as the state requirements for
157 obtaining a license under this section, and (2) contain any other
158 provisions necessary to implement the provisions of subsection (c) of
159 this section. The regulations may also set an administrative fee
160 sufficient to pay for the costs to the department of processing an
161 application for a deemed status license under subsection (c) of this
162 section.

163 Sec. 3. Section 17a-147 of the general statutes is repealed and the
164 following is substituted in lieu thereof (*Effective October 1, 2017, and*
165 *applicable to applications for renewal submitted after the adoption of*
166 *regulations in accordance with this section*):

167 (a) For the purposes of this section and section 17a-22, "extended
168 day treatment" means a supplementary care community-based
169 program providing a comprehensive multidisciplinary approach to
170 treatment and rehabilitation of emotionally disturbed, mentally ill,
171 behaviorally disordered or multiply handicapped children and youths
172 during the hours immediately before and after school while they
173 reside with their parents or surrogate family. Extended day treatment
174 programs, except any such program provided by a regional
175 educational service center established in accordance with section 10-
176 66a, shall be licensed by the Department of Children and Families.

177 (b) The goal of extended day treatment is to improve the
178 functioning of the child or youth as an individual and the family as a
179 unit with the least possible interruption of beneficial relationships with
180 the family and the community. An extended day treatment program
181 (1) shall offer the broadest range of therapeutic services consistent with

182 the needs of the children and youths it serves, including, but not
183 limited to, (A) a therapeutic setting, (B) the integration of the family
184 into the treatment and the treatment planning process, (C) support and
185 emergency services to families designed to allow continued residence
186 of the children and youths in their homes, (D) professional clinical
187 services, (E) access to educational services, and (F) the coordination of
188 community services in support of the treatment effort, or (2) if
189 provided for children requiring special education by a regional
190 educational service center, shall offer such services as are specified in
191 the prescribed educational program for each such child in accordance
192 with section 10-76d.

193 (c) The Commissioner of Children and Families shall adopt such
194 regulations, in accordance with chapter 54, as are necessary to establish
195 procedures and requirements for the licensure of extended day
196 treatment programs, except any such program provided by a regional
197 educational service center. Such regulations shall (1) set forth an
198 optional process for the provider of an extended day treatment
199 program to apply for renewal of such license by submitting evidence,
200 satisfactory to the commissioner, that such person or entity has been
201 accredited as a provider of extended day treatment services within the
202 immediately preceding twelve-month period by a national accrediting
203 organization, (2) list the national accrediting organizations that the
204 department finds have standards that are more or at least as stringent
205 for obtaining accreditation as the state requirements for obtaining a
206 license under this section, and (3) contain any other provisions
207 necessary to implement this section. The regulations may also set an
208 administrative fee sufficient to pay for the costs to the department of
209 processing an application for a deemed status license.

210 (d) After the adoption of regulations in accordance with this section,
211 the commissioner may waive any inspection and investigation of a
212 provider of extended day treatment programs applying for a renewal
213 of such license that is accredited in accordance with, and that satisfies
214 any other requirements of, the regulations adopted under this section,
215 and, in such event, any such provider shall be deemed to have satisfied

216 the requirements of this section for the purposes of licensure. Such
217 license shall not be transferable or assignable. The provisions of this
218 subsection shall not be construed to limit the commissioner's authority
219 to inspect any provider, to suspend or revoke any license or deemed
220 status license issued pursuant to this section or to take any other legal
221 action authorized by any provision of the general statutes.

222 Sec. 4. Section 17a-149 of the general statutes is repealed and the
223 following is substituted in lieu thereof (*Effective October 1, 2017, and*
224 *applicable to applications for renewal submitted after the adoption of*
225 *regulations in accordance with section 17a-150*):

226 (a) No person or entity except a parent, an adult relative as specified
227 by section 17b-75 or guardian of any child shall place a child without a
228 license obtained from the Commissioner of Children and Families.
229 Application for a child-placing license shall be in a form furnished by
230 the commissioner, and shall state the location of the principal place of
231 business of the applicant, its organization or corporate name, its
232 purposes and the name, title and degree of professional training of
233 each of its staff members engaged in carrying out its stated purposes.
234 Any such applicant shall consent to such inspection, review and
235 supervision of all acts in relation to child placing as are reasonably
236 necessary to enable the commissioner to perform his or her duties
237 under section 17a-151, as amended by this act. The provisions of this
238 section with regard to the commissioner's authority to inspect, review
239 and supervise all acts in relation to child placing under section 17a-151,
240 as amended by this act, shall be limited to inspection, review and
241 supervision of the applicant under this section and shall not include
242 inspection, review or supervision of the homes in which a child is
243 placed.

244 (b) In lieu of applying for renewal of a license under this section, an
245 applicant may, at the time when any renewal is due, submit evidence,
246 satisfactory to the commissioner, that such applicant has been
247 accredited as a provider of child-placing services within the
248 immediately preceding twelve-month period by a national accrediting

249 organization that the department has listed in regulations adopted
250 pursuant to section 17a-150, as amended by this act. The commissioner
251 may waive any inspection and investigation of such applicant required
252 under this section and, in such event, any such applicant shall be
253 deemed to have satisfied the requirements of this section for the
254 purposes of licensure. Such deemed status license shall be valid for
255 two years and shall not be transferable or assignable. The provisions of
256 this subsection shall not be construed to limit the commissioner's
257 authority to inspect any applicant, to suspend or revoke any license or
258 deemed status license issued pursuant to this section or to take any
259 other legal action authorized by any provision of the general statutes.

