

Higher Education and Employment Advancement Committee

JOINT FAVORABLE REPORT

Bill No.: HB-6461

AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE TASK FORCE REGARDING THE PREVENTION AND TREATMENT OF MENTAL ILLNESS AT

Title: INSTITUTIONS OF HIGHER EDUCATION.

Vote Date: 3/18/2021

Vote Action: Joint Favorable Substitute

PH Date: 3/2/2021

File No.:

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SPONSORS OF BILL:

The Higher Education and Employment Advancement Committee

REASONS FOR BILL:

To establish mental health services and standards at higher education institutions.

SUBSTITUTE LANGUAGE:

Line 101: Changes, from annually to every four years, the frequency with which a higher education institution must establish and update a crisis intervention and management plan for each institution's campus

RESPONSE FROM ADMINISTRATION/AGENCY:

Eleanor Daugherty, EdD, Associate Vice President of Student Affairs & Dean of Students, UCONN:

Submitted written testimony in support with substitute language. Dr. Daugherty requests, "that the committee establish the expectation of a diversity and inclusion training for all mental health clinicians." She also asks that the university have the ability to select a survey method. Regarding section 4, Dr. Daugherty emphasizes the importance of protecting student confidentiality and recommends utilizing the general leave policy. She says we must remember that transparency and clarity are "critical" and asks that information be presented in a way that students can understand. Finally, she includes a diagram of the structure of UCONN's wellness coalition and a list of its members.

NATURE AND SOURCES OF SUPPORT:

Senate Democrats:

Submitted written testimony in support. The Senate Democrats explain that mental disorders are common on college campuses and on the rise, yet most students do not receive treatment. They further explain how this bill will address the needs of students through new standards, training, and collaboration between stakeholders.

Ben Shaiken, Manager of Advocacy & Public Policy, The Alliance:

Submitted written testimony in support. The Alliance specifically applauds section 3 of the bill, noting the community provider system is "uniquely situated" to provide services to college students and staff.

Jennifer Widness, President Connecticut Conference of Independent Colleges (CCIC):

Submitted written testimony in support with substitute language. CCIC explains that the Pandemic has made student mental health a top concern, despite significant institutional financial stress. They commend the committee for raising this bill, but caution against creating an undue burden on limited resources. They are "generally comfortable" with section 1, but they believe the language should be amended to include "the community" as stakeholders.

CCIC asks that Section 2 eliminate the requirement that OHE and DMHAS develop an assessment tool, and say, "These agencies are not equipped to perform this function without outside expertise in college mental health assisting on this project." They support requiring OHE and DMHAS to coordinate training workshops as this could benefit all institutions.

They believe section 4 is unfeasible annually and should instead be reviewed every four years in addition to being wrapped into the Coalition responsibilities and existing assessment.

NATURE AND SOURCES OF OPPOSITION:

Connecticut Association of Health Plans:

Submitted written testimony in opposition. Regarding section 6, CTAHP says that the concept is already before the Insurance Committee and prefer that it is decided there, and that all changes to current law must be made within the context of federal requirements.

Connecticut College:

Submitted written testimony in opposition with substitute language. Connecticut college is concerned about "potential misunderstandings of the specialty of college mental health, the broad variability in institutions of higher education, and mandates that would place an undue burden on college campuses, especially for those lacking funding and resources, and those already stressed by the current COVID pandemic."

Under section 1, they support the mental health coalition, however, they believe the language should be amended to include "the community" as stakeholders. Additionally, they believe the coalition should be tasked with reviewing the presence, not the quality, of mental health services and supports, since the coalition is not in a position to provide evaluation of quality. They recommend an agency, methods, and the frequency for this review.

Under section 2, they believe the Executive Director of the Office of Higher Education and the Commissioner of Mental Health and Addiction Services development of a new assessment requires the input of experts in college mental health, and that a state task force be established with those experts. They note that the Executive Director and Commissioner, "could, however, be critical in conducting training workshops for state-wide mental health coalitions," and that such efforts would be budget neutral and could benefit all institutions.

They believe section 4 is unfeasible annually and should instead be reviewed every four years in addition to being wrapped into the Coalition responsibilities and existing assessment.

Connecticut College explains that section 6 largely involves insurance, that CT doesn't have a student plan waiver requirement, but has each school determine rules based on their resources and needs. Since plans vary by school and student, and most students utilize private insurance for medical coverage, this section would burden schools and infringe upon a student's right to choose their insurance plan.

They note that section 7 is already in statute and does not have to be repeated.

Reported by: Jeremy Salyer

Date: 03/23/2021