



Senate

General Assembly

File No. 276

February Session, 2022

Substitute Senate Bill No. 2

Senate, April 4, 2022

The Committee on Children reported through SEN. ANWAR of the 3rd Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT EXPANDING PRESCHOOL AND MENTAL AND BEHAVIORAL SERVICES FOR CHILDREN.

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

1 Section 1. Subdivision (1) of subsection (b) of section 10-16q of the
2 general statutes is repealed and the following is substituted in lieu
3 thereof (*Effective July 1, 2022*):

4 (b) (1) [For the fiscal year ending June 30, 2020, the per child cost of
5 the Office of Early Childhood school readiness program offered by a
6 school readiness provider shall not exceed eight thousand nine hundred
7 twenty-seven dollars. For the fiscal year ending June 30, 2021, and each
8 fiscal year thereafter, the per child cost of the Office of Early Childhood
9 school readiness program offered by a school readiness provider shall
10 not exceed nine thousand twenty-seven dollars.] For the fiscal year
11 ending June 30, 2023, and each fiscal year thereafter, the per child cost
12 of the Office of Early Childhood school readiness program offered by a
13 school readiness provider shall not exceed fourteen thousand five
14 hundred dollars.

15 Sec. 2. Subsection (l) of section 10-16p of the 2022 supplement to the
16 general statutes is repealed and the following is substituted in lieu
17 thereof (*Effective July 1, 2022*):

18 (l) For the fiscal year ending June 30, [2020] 2023, and each fiscal year
19 thereafter, any school readiness program that (1) is licensed by the
20 Office of Early Childhood pursuant to chapter 368a, (2) provides full-
21 day and year-round child care and education programs for children,
22 and (3) receives funds pursuant to this section or section 10-16u, shall
23 use any amount of the per child cost as described in subdivision (1) of
24 subsection (b) of section 10-16q, as amended by this act, that is over the
25 amount of [eight thousand nine hundred twenty-seven] fourteen
26 thousand two hundred ten dollars, exclusively to increase the salaries
27 of those individuals with direct responsibility for teaching or caring for
28 children in a classroom at such school readiness program.

29 Sec. 3. Subsection (b) of section 8-210 of the 2022 supplement to the
30 general statutes is repealed and the following is substituted in lieu
31 thereof (*Effective July 1, 2022*):

32 (b) The state, acting by and in the discretion of the Commissioner of
33 Early Childhood, may enter into a contract with a municipality, a group
34 child care home or family child care home, as described in section 19a-
35 77, as amended by this act, a human resource development agency or a
36 nonprofit corporation for state financial assistance in developing and
37 operating child care centers, group child care homes and family child
38 care homes for children disadvantaged by reasons of economic, social
39 or environmental conditions, provided no such financial assistance shall
40 be available for the operating costs of any such child care center, group
41 child care home or family child care home unless it has been licensed by
42 the Commissioner of Early Childhood pursuant to section 19a-80. Such
43 financial assistance shall be available for a program of a municipality, of
44 a group child care home or family child care home, of a human resource
45 development agency or of a nonprofit corporation which may provide
46 for personnel, equipment, supplies, activities, program materials and
47 renovation and remodeling of the physical facilities of such child care

48 centers, group child care homes or family child care homes. Such
49 contract shall provide for state financial assistance, within available
50 appropriations, in the form of a state grant-in-aid (1) for a portion of the
51 cost of such program, as determined by the Commissioner of Early
52 Childhood, if not federally assisted, (2) equal to one-half of the amount
53 by which the net cost of such program, as approved by the
54 Commissioner of Early Childhood, exceeds the federal grant-in-aid
55 thereof, or (3) in an amount not less than (A) the per child cost as
56 described in subdivision (1) of subsection (b) of section 10-16q, as
57 amended by this act, for each child in such program that is three or four
58 years of age and each child that is five years of age who is not eligible to
59 enroll in school, pursuant to section 10-15c, while maintaining services
60 to children under three years of age under this section, and (B) sixteen
61 thousand dollars for each child three years of age or under who is in
62 infant or toddler care and not in a preschool program. For the fiscal year
63 ending June 30, [2020] 2024, and each fiscal year thereafter, the amount
64 per child pursuant to subdivision (3) of this subsection that is over the
65 amount of the per child cost that was prescribed pursuant to the contract
66 under said subdivision (3) for the fiscal year ending June 30, [2019] 2023,
67 shall be used exclusively to increase the salaries of early childhood
68 educators employed at the child care center. The Commissioner of Early
69 Childhood may authorize child care centers, group child care homes
70 and family child care homes receiving financial assistance under this
71 subsection to apply a program surplus to the next program year. The
72 Commissioner of Early Childhood shall consult with directors of child
73 care centers in establishing fees for the operation of such centers.

74 Sec. 4. (NEW) (*Effective July 1, 2022*) (a) As used in this section:

75 (1) "Child care services" has the same meaning as provided in section
76 19a-77 of the general statutes, as amended by this act;

77 (2) "Child care facility" has the same meaning as provided in section
78 10-530 of the general statutes;

79 (3) "Child care services provider" means (A) the employer of any
80 person who is an employee of a child care facility, (B) a family child care

81 provider, or (C) any other person who provides child care services
82 under the child care subsidy program established pursuant to section
83 17b-749 of the general statutes, but does not include a person who is
84 providing child care services under the child care subsidy program (i)
85 exclusively to children to whom such person is related, and (ii) without
86 being issued a license to provide child care services by the Office of
87 Early Childhood;

88 (4) "Early childhood education program" means any privately
89 operated or state-funded preschool program, including school readiness
90 programs; and

91 (5) "School readiness program" has the same meaning as provided in
92 section 10-16p of the general statutes, as amended by this act.

93 (b) For the fiscal years ending June 30, 2023, and June 30, 2024, the
94 Office of Early Childhood shall administer a wage supplement grant
95 program for employees of child care service providers and early
96 childhood education programs. Grants under the program shall be
97 calculated to increase the hourly salary of each such employee by one
98 dollar. The office shall pay such grant to child care services providers
99 and operators of early childhood education programs, and such
100 providers and operators shall distribute such funds to its employees in
101 accordance with the policy developed by the Commissioner of Early
102 Childhood pursuant to subsection (d) of this section.

103 (c) Each child care services provider and operator of an early
104 childhood education program shall register, at such time and in such
105 manner as prescribed by the commissioner, with the Office of Early
106 Childhood to receive a grant under the program. Upon registration,
107 such provider and operator shall provide any information required by
108 the office, in accordance with the policy developed by the commissioner
109 pursuant to subsection (d) of this section.

110 (d) Not later than October 1, 2022, the commissioner shall develop a
111 policy for the administration of the wage supplement grant program.
112 The policy shall include, but need not be limited to, eligibility

113 requirements for the program, the registration process for the program,
114 the distribution requirements of the grant and any other requirements
115 the commissioner deems necessary.

116 Sec. 5. Section 10-21k of the general statutes is repealed and the
117 following is substituted in lieu thereof (*Effective July 1, 2022*):

118 [A local or regional board of education may establish a] The
119 Department of Education, in collaboration with the Labor Department,
120 shall administer the Pipeline for Connecticut's Future program. Under
121 the program, [a local or regional board of education shall partner with]
122 the department shall (1) assist local and regional boards of education in
123 enhancing existing partnerships or establishing new partnerships with
124 providers of child care services and early childhood education
125 programs, as well as any additional fields such as manufacturing,
126 computer programming or the culinary arts, and one or more local
127 businesses, to offer a pathways program (A) that assists students in (i)
128 obtaining occupational licenses, (ii) participating in apprenticeship
129 opportunities, and (iii) gaining immediate job skills, (B) that provides (i)
130 industry-specific class time and cooperative work placements, (ii) on-
131 site and apprenticeship training, and (iii) course credit and occupational
132 licenses to students upon completion, and (C) in early childhood care
133 and education and any additional fields, such as manufacturing,
134 computer programming or the culinary arts, that may lead to a diploma,
135 credential, certificate or license upon graduation, and (2) provide
136 incentives to local and regional boards of education for establishing
137 such partnerships.

138 Sec. 6. (NEW) (*Effective July 1, 2022*) For the fiscal year ending June 30,
139 2023, and each fiscal year thereafter, the Department of Children and
140 Families shall make mobile crisis response services available twenty-
141 four hours a day, seven days per week, to the public.

142 Sec. 7. (NEW) (*Effective July 1, 2022*) (a) There is established a Social
143 Determinants of Mental Health Fund, which shall be a separate,
144 nonlapsing account within the General Fund. The account shall contain
145 any moneys required by law to be deposited in the account, the

146 resources of which shall be used by the Commissioner of Children and
147 Families to assist families in covering the cost of mental health services
148 and treatment for their children. The commissioner shall establish
149 eligibility criteria for families to receive such assistance based on social
150 determinants of mental health, with a goal toward reducing racial,
151 ethnic, gender and socioeconomic mental health disparities. As used in
152 this section, "social determinants of mental health" includes, but is not
153 limited to, discrimination and social exclusion, adverse early life
154 experiences, low educational attainment, poor educational quality and
155 educational inequality, poverty, income inequality and neighborhood
156 deprivation, food insecurity, unemployment, underemployment and
157 job insecurity, poor housing quality and housing instability, impact of
158 climate change, adverse features of the built environment and poor
159 access to health care.

160 (b) The commissioner may accept on behalf of the fund any federal
161 funds or private grants or gifts made for purposes of this section. The
162 commissioner shall use such funds to make grants to families for the
163 purposes described in this section.

164 Sec. 8. (NEW) (*Effective July 1, 2022*) Not later than July 1, 2023, the
165 Department of Education, in collaboration with the governing authority
166 for intramural and interscholastic athletics, shall develop a mental
167 health plan for student athletes to raise awareness of mental health
168 resources available to student athletes. Such plan shall be made
169 available to local and regional boards of education and implemented in
170 accordance with the provisions of section 9 of this act. Such plan shall
171 include, but need not be limited to, provisions relating to (1) access to
172 the mental health services team for the school district, (2) screening and
173 recognizing appropriate referrals for student athletes, (3)
174 communication among members of the mental health services team, (4)
175 the management of medications of student athletes, (5) crisis
176 intervention services, (6) the mitigation of risk to student athletes, and
177 (7) transition care for those student athletes leaving intramural or
178 interscholastic athletics by means of graduation, dismissal or
179 suspension. The department shall make such plan available on its

180 Internet web site and provide technical assistance to local and regional
181 boards of education in the implementation of the plan.

182 Sec. 9. (NEW) (*Effective July 1, 2022*) For the school year commencing
183 July 1, 2023, and each school year thereafter, each local and regional
184 board of education shall implement the mental health plan for student
185 athletes, developed pursuant to section 8 of this act, for the school
186 district.