260 Sec. 5. Section 17a-150 of the general statutes is repealed and the
261 following is substituted in lieu thereof (*Effective October 1, 2017*):

262 (a) The Commissioner of Children and Families shall adopt
263 regulations in accordance with chapter 54 setting forth standards for
264 licensing of persons or entities which place children. The regulations
265 shall require a person or entity licensed on or after March 9, 1984, to
266 have a minimum of two staff persons who are qualified by a
267 combination of education and work experience, and be a nonprofit
268 organization qualified as a tax-exempt organization under Section
269 501(c)(3) of the Internal Revenue Code of 1986, or any subsequent
270 corresponding internal revenue code of the United States, as from time
271 to time amended. Such regulations shall (1) set forth an optional
272 process for persons or entities which place children to apply for
273 renewal of their license by submitting evidence, satisfactory to the
274 commissioner, that such person or entity has been accredited as a
275 provider of child placement services within the immediately preceding
276 twelve-month period by a national accrediting organization, (2) list the
277 national accrediting organizations that the department finds have
278 standards that are more or at least as stringent for obtaining
279 accreditation as the state requirements for obtaining a license under
280 section 17a-149, as amended by this act, and (3) contain any other
281 provisions necessary to implement the provisions of section 17a-149, as
282 amended by this act. The regulations may also set an administrative

283 fee sufficient to pay for the costs to the department of processing an
284 application for a deemed status license under section 17a-149, as
285 amended by this act.

286 (b) Said commissioner shall adopt regulations prescribing the
287 minimum standards for homes in which children may be placed.

288 Sec. 6. Section 17a-151 of the general statutes is repealed and the
289 following is substituted in lieu thereof (*Effective October 1, 2017*):

290 (a) [The] Except as provided in subsection (b) of this section, the
291 Commissioner of Children and Families shall investigate the
292 conditions stated in each application made under the provisions of
293 sections 17a-145 and 17a-149, as amended by this act, and shall require
294 any person identified on the application under said sections to submit
295 to state and national criminal history records checks. [The] Except as
296 provided in subsection (b) of this section, the commissioner shall
297 investigate the conditions in each application under the provisions of
298 sections 17a-145 and 17a-149, as amended by this act, and, if the
299 commissioner finds such conditions suitable for the proper care of
300 children, or for the placing out of children, under such standards for
301 the promotion of the health, safety, morality and well-being of such
302 children as the commissioner prescribes, shall issue such license as is
303 required as promptly as possible, without expense to the licensee. If,
304 after such investigation, the commissioner finds that the applicant,
305 notwithstanding good faith efforts, is not able to fully comply with all
306 the requirements the commissioner prescribes, but compliance can be
307 achieved with minimal efforts, the commissioner may issue a
308 provisional license for a period not to exceed sixty days. The
309 provisional license may be renewed for additional sixty-day periods,
310 but in no event shall the total of such periods be for longer than one
311 year. Before issuing any license, the commissioner shall give to the
312 selectmen of the town wherein such licensee proposes to carry on the
313 licensed activity ten days' notice in writing that the issuance of such
314 license is proposed, but such notice shall not be required in case of
315 intention to issue such license to any corporation incorporated for the

316 purpose of caring for or placing such children. Each license so issued
317 shall specify whether it is granted for child-caring or child-placing
318 purposes, shall state the number of children who may be cared for,
319 shall be in force twenty-four months from date of issue, and shall be
320 renewed for the ensuing twenty-four months, if conditions continue to
321 be satisfactory to the commissioner. The commissioner shall also
322 provide such periodical inspections and review as shall safeguard the
323 well-being, health and morality of all children cared for or placed
324 under a license issued by the commissioner under this section and
325 shall visit and consult with each such child and with the licensee as
326 often as the commissioner deems necessary but for licenses other than
327 deemed status licenses, at intervals of not more than ninety days. Each
328 licensee under the provisions of this section shall file annually with the
329 commissioner a report containing such information concerning its
330 functions, services and operation, including financial data, as the
331 commissioner requires. Any license issued under this section,
332 including a deemed status license, may be revoked, suspended or
333 limited by the commissioner for cause, after notice given to the person
334 or entity concerned and after opportunity for a hearing thereon. Any
335 party whose application is denied or whose license is revoked,
336 suspended or limited by the commissioner may appeal from such
337 adverse decision in accordance with the provisions of section 4-183.
338 Appeals under this section shall be privileged in respect to the order of
339 trial assignment.

340 (b) The criminal history records checks required pursuant to
341 subsection (a) of this section shall be conducted in accordance with
342 section 29-17a.

343 (c) The commissioner may waive any inspection and investigation
344 of a person who is applying or who has obtained a deemed status
345 license in accordance with the provisions of sections 17a-145 and 17a-
346 149, as amended by this act.

347 Sec. 7. Section 17a-227 of the general statutes is repealed and the
348 following is substituted in lieu thereof (*Effective October 1, 2017, and*

349 *applicable to applications for renewal submitted after the adoption of*
350 *regulations in accordance with this section):*

351 (a) No person, firm or corporation shall operate within this state a
352 community living arrangement or community companion home which
353 it owns, leases or rents for the lodging, care or treatment of persons
354 with intellectual disability, Prader-Willi syndrome or autism spectrum
355 disorder unless such person, firm or corporation, upon written
356 application, verified by oath, has obtained a license issued by the
357 Department of Developmental Services.

358 (b) The commissioner shall adopt regulations, in accordance with
359 the provisions of chapter 54, to insure the comfort, safety, adequate
360 medical care and treatment of such persons at the residential facilities
361 described in subsection (a) of this section. Such regulations shall
362 include requirements that: (1) All residential facility staff be certified in
363 cardiopulmonary resuscitation in a manner and time frame prescribed
364 by the commissioner; (2) records of staffing schedules and actual staff
365 hours worked, by residential facility, be available for inspection by the
366 department upon advance notice; (3) each residential facility develop
367 and implement emergency plans and staff training to address
368 emergencies that may pose a threat to the health and safety of the
369 residents of the facility; (4) department staff verify during quality
370 service reviews and licensing inspections, that (A) staff is adequately
371 trained to respond in an emergency, and (B) a summary of information
372 on each resident is available to emergency medical personnel for use in
373 an emergency; (5) all residential facilities serving persons with Down
374 syndrome fifty years of age or older have at least one staff member
375 trained in Alzheimer's disease and dementia symptoms and care; and
376 (6) not less than one-half of the quality service reviews, licensing
377 inspections or facility visits conducted by the department after initial
378 licensure, if applicable, are unannounced. Such regulations shall also
379 set forth an optional process for a person, firm or corporation which
380 operates a community living arrangement or community companion
381 home within this state to apply for renewal of a license under this
382 section by submitting evidence, satisfactory to the commissioner, that

