



Acts Affecting People with Disabilities

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Notice to Readers

This report provides summaries of new laws (public acts and special acts) significantly affecting people with disabilities enacted during the 2019 regular session. OLR's other Acts Affecting reports, including Acts Affecting Seniors and Acts Affecting Health Professions, are, or will soon be, available on OLR's website: <https://www.cga.ct.gov/olr/actsaffecting.asp>.

Each summary indicates the public act (PA) or special act (SA) number. Not all provisions of the acts are included. The report does not include vetoed acts unless the veto was overridden.

Complete summaries of public acts are, or will soon be, available on OLR's website:

<https://www.cga.ct.gov/olr/olrsums.asp>.

Readers are encouraged to obtain the full text of acts that interest them from the Connecticut State Library, House Clerk's Office, or General Assembly's website: <http://www.cga.ct.gov>.

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Benefits

Circuit Breaker Program

The state's Circuit Breaker program entitles older adults and individuals with a permanent and total disability to a property tax reduction on their real property, which varies based on the individual's income. Under a new law, tax relief under this program also extends to owners of real property that is held in trust for the owner ([PA 19-66](#), effective October 1, 2019, and applicable to assessment years beginning on and after that date).

State Supplement Program (SSP) Rates

A new law prevents SSP benefits from increasing to account for inflation. Generally, low-income people who are aged, blind, or have a disability can receive federal Supplemental Security Income (SSI) benefits if they meet certain financial eligibility requirements. The state supplements SSI benefits with SSP benefits for those who are eligible. To calculate the benefit, DSS subtracts from income any applicable disregards, and compares the difference to the program's payment standard. If the net income figure is less than the benefit, the person qualifies and the benefit equals the difference between them.

The law generally requires the DSS commissioner to annually increase SSP payment standards based on the consumer price index within certain parameters. The new law extends the current freeze on these payment standards at FY 15 rates for the next two fiscal years (FYs 20 and 21) ([PA 19-117](#), § 292, effective July 1, 2019).

Business and Employment

Angel Investor Tax Credit

By law, the amount of angel investor tax credits that Connecticut Innovations, Inc. (CI) may reserve each year for investments in emerging technology businesses is capped at 75% of the total amount of credits available that year, but CI may exceed the cap if any unreserved credits remain after April 1 in each year. A new law authorizes CI to prioritize the unreserved credits for veteran-owned, women-owned, or minority-owned businesses and businesses owned by individuals with disabilities.

The new law also extends the angel investor tax credit program by five years, from July 1, 2019, to July 1, 2024. It increases (1) from \$3 million to \$5 million, the aggregate amount of angel investor credits CI may reserve each fiscal year and (2) from \$250,000 to \$500,000, the total amount of tax credits allowed to any angel investor ([PA 19-117](#), § 347, effective July 1, 2019, and applicable to income and tax years beginning on or after January 1, 2019).

Disabilities and Employment Taskforce

A new law establishes a 14-member taskforce to study expanding existing employment assistance programs for people with disabilities and establishing financial incentives for businesses to employ more people with disabilities. The taskforce must report its findings to the Finance, Revenue and Bonding; Labor; Human Services; and Public Health committees by February 1, 2020 ([SA 19-12](#), effective upon passage).

Set-Aside Program

A new law increases the number of businesses and nonprofits eligible to bid on small contractor and minority business set-aside contracts by increasing the annual gross revenue limit for eligible small contractors from \$15 million to \$20 million.

By law, state agencies and certain contractors must annually set-aside or reserve (1) 25% of their contracts for exclusive bidding by state certified “small contractors,” which include nonprofit organizations, and (2) 25% of that amount (6.25% of the total) for exclusive bidding by small contractors that are certified minority business enterprises (i.e., those owned or operated by women, people with disabilities, and minority group members) ([PA 19-117](#), § 348, effective October 1, 2019).