187 Sec. 10. (NEW) (*Effective from passage*) (a) The Department of Children
188 and Families shall conduct an instructional program that utilizes a
189 training model that will enable participants to provide adolescent
190 screening, brief intervention and referral to treatment training to other
191 individuals upon completion of the instructional program. Such
192 instructional program shall be offered to the employees of a local health
193 department, district department of health formed pursuant to section
194 19a-241 of the general statutes, youth service bureau, municipality, paid
195 municipal or volunteer fire department, local police department and
196 local or regional board of education. The department shall conduct such
197 instructional program at no charge to participants and at least four times
198 in each year. The department may conduct each such instructional
199 program in a different geographical region of the state during the year.

200 (b) (1) Each local health department shall offer training in adolescent
201 screening, brief intervention and referral to treatment free of charge to
202 the employees of such local health department and to members of the
203 public. Any employee of a local health department who has participated
204 in the instructional program described in subsection (a) of this section
205 shall be the person to provide such training in adolescent screening,
206 brief intervention and referral to treatment under this subdivision.

207 (2) A district department of health, youth service bureau,
208 municipality, paid municipal or volunteer fire department, local police
209 department or local or regional board of education may offer training in
210 adolescent screening, brief intervention and referral to treatment free of
211 charge to the employees of such district department of health, youth
212 service bureau, municipality, paid municipal or volunteer fire

213 department, local police department or local or regional board of
214 education and to members of the public. Any employee who has
215 participated in the instructional program described in subsection (a) of
216 this section shall be the person to provide such training in adolescent
217 screening, brief intervention and referral to treatment under this
218 subdivision.

219 Sec. 11. (NEW) (*Effective from passage*) On or before July 1, 2022, the
220 Commissioner of Public Health shall establish guidelines regarding the
221 manner in which menstrual products may be provided pursuant to
222 section 18-69e of the general statutes, as amended by this act, sections
223 13, 14 and 17 of this act and section 8-359a of the general statutes, as
224 amended by this act, without stigmatizing the person who requests such
225 products. The commissioner shall post such guidelines on the
226 Department of Public Health's Internet web site. For purposes of this
227 section, "menstrual products" means tampons and sanitary napkins.

228 Sec. 12. Section 18-69e of the general statutes is repealed and the
229 following is substituted in lieu thereof (*Effective September 1, 2022*):

230 Correctional staff at York Correctional Institution shall, upon request,
231 provide an inmate at the institution with [feminine hygiene] menstrual
232 products as soon as practicable. Correctional staff shall provide such
233 [feminine hygiene] menstrual products for free, [and] in a quantity that
234 is appropriate to the health care needs of the inmate and in a manner
235 that does not stigmatize any inmate seeking such products, pursuant to
236 guidelines established by the Commissioner of Public Health under
237 section 11 of this act. To carry out the provisions of this section, the
238 Department of Correction may (1) accept donations of menstrual
239 products and grants from any source for the purpose of purchasing such
240 products, and (2) partner with a nonprofit or community-based
241 organization. For purposes of this section, ["feminine hygiene products"
242 means tampons and sanitary napkins] "menstrual products" has the
243 same meaning as provided in section 11 of this act.

244 Sec. 13. (NEW) (*Effective July 1, 2022*) For the school year commencing
245 July 1, 2022, and each school year thereafter, each local and regional

246 board of education shall provide free menstrual products, as defined in
247 section 11 of this act, in restrooms that are accessible to students in each
248 school under the jurisdiction of such boards and in a manner that does
249 not stigmatize any student seeking such products, pursuant to
250 guidelines established by the Commissioner of Public Health under
251 section 11 of this act. To carry out the provisions of this section, the local
252 and regional boards of education may (1) accept donations of menstrual
253 products and grants from any source for the purpose of purchasing such
254 products, and (2) partner with a nonprofit or community-based
255 organization.

256 Sec. 14. (NEW) (*Effective July 1, 2022*) On and after September 1, 2022,
257 each public institution of higher education, as defined in section 10a-173
258 of the general statutes, shall provide free menstrual products, as defined
259 in section 11 of this act, in no fewer than one designated and accessible
260 central location on each campus of the institution and in a manner that
261 does not stigmatize any student seeking such products, pursuant to
262 guidelines established by the Department of Public Health under
263 section 11 of this act. Each public institution of higher education shall
264 post notice of such location on its Internet web site. To carry out the
265 provisions of this section, each public institution of higher education
266 may (1) accept donations of menstrual products and grants from any
267 source for the purpose of purchasing such products, and (2) partner
268 with a nonprofit or community-based organization.

269 Sec. 15. Section 8-359a of the general statutes is repealed and the
270 following is substituted in lieu thereof (*Effective September 1, 2022*):

271 (a) The Commissioner of Housing may, upon application of any
272 public or private organization or agency, make grants, within available
273 appropriations, to develop and maintain programs for homeless
274 individuals including programs for emergency shelter services,
275 transitional housing services, on-site social services for available
276 permanent housing and for the prevention of homelessness.

277 (b) Each shelter receiving a grant pursuant to this section (1) shall
278 provide decent, safe and sanitary shelter for residents of the shelter,

279 including, but not limited to, through the provision of free menstrual
280 products, as defined in section 11 of this act, in each restroom of such
281 shelter that is accessible to its residents and in a manner that does not
282 stigmatize any resident seeking such products, pursuant to guidelines
283 established by the Commissioner of Public Health under section 11 of
284 this act; (2) shall not suspend or expel a resident without good cause; (3)
285 shall, in the case of a resident who is listed on the registry of sexual
286 offenders maintained pursuant to chapter 969, provide verification of
287 such person's residence at the shelter to a law enforcement officer upon
288 the request of such officer; and (4) shall provide a grievance procedure
289 by which residents can obtain review of grievances, including
290 grievances concerning suspension or expulsion from the shelter. No
291 shelter serving homeless families may admit a person who is listed on
292 the registry of sexual offenders maintained pursuant to chapter 969. The
293 Commissioner of Housing shall adopt regulations, in accordance with
294 the provisions of chapter 54, establishing (A) minimum standards for
295 shelter grievance procedures and rules concerning the suspension and
296 expulsion of shelter residents, and (B) standards for the review and
297 approval of the operating policies of shelters receiving a grant under
298 this section. Shelter operating policies shall establish a procedure for the
299 release of information concerning a resident who is listed on the registry
300 of sexual offenders maintained pursuant to chapter 969 to a law
301 enforcement officer in accordance with this subsection. To carry out the
302 provisions of subdivision (1) of this subsection, each shelter may (i)
303 accept donations of menstrual products and grants from any source for
304 the purpose of purchasing such products, and (ii) partner with a
305 nonprofit or community-based organization.

306 Sec. 16. Subdivision (122) of section 12-412 of the 2022 supplement to
307 the general statutes is repealed and the following is substituted in lieu
308 thereof (*Effective from passage*):

309 (122) Sales of [feminine hygiene] menstrual products.

310 Sec. 17. (NEW) (*Effective from passage*) On and after September 1, 2022,
311 each emergency shelter operated by a domestic violence agency, as

312 defined in section 52-146k of the general statutes, shall provide free
313 menstrual products, as defined in section 11 of this act, in each restroom
314 of such shelter that is accessible to its residents and in a manner that
315 does not stigmatize any resident seeking such products, pursuant to
316 guidelines established by the Commissioner of Public Health under
317 section 11 of this act. To carry out the provisions of this section, each
318 shelter may (1) accept donations of menstrual products and grants from
319 any source for the purpose of purchasing such products, and (2) partner
320 with a nonprofit or community-based organization.

321 Sec. 18. (*Effective July 1, 2022*) The Neag School of Education at The
322 University of Connecticut shall conduct a study of the impact of social
323 media and mobile telephone usage on the mental health of students in
324 grades kindergarten to twelve, inclusive. Such study shall include, but
325 need not be limited to, an evaluation of the mental health of students
326 related to social media and phone usage across the elementary, middle
327 and high school levels and how such usage impacts the educational
328 experience for students and the school climate of schools. Not later than
329 January 1, 2024, the Neag School of Education shall submit a report on
330 its findings and any recommendations to the joint standing committee
331 of the General Assembly having cognizance of matters relating to
332 children and public health, in accordance with the provisions of section
333 11-4a of the general statutes.

334 Sec. 19. Subdivision (3) of subsection (a) of section 19a-77 of the
335 general statutes is repealed and the following is substituted in lieu
336 thereof (*Effective July 1, 2022*):

337 (3) A "family child care home" which consists of a private family
338 home (A) caring for not more than six children, including the provider's
339 own children not in school full time, or if there is an assistant or
340 substitute staff member approved by the Commissioner of Early
341 Childhood present, not more than nine children, (B) where the children
342 are cared for not less than three or more than twelve hours during a
343 twenty-four-hour period, and (C) where care is given on a regularly
344 recurring basis except that care may be provided in excess of twelve

345 hours but not more than seventy-two consecutive hours to
346 accommodate a need for extended care or intermittent short-term
347 overnight care. [During the regular school year, a maximum of three
348 additional children who are in school full time, including the provider's
349 own children, shall be permitted, except that if the provider has more
350 than three children who are in school full time] At any time during the
351 year, all of the provider's own children shall be permitted; [. During the
352 summer months when regular school is not in session, a maximum of
353 three additional children who are otherwise enrolled in school full time,
354 including the provider's own children, shall be permitted if there is an
355 assistant or substitute staff member approved by the Commissioner of
356 Early Childhood, pursuant to section 19a-87b, present and assisting the
357 provider, except that (A) if the provider has more than three such
358 additional children who are the provider's own children, all of the
359 provider's own children shall be permitted, and (B) such approved
360 assistant or substitute staff member shall not be required if all of such
361 additional children are the provider's own children;]

362 Sec. 20. Section 10-16r of the 2022 supplement to the general statutes
363 is repealed and the following is substituted in lieu thereof (*Effective July*
364 *1, 2022*):

365 (a) A town seeking to apply for a grant pursuant to subsection (c) of
366 section 10-16p or section 10-16u shall convene a local school readiness
367 council or shall establish a regional school readiness council pursuant to
368 subsection (c) of this section. Any other town may convene such a
369 council. The chief elected official of the town or, in the case of a regional
370 school district, the chief elected officials of the towns in the school
371 district and the superintendent of schools for the school district shall
372 jointly appoint and convene such council. Each school readiness council
373 shall be composed of: (1) The chief elected official, or the official's
374 designee; (2) the superintendent of schools, or a management level staff
375 person as the superintendent's designee; (3) parents; (4) representatives
376 from local programs such as Head Start, child care providers receiving
377 state financial assistance pursuant to section 8-210, as amended by this
378 act, family resource centers, nonprofit and for-profit child care centers,

379 group child care homes, prekindergarten and nursery schools, and
380 family child care home providers; (5) a representative from a health care
381 provider in the community; (6) the local homeless education liaison
382 designated by the local or regional board of education for the school
383 district, pursuant to Subtitle B of Title VII of the McKinney-Vento
384 Homeless Assistance Act, 42 USC 11431 et seq., as amended from time
385 to time; (7) a representative from a workforce or job training entity in
386 the community; (8) a representative from a local business in the
387 community; and (9) other representatives from the community who
388 provide services to children. On and after July 1, 2021, the members of
389 the school readiness council shall elect the chairperson of the school
390 readiness council. Each school readiness council is required to
391 document efforts to ensure that the racial, ethnic and socioeconomic
392 composition of the council reflects that of its town or region, as
393 applicable. At least twenty-five per cent of the membership of the school
394 readiness council shall be parents or guardians of children eligible to
395 attend a school readiness program. Such parents or guardians may,
396 within available appropriations, be compensated for any time and travel
397 related to council meetings, and any activities related to training,
398 leadership and community engagement. School readiness council
399 meetings shall be held at times and locations that are convenient for the
400 council members, including the parent and guardian members.