383 such person, firm or corporation has been accredited as a provider of
384 services within the immediately preceding twelve-month period by a
385 national accrediting organization, list the national accrediting
386 organizations that the department finds have standards that are more
387 or at least as stringent for obtaining accreditation as the state
388 requirements for obtaining a license under this section, and contain
389 any other provisions necessary to implement the provisions of this
390 subsection. The regulations may also set an administrative fee
391 sufficient to pay for the costs to the department of processing an
392 application for a deemed status license under this section.

393 (c) After receiving an application and making such investigation as
394 is deemed necessary and after finding the specified requirements to
395 have been fulfilled, the department shall grant a license to such
396 applicant to operate a facility of the character described in such
397 application, which license shall specify the name of the person to have
398 charge and the location of each facility operated under the license. In
399 the case of a renewal of such license, an applicant may, at the time
400 when any such renewal is due, submit evidence, satisfactory to the
401 department, that such applicant has been accredited as a provider of
402 services within the immediately preceding twelve-month period by a
403 national accrediting organization that the department has listed in
404 regulations adopted pursuant to subsection (b) of this section. The
405 department may waive any inspection and investigation of such
406 applicant required under this section and, in such event, any such
407 applicant shall be deemed to have satisfied the requirements of this
408 section for the purposes of licensure. Such deemed status license shall
409 be valid for two years and shall not be transferable or assignable. The
410 provisions of this subsection shall not be construed to limit the
411 department's authority to inspect any applicant, to suspend or revoke
412 any license or deemed status license issued pursuant to this section or
413 to take any other legal action authorized by any provision of the
414 general statutes. Any person, firm or corporation aggrieved by any
415 requirement of the regulations or by the refusal to grant any license
416 may request an administrative hearing in accordance with the
417 provisions of chapter 54. If the licensee of any such facility desires to

418 place in charge thereof a person other than the one specified in the
419 license, application shall be made to the Department of Developmental
420 Services, in the same manner as provided for the original application,
421 for permission to make such change. Such application shall be acted
422 upon not later than ten calendar days from the date of the filing of the
423 application. Each such license shall be renewed annually upon such
424 terms as may be established by regulations and may be revoked by the
425 department upon proof that the facility for which such license was
426 issued is being improperly operated, or for the violation of any of the
427 provisions of this section or of the regulations adopted pursuant to this
428 section, provided the licensee shall first be given a reasonable
429 opportunity to be heard in reference to such proposed revocation. Any
430 person, firm or corporation aggrieved by such revocation may request
431 an administrative hearing in accordance with the provisions of chapter
432 54. Each person, firm or corporation, upon filing an application under
433 the provisions of this section for a license for a community living
434 arrangement, shall pay to the State Treasurer the sum of fifty dollars.

435 (d) The Department of Developmental Services may contract, within
436 available appropriations, with any qualified provider for the operation
437 of a community-based residential facility, provided the qualified
438 provider is licensed by the department to operate such facilities,
439 including a deemed status license. The department shall include in all
440 contracts with such licensed qualified providers, provisions requiring
441 the department to (1) conduct periodic reviews of contract
442 performance, and (2) take progressive enforcement actions if the
443 department finds poor performance or noncompliance with the
444 contract, as follows: (A) The licensed qualified provider may be placed
445 on a strict schedule of monitoring and oversight by the department; (B)
446 the licensed qualified provider may be placed on a partial-year
447 contract; and (C) payments due under the contract may be reduced by
448 specific amounts on a monthly basis until the licensed qualified
449 provider complies with the contract. If compliance cannot be achieved,
450 the department shall terminate the contract.

451 (e) The department may contract with any person, firm or

452 corporation to provide residential support services for persons with
453 intellectual disability, Prader-Willi syndrome or autism spectrum
454 disorder who reside in settings which are not licensed by the
455 department. The commissioner shall adopt regulations, in accordance
456 with the provisions of chapter 54, to ensure the safety, adequate
457 supervision and support of persons receiving such residential support
458 services.

459 (f) Any person, firm or corporation who operates any facility
460 contrary to the provisions of this section shall be fined not more than
461 one thousand dollars or imprisoned not more than six months or both.
462 Any person, firm or corporation who operates any facility contrary to
463 the regulations adopted pursuant to subsection (b) of this section shall
464 be fined not more than one thousand dollars.

465 Sec. 8. Section 19a-491 of the general statutes is repealed and the
466 following is substituted in lieu thereof (*Effective October 1, 2017, and*
467 *applicable to applications for renewal submitted after the adoption of*
468 *regulations in accordance with this section*):

469 (a) No person acting individually or jointly with any other person
470 shall establish, conduct, operate or maintain an institution in this state
471 without a license as required by this chapter, except for persons issued
472 a license by the Commissioner of Children and Families pursuant to
473 section 17a-145, as amended by this act, for the operation of (1) a
474 substance abuse treatment facility, or (2) a facility for the purpose of
475 caring for women during pregnancies and for women and their infants
476 following such pregnancies. Application for such license shall be made
477 to the Department of Public Health upon forms provided by it and
478 shall contain such information as the department requires, which may
479 include affirmative evidence of ability to comply with reasonable
480 standards and regulations prescribed under the provisions of this
481 chapter or of a national accrediting organization listed in regulations
482 adopted by the commissioner under subsection (b) of section 19a-493,
483 as amended by this act. The commissioner may require as a condition
484 of licensure that an applicant sign a consent order providing

485 reasonable assurances of compliance with the Public Health Code. The
486 commissioner may issue more than one chronic disease hospital
487 license to a single institution until such time as the state offers a
488 rehabilitation hospital license.