Courts, Judicial Procedures, and Correctional Facilities

Acquittee Images and Recordings

A new law establishes conditions under which the Department of Mental Health and Addiction Services (DMHAS) must provide the attorney for an acquittee (i.e., a person found not guilty of a crime by reason of mental disease or defect) the right to review certain images or recordings of the acquittee that were taken at a DMHAS inpatient facility in any matter before the Psychiatric Security Review Board or Superior Court related to the board’s jurisdiction.

Among other conditions, (1) the acquittee, and any other identifiable patient in the image or recording, must consent to the disclosure and (2) the image or recording must not be the subject of a pending criminal investigation ([PA 19-151](#), § 2, effective upon passage).

Diversions Program Record Sealing

Under a new law, courts must seal a defendant’s records to the public when the defendant applies for certain pretrial diversionary programs, including the alcohol education program and drug education and community service program. Under prior law, the records were sealed at specified

points later in the process (e.g., for the drug education program, after the person paid required program fees) ([PA 19-151](#), §§ 4-6, effective upon passage).

Emergency Hospitalization Certificates at Correctional Facilities

A new law allows advanced practice registered nurses (APRNs), under certain conditions, to issue emergency certificates to require up to 72 hours of hospitalization for prison inmates with psychiatric disabilities. It applies to all APRNs employed by the Department of Correction to provide mental health care at correctional facilities. The APRN must reasonably believe, based on direct evaluation, that the person has a psychiatric disability, is dangerous to himself or herself or others or gravely disabled, and needs immediate care and treatment.

Under existing law, APRNs who have received specified training can issue emergency certificates authorizing people with a psychiatric disability to be taken to a general hospital for examination ([PA 19-117](#), § 96, effective July 1, 2019).

Medicating Criminal Defendants with Psychiatric Disabilities

A new law codifies existing practice by allowing DMHAS, without going to court, to involuntarily medicate certain criminal defendants in department custody who were found incompetent to stand trial and are unable or unwilling to consent to medication to treat their psychiatric disabilities.

The act applies only if obtaining consent would cause a medically harmful delay to such a patient with a condition of an extremely critical nature, as determined by personal observation of a physician or the senior clinician on duty ([PA 19-99](#), effective upon passage).

Probate Courts

A new law makes various changes to the state's probate court operations. Among these changes, it (1) eliminates the requirement that the guardian of an adult with intellectual disability (i.e., a plenary or limited guardian) receive personal service of a petition to remove his or her guardianship and (2) repeals a procedure by which a petitioner may freeze the assets of someone who is the subject of a conservatorship proceeding by filing a certified copy of the petition with a financial institution or recording the copy on the land records ([PA 19-47](#), §§ 6 & 17, effective October 1, 2019, and July 1, 2019, respectively).

Sexual Assault Criminal Penalty

A new law increases the penalty for subjecting someone to sexual contact if the victim cannot consent due to mental incapacity or impairment because of a mental disability ([PA 19-16](#), §§ 15 & 16, as amended by [PA 19-93](#), §§ 9 & 10, effective October 1, 2019).

Facility Reporting and Closures

Behavioral Health Facility Reportable Events

Existing law requires the Department of Public Health (DPH) to develop a system for nursing homes to electronically report “reportable events” (i.e., those that require immediate department notification) to the department, and nursing homes to report these events using that system. A new law extends these provisions to behavioral health facilities ([PA 19-118](#), § 41, effective July 1, 2019).

Facility Closures

By law, intermediate care facilities for individuals with intellectual disabilities (ICF-IIDs), nursing homes, rest homes, and residential care homes must generally apply to DSS to terminate a service or substantially decrease their bed capacity through the department’s certificate of need process. A new law allows such facilities to submit a petition for closure to DSS and allows DSS to authorize the closure if certain requirements are met ([PA 19-117](#), § 304, effective July 1, 2019).