401 (b) The local school readiness council shall: (1) Make
402 recommendations to the chief elected official and the superintendent of
403 schools on issues relating to school readiness, including any
404 applications for grants pursuant to sections 10-16p, as amended by this
405 act, 10-16u, 17b-749a and 17b-749c; (2) foster partnerships among
406 providers of school readiness programs; (3) cooperate with the Office of
407 Early Childhood in any evaluation of a school readiness program; (4)
408 identify existing and prospective resources and services available to
409 children and families; (5) facilitate the coordination of the delivery of
410 services to children and families, including (A) referral procedures, and
411 (B) before and after-school child care for children attending
412 kindergarten programs; (6) exchange information with other councils,
413 the community and organizations serving the needs of children and

414 families; (7) make recommendations to school officials concerning
415 transition from school readiness programs to kindergarten; (8)
416 encourage public participation; [and] (9) collaborate with the Office of
417 Early Childhood related to planning improvements to the state early
418 care and education governance structure; and (10) conduct, as
419 necessary, a needs assessment for early childhood education for
420 children and families in the community.

421 (c) Two or more towns or school districts and appropriate
422 representatives of groups or entities interested in early childhood
423 education in a region may establish a regional school readiness council.
424 If a priority school is located in at least one of such school districts, the
425 regional school readiness council may apply for a grant pursuant to
426 subsection (d) of section 10-16p. The regional school readiness council
427 may perform the duties outlined in subdivisions (2) to (8), inclusive, and
428 subdivision (10) of subsection (b) of this section.

429 (d) On and after July 1, 2022, following a local needs assessment
430 conducted pursuant to subdivision (10) of subsection (b) of this section
431 that reveals a surplus of unused school readiness spaces, a local or
432 regional school readiness council may convert such unused school
433 readiness spaces to infant and toddler spaces, provided the per child
434 cost for such converted spaces does not exceed the per child cost for
435 infant and toddler spaces for state-funded child care centers pursuant to
436 section 8-210, as amended by this act.

437 Sec. 21. (NEW) (*Effective July 1, 2022*) For the school year commencing
438 July 1, 2022, and each school year thereafter, each local and regional
439 board of education shall hire or designate an existing employee to serve
440 as the family care coordinator for the school district. The family care
441 coordinator shall work with school social workers and school
442 psychologists in the schools under the jurisdiction of the board. The
443 family care coordinator shall serve as a liaison for the school system
444 with mental health service providers for the purposes of providing
445 students with access to mental health resources within the community
446 bringing mental health services to students inside of the school.

447 Sec. 22. (NEW) (*Effective October 1, 2022, and applicable to assessment*
448 *years commencing on or after October 1, 2022*) Any municipality may, by
449 vote of its legislative body or, in a municipality where the legislative
450 body is a town meeting, by vote of the board of selectmen, abate up to
451 one hundred per cent of the property taxes due for any tax year, for not
452 more than five tax years, for any property or portion of a property (1)
453 used in the operation of a child care center or group child care home
454 licensed pursuant to section 19a-80 of the general statutes, or a family
455 child care home licensed pursuant to section 19a-87b of the general
456 statutes, and (2) owned by the person, persons, association,
457 organization, corporation, institution or agency holding such license.

458 Sec. 23. Subsection (a) of section 19a-79 of the 2022 supplement to the
459 general statutes is repealed and the following is substituted in lieu
460 thereof (*Effective July 1, 2022*):

461 (a) The Commissioner of Early Childhood shall adopt regulations, in
462 accordance with the provisions of chapter 54, to carry out the purposes
463 of sections 19a-77 to 19a-80, inclusive, as amended by this act, and 19a-
464 82 to 19a-87, inclusive, and to assure that child care centers and group
465 child care homes meet the health, educational and social needs of
466 children utilizing such child care centers and group child care homes.
467 Such regulations shall (1) specify that before being permitted to attend
468 any child care center or group child care home, each child shall be
469 protected as age-appropriate by adequate immunization against
470 diphtheria, pertussis, tetanus, poliomyelitis, measles, mumps, rubella,
471 haemophilus influenzae type B and any other vaccine required by the
472 schedule of active immunization adopted pursuant to section 19a-7f, (2)
473 specify conditions under which child care center directors and teachers
474 and group child care home providers may administer tests to monitor
475 glucose levels in a child with diagnosed diabetes mellitus, and
476 administer medicinal preparations, including controlled drugs specified
477 in the regulations by the commissioner, to a child receiving child care
478 services at such child care center or group child care home pursuant to
479 the written order of a physician licensed to practice medicine or a dentist
480 licensed to practice dental medicine in this or another state, or an

481 advanced practice registered nurse licensed to prescribe in accordance
482 with section 20-94a, or a physician assistant licensed to prescribe in
483 accordance with section 20-12d, and the written authorization of a
484 parent or guardian of such child, (3) specify that an operator of a child
485 care center or group child care home, licensed before January 1, 1986, or
486 an operator who receives a license after January 1, 1986, for a facility
487 licensed prior to January 1, 1986, shall provide a minimum of thirty
488 square feet per child of total indoor usable space, free of furniture except
489 that needed for the children's purposes, exclusive of toilet rooms,
490 bathrooms, coatrooms, kitchens, halls, isolation room or other rooms
491 used for purposes other than the activities of the children, (4) specify
492 that a child care center or group child care home licensed after January
493 1, 1986, shall provide thirty-five square feet per child of total indoor
494 usable space, (5) establish appropriate child care center staffing
495 requirements for employees certified in cardiopulmonary resuscitation
496 by the American Red Cross, the American Heart Association, the
497 National Safety Council, American Safety and Health Institute, Medic
498 First Aid International, Inc. or an organization using guidelines for
499 cardiopulmonary resuscitation and emergency cardiovascular care
500 published by the American Heart Association and International Liaison
501 Committee on Resuscitation, (6) specify that a child care center or group
502 child care home (A) shall not deny services to a child on the basis of a
503 child's known or suspected allergy or because a child has a prescription
504 for an automatic prefilled cartridge injector or similar automatic
505 injectable equipment used to treat an allergic reaction, or for injectable
506 equipment used to administer glucagon, (B) shall, not later than three
507 weeks after such child's enrollment in such a center or home, have staff
508 trained in the use of such equipment on-site during all hours when such
509 a child is on-site, (C) shall require such child's parent or guardian to
510 provide the injector or injectable equipment and a copy of the
511 prescription for such medication and injector or injectable equipment
512 upon enrollment of such child, and (D) shall require a parent or
513 guardian enrolling such a child to replace such medication and
514 equipment prior to its expiration date, (7) specify that a child care center
515 or group child care home (A) shall not deny services to a child on the

516 basis of a child's diagnosis of asthma or because a child has a
517 prescription for an inhalant medication to treat asthma, and (B) shall,
518 not later than three weeks after such child's enrollment in such a center
519 or home, have staff trained in the administration of such medication on-
520 site during all hours when such a child is on-site, [and] (8) establish
521 physical plant requirements for licensed child care centers and licensed
522 group child care homes that exclusively serve school-age children, (9)
523 specify that a child care center or group child care home shall
524 immediately notify the parent or guardian of a child enrolled in such
525 center or home if such child becomes ill or is injured while in the care of
526 such center or home, (10) specify that a child care center or group child
527 care home shall create a written record of any illness or injury described
528 in subdivision (9) of this subsection, which shall, (A) include, but not be
529 limited to, (i) a description of such illness or injury, (ii) the date, time of
530 occurrence and location of such illness or injury, (iii) any responsive
531 action taken by an employee of such center or home, and (iv) whether
532 such child was transported to a hospital emergency room, doctor's office
533 or other medical facility as a result of such illness or injury, (B) be
534 provided to the parent or guardian of such child not later than the next
535 business day, and (C) be maintained by such center or home for a period
536 of not less than two years and be made immediately available upon the
537 request of the Office of Early Childhood, and (11) specify that a child
538 care center or group child care home shall maintain any video
539 recordings created at such center or home for a period of not less than
540 thirty days, and make such recordings immediately available upon the
541 request of the Office of Early Childhood. When establishing such
542 requirements, the Office of Early Childhood shall give consideration to
543 child care centers and group child care homes that are located in private
544 or public school buildings. With respect to [this] subdivision [only] (8)
545 of this subsection, the commissioner shall implement policies and
546 procedures necessary to implement the physical plant requirements
547 established pursuant to this subdivision while in the process of adopting
548 such policies and procedures in regulation form. Until replaced by
549 policies and procedures implemented pursuant to this subdivision, any
550 physical plant requirement specified in the office's regulations that is

551 generally applicable to child care centers and group child care homes
552 shall continue to be applicable to such centers and homes that
553 exclusively serve school-age children. The commissioner shall post
554 notice of the intent to adopt regulations pursuant to this subdivision on
555 the eRegulations System not later than twenty days after the date of
556 implementation of such policies and procedures. Policies and
557 procedures implemented pursuant to this subdivision shall be valid
558 until the time final regulations are adopted.

559 Sec. 24. (NEW) (*Effective July 1, 2022*) (a) There is established the
560 Children's Behavioral Health Cabinet. The cabinet shall consist of the:
561 (1) Commissioner of Children and Families, or the commissioner's
562 designee, (2) Commissioner of Mental Health and Addiction Services,
563 or the commissioner's designee, (3) Commissioner of Public Health, or
564 the commissioner's designee, (4) Commissioner of Developmental
565 Services, or the commissioner's designee, (5) Commissioner of Social
566 Services, or the commissioner's designee, (6) Commissioner of Early
567 Childhood, or the commissioner's designee, (7) Commissioner of
568 Correction, or the commissioner's designee, (8) Insurance
569 Commissioner, or the commissioner's designee, (9) Commissioner of
570 Education, or the commissioner's designee, (10) Secretary of the Office
571 of Policy and Management, or the secretary's designee, (11) Healthcare
572 Advocate, or the Healthcare Advocate's designee, (12) Child Advocate,
573 or the Child Advocate's designee, (13) Chief Court Administrator, or the
574 Chief Court Administrator's designee, (14) executive director of the
575 Office of Health Strategy, or the executive director's designee, and (15)
576 executive director of the Commission on Women, Children, Seniors,
577 Equity and Opportunity, or the executive director's designee.