489 (b) If any person acting individually or jointly with any other person
490 owns real property or any improvements thereon, upon or within
491 which an institution, as defined in subsection (c) of section 19a-490, is
492 established, conducted, operated or maintained and is not the licensee
493 of the institution, such person shall submit a copy of the lease
494 agreement to the department at the time of any change of ownership
495 and with each license renewal application. The lease agreement shall,
496 at a minimum, identify the person or entity responsible for the
497 maintenance and repair of all buildings and structures within which
498 such an institution is established, conducted or operated. If a violation
499 is found as a result of an inspection or investigation, the commissioner
500 may require the owner to sign a consent order providing assurances
501 that repairs or improvements necessary for compliance with the
502 provisions of the Public Health Code shall be completed within a
503 specified period of time or may assess a civil penalty of not more than
504 one thousand dollars for each day that such owner is in violation of the
505 Public Health Code or a consent order. A consent order may include a
506 provision for the establishment of a temporary manager of such real
507 property who has the authority to complete any repairs or
508 improvements required by such order. Upon request of the
509 Commissioner of Public Health, the Attorney General may petition the
510 Superior Court for such equitable and injunctive relief as such court
511 deems appropriate to ensure compliance with the provisions of a
512 consent order. The provisions of this subsection shall not apply to any
513 property or improvements owned by a person licensed in accordance
514 with the provisions of subsection (a) of this section to establish,
515 conduct, operate or maintain an institution on or within such property
516 or improvements.

517 (c) Notwithstanding any regulation other than the regulations
518 adopted under subsection (b) of section 19a-493, as amended by this

519 act, the Commissioner of Public Health shall charge the following fees
520 for the biennial licensing and inspection of the following institutions:
521 (1) Chronic and convalescent nursing homes, per site, four hundred
522 forty dollars; (2) chronic and convalescent nursing homes, per bed, five
523 dollars; (3) rest homes with nursing supervision, per site, four hundred
524 forty dollars; (4) rest homes with nursing supervision, per bed, five
525 dollars; (5) outpatient dialysis units and outpatient surgical facilities,
526 six hundred twenty-five dollars; (6) mental health residential facilities,
527 per site, three hundred seventy-five dollars; (7) mental health
528 residential facilities, per bed, five dollars; (8) hospitals, per site, nine
529 hundred forty dollars; (9) hospitals, per bed, seven dollars and fifty
530 cents; (10) nonstate agency educational institutions, per infirmary, one
531 hundred fifty dollars; (11) nonstate agency educational institutions, per
532 infirmary bed, twenty-five dollars; (12) home health care agencies,
533 except certified home health care agencies described in subsection (d)
534 of this section, per agency, three hundred dollars; (13) home health
535 care agencies, except certified home health care agencies described in
536 subsection (d) of this section, per satellite patient service office, one
537 hundred dollars; (14) assisted living services agencies, except such
538 agencies participating in the congregate housing facility pilot program
539 described in section 8-119n, per site, five hundred dollars; (15) short-
540 term hospitals special hospice, per site, nine hundred forty dollars; (16)
541 short-term hospitals special hospice, per bed, seven dollars and fifty
542 cents; (17) hospice inpatient facility, per site, four hundred forty
543 dollars; and (18) hospice inpatient facility, per bed, five dollars.

544 (d) Notwithstanding any regulation other than the regulations
545 adopted under subsection (b) of section 19a-493, as amended by this
546 act, the commissioner shall charge the following fees for the triennial
547 licensing and inspection of the following institutions: (1) Residential
548 care homes, per site, five hundred sixty-five dollars; (2) residential care
549 homes, per bed, four dollars and fifty cents; (3) home health care
550 agencies that are certified as a provider of services by the United States
551 Department of Health and Human Services under the Medicare or
552 Medicaid program, three hundred dollars; and (4) certified home
553 health care agencies, as described in section 19a-493, as amended by

554 this act, per satellite patient service office, one hundred dollars.

555 (e) The commissioner shall charge one thousand dollars for the
556 licensing and inspection every four years of outpatient clinics that
557 provide either medical or mental health service, and well-child clinics,
558 except those which have deemed status licenses under section 19a-493,
559 as amended by this act, or those operated by municipal health
560 departments, health districts or licensed nonprofit nursing or
561 community health agencies.

562 (f) The commissioner shall charge a fee of five hundred sixty-five
563 dollars for the technical assistance provided for the design, review and
564 development of an institution's construction, renovation, building
565 alteration, sale or change in ownership when the cost of the project is
566 one million dollars or less and shall charge a fee of one-quarter of one
567 per cent of the total construction cost when the cost of the project is
568 more than one million dollars. Such fee shall include all department
569 reviews and on-site inspections. For purposes of this subsection,
570 "institution" does not include a facility owned by the state.

571 (g) The commissioner may require as a condition of the licensure of
572 home health care agencies and homemaker-home health aide agencies
573 that each agency meet minimum service quality standards. In the
574 event the commissioner requires such agencies to meet minimum
575 service quality standards as a condition of their licensure, the
576 commissioner shall adopt regulations, in accordance with the
577 provisions of chapter 54, to define such minimum service quality
578 standards, which shall (1) allow for training of homemaker-home
579 health aides by adult continuing education, (2) require a registered
580 nurse to visit and assess each patient receiving homemaker-home
581 health aide services as often as necessary based on the patient's
582 condition, but not less than once every sixty days, and (3) require the
583 assessment prescribed by subdivision (2) of this subsection to be
584 completed while the homemaker-home health aide is providing
585 services in the patient's home.