Receiverships for Nursing Homes and Residential Care Homes

A new law requires receivers operating a nursing home or residential care home to immediately begin closing the facility if (1) its overall occupancy is below 70% and (2) the closure is consistent with the state’s strategic rebalancing plan. The act also adjusts related deadlines and increases, from \$3,000 to \$10,000, the amount receivers can spend to correct or eliminate certain deficiencies in a facility’s structure or furnishing ([PA 19-117](#), § 303, effective July 1, 2019).

Home- and Community-Based Services

Acquired Brain Injury (ABI) Waiver Advisory Committee

By law, the Department of Social Services (DSS) administers two home- and community-based Medicaid waivers for individuals with acquired brain injuries. Existing law also establishes an advisory committee related to these waivers. A new law reduces the frequency of required advisory committee meetings from four times per year to once annually ([PA 19-117](#), § 314, effective July 1, 2019).

Community Health Worker Certification

A new law creates a community health worker certification program administered by DPH. Starting January 1, 2020, it prohibits anyone from using the title “certified community health worker” unless they obtain this certification.

The act also establishes a 14-member Community Health Worker Advisory Body within the Office of Health Strategy (OHS). Among other things, the advisory body must advise OHS and DPH on education and certification requirements for community health worker training programs ([PA 19-117](#), §§ 160 & 161, effective January 1, 2020).

Community Ombudsman Program

A new law requires the state’s long-term care ombudsman and the DSS commissioner to (1) develop a community ombudsman program to investigate complaints concerning care received by DSS-administered home- and community-based services and (2) submit a plan for the program to the legislature by January 1, 2020 ([SA 19-18](#), effective upon passage).

Evaluation of Community Residences

A new law repeals a requirement that DMHAS evaluate community residences for individuals with mental illness twice a year and send the review to DPH upon request. These facilities remain subject to DPH licensure requirements ([PA 19-118](#), § 78, effective July 1, 2019).

Nutrition Services

Under the state’s Connecticut Home Care Program for Elders (CHCPE), eligible individuals age 65 and older who are at risk of institutionalization can receive a range of home- and community-based services, such as meal delivery. A new law requires the DSS commissioner to increase, by 10%, the reimbursement rate for meals-on-wheels providers under this program ([PA 19-117](#), § 308, effective July 1, 2019).

Another new law allows the DSS commissioner, beginning July 1, 2020, to annually increase the reimbursement rate for meals-on-wheels providers under the CHCPE by at least the consumer price index’s cost of living adjustment. It also allows the commissioner to further increase a provider’s rate if the provider submits evidence of extraordinary costs related to delivering these meals in sparsely populated rural areas of the state.

The new law also requires DPH, as part of its quality of care program for licensed health care facilities (e.g., hospitals and nursing homes), to develop recommendations on collecting and

analyzing data on patient malnutrition to improve quality of care ([PA 19-157](#), effective July 1, 2019).

Prohibiting Non-Compete Agreements

A new law prohibits contracts for homemaker, companion, or home health services from including a covenant not to compete. Under the act, a covenant not to compete is a contract provision restricting an individual's right to provide services in any geographic area of the state or to a specific person ([PA 19-117](#), § 305, effective upon passage).

Other Health Services

First Responder Training

A new law expands first responders' access to training on handling incidents involving children and adults with autism spectrum disorder (ASD), nonverbal learning disorder (NLD), and cognitive impairment. It also requires the UConn Center for Excellence in Developmental Disabilities to develop and publish on its website a communication aid for certain first responders to use to communicate with individuals with ASD, NLD, or cognitive impairment during emergencies when verbal communication may be hindered or impossible ([PA 19-147](#), most provisions effective July 1, 2019).

Medicaid Telehealth

Prior law required DSS to provide telehealth coverage, within available state and federal resources, for categories of health care services that the commissioner determines are (1) clinically appropriate, (2) cost effective, and (3) likely to expand access. A new law removes the availability of state and federal resources as a condition for providing such telehealth coverage. It specifies that there must be a clinical need for telehealth in determining health care categories likely to expand access for Medicaid recipients.