578 (b) The Commissioner of Children and Families, or the
579 commissioner's designee, shall serve as the chairperson of the cabinet.
580 The cabinet shall meet at least quarterly. Members shall not be
581 compensated for their services.

582 (c) The cabinet shall (1) assess children's behavioral health services in
583 the state to identify areas for improvement in (A) the delivery of such

584 services, (B) the policies and practices of providers of such services, (C)
585 the outcomes for children receiving such services, and (D) patient
586 experiences, (2) make recommendations for improvements in such
587 areas, and (3) consult with private insurers, the Commissioner of Social
588 Services and the Behavioral Health Partnership developed pursuant to
589 section 17a-22h of the general statutes, to ensure timely access to
590 behavioral health services for children in need of such services.

591 (d) Not later than January 1, 2023, and quarterly thereafter, the
592 cabinet shall submit a status report, in accordance with the provisions
593 of section 11-4a of the general statutes, to the Governor and the joint
594 standing committees of the General Assembly having cognizance of
595 matters relating to children, insurance and public health. Such report
596 shall include the cabinet's findings and recommendations from the
597 previous quarter.

598 (e) The Department of Children and Families shall provide support
599 staff to the Children's Behavioral Health Cabinet.

600 Sec. 25. (NEW) (*Effective July 1, 2022*) No Social Security disability
601 benefit received by a child or youth in the care and custody of the
602 Commissioner of Children and Families shall be utilized by the
603 Department of Children and Families to offset the cost of such child or
604 youth's care.

605 Sec. 26. (NEW) (*Effective July 1, 2022*) (a) The Commissioner of Social
606 Services, in consultation with the Commissioner of Public Health, shall
607 establish a pilot grant program to expand behavioral health care offered
608 to children at federally qualified health centers.

609 (b) The Commissioner of Social Services, within available
610 appropriations, shall establish a grant program to provide such health
611 centers with a fifty per cent match for the cost of hiring licensed social
612 workers to provide counseling and other services to children receiving
613 primary health care at such health centers. The commissioner shall (1)
614 prescribe forms and criteria for such health centers to apply and qualify
615 for grant funds; and (2) require such centers to report to the

616 commissioner on use of the funds to expand behavioral health care for
617 children.

618 Sec. 27. (NEW) (*Effective July 1, 2022*) Not later than December 1, 2022,
619 the Department of Consumer Protection shall develop documents
620 concerning the safe storage by consumers of (1) prescription drugs, as
621 defined in section 19a-754b of the general statutes, and (2) cannabis, as
622 defined in section 21a-420 of the general statutes, and cannabis
623 products, as defined in section 21a-420 of the general statutes. Such
624 documents shall contain, but need not be limited to, information
625 concerning best practices for (A) storing prescription drugs and
626 cannabis and cannabis products in a manner that renders such items
627 inaccessible to children, and (B) disposal of unused and expired
628 prescription drugs and cannabis and cannabis products. Not later than
629 December 15, 2022, the department shall publish such documents on its
630 Internet web site.

631 Sec. 28. (NEW) (*Effective July 1, 2022*) Not later than January 1, 2023,
632 each pharmacy, as defined in section 20-635 of the general statutes, shall
633 post a sign in a conspicuous place on the premises of such pharmacy,
634 notifying consumers that they may visit the Internet web site of the
635 Department of Consumer Protection for information concerning the safe
636 storage of prescription drugs and disposal of unused and expired
637 prescription drugs.

638 Sec. 29. (NEW) (*Effective July 1, 2022*) Not later than January 1, 2023,
639 each retailer, as defined in section 21a-420 of the general statutes, and
640 hybrid retailer, as defined in section 21a-420 of the general statutes, shall
641 post a sign in a conspicuous place on the premises of such retailer or
642 hybrid retailer, notifying consumers that they may visit the Internet web
643 site of the Department of Consumer Protection for information
644 concerning the safe storage of cannabis and cannabis products and
645 disposal of unused and expired cannabis and cannabis products.

646 Sec. 30. (NEW) (*Effective October 1, 2022*) Each hospice and hospice
647 care program licensed under section 19a-122b of the general statutes
648 that provides hospice home care services for terminally ill persons shall

649 dispose of any controlled substance, as defined in section 21a-240 of the
650 general statutes, that such hospice or hospice care program dispensed
651 or administered to a terminally ill person (1) as soon as practicable after
652 the death of such person, and (2) in a manner that complies with any
653 applicable state or federal law regarding disposal of controlled
654 substances.

655 Sec. 31. (NEW) (*Effective July 1, 2022*) (a) There is established an
656 account to be known as the "transitional housing for youths
657 experiencing homelessness account" which shall be a separate,
658 nonlapsing account within the General Fund. The account shall contain
659 any moneys required by law to be deposited in the account. Moneys in
660 the account shall be expended by the Department of Housing for the
661 purpose of providing grants for transitional housing for individuals
662 under the age of twenty-one who are experiencing homelessness.

663 (b) The Commissioner of Housing shall establish a grant application
664 process, eligibility criteria for the provision of grants and a formula for
665 determining the amount of each grant awarded pursuant to this
666 subsection. The commissioner shall implement policies and procedures
667 to carry out the provisions of this section while in the process of
668 adopting such policies and procedures in regulation form, provided the
669 commissioner posts notice of intent to adopt the regulation on the
670 eRegulations System not later than twenty days after implementation.
671 Such policies and procedures shall be valid until the final regulations
672 are adopted.

673 Sec. 32. (*Effective from passage*) The Commissioner of Revenue Services
674 shall conduct a study to identify options for establishing a tax credit
675 against the personal income tax for taxpayers with dependent children
676 enrolled in child care. Not later than January 1, 2023, the commissioner
677 shall submit a report, in accordance with the provisions of section 11-4a
678 of the general statutes, to the joint standing committee of the General
679 Assembly having cognizance of matters relating to children. Such report
680 shall include the findings of such study and any legislative
681 recommendations.

682 Sec. 33. (*Effective from passage*) (a) For the purposes of this section,
683 "child care facilities" means child care centers, group child care homes
684 and family child care homes that provide "child care services", as
685 described in section 19a-77 of the general statutes, as amended by this
686 act, and "out-of-pocket costs" has the same meaning as provided in
687 section 19a-755b of the general statutes.

688 (b) The Commissioner of Social Services, in consultation with the
689 Office of the State Comptroller, shall conduct a study to identify ways
690 in which the state may provide financial assistance to employees of child
691 care facilities for out-of-pocket costs associated with the provision of
692 medical care to such employees. Not later than January 1, 2023, the
693 commissioner of Social Services shall submit a report, in accordance
694 with the provisions of section 11-4a of the general statutes, to the joint
695 standing committee of the General Assembly having cognizance of
696 matters relating to children. Such report shall include the findings of
697 such study, including, but not limited to, an analysis of whether such
698 employees may be eligible for participation in the State Partnership Plan
699 2.0, and any legislative recommendations.

700 Sec. 34. (*Effective from passage*) (a) There is established a task force to
701 continue to study the comprehensive needs of children in the state and
702 the extent to which such needs are being met by educators, community
703 members and local and state agencies. The task force shall address
704 subdivisions (1) to (6), inclusive, of subsection (a) of section 30 of public
705 act 21-46.

706 (b) The task force shall consist of the members appointed to the task
707 force to study the comprehensive needs of children pursuant to
708 subsection (b) of section 30 of public act 21-46, except that if any member
709 declines such appointment, a new appointee shall be selected by the
710 appointing authority pursuant to said subsection.

711 (c) Any member of the task force appointed under subdivisions (1) to
712 (6), inclusive, of subsection (b) of section 30 of public act 21-46 may be a
713 member of the General Assembly.

714 (d) All initial appointments to the task force shall be made not later
715 than thirty days after the effective date of this section. Any vacancy shall
716 be filled by the appointing authority not later than thirty days after the
717 vacancy occurs. If a vacancy is not filled by the appointing authority, the
718 chairpersons of the task force may fill such vacancy.

719 (e) The speaker of the House of Representatives and the president pro
720 tempore of the Senate shall select the chairpersons of the task force from
721 among the members of the task force. Such chairpersons shall schedule
722 the first meeting of the task force, which shall be held not later than sixty
723 days after the effective date of this section.

724 (f) The administrative staff of the joint standing committee of the
725 General Assembly having cognizance of matters relating to children
726 shall serve as administrative staff of the task force.

727 (g) Not later than January 1, 2023, the task force shall update the
728 report issued pursuant to subsection (g) of section 30 of public act 21-46,
729 and submit such updated report and any additional findings and
730 recommendations to the joint standing committee of the General
731 Assembly having cognizance of matters relating to children, in
732 accordance with the provisions of section 11-4a of the general statutes.
733 The task force shall terminate on the date that it submits such report or
734 January 1, 2023, whichever is later.

735 Sec. 35. Section 17b-28e of the general statutes is repealed and the
736 following is substituted in lieu thereof (*Effective July 1, 2022*):

737 (a) The Commissioner of Social Services shall amend the Medicaid
738 state plan to include, on and after January 1, 2009, hospice services as
739 optional services covered under the Medicaid program. Said state plan
740 amendment shall supersede any regulations of Connecticut state
741 agencies concerning such optional services. Hospice services covered
742 under the Medicaid program for individuals who are residents in long-
743 term care facilities shall be paid at a rate that is ninety-five per cent of
744 the facility's per diem rate.

745 (b) Not later than October 1, 2011, the Commissioner of Social
746 Services shall amend the Medicaid state plan to include podiatry as an
747 optional service under the Medicaid program.

748 (c) Not later than October 1, [2014] 2022, the Commissioner of Social
749 Services shall amend the Medicaid state plan to include services
750 provided by the following licensed behavioral health clinicians in
751 independent practice to Medicaid recipients who are twenty-one years
752 of age or older: (1) Psychologists licensed under chapter 383, (2) clinical
753 social workers licensed under subsection (c) or (e) of section 20-195n, (3)
754 alcohol and drug counselors licensed under section 20-74s, (4)
755 professional counselors licensed under sections 20-195cc and 20-195dd,
756 [and] (5) marital and family therapists licensed under section 20-195c₂
757 and (6) master social workers licensed under chapter 383b who work
758 under the supervision of psychologists licensed under chapter 383 or
759 clinical social workers licensed under subsection (c) or (e) of section 20-
760 195n. The commissioner shall include such services as optional services
761 covered under the Medicaid program and provide direct Medicaid
762 reimbursements to such licensed behavioral health clinicians who are
763 enrolled as Medicaid providers and who treat such Medicaid recipients
764 in independent practice settings. The commissioner may implement
765 policies and procedures necessary to implement this subsection in
766 advance of regulations, provided the commissioner prints notice of
767 intent to adopt the regulations in accordance with section 17b-10 not
768 later than twenty days after the date of implementation of such policies
769 and procedures. Such policies and procedures shall be valid until the
770 time final regulations are adopted.