586 (h) No person acting individually or jointly with any other person

587 shall establish, conduct, operate or maintain a home health care agency
588 or homemaker-home health aide agency without maintaining
589 professional liability insurance or other indemnity against liability for
590 professional malpractice. The amount of insurance which such person
591 shall maintain as insurance or indemnity against claims for injury or
592 death for professional malpractice shall be not less than one million
593 dollars for one person, per occurrence, with an aggregate of not less
594 than three million dollars.

595 (i) On and after June 15, 2012, until June 30, 2017, the commissioner
596 shall not issue or renew a license under this chapter for any hospital
597 certified to participate in the Medicare program as a long-term care
598 hospital under Section 1886(d)(1)(B)(iv) of the Social Security Act (42
599 USC 1395ww) unless such hospital was so certified under said federal
600 act on January 1, 2012.

601 (j) (1) A chronic disease hospital shall (A) maintain its medical
602 records on-site in an accessible manner or be able to retrieve such
603 records from an off-site location not later than the end of the next
604 business day after receiving a request for such records, (B) keep a
605 patient's medical records on-site for a minimum of ten years after the
606 date of such patient's discharge, except the hospital may destroy the
607 patient's original medical records prior to the expiration of the ten-year
608 period if a copy of such medical records is preserved by a process that
609 is consistent with current hospital standards, or (C) complete a
610 patient's medical records not more than thirty days after the date of
611 such patient's discharge, except in unusual circumstances that shall be
612 specified in the hospital's rules and regulations for its medical staff.
613 Each chronic disease hospital shall provide the Department of Public
614 Health with a list of the process it uses for preserving a copy of
615 medical records in accordance with subparagraph (B) of this
616 subdivision.

617 (2) A children's hospital shall (A) maintain its medical records on-
618 site in an accessible manner or be able to retrieve such records from an
619 off-site location not later than the end of the next business day after

620 receiving a request for such records, and (B) keep a patient's medical
621 records on-site for a minimum of ten years after the date of such
622 patient's discharge, except the hospital may destroy the patient's
623 original medical records prior to the expiration of the ten-year period if
624 a copy of such medical records is preserved by a process that is
625 consistent with current hospital standards. Each children's hospital
626 shall provide the Department of Public Health a list of the process it
627 uses for preserving a copy of medical records in accordance with
628 subparagraph (B) of this subdivision.

629 (3) The Department of Public Health may adopt regulations in
630 accordance with the provisions of chapter 54 to implement the
631 provisions of this subsection.

632 Sec. 9. Section 19a-493 of the general statutes is repealed and the
633 following is substituted in lieu thereof (*Effective October 1, 2017, and*
634 *applicable to applications for renewal submitted after the adoption of*
635 *regulations in accordance with this section*):

636 (a) Upon receipt of an application for an initial license, the
637 Department of Public Health, subject to the provisions of section 19a-
638 491a, shall issue such license if, upon conducting a scheduled
639 inspection and investigation, the department finds that the applicant
640 and facilities meet the requirements established under section 19a-495,
641 provided a license shall be issued to or renewed for an institution, as
642 defined in section 19a-490, only if such institution is not otherwise
643 required to be licensed by the state. If an institution, (1) as defined in
644 subsections (b), (d), (e) and (f) of section 19a-490, applies for license
645 renewal and has been certified as a provider of services by the United
646 States Department of Health and Human Services under Medicare or
647 Medicaid programs within the immediately preceding twelve-month
648 period, [or if an institution,] (2) as defined in subsection (b) of section
649 19a-490, is currently certified, or (3) as defined in subsections (g), (h)
650 and (m) of section 19a-490, applies for license renewal and has been
651 accredited as a provider of services within the immediately preceding
652 twelve-month period by a national accrediting organization that the

653 department has listed in regulations adopted pursuant to subsection
654 (b) of this section, the commissioner or the commissioner's designee
655 may waive on renewal the inspection and investigation of such facility
656 required by this section and, in such event, any such facility shall be
657 deemed to have satisfied the requirements of section 19a-495 for the
658 purposes of licensure. Such license shall be valid for two years or a
659 fraction thereof and shall terminate on March thirty-first, June
660 thirtieth, September thirtieth or December thirty-first of the
661 appropriate year. A license issued pursuant to this chapter, unless
662 sooner suspended or revoked, shall be renewable biennially [(1)] (A)
663 after an unscheduled inspection is conducted by the department, and
664 [(2)] (B) upon the filing by the licensee, and approval by the
665 department, of a report upon such date and containing such
666 information in such form as the department prescribes and satisfactory
667 evidence of continuing compliance with requirements established
668 under section 19a-495. In the case of an institution, as defined in
669 subsection (d) of section 19a-490, that is also certified as a provider
670 under the Medicare program, the license shall be issued for a period
671 not to exceed three years, to run concurrently with the certification
672 period. Except in the case of a multicare institution, each license shall
673 be issued only for the premises and persons named in the application.
674 Such license shall not be transferable or assignable. Licenses shall be
675 posted in a conspicuous place in the licensed premises.

676 (b) The Commissioner of Public Health shall adopt regulations, in
677 accordance with the provisions of chapter 54, to implement the
678 provisions of subsection (a) of this section concerning licensure
679 renewal for an institution, as defined in subsections (g), (h) and (m) of
680 section 19a-490. Such regulations shall (1) list any national accrediting
681 organizations that the department finds have standards that are more
682 or at least as stringent for obtaining accreditation as the state
683 requirements for obtaining a license under this section, and (2) contain
684 any other provisions necessary to implement the provisions of
685 subsection (a) of this section. The regulations may also set an
686 administrative fee sufficient to pay for the costs to the department of
687 processing an application for a deemed status license under subsection

688 (a) of this section.

689 [(b)] (c) (1) A nursing home license may be renewed biennially after
690 (A) an unscheduled inspection conducted by the department, (B)
691 submission of the information required by section 19a-491a, and (C)
692 submission of evidence satisfactory to the department that the nursing
693 home is in compliance with the provisions of this chapter, the Public
694 Health Code and licensing regulations.