Under the act, the commissioner may provide coverage of telehealth services regardless of any state regulations that would otherwise prohibit it. The act also requires her to submit a report to the Human Services and Public Health committees by August 1, 2020, on (1) the health care categories utilizing telehealth, (2) the cities or regions where the services are being offered, and (3) any cost savings realized by the state ([PA 19-76](#), effective July 1, 2019).

Mobile Dental Clinics

A new law authorizes DSS to reimburse a mobile dental clinic (i.e., preventative or restorative dental services offered by a licensed dentist or dental hygienist from a van or through the use of

portable equipment at various locations) for dental services provided to Medicaid beneficiaries within 30 miles of the associated dentist's fixed location. The act extends the reimbursable service area to a 50-mile radius for mobile dental clinics located in New London, Litchfield, and Windham counties.

It also defines a "fixed location" as the permanent office of an associated licensed dentist who contracts with a mobile dental clinic and (1) is an enrolled Medicaid provider; (2) maintains the diagnostic imaging, tests, and charts of patients the mobile dental clinic treats; (3) accepts and treats patients from the mobile dental clinic; and (4) provides a continuum of dental care ([PA 19-149](#), effective upon passage).

Parking and Transportation

Accessible Parking Penalties

A new law restricts use of the cross hatches next to parking reserved for people with disabilities (i.e., accessible parking) to motor vehicles (1) displaying a special, state-issued license plate or windshield placard and (2) being operated by, or carrying as a passenger, the person for whom the plate or placard was issued. The act also raises the fines for violating existing law governing accessible parking from \$100 to \$250 for a first violation and from \$250 to \$500 for a subsequent violation, and subjects people who unlawfully use the cross hatches next to such parking to the same penalties ([PA 19-119](#), §§ 11 & 12, effective October 1, 2019).

Document Envelope for Individuals with Autism Spectrum Disorder

A new law requires the Department of Motor Vehicles (DMV), in consultation with the Connecticut Police Chiefs Association and at least one advocacy organization for people with autism spectrum disorder, to design blue envelopes that (1) can hold a driver's license, registration, and insurance card and (2) provide guidance on ways to enhance effective communication between police officers and people with autism spectrum disorder. The bill requires DMV, beginning January 1, 2020, to provide an envelope upon request to a person with autism spectrum disorder or such person's parent, if the person is a minor ([PA 19-161](#), § 39, effective upon passage).

Parking Placards for Children with Disabilities

A new law allows each parent or guardian of a child (under age 18) with disabilities to get a parking placard, up to two per eligible child. Under prior law, only one placard could be issued per eligible child ([PA 19-161](#), § 37, effective October 1, 2019).

Provider Background Check Requirements

Databases on Providers' Backgrounds

A new law requires the executive director of the Commission on Women, Children, Seniors, Equity, and Opportunity to (1) provide a portal on the commission's website that includes links to publicly available databases (e.g., sex offender registry) concerning a person's background and (2) convene a working group to develop strategies to raise public awareness of these searchable databases to people hiring providers to care for adults age 60 and older, children, or individuals with disabilities.

The executive director must keep records on the number of times the portal is used and report to the legislature by January 1, 2021 ([PA 19-116](#), effective October 1, 2019).

DDS Background Checks

A new law codifies current practice by requiring the Department of Developmental Services (DDS) to conduct fingerprint and state and national background checks on any job applicant who has been made a conditional employment offer. The act similarly provides that such background checks may be required for individuals applying for certain direct care roles who have received a conditional employment offer with a DDS-licensed or –funded private provider. Prior law referenced job applicants rather than those who have received a conditional employment offer ([PA 19-118](#), § 25, effective July 1, 2019).