771 Sec. 36. (*Effective October 1, 2022*) The Psychology Interjurisdictional
772 Compact is hereby enacted into law and entered into by the state of
773 Connecticut with any and all states legally joining therein in accordance
774 with its terms. The compact is substantially as follows:

775 "PSYCHOLOGY INTERJURISDICTIONAL COMPACT

776 ARTICLE I

777 PURPOSE

778 Whereas, states license psychologists in order to protect the public
779 through verification of education, training and experience and ensure
780 accountability for professional practice; and

781 Whereas, the compact is intended to regulate the day-to-day practice
782 of telepsychology, including, but not limited to, the provision of
783 psychological services using telecommunication technologies, by
784 psychologists across state boundaries in the performance of their
785 psychological practice as assigned by an appropriate authority; and

786 Whereas, the compact is intended to regulate the temporary in-
787 person, face-to-face practice of psychology by psychologists across state
788 boundaries for thirty days within a calendar year in the performance of
789 their psychological practice as assigned by an appropriate authority;
790 and

791 Whereas, the compact is intended to authorize state psychology
792 regulatory authorities to afford legal recognition, in a manner consistent
793 with the terms of the compact, to psychologists licensed in another state;
794 and

795 Whereas, the compact recognizes that states have a vested interest in
796 protecting the public's health and safety through their licensing and
797 regulation of psychologists and that such state licensing and regulation
798 will best protect public health and safety; and

799 Whereas, the compact shall not apply when a psychologist is licensed
800 in both the home and receiving states; and

801 Whereas, the compact shall not apply to permanent in-person, face-
802 to-face practice, it shall allow for authorization of temporary
803 psychological practice.

804 Consistent with such principles, the compact is designed to achieve
805 the following purposes and objectives:

806 (1) Increase public access to professional psychological services by
807 allowing for telepsychological practice across state lines and temporary
808 in-person, face-to-face services in a state which the psychologist is not
809 licensed to practice psychology;

810 (2) Enhance the states' ability to protect the public's health and safety,
811 especially client or patient safety;

812 (3) Encourage the cooperation of compact states in the areas of
813 psychology licensure and regulation;

814 (4) Facilitate the exchange of information between compact states
815 regarding licensure, adverse actions and disciplinary history of
816 psychologists;

817 (5) Promote compliance with the laws governing psychological
818 practice in each compact state; and

819 (6) Invest all compact states with the authority to hold licensed
820 psychologists accountable through the mutual recognition of compact
821 state licenses.

822 ARTICLE II

823 DEFINITIONS

824 (1) "Adverse action" means any action taken by a state psychology
825 regulatory authority that finds a violation of a statute or regulation that
826 is identified by the state psychology regulatory authority as discipline
827 and is a matter of public record.

828 (2) "Association of State and Provincial Psychology Boards" means
829 the recognized membership organization composed of state and
830 provincial psychology regulatory authorities responsible for the
831 licensure and registration of psychologists throughout the United States
832 and Canada.

833 (3) "Authority to practice interjurisdictional telepsychology" means a
834 licensed psychologist's authority to practice telepsychology, within the

835 limits authorized under the compact, in another compact state.

836 (4) "Bylaws" means the bylaws established by the Psychology
837 Interjurisdictional Compact Commission pursuant to Article X of the
838 compact for the governance of said commission, or for directing and
839 controlling the actions and conduct of said commission.

840 (5) "Client or patient" means the recipient of psychological services,
841 whether psychological services are delivered in the context of
842 healthcare, corporate, supervision or consulting services.

843 (6) "Commissioner" means the voting representative appointed by
844 each state psychology regulatory authority pursuant to Article X of the
845 compact.

846 (7) "Compact" means the Psychology Interjurisdictional Compact.

847 (8) "Compact state" means a state, the District of Columbia or United
848 States territory that has enacted the compact and that has not withdrawn
849 pursuant to subsection (c) of Article XIII of the compact, or been
850 terminated pursuant to subsection (b) of Article XII of the compact.

851 (9) "Coordinated licensure information system" or "coordinated
852 database" means an integrated process for collecting, storing and
853 sharing information on psychologists' licensure and enforcement
854 activities related to psychology licensure laws, that is administered by
855 the recognized membership organization composed of state and
856 provincial psychology regulatory authorities.

857 (10) "Confidentiality" means the principle that data or information is
858 not made available or disclosed to unauthorized persons or processes.

859 (11) "Day" means any part of a day in which psychological work is
860 performed.

861 (12) "Distant state" means the compact state where a psychologist is
862 physically present, not through the use of telecommunications
863 technologies, to provide temporary in-person, face-to-face

864 psychological services.

865 (13) "E.Passport" means the Interjurisdictional Practice Certificate
866 issued by the Association of State and Provincial Psychology Boards
867 that promotes the standardization in the criteria of interjurisdictional
868 telepsychology practice and facilitates the process for licensed
869 psychologists to provide telepsychological services across state lines.

870 (14) "Executive board" means a group of directors elected or
871 appointed to act on behalf of, and within the powers granted to them
872 by, the commission.

873 (15) "Home state" means a compact state where a psychologist is
874 licensed to practice psychology, provided (A) if the psychologist is
875 licensed in more than one compact state and is practicing under the
876 temporary authorization to practice, the home state is the compact state
877 where the psychologist is physically present when delivering
878 telepsychological services, and (B) if the psychologist is licensed in more
879 than one compact state and is practicing under the temporary
880 authorization to practice, the home state is any compact state where the
881 psychologist is licensed.

882 (16) "Identity history summary" means a summary of information
883 retained by the Federal Bureau of Investigation, or said bureau's
884 designee with similar authority, in connection with arrests and, in some
885 instances, federal employment, naturalization, or military service.

886 (17) "In-person, face-to-face" (A) means interactions in which the
887 psychologist and the client or patient are in the same physical space, and
888 (B) does not include interactions that may occur through the use of
889 telecommunication technologies.

890 (18) "IPC" means the Interjurisdictional Practice Certificate issued by
891 the Association of State and Provincial Psychology Boards that grants
892 temporary authority to practice based on notification to the state
893 psychology regulatory authority of intention to practice temporarily,
894 and verification of one's qualifications for such practice.

895 (19) "License" means authorization by a state psychology regulatory
896 authority to engage in the independent practice of psychology, which
897 practice would be unlawful without the authorization.

898 (20) "Noncompact state" means any state that is not a compact state.

899 (21) "Psychologist" means an individual licensed for the independent
900 practice of psychology.

901 (22) "Psychology Interjurisdictional Compact Commission" or
902 "commission" means the national administration of which all compact
903 states are members.

904 (23) "Receiving state" means a compact state where the client or
905 patient is physically located when the telepsychological services are
906 delivered.

907 (24) "Rule" means a written statement by the Psychology
908 Interjurisdictional Compact Commission promulgated pursuant to
909 Article XI of the compact that is of general applicability, implements,
910 interprets or prescribes a policy or provision of the compact, or an
911 organizational, procedural or practice requirement of the commission,
912 and has the force and effect of statutory law in a compact state,
913 including, but not limited to, the amendment, repeal or suspension of
914 an existing rule.

915 (25) "Significant investigatory information" means:

916 (A) Investigative information that a state psychology regulatory
917 authority, after a preliminary inquiry that includes notification and an
918 opportunity to respond if required by state law, has reason to believe, if
919 proven true, would indicate more than a violation of state statute or
920 ethics code that would be considered more substantial than minor
921 infraction; or

922 (B) Investigative information that indicates that the psychologist
923 represents an immediate threat to public health and safety regardless of
924 whether the psychologist has been notified or had an opportunity to

925 respond.

926 (26) "State" means a state, commonwealth, territory or possession of
927 the United States, or the District of Columbia.

928 (27) "State psychology regulatory authority" means the board, office
929 or other agency with the legislative mandate to license and regulate the
930 practice of psychology.

931 (28) "Telepsychology" means the provision of psychological services
932 using telecommunication technologies.

933 (29) "Temporary authorization to practice" means a licensed
934 psychologist's authority to conduct temporary in-person, face-to-face
935 practice, within the limits authorized under the compact, in another
936 compact state.

937 (30) "Temporary in-person, face-to-face practice" means the practice
938 of psychology by a psychologist who is physically present, not through
939 the use of telecommunications technologies, in the distant state for not
940 more than thirty days in a calendar year and based on notification to the
941 distant state.

942 ARTICLE III

943 HOME STATE LICENSURE

944 (a) The home state shall be a compact state where a psychologist is
945 licensed to practice psychology.

946 (b) A psychologist may hold one or more compact state licenses at a
947 time. If the psychologist is licensed in more than one compact state, the
948 home state is the compact state where the psychologist is physically
949 present when the services are delivered as authorized by the authority
950 to practice interjurisdictional telepsychology under the terms of the
951 compact.

952 (c) Any compact state may require a psychologist not previously
953 licensed in a compact state to obtain and retain a license to be authorized

954 to practice in the compact state under circumstances not authorized by
955 the authority to practice interjurisdictional telepsychology under the
956 terms of the compact.

957 (d) Any compact state may require a psychologist to obtain and retain
958 a license to be authorized to practice in a compact state under
959 circumstances not authorized by a temporary authorization to practice
960 under the terms of the compact.

961 (e) A home state's license authorizes a psychologist to practice in a
962 receiving state under the authority to practice interjurisdictional
963 telepsychology only if the compact state:

964 (1) Currently requires the psychologist to hold an active E.Passport;

965 (2) Has a mechanism in place for receiving and investigating
966 complaints about licensed individuals;

967 (3) Notifies the commission, in compliance with the terms of the
968 compact, of any adverse action or significant investigatory information
969 regarding a licensed individual;

970 (4) Requires an identity history summary of all applicants at initial
971 licensure, including, but not limited to, the use of the results of
972 fingerprints or other biometric data checks compliant with the
973 requirements of the Federal Bureau of Investigation, or said bureau's
974 designee with similar authority, not later than ten years after activation
975 of the compact; and

976 (5) Complies with the bylaws and rules of the commission.

977 (f) A home state's license grants a temporary authorization to practice
978 to a psychologist in a distant state only if the compact state:

979 (1) Currently requires the psychologist to hold an active IPC;

980 (2) Has a mechanism in place for receiving and investigating
981 complaints about licensed individuals;

982 (3) Notifies the commission, in compliance with the terms of the
983 compact, of any adverse action or significant investigatory information
984 regarding a licensed individual;

985 (4) Requires an identity history summary of all applicants at initial
986 licensure, including, but not limited to, the use of the results of
987 fingerprints or other biometric data checks compliant with the
988 requirements of the Federal Bureau of Investigation, or said bureau's
989 designee with similar authority, not later than ten years after activation
990 of the compact; and

991 (5) Complies with the bylaws and rules of the commission.