695 (2) Any change in the ownership of a facility or institution, as
696 defined in subsection (c) of section 19a-490, owned by an individual,
697 partnership or association or the change in ownership or beneficial
698 ownership of ten per cent or more of the stock of a corporation which
699 owns, conducts, operates or maintains such facility or institution, shall
700 be subject to prior approval of the department after a scheduled
701 inspection of such facility or institution is conducted by the
702 department, provided such approval shall be conditioned upon a
703 showing by such facility or institution to the commissioner that it has
704 complied with all requirements of this chapter, the regulations relating
705 to licensure and all applicable requirements of the Public Health Code.
706 Any such change in ownership or beneficial ownership resulting in a
707 transfer to a person related by blood or marriage to such an owner or
708 beneficial owner shall not be subject to prior approval of the
709 department unless: (A) Ownership or beneficial ownership of ten per
710 cent or more of the stock of a corporation, partnership or association
711 which owns, conducts, operates or maintains more than one facility or
712 institution is transferred; (B) ownership or beneficial ownership is
713 transferred in more than one facility or institution; or (C) the facility or
714 institution is the subject of a pending complaint, investigation or
715 licensure action. If the facility or institution is not in compliance, the
716 commissioner may require the new owner to sign a consent order
717 providing reasonable assurances that the violations shall be corrected
718 within a specified period of time. Notice of any such proposed change
719 of ownership shall be given to the department at least ninety days
720 prior to the effective date of such proposed change. For the purposes of
721 this subdivision, "a person related by blood or marriage" means a

722 parent, spouse, child, brother, sister, aunt, uncle, niece or nephew. For
723 the purposes of this subdivision, a change in the legal form of the
724 ownership entity, including, but not limited to, changes from a
725 corporation to a limited liability company, a partnership to a limited
726 liability partnership, a sole proprietorship to a corporation and similar
727 changes, shall not be considered a change of ownership if the
728 beneficial ownership remains unchanged and the owner provides such
729 information regarding the change to the department as may be
730 required by the department in order to properly identify the current
731 status of ownership and beneficial ownership of the facility or
732 institution. For the purposes of this subdivision, a public offering of
733 the stock of any corporation that owns, conducts, operates or
734 maintains any such facility or institution shall not be considered a
735 change in ownership or beneficial ownership of such facility or
736 institution if the licensee and the officers and directors of such
737 corporation remain unchanged, such public offering cannot result in
738 an individual or entity owning ten per cent or more of the stock of
739 such corporation, and the owner provides such information to the
740 department as may be required by the department in order to properly
741 identify the current status of ownership and beneficial ownership of
742 the facility or institution.

743 [(c)] (d) (1) A multicare institution may, under the terms of its
744 existing license, provide behavioral health services or substance use
745 disorder treatment services on the premises of more than one facility,
746 at a satellite unit or at another location outside of its facilities or
747 satellite units that is acceptable to the patient receiving services and is
748 consistent with the patient's assessment and treatment plan.

749 (2) Any multicare institution that intends to offer services at a
750 satellite unit or other location outside of its facilities or satellite units
751 shall submit an application for approval to offer services at such
752 location to the Department of Public Health. Such application shall be
753 submitted on a form and in the manner prescribed by the
754 Commissioner of Public Health. Not later than forty-five days after
755 receipt of such application, the commissioner shall notify the multicare

756 institution of the approval or denial of such application. If the satellite
757 unit or other location is approved, that satellite unit or location shall be
758 deemed to be licensed in accordance with this section and shall comply
759 with the applicable requirements of this chapter and regulations
760 adopted under this chapter.

761 (3) The Commissioner of Public Health may adopt regulations, in
762 accordance with the provisions of chapter 54, to carry out the
763 provisions of this subsection. The Commissioner of Public Health may
764 implement policies and procedures necessary to administer the
765 provisions of this subsection while in the process of adopting such
766 policies and procedures as regulation, provided the commissioner
767 prints notice of intent to adopt regulations in the Connecticut Law
768 Journal not later than twenty days after the date of implementation.
769 Policies and procedures implemented pursuant to this section shall be
770 valid until the time final regulations are adopted.

771 Sec. 10. Section 19a-493c of the general statutes is repealed and the
772 following is substituted in lieu thereof (*Effective October 1, 2017, and*
773 *applicable to applications for renewal submitted after the adoption of*
774 *regulations in accordance with this section*):

775 (a) The Commissioner of Public Health shall license outpatient
776 clinics, as defined in section 19a-490. In lieu of applying for the
777 renewal of such license, an applicant may, at the time when any such
778 renewal is due, submit evidence, satisfactory to the commissioner, that
779 such applicant has been accredited as a provider of outpatient clinic
780 services within the immediately preceding twelve-month period by a
781 national accrediting organization that the commissioner has listed in
782 regulations adopted pursuant to this section. Any such applicant shall
783 be deemed to have satisfied the requirements of this section for the
784 purposes of licensure. Such deemed status license shall be valid for
785 two years and shall not be transferable or assignable. The provisions of
786 this subsection shall not be construed to limit the commissioner's
787 authority to inspect any applicant, to suspend or revoke any license or
788 deemed status license issued pursuant to this section or to take any

789 other legal action authorized by any provision of the general statutes.

790 (b) The commissioner [may] shall adopt regulations, in accordance
791 with the provisions of chapter 54, to implement the provisions of this
792 section. Such regulations shall (1) list any national accrediting
793 organizations that the commissioner finds have standards that are
794 more or at least as stringent for obtaining accreditation as the state
795 requirements for obtaining a license under this section, and (2) contain
796 any other provisions necessary to implement the provisions of
797 subsection (a) of this section. The regulations may also set an
798 administrative fee sufficient to pay for the costs to the department of
799 processing an application for a deemed status license under subsection
800 (a) of this section. The commissioner may waive any provision of the
801 regulations for outpatient clinics. The commissioner may implement
802 policies and procedures necessary to administer the provisions of this
803 section while in the process of adopting such policies and procedures
804 as regulations, except for the regulations concerning deemed status
805 licenses, provided notice of intent to adopt regulations is published in
806 the Connecticut Law Journal not later than twenty days after the date
807 of implementation. Policies and procedures implemented pursuant to
808 this section shall be valid until the time final regulations are adopted.