Long-Term Care Background Check Program

By law, DPH administers a background check program for direct care employees and volunteers of long-term care facilities. A new law expands the list of offenses that disqualify someone from being hired as such an employee or volunteer to include convictions for specified assault and abuse crimes against the elderly and individuals with disabilities ([PA 19-116](#), effective October 1, 2019).

Schools, Colleges, and Universities

Dyslexia Instruction and Training

The legislature created an 11-member task force to examine whether (1) Connecticut colleges and universities are providing teacher preparation program students with 12 clock hours of instruction about dyslexia and related supervised practicum hours as required by law and (2) current teacher in-service training and professional development models are appropriate to meet the needs of students with dyslexia. The task force is also permitted to make recommendations on additional topics related to reading assessments, teacher preparation, and dyslexia screening. The final task

force report is due to the Education and Higher Education committees by January 1, 2021 ([SA 19-8](#), effective upon passage).

School Administrator Training

A new law requires boards of education to develop training materials for school administrators that provide information on preventing and intervening in discrimination against, and targeted harassment of, students based on their (1) actual or perceived differentiating characteristics (including physical or intellectual disabilities) or (2) association with individuals or groups who have one or more such characteristics. The materials may be developed in consultation with, or provided by, one or more organizations offering training on identifying, preventing, and intervening in discrimination ([PA 19-166](#), § 5, effective July 1, 2019).

Student Mental Health Services

The legislature created a 10-member task force to (1) study each Connecticut higher education institution's policies and procedures for the prevention and treatment of student mental illness and (2) recommend a statewide policy for student mental health services at these institutions. Among other topics, the task force must examine the manner in which mental health services are delivered to students, the types of mental health care providers available to students, and the rate at which mental health services are utilized. The final task force report is due to the Higher Education and Public Health committees by January 1, 2020 ([SA 19-14](#), effective upon passage).

Transition Services for Children with Autism

Federal law generally requires individual education programs or plans (IEPs) for children with disabilities to include, when the child turns 16, appropriate measurable postsecondary goals and transition services, including courses of study, needed to assist the child in reaching those goals. For children diagnosed with autism spectrum disorder, a new law imposes these requirements for the first IEP after the child turns 14 ([PA 19-49](#), effective July 1, 2019).

Substance Use Disorder

DPH Substance Abuse Regulations

A new law permits, rather than requires, DPH, in consultation with the DMHAS, to (1) amend its substance abuse treatment regulations, (2) implement a dual licensure program for behavioral health providers who provide mental health and substance abuse services, or (3) permit the use of saliva and urine drug screens at DPH-licensed facilities ([PA 19-118](#), § 17, effective July 1, 2019).

Home-Based Treatment

A new law requires the Department of Mental Health and Addiction Services (DHMAS) to review and report on literature about the efficacy of providing home-based treatment and recovery services for opioid use disorder to certain Medicaid beneficiaries ([PA 19-191](#), § 8, effective July 1, 2019).

Inmates with Opioid Use Disorder

A new law requires the Department of Correction (DOC) commissioner to provide inmates who self-identify as suffering from or relapsing into an opioid use disorder with information on opioid use disorder treatment options. The information must (1) be provided at least 45 days before the inmate is released from DOC custody, including release subject to parole or to a supervised community setting (e.g., a halfway house), and (2) include ways to access treatment options after being released into the community ([PA 19-167](#), § 1, effective October 1, 2019).

Medicaid Provider Rates for Methadone Treatment

The biennial budget act requires the DSS commissioner to amend the state Medicaid plan to provide an \$88.52 minimum weekly reimbursement rate for a Medicaid beneficiary's methadone maintenance treatment from chemical maintenance providers but also makes such rates contingent on meeting certain performance measures beginning July 1, 2020. The act also lowers rates for providers who fail to meet certain standards ([PA 19-117](#), § 311, effective July 1, 2019).