992 ARTICLE IV

993 COMPACT PRIVILEGE TO PRACTICE TELEPSYCHOLOGY

994 (a) Compact states shall recognize the right of a psychologist, licensed
995 in a compact state in conformance with Article III of the compact, to
996 practice telepsychology in receiving states in which the psychologist is
997 not licensed, under the authority to practice interjurisdictional
998 telepsychology as provided in the compact.

999 (b) To exercise the authority to practice interjurisdictional
1000 telepsychology under the terms and provisions of the compact, a
1001 psychologist licensed to practice in a compact state shall:

1002 (1) Hold a graduate degree in psychology from an institution of
1003 higher education that was, at the time the degree was awarded:

1004 (A) Regionally accredited by an accrediting body recognized by the
1005 United States Department of Education to grant graduate degrees, or
1006 authorized by provincial statute or royal charter to grant doctoral
1007 degrees; or

1008 (B) A foreign college or university deemed to be equivalent to an
1009 institution of higher education described in subparagraph (A) of this
1010 subdivision by a foreign credential evaluation service that is a member

1011 of the National Association of Credential Evaluation Services or by a
1012 recognized foreign credential evaluation service; and

1013 (2) Hold a graduate degree in psychology from a psychology
1014 program that meets the following criteria:

1015 (A) The program, wherever it may be administratively housed, shall
1016 be clearly identified and labeled as a psychology program. Such
1017 program shall specify in pertinent institutional catalogues and
1018 brochures its intent to educate and train professional psychologists;

1019 (B) The psychology program shall stand as a recognizable, coherent,
1020 organizational entity within the institution;

1021 (C) There shall be a clear authority and primary responsibility for the
1022 core and specialty areas whether or not the program cuts across
1023 administrative lines;

1024 (D) The program shall consist of an integrated, organized sequence
1025 of study;

1026 (E) There shall be an identifiable psychology faculty sufficient in size
1027 and breadth to carry out its responsibilities;

1028 (F) The designated director of the program shall be a psychologist
1029 and a member of the core faculty;

1030 (G) The program shall have an identifiable body of students who are
1031 matriculated in such program for a degree;

1032 (H) The program shall include supervised practicum, internship or
1033 field training appropriate to the practice of psychology;

1034 (I) The curriculum shall encompass a minimum of three academic
1035 years of full-time graduate study for a doctoral degree and a minimum
1036 of one academic year of full-time graduate study for a master's degree;
1037 and

1038 (J) The program shall include an acceptable residency, as defined by

1039 the rules of the commission;

1040 (3) Possess a current, full and unrestricted license to practice
1041 psychology in a home state that is a compact state;

1042 (4) Have no history of adverse action that violates the rules of the
1043 commission;

1044 (5) Have no criminal record history reported on an identity history
1045 summary that violates the rules of the commission;

1046 (6) Possess a current, active E.Passport;

1047 (7) Provide (A) attestations regarding areas of intended practice,
1048 conformity with standards of practice, competence in telepsychology
1049 technology, criminal background and knowledge and adherence to
1050 legal requirements in the home and receiving states, and (B) a release of
1051 information to allow for primary source verification in a manner
1052 specified by the commission; and

1053 (8) Meet other criteria as defined by the rules of the commission.

1054 (c) The home state maintains authority over the license of any
1055 psychologist practicing in a receiving state under the authority to
1056 practice interjurisdictional telepsychology.

1057 (d) A psychologist practicing in a receiving state under the authority
1058 to practice interjurisdictional telepsychology shall be subject to the
1059 receiving state's scope of practice. A receiving state may, in accordance
1060 with such state's due process law, limit or revoke a psychologist's
1061 authority to practice interjurisdictional telepsychology in the receiving
1062 state and may take any other necessary actions under the receiving
1063 state's applicable law to protect the health and safety of the receiving
1064 state's citizens. If a receiving state takes action, the state shall promptly
1065 notify the home state and the commission.

1066 (e) If a psychologist's license in any home state, another compact state
1067 or any authority to practice interjurisdictional telepsychology in any

1068 receiving state, is restricted, suspended or otherwise limited, the
1069 E.Passport shall be revoked and the psychologist shall not be eligible to
1070 practice telepsychology in a compact state under the authority to
1071 practice interjurisdictional telepsychology.

1072 ARTICLE V

1073 COMPACT TEMPORARY AUTHORIZATION TO PRACTICE

1074 (a) Compact states shall recognize the right of a psychologist, licensed
1075 in a compact state in conformance with Article III of the compact, to
1076 practice temporarily in other compact states in which the psychologist
1077 is not licensed, as provided in the compact.

1078 (b) To exercise the temporary authorization to practice under the
1079 terms and provisions of the compact, a psychologist licensed to practice
1080 in a compact state shall:

1081 (1) Hold a graduate degree in psychology from an institution of
1082 higher education that was, at the time the degree was awarded:

1083 (A) Regionally accredited by an accrediting body recognized by the
1084 United States Department of Education to grant graduate degrees, or
1085 authorized by provincial statute or royal charter to grant doctoral
1086 degrees; or

1087 (B) A foreign college or university deemed to be equivalent to an
1088 institution of higher education described in subparagraph (A) of this
1089 subdivision by a foreign credential evaluation service that is a member
1090 of the National Association of Credential Evaluation Services or by a
1091 recognized foreign credential evaluation service; and

1092 (2) Hold a graduate degree in psychology that meets the following
1093 criteria:

1094 (A) The program, wherever it may be administratively housed, shall
1095 be clearly identified and labeled as a psychology program. Such
1096 program shall specify in pertinent institutional catalogues and

1097 brochures its intent to educate and train professional psychologists;

1098 (B) The psychology program shall stand as a recognizable, coherent,
1099 organizational entity within the institution;

1100 (C) There shall be a clear authority and primary responsibility for the
1101 core and specialty areas whether or not the program cuts across
1102 administrative lines;

1103 (D) The program shall consist of an integrated, organized sequence
1104 of study;

1105 (E) There shall be an identifiable psychology faculty sufficient in size
1106 and breadth to carry out its responsibilities;

1107 (F) The designated director of the program shall be a psychologist
1108 and a member of the core faculty;

1109 (G) The program shall have an identifiable body of students who are
1110 matriculated in such program for a degree;

1111 (H) The program shall include supervised practicum, internship or
1112 field training appropriate to the practice of psychology;

1113 (I) The curriculum shall encompass a minimum of three academic
1114 years of full-time graduate study for a doctoral degree and a minimum
1115 of one academic year of full-time graduate study for a master's degree;
1116 and

1117 (J) The program includes an acceptable residency, as defined by the
1118 rules of the commission;

1119 (3) Possess a current, full and unrestricted license to practice
1120 psychology in a home state that is a compact state;

1121 (4) No history of adverse action that violates the rules of the
1122 commission;

1123 (5) No criminal record history that violates the rules of the

1124 commission;

1125 (6) Possess a current, active IPC;

1126 (7) Provide attestations regarding areas of intended practice and
1127 work experience and provide a release of information to allow for
1128 primary source verification in a manner specified by the commission;
1129 and

1130 (8) Meet other criteria, as defined by the rules of the commission.

1131 (c) A psychologist practicing in a distant state under the temporary
1132 authorization to practice shall practice within the scope of practice
1133 authorized by the distant state.

1134 (d) A psychologist practicing in a distant state under the temporary
1135 authorization to practice shall be subject to the distant state's authority
1136 and law. A distant state may, in accordance with such state's due process
1137 law, limit or revoke a psychologist's temporary authorization to practice
1138 in the distant state and may take any other necessary actions under the
1139 distant state's applicable law to protect the health and safety of the
1140 distant state's citizens. If a distant state takes action, the state shall
1141 promptly notify the home state and the commission.

1142 (e) If a psychologist's license in any home state or another compact
1143 state, or any temporary authorization to practice in any distant state, is
1144 restricted, suspended or otherwise limited, the IPC shall be revoked and
1145 the psychologist shall not be eligible to practice in a compact state under
1146 the temporary authorization to practice.

1147 ARTICLE VI

1148 CONDITIONS OF TELEPSYCHOLOGY PRACTICE IN A
1149 RECEIVING STATE

1150 A psychologist may practice in a receiving state under the authority
1151 to practice interjurisdictional telepsychology only in the performance of
1152 the scope of practice for psychology as assigned by an appropriate state

1153 psychology regulatory authority, as defined in the rules of the
1154 commission, and under the following circumstances:

1155 (1) The psychologist initiates a client or patient contact in a home state
1156 via telecommunications technologies with a client or patient in a
1157 receiving state; and

1158 (2) The psychologist complies with any other conditions regarding
1159 telepsychology that are set forth in the rules promulgated by the
1160 commission.

1161 ARTICLE VII

1162 ADVERSE ACTIONS

1163 (a) A home state shall have the power to impose adverse action
1164 against a psychologist's license issued by the home state. A distant state
1165 shall have the power to take adverse action on a psychologist's
1166 temporary authorization to practice in such distant state.

1167 (b) A receiving state may take adverse action on a psychologist's
1168 authority to practice interjurisdictional telepsychology in such receiving
1169 state. A home state may take adverse action against a psychologist based
1170 on an adverse action taken by a distant state regarding temporary in-
1171 person, face-to-face practice.

1172 (c) If a home state takes adverse action against a psychologist's
1173 license, the psychologist's (1) authority to practice interjurisdictional
1174 telepsychology is terminated, (2) E.Passport is revoked, (3) temporary
1175 authorization to practice is terminated, and (4) IPC is revoked. All home
1176 state disciplinary orders that impose adverse action shall be reported to
1177 the commission in accordance with the rules promulgated by the
1178 commission. A compact state shall report adverse actions in accordance
1179 with the rules of the commission. If discipline is reported on a
1180 psychologist, the psychologist shall not be eligible for telepsychology or
1181 temporary in-person, face-to-face practice in accordance with the rules
1182 of the commission. Other actions may be imposed as determined by the
1183 rules promulgated by the commission.

1184 (d) A home state's psychology regulatory authority shall investigate
1185 and take appropriate action with respect to reported inappropriate
1186 conduct engaged in by a licensee that occurred in a receiving state as it
1187 would if such conduct had occurred by a licensee in the home state. In
1188 such cases, the home state's law shall control in determining any adverse
1189 action against a psychologist's license.

1190 (e) A distant state's psychology regulatory authority shall investigate
1191 and take appropriate action with respect to reported inappropriate
1192 conduct engaged in by a psychologist practicing under temporary
1193 authorization to practice that occurred in that distant state as it would if
1194 such conduct had occurred by a licensee within the home state. In such
1195 cases, the distant state's law shall control in determining any adverse
1196 action against a psychologist's temporary authorization to practice.

1197 (f) Nothing in the compact shall override a compact state's decision
1198 that a psychologist's participation in an alternative program may be
1199 used in lieu of adverse action and that such participation shall remain
1200 nonpublic if required by the compact state's law. Compact states shall
1201 require psychologists who enter any alternative programs to not
1202 provide telepsychology services under the authority to practice
1203 interjurisdictional telepsychology or provide temporary psychological
1204 services under the temporary authorization to practice in any other
1205 compact state during the term of the alternative program.