809 Sec. 11. Section 19a-507b of the general statutes is repealed and the
810 following is substituted in lieu thereof (*Effective October 1, 2017, and*
811 *applicable to applications for renewal submitted after the adoption of*
812 *regulations in accordance with this section*):

813 (a) No community residence shall be established on or after July 1,
814 1984, within one thousand feet of any other community residence. If
815 more than one community residence is proposed to be established in
816 any municipality, the total capacity of all community residences in the
817 municipality in which such residence is proposed to be established
818 shall not exceed one-tenth of one per cent of the population of such
819 municipality.

820 (b) Any resident of a municipality in which a community residence
821 is or will be located may, through the chief executive officer of the

822 municipality, or the legislative body of such municipality may, petition
823 the Commissioner of Public Health to deny an application for a license
824 to operate a community residence on the grounds that the operation of
825 such a community residence would be in violation of the limits
826 established under subsection (a) of this section.

827 (c) An applicant for a license to operate a community residence shall
828 mail a copy of the application made to the Department of Public
829 Health to the regional mental health board and the governing body of
830 the municipality in which the community residence is to be located, by
831 certified mail, return receipt requested. All applications shall specify
832 the number of community residences in the municipality, the address
833 of each such residence and the number of residents in each and the
834 address of the proposed community residence, and shall include
835 population and occupancy statistics reflecting compliance with the
836 limits established pursuant to subsection (a) of this section.

837 (d) The Commissioner of Public Health shall not issue a license for a
838 community residence until the applicant has submitted proof that the
839 mailing required by subsection (c) of this section has been made and
840 until at least thirty days have elapsed since the receipt of such mailing
841 by all required recipients.

842 (e) In the case of a renewal of such license, an applicant may, at the
843 time when any renewal is due, submit evidence, satisfactory to the
844 commissioner, that such applicant has been accredited as a provider of
845 community residence services within the immediately preceding
846 twelve-month period by a national accrediting organization that the
847 commissioner has listed in regulations adopted pursuant this section.
848 The commissioner may waive any inspection and investigation of such
849 applicant required under this section and, in such event, any such
850 applicant shall be deemed to have satisfied the requirements of this
851 section for the purposes of licensure. Such license shall be valid for two
852 years and shall not be transferable or assignable. The provisions of this
853 subsection shall not be construed to limit the commissioner's authority
854 to inspect any applicant, to suspend or revoke any license or deemed

855 status license issued pursuant to this section or to take any other legal
856 action authorized by any provision of the general statutes.

857 (f) The Commissioner of Public Health shall adopt regulations, in
858 accordance with the provisions of chapter 54, to implement the
859 provisions of subsection (e) of this section concerning deemed status
860 licensure for a community residence. Such regulations shall (1) list any
861 national accrediting organizations that the commissioner finds have
862 standards that are more or at least as stringent for obtaining
863 accreditation as the state requirements for obtaining a license under
864 this section, and (2) contain any other provisions necessary to
865 implement the provisions of subsection (e) of this section. The
866 regulations may also set an administrative fee sufficient to pay for the
867 costs to the department of processing an application for a deemed
868 status license under subsection (e) of this section.

869 Sec. 12. Section 19a-507c of the general statutes is repealed and the
870 following is substituted in lieu thereof (*Effective October 1, 2017*):

871 A community residence shall be evaluated twice a year by the
872 Department of Mental Health and Addiction Services, except that a
873 community residence that has obtained deemed status licensure under
874 section 19a-507b, as amended by this act, may be evaluated less
875 frequently and may be evaluated by the department or the accrediting
876 organization. Evaluations by said department shall include a review of
877 individual client records and shall be sent to the Department of Public
878 Health upon its request.

879 Sec. 13. Section 19a-507g of the general statutes is repealed and the
880 following is substituted in lieu thereof (*Effective October 1, 2017, and*
881 *applicable to applications for renewal submitted after the adoption of*
882 *regulations in accordance with this section*):

883 (a) The Department of Social Services shall adopt regulations, in
884 accordance with chapter 54, for the certification of adult day health
885 care facilities. In establishing such regulations, the Department of
886 Social Services shall consult with the Connecticut Association of Adult

887 Day Centers and such other persons or entities it deems appropriate.
888 In the case of a renewal of such certification, an applicant may, at the
889 time when any renewal is due, submit evidence, satisfactory to the
890 commissioner, that such applicant has been accredited as a provider of
891 adult day health care services within the immediately preceding
892 twelve-month period by a national accrediting organization that the
893 department has listed in regulations adopted pursuant to this section.
894 The department may waive any inspection and investigation of such
895 applicant required under this section and, in such event, any such
896 applicant shall be deemed to have satisfied the requirements of this
897 section for the purposes of certification. Such certificate shall be valid
898 for two years and shall not be transferable or assignable. The
899 provisions of this subsection shall not be construed to limit the
900 department's authority to inspect any applicant, to suspend or revoke
901 any certificate or deemed status certificate issued pursuant to this
902 section or to take any other legal action authorized by any provision of
903 the general statutes.

904 (b) The Department of Social Services shall adopt regulations, in
905 accordance with the provisions of chapter 54, to implement the
906 provisions of subsection (a) of this section concerning certification
907 renewal for adult day health care facilities. Such regulations shall (1)
908 list any national accrediting organizations that the department finds
909 have standards that are more or at least as stringent for obtaining
910 accreditation as the state requirements for obtaining certification under
911 this section, and (2) contain any other provisions necessary to
912 implement the provisions of subsection (a) of this section. The
913 regulations may also set an administrative fee sufficient to pay for the
914 costs to the department of processing an application for a deemed
915 status certificate under subsection (a) of this section.