Multicare Institutions

A new law specifies that a multicare institution's services may include methadone delivery and related substance use treatment to individuals in a nursing home. Multicare institutions include, among others, hospitals that provide outpatient behavioral health care services at multiple facilities owned by a single licensee ([PA 19-118](#), §§ 5 & 6, effective July 1, 2019).

Opioid Antagonist Education

A provision in a new law generally requires DMHAS-operated or –approved treatment programs to educate patients with opioid use disorder, and their relatives and significant others, on opioid antagonists and how to administer them. It also requires a prescribing practitioner to issue a prescription for at least one dose of an opioid antagonist to a patient the prescriber determines would benefit from it ([PA 19-191](#), § 9, effective October 1, 2019).

Opioid Antagonists in AED Cabinet

Under certain conditions, a new law grants civil immunity to individuals or entities that provide or maintain an automatic external defibrillator (AED) in a cabinet which also contains an opioid

antagonist (e.g., Narcan) used for drug overdoses. Under this new law, they are not liable for ordinary negligence for their acts or omissions in making the opioid antagonist available ([PA 19-169](#), effective October 1, 2019).

Opioid Antagonist Prescriptions and Life Insurance and Annuity Policies

A provision in a new law prohibits life insurance or annuity policies or contracts from excluding coverage solely based on an individual having received a prescription for naloxone (i.e., an opioid antagonist) or for a naloxone biosimilar or generic ([PA 19-191](#), § 5, effective October 1, 2019).

Veterans

Disabled Veteran and Service Member Property Tax Exemption

A new law increases the base property tax exemption for certain disabled service members and veterans by \$500. By doing so, it also increases the additional income-based exemption for such service members and veterans, which is calculated using the base exemption, by \$250 or \$1,000 depending on income ([PA 19-171](#), effective October 1, 2019, and applicable to assessment years commencing on or after that date).

Veterans' Mental Health

A new law requires the southwest workforce development board, among other things, to identify appropriate written materials on mental health conditions common to veterans to distribute to employers. Such conditions include post-traumatic stress disorder, suicide risk, depression, and grief.

Under the new law, the written materials must provide guidance on (1) identifying the signs and symptoms of the mental health conditions and (2) assisting employees who are veterans and who exhibit such signs and symptoms in the workplace. The board (1) must distribute such materials to employers participating in, or who may participate in, the employment-related pilot programs created under the new law and (2) may distribute the materials to other employers that may hire veterans ([PA 19-129](#), § 3, effective July 1, 2019).

Veterans' Wartime Service Benefits

A new law extends certain state war service benefits to veterans who served less than 90 days in a war, but were separated from service because of an injury incurred or aggravated in the line of duty, even if the injury was not a service-connected disability rated by the U.S.

Department of Veterans Affairs, as prior law required in such circumstances. For eligible veterans (some benefits also accrue to eligible spouses and dependent children), such benefits include certain property tax exemptions, tuition waivers for the state's public colleges and universities, and civil service exam bonus points ([PA 19-33](#), effective October 1, 2019).

Miscellaneous

Adults with Intellectual Disability Task Force

A new law extends by one year, until January 1, 2020, the reporting deadline for the task force on the needs of and services for adults with intellectual disability to report to the Public Health Committee ([PA 19-56](#), § 12, effective upon passage).

Department of Aging and Disability Services

A new law renames the Department of Rehabilitative Services as the “Department of Aging and Disability Services” ([PA 19-157](#), effective October 1, 2019)

Working Group on Alzheimer’s Disease and Dementia

A new law requires the Commission on Women, Children, Seniors, Equity and Opportunity executive director to establish a nine-member working group to (1) review the recommendations of the Task Force on Alzheimer’s Disease and Dementia established by [SA 13-11](#), (2) determine gaps in implementing these recommendations, and (3) make recommendations on best practices for Alzheimer’s disease and dementia care. It must report its findings to the legislature by January 30, 2020 ([PA 19-115](#), effective upon passage).