1206 (g) No other judicial or administrative remedies shall be available to
1207 a psychologist if the compact state imposes an adverse action pursuant
1208 to subsection (c) of this article.

1209 ARTICLE VIII

1210 ADDITIONAL AUTHORITIES INVESTED IN A COMPACT
1211 STATE'S PSYCHOLOGY REGULATORY AUTHORITY

1212 (a) In addition to any other powers granted under state law, a
1213 compact state's psychology regulatory authority shall have the
1214 authority under the compact to do the following:

1215 (1) Issue subpoenas, for both hearings and investigations, that require
1216 the attendance and testimony of witnesses and the production of
1217 evidence. Subpoenas issued by a compact state's psychology regulatory
1218 authority for the attendance and testimony of witnesses or the
1219 production of evidence from another compact state shall be enforced in
1220 the latter compact state by any court of competent jurisdiction,
1221 according to such court's practice and procedure in considering
1222 subpoenas issued in its own proceedings. The issuing state psychology
1223 regulatory authority shall pay any witness fees, travel expenses, mileage
1224 and other fees required by the service statutes of the state where the
1225 witnesses are or evidence is located; and

1226 (2) Issue cease and desist or injunctive relief orders to revoke a
1227 psychologist's authority to practice interjurisdictional telepsychology or
1228 temporary authorization to practice.

1229 (b) During the course of any investigation, a psychologist may not
1230 change the psychologist's home state licensure. A home state
1231 psychology regulatory authority is authorized to complete any pending
1232 investigations of a psychologist and to take any actions appropriate
1233 under its law. The home state psychology regulatory authority shall
1234 promptly report the conclusions of such investigations to the
1235 commission. Once an investigation has been completed, and pending
1236 the outcome of such investigation, the psychologist may change his or
1237 her home state licensure. The commission shall promptly notify the new
1238 home state of any such decisions as provided in the rules of the
1239 commission. All information provided to the commission or distributed
1240 by compact states pursuant to the psychologist shall be confidential,
1241 filed under seal and used for investigatory or disciplinary matters. The
1242 commission may create additional rules for mandated or discretionary
1243 sharing of information by compact states.

1244 ARTICLE IX

1245 COORDINATED LICENSURE INFORMATION SYSTEM

1246 (a) The commission shall provide for the development and

1247 maintenance of a coordinated licensure information system and
1248 reporting system containing licensure and disciplinary action
1249 information on all psychologists to whom the compact is applicable in
1250 all compact states as defined by the rules of the commission.

1251 (b) Notwithstanding any other provision of the general statutes, a
1252 compact state shall submit a uniform data set to the coordinated
1253 database on all licensees as required by the rules of the commission,
1254 including, but not limited to, the following:

1255 (1) Identifying information;

1256 (2) Licensure data;

1257 (3) Significant investigatory information;

1258 (4) Adverse actions against a psychologist's license;

1259 (5) An indicator that a psychologist's authority to practice
1260 interjurisdictional telepsychology or temporary authorization to
1261 practice is revoked;

1262 (6) Nonconfidential information related to alternative program
1263 participation information;

1264 (7) Any denial of application for licensure, and the reasons for such
1265 denial; and

1266 (8) Other information that may facilitate the administration of the
1267 compact, as determined by the rules of the commission.

1268 (c) The coordinated database administrator shall promptly notify all
1269 compact states of any adverse action taken against, or significant
1270 investigative information on, any licensee in a compact state.

1271 (d) Compact states reporting information to the coordinated database
1272 may designate information that may not be shared with the public
1273 without the express permission of the compact state reporting the
1274 information.

1275 (e) Any information submitted to the coordinated database that is
1276 subsequently required to be expunged by the law of the compact state
1277 reporting the information shall be removed from the coordinated
1278 database.

1279 ARTICLE X

1280 ESTABLISHMENT OF THE PSYCHOLOGY
1281 INTERJURISDICTIONAL COMPACT COMMISSION

1282 (a) The compact states hereby create and establish a joint public
1283 agency known as the Psychology Interjurisdictional Compact
1284 Commission.

1285 (1) The commission is a body politic and an instrumentality of the
1286 compact states.

1287 (2) Venue is proper and judicial proceedings by or against the
1288 commission shall be brought solely and exclusively in a court of
1289 competent jurisdiction where the principal office of the commission is
1290 located. The commission may waive venue and jurisdictional defenses
1291 to the extent it adopts or consents to participate in alternative dispute
1292 resolution proceedings.

1293 (3) Nothing in the compact shall be construed to be a waiver of
1294 sovereign immunity.

1295 (b) (1) The commission shall consist of one voting representative
1296 appointed by each compact state who shall serve as such state's
1297 commissioner. The state psychology regulatory authority shall appoint
1298 its delegate. The delegate shall be empowered to act on behalf of the
1299 compact state. The delegate shall be limited to the following:

1300 (A) An executive director, executive secretary or similar executive;

1301 (B) A current member of the state psychology regulatory authority of
1302 a compact state; or

1303 (C) A designee empowered with the appropriate delegate authority

1304 to act on behalf of the compact state.

1305 (2) Any commissioner may be removed or suspended from office as
1306 provided by the law of the state from which the commissioner is
1307 appointed. Any vacancy occurring in the commission shall be filled in
1308 accordance with the laws of the compact state in which the vacancy
1309 exists.

1310 (3) Each commissioner shall be entitled to one vote with regard to the
1311 promulgation of rules and creation of bylaws and shall otherwise have
1312 an opportunity to participate in the business and affairs of the
1313 commission. A commissioner shall vote in person or by such other
1314 means as provided in the bylaws. The bylaws may provide for
1315 commissioners' participation in meetings by telephone or other means
1316 of communication.

1317 (4) The commission shall meet at least once during each calendar
1318 year. Additional meetings shall be held as set forth in the bylaws.

1319 (5) All meetings shall be open to the public, and public notice of
1320 meetings shall be given in the same manner as required under the
1321 rulemaking provisions in Article XI of the compact.

1322 (6) The commission may convene in a closed, nonpublic meeting if
1323 the commission has to discuss the following:

1324 (A) Noncompliance of a compact state with its obligations under the
1325 compact;

1326 (B) The employment, compensation, discipline or other personnel
1327 matters, practices or procedures related to specific employees or other
1328 matters related to the commission's internal personnel practices and
1329 procedures;

1330 (C) Current, threatened or reasonably anticipated litigation against
1331 the commission;

1332 (D) Negotiation of contracts for the purchase or sale of goods, services

1333 or real estate;

1334 (E) Accusation against any person of a crime or formally censuring
1335 any person;

1336 (F) Disclosure of trade secrets or commercial or financial information
1337 which is privileged or confidential;

1338 (G) Disclosure of information of a personal nature where disclosure
1339 would constitute a clearly unwarranted invasion of personal privacy;

1340 (H) Disclosure of investigatory records compiled for law enforcement
1341 purposes;

1342 (I) Disclosure of information related to any investigatory reports
1343 prepared by or on behalf of or for use of the commission or other
1344 committee charged with responsibility for investigation or
1345 determination of compliance issues pursuant to the compact; or

1346 (J) Matters specifically exempted from disclosure by federal and state
1347 statute.

1348 (7) If a meeting, or portion of a meeting, is closed pursuant to the
1349 provisions of subdivision (6) of this subsection, the commission's legal
1350 counsel or designee shall certify that the meeting may be closed and
1351 shall reference each relevant exempting provision. The commission
1352 shall keep minutes that fully and clearly describe all matters discussed
1353 in a meeting and shall provide a full and accurate summary of actions
1354 taken, of any person participating in the meeting, and the reasons
1355 therefore, including, but not limited to, a description of the views
1356 expressed. All documents considered in connection with an action shall
1357 be identified in such minutes. All minutes and documents of a closed
1358 meeting shall remain under seal, subject to release only by a majority
1359 vote of the commission or order of a court of competent jurisdiction.

1360 (c) The commission shall, by a majority vote of the commissioners,
1361 prescribe bylaws or rules to govern its conduct as may be necessary or
1362 appropriate to carry out the purposes and exercise the powers of the

- 1363 compact, including, but not limited to:
- 1364 (1) Establishing the fiscal year of the commission;
- 1365 (2) Providing reasonable standards and procedures for the following:
- 1366 (A) The establishment and meetings of other committees; and
- 1367 (B) Governing any general or specific delegation of any authority or
1368 function of the commission;
- 1369 (3) Providing reasonable procedures for calling and conducting
1370 meetings of the commission, ensuring reasonable advance notice of all
1371 meetings and providing an opportunity for attendance of such meetings
1372 by interested parties, with enumerated exceptions designed to protect
1373 the public's interest, the privacy of individuals at such meetings and
1374 proprietary information, including, but not limited to, trade secrets. The
1375 commission may meet in closed session only after a majority of the
1376 commissioners vote to close a meeting to the public in whole or in part.
1377 As soon as practicable, the commission shall make public a copy of the
1378 vote to close the meeting revealing the vote of each commissioner with
1379 no proxy votes allowed;
- 1380 (4) Establishing the titles, duties and authority and reasonable
1381 procedures for the election of the officers of the commission;
- 1382 (5) Providing reasonable standards and procedures for the
1383 establishment of the personnel policies and programs of the
1384 commission. Notwithstanding any civil service law or other similar law
1385 of any compact state, the bylaws shall exclusively govern the personnel
1386 policies and programs of the commission;
- 1387 (6) Promulgating a code of ethics to address permissible and
1388 prohibited activities of commission members and employees;
- 1389 (7) Providing a mechanism for concluding the operations of the
1390 commission and the equitable disposition of any surplus funds that may
1391 exist after the termination of the compact after the payment or reserving

1392 of all of its debts and obligations;

1393 (8) The commission shall publish its bylaws in a convenient form and
1394 file a copy thereof and a copy of any amendment thereto, with the
1395 appropriate agency or officer in each of the compact states;

1396 (9) The commission shall maintain its financial records in accordance
1397 with the bylaws; and

1398 (10) The commission shall meet and take such actions as are
1399 consistent with the provisions of the compact and the bylaws.

1400 (d) The commission may:

1401 (1) Promulgate uniform rules to facilitate and coordinate
1402 implementation and administration of the compact, which rules shall
1403 have the force and effect of law and shall be binding in all compact
1404 states;

1405 (2) Bring and prosecute legal proceedings or actions in the name of
1406 the commission, provided the standing of any state psychology
1407 regulatory authority or other regulatory body responsible for
1408 psychology licensure to sue or be sued under applicable law shall not
1409 be affected;

1410 (3) Purchase and maintain insurance and bonds;

1411 (4) Borrow, accept or contract for services of personnel, including, but
1412 not limited to, employees of a compact state;

1413 (5) Hire employees, elect or appoint officers, fix compensation, define
1414 duties, grant such individuals appropriate authority to carry out the
1415 purposes of the compact and to establish the commission's personnel
1416 policies and programs relating to conflicts of interest, qualifications of
1417 personnel and other related personnel matters;

1418 (6) Accept any appropriate donations and grants of money,
1419 equipment, supplies, materials and services and to receive, utilize and
1420 dispose of the same; provided the commission shall strive at all times to

1421 avoid any appearance of impropriety or conflict of interest;

1422 (7) Lease, purchase, accept appropriate gifts or donations of, or
1423 otherwise own, hold, improve or use, any property, real, personal or
1424 mixed, provided the commission shall strive at all times to avoid any
1425 appearance of impropriety;

1426 (8) Sell, convey, mortgage, pledge, lease, exchange, abandon or
1427 otherwise dispose of any property real, personal or mixed;

1428 (9) Establish a budget and make expenditures;

1429 (10) Borrow money;

1430 (11) Appoint committees, including, but not limited to, advisory
1431 committees comprised of members, state regulators, state legislators or
1432 their representatives and consumer representatives, and such other
1433 interested persons as may be designated in the compact and the bylaws;

1434 (12) Provide and receive information from, and to cooperate with,
1435 law enforcement agencies;

1436 (13) Adopt and use an official seal; and

1437 (14) Perform such other functions as may be necessary or appropriate
1438 to achieve the purposes of the compact consistent with the state
1439 regulation of psychology licensure, temporary in-person, face-to-face
1440 practice and telepsychology practice.

1441 (e) (1) The elected officers shall serve as the executive board, which
1442 shall have the power to act on behalf of the commission according to the
1443 terms of the compact. The executive board shall be comprised of the
1444 following six members:

1445 (A) Five voting members who are elected from the membership of the
1446 commission by the commission; and

1447 (B) One ex-officio, nonvoting member from the recognized
1448 membership organization composed of state and provincial psychology

1449 regulatory authorities.

1450 (2) The ex-officio member shall have served as staff or member on a
1451 state psychology regulatory authority and shall be selected by its
1452 respective organization.

1453 (3) The commission may remove any member of the executive board
1454 as provided in the bylaws.

1455 (4) The executive board shall meet at least annually.

1456 (5) The executive board shall have the following duties and
1457 responsibilities:

1458 (A) Recommend to the entire commission changes to the rules or
1459 bylaws, changes to the compact legislation, fees paid by compact states,
1460 including, but not limited to, annual dues, and any other applicable fees;

1461 (B) Ensure compact administration services are appropriately
1462 provided, contractually or otherwise;

1463 (C) Prepare and recommend the budget;

1464 (D) Maintain financial records on behalf of the commission;

1465 (E) Monitor compact compliance of member states and provide
1466 compliance reports to the commission;

1467 (F) Establish additional committees as necessary; and

1468 (G) Other duties as provided in rules or bylaws.

1469 (f) The commission:

1470 (1) Shall pay, or provide for the payment of the reasonable expenses
1471 of its establishment, organization and ongoing activities.

1472 (2) May accept any and all appropriate revenue sources, donations
1473 and grants of money, equipment, supplies, materials and services.

1474 (3) May levy on and collect an annual assessment from each compact
1475 state or impose fees on other parties to cover the cost of the operations
1476 and activities of the commission and its staff. Such assessment and fees
1477 shall be in a total amount sufficient to cover the commission's annual
1478 budget as approved each year for which revenue is not provided by
1479 other sources. The aggregate annual assessment amount shall be
1480 allocated based upon a formula to be determined by the commission.
1481 The commission shall promulgate a rule under this subdivision that is
1482 binding upon all compact states.

1483 (4) Shall not incur obligations of any kind prior to securing the funds
1484 adequate to meet such obligations, or pledge the credit of any of the
1485 compact states, except by and with the authority of the compact state.

1486 (5) Shall keep accurate accounts of all receipts and disbursements.
1487 The receipts and disbursements of the commission shall be subject to the
1488 audit and accounting procedures established under its bylaws. All
1489 receipts and disbursements of funds handled by the commission shall
1490 be audited yearly by a certified or licensed public accountant and the
1491 report of the audit shall be included in and become part of the annual
1492 report of the commission.

1493 (g) (1) The members, officers, executive director, employees and
1494 representatives of the commission shall be immune from suit and
1495 liability, either personally or in their official capacity, for any claim for
1496 damage to or loss of property or personal injury or other civil liability
1497 caused by or arising out of any actual or alleged act, error or omission
1498 that occurred, or that the person against whom the claim is made had a
1499 reasonable basis for believing occurred within the scope of commission
1500 employment, duties or responsibilities, provided nothing in this
1501 subdivision shall be construed to protect any such person from suit or
1502 liability for any damage, loss, injury or liability caused by the intentional
1503 or wilful or wanton misconduct of such person.

1504 (2) The commission shall defend any member, officer, executive
1505 director, employee or representative of the commission in any civil
1506 action seeking to impose liability arising out of any actual or alleged act,

1507 error or omission that occurred within the scope of commission
1508 employment, duties or responsibilities, or that the person against whom
1509 the claim is made had a reasonable basis for believing occurred within
1510 the scope of commission employment, duties or responsibilities,
1511 provided (A) nothing in this subdivision shall be construed to prohibit
1512 such person from retaining his or her own counsel, and (B) the actual or
1513 alleged act, error or omission did not result from such person's
1514 intentional or wilful or wanton misconduct.

1515 (3) The commission shall indemnify and hold harmless any member,
1516 officer, executive director, employee or representative of the
1517 commission for the amount of any settlement or judgment obtained
1518 against such person arising out of any actual or alleged act, error or
1519 omission that occurred within the scope of commission employment,
1520 duties or responsibilities, or that such person had a reasonable basis for
1521 believing occurred within the scope of commission employment, duties
1522 or responsibilities, provided the actual or alleged act, error or omission
1523 did not result from the intentional or wilful or wanton misconduct of
1524 such person.

1525 ARTICLE XI

1526 RULEMAKING

1527 (a) The commission shall exercise its rulemaking powers pursuant to
1528 the criteria set forth in this Article and the rules adopted thereunder.
1529 Rules and amendments shall become binding as of the date specified in
1530 each rule or amendment.

1531 (b) If a majority of the legislatures of the compact states rejects a rule,
1532 by enactment of a statute or resolution in the same manner used to adopt
1533 the compact, then such rule shall have no further force and effect in any
1534 compact state.

1535 (c) Rules, or amendments to the rules, shall be adopted at a regular
1536 or special meeting of the commission.

1537 (d) Prior to promulgation and adoption of a final rule or rules by the

1538 commission, and at least sixty days prior to the scheduled date of the
1539 meeting at which the rule will be considered and voted upon, the
1540 commission shall file a notice of proposed rulemaking as follows:

1541 (1) On the Internet web site of the commission; and

1542 (2) On the Internet web site of each compact state's psychology
1543 regulatory authority or the publication in which each state would
1544 otherwise publish proposed rules.

1545 (e) The notice of proposed rulemaking shall include the following:

1546 (1) The proposed time, date and location of the meeting in which the
1547 rule will be considered and voted upon;

1548 (2) The text of the proposed rule or amendment and the reason for
1549 the proposed rule;

1550 (3) A request for comments on the proposed rule from any interested
1551 person; and

1552 (4) The manner in which interested persons may submit to the
1553 commission (A) notice of their intention to attend the public hearing,
1554 and (B) written comments.

1555 (f) Prior to adoption of a proposed rule, the commission shall allow
1556 persons to submit written data, facts, opinions and arguments, which
1557 shall be made available to the public.

1558 (g) The commission shall grant an opportunity for a public hearing
1559 before it adopts a rule or amendment if a hearing is requested by the
1560 following:

1561 (1) At least twenty-five persons who submit written comments
1562 independently of each other;

1563 (2) A governmental subdivision or agency; or

1564 (3) A duly appointed person in an association that has at least twenty-

1565 five members.

1566 (h) If a hearing is held on the proposed rule or amendment, the
1567 commission shall publish the location, time and date of the scheduled
1568 public hearing.

1569 (1) All persons wishing to be heard at the hearing shall notify the
1570 executive director of the commission or other designated member in
1571 writing of their desire to appear and testify at the hearing not less than
1572 five business days prior to the scheduled date of the hearing.

1573 (2) Hearings shall be conducted in a manner providing each person
1574 who wishes to comment a fair and reasonable opportunity to comment
1575 orally or in writing.

1576 (3) No transcript of the hearing is required, unless a written request
1577 for a transcript is made, in which case the person requesting the
1578 transcript shall bear the cost of producing the transcript. A recording
1579 may be made in lieu of a transcript under the same terms and conditions
1580 as a transcript. The provisions of this subdivision shall not preclude the
1581 commission from making a transcript or recording of the hearing if it so
1582 chooses.

1583 (4) Nothing in this subsection shall be construed as requiring a
1584 separate hearing on each rule. Rules may be grouped for the
1585 convenience of the commission at hearings required under this
1586 subsection.

1587 (i) Following the scheduled hearing date, or by the close of business
1588 on the scheduled hearing date if the hearing was not held, the
1589 commission shall consider all written and oral comments received.

1590 (j) The commission shall, by majority vote of all members, take final
1591 action on the proposed rule and shall determine the effective date of the
1592 rule, if any, based on the rulemaking record and the full text of the rule.

1593 (k) If no written notice of intent to attend the public hearing by
1594 interested parties is received, the commission may proceed with

1595 promulgation of the proposed rule without a public hearing.

1596 (l) Upon determination that an emergency exists, the commission
1597 may consider and adopt an emergency rule without prior notice,
1598 opportunity for comment or hearing, provided the usual rulemaking
1599 procedures described in the compact and in this subsection shall be
1600 retroactively applied to the rule as soon as reasonably possible, in no
1601 event later than ninety days after the effective date of the rule. For the
1602 purposes of this subsection, "emergency rule" means a rule that shall be
1603 adopted immediately in order to:

1604 (1) Meet an imminent threat to public health, safety or welfare;

1605 (2) Prevent a loss of commission or compact state funds;

1606 (3) Meet a deadline for the promulgation of an administrative rule
1607 that is established by federal law or rule; or

1608 (4) Protect public health and safety.

1609 (m) The commission, or an authorized committee of the commission,
1610 may direct revisions to a previously adopted rule or amendment for
1611 purposes of correcting typographical errors, errors in format, errors in
1612 consistency or grammatical errors. Public notice of any revisions shall
1613 be posted on the Internet web site of the commission. The revision shall
1614 be subject to challenge by any person for a period of thirty days after
1615 posting. The revision may be challenged only on grounds that the
1616 revision results in a material change to a rule. A challenge shall be made
1617 in writing, and delivered to the chair of the commission prior to the end
1618 of the notice period. If no challenge is made, the revision shall take effect
1619 without further action. If the revision is challenged, the revision may not
1620 take effect without the approval of the commission.

1621 ARTICLE XII

1622 OVERSIGHT, DISPUTE RESOLUTION AND ENFORCEMENT

1623 (a) (1) The executive, legislative and judicial branches of state