This act shall take effect as follows and shall amend the following sections:

| | | |
|-----------|---|---------|
| Section 1 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 17a-20 |
| Sec. 2 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 17a-145 |
| Sec. 3 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 17a-147 |
| Sec. 4 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with section 17a-150</i> | 17a-149 |
| Sec. 5 | <i>October 1, 2017</i> | 17a-150 |
| Sec. 6 | <i>October 1, 2017</i> | 17a-151 |
| Sec. 7 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 17a-227 |
| Sec. 8 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 19a-491 |

| | | |
|---------|--|----------|
| Sec. 9 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 19a-493 |
| Sec. 10 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 19a-493c |
| Sec. 11 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 19a-507b |
| Sec. 12 | <i>October 1, 2017</i> | 19a-507c |
| Sec. 13 | <i>October 1, 2017, and applicable to applications for renewal submitted after the adoption of regulations in accordance with this section</i> | 19a-507g |

Statement of Legislative Commissioners:

In Section 5(a)(2), "this section" was changed to "section 17a-149" for accuracy, and in Section 11(f) "license" was added for consistency and throughout the bill "national" was added before "accrediting" for consistency.

GAE *Joint Favorable Subst. -LCO*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact: See Below

Municipal Impact: None

Explanation

This bill requires the Departments of Children and Families (DCF), Developmental Services (DDS), Public Health (DPH), and Social Services (DSS) to grant “deemed status” license or certification renewals to certain contracted private providers that have earned and maintained accreditation from a recognized national accrediting organization. It allows the departments to charge an administrative fee to cover associated processing costs. It is unknown how many providers will seek deemed status and what fee, if any, departments will charge. Revenue that may be lost from existing licensing fees may, or may not, be recouped or surpassed through deemed status fees established by the departments.

Section 13 results in a potential savings to DSS. The agency contracts with the Connecticut Association of Adult Day Centers Inc. to complete the certification of adult day centers under the Connecticut Home Care Program for Elders waiver. Assuming an amendment to the waiver is approved by the federal Centers for Medicare and Medicaid Services, DSS could experience savings associated with reduced contract costs. Savings are anticipated to the extent that DSS chooses to waive inspections and/or investigations due to applicants meeting accreditation requirements.

Existing Licensure Fees

DCF does not charge fees for its health care institution licenses.

DDS collects a \$50 annual licensing fee from private providers for each group home they operate with five or more individuals. There are approximately 85 providers qualified to operate group homes and there are approximately 390 group homes for which providers must pay the fee, generating \$19,500 annually for the General Fund.

DPH generates approximately \$11,470 for the General Fund every two years and approximately \$25,000 for the General Fund every four years through health care institution licensure.

DSS contracts with the Connecticut Association of Adult Day Centers Inc., which does charge a fee for its adult day health care facilities certification.

The Out Years

The fiscal impact identified above would continue into the future subject to the number of entities seeking deemed status and fees established by the departments.

OLR Bill Analysis**sHB 6155*****AN ACT AUTHORIZING DEEMED STATUS LICENSE RENEWALS FOR CERTAIN NONPROFIT COMMUNITY SERVICE PROVIDERS.*****SUMMARY**

This bill requires the departments of children and families (DCF), developmental services (DDS), public health (DPH), and social services (DSS) to adopt regulations in order to grant “deemed status” license or certification renewals to certain contracted private providers that have earned and maintained accreditation from a recognized national accrediting organization. The accreditation requirements must be no less stringent than the state licensing or certification requirements. The deemed status license or certification is valid for two years and cannot be transferred or assigned.

The bill gives the affected providers the option to satisfy their license or certification renewal requirements by submitting proof of accreditation for the same services within the preceding 12-month period by an accrediting organization that the department has accepted and listed in its regulations for this purpose. The bill authorizes these agencies’ regulations to set an administrative fee to cover associated processing costs.

Under the bill, a department may waive, for deemed status license or certification renewals, the inspection and investigation that would otherwise be required for standard renewals. This does not limit any department’s authority to inspect providers, suspend or revoke a license or certification, or take any other legal action to address complaints or non-compliance under the law.

The bill also makes technical and conforming changes.

EFFECTIVE DATE: October 1, 2017, and applicable to renewal applications submitted after the adoption of associated regulations.

PROVIDERS ELIGIBLE FOR DEEMED STATUS

The provisions apply to certain types of providers (depicted in Table 1) which may have purchase of service contracts with the state (see BACKGROUND).

Table 1: Providers Eligible for Deemed Status License or Certification Renewals under the Bill

| Bill Section | Citation | Type of Private Provider | Licensing Agency |
|---------------------|-----------------------------------|--|-------------------------|
| §1 | CGS § 17a-20 | Outpatient psychiatric clinics | DCF |
| §2 | CGS § 17a-145 | Childcare facilities | |
| §3 | CGS § 17a-147 | Extended day treatment programs | |
| §§4-5 | CGS § 17a-149, CGS § 17a-150 | Child-placing services | |
| §7 | CGS § 17a-227 | Community-based residential facilities | DDS |
| §§8-9 | CGS § 19a-491, CGS § 19a-493 | Behavioral health facilities, alcohol or drug treatment facilities, and outpatient clinics | DPH |
| §10 | CGS § 19a-493c | Outpatient clinics | |
| §§11-12 | CGS § 19a-507b, CGS § 19a-507c | Community residences | |
| §13 | CGS § 19a-507g | Adult day health care facilities | DSS |

BACKGROUND

Purchase of Service Contracts

A purchase of service is a contract between a state agency and a private provider organization or municipality for the purpose of obtaining direct health and human services for agency clients (CGS § 4-70b).

COMMITTEE ACTION

Government Administration and Elections Committee

Joint Favorable

Yea 17 Nay 0 (03/27/2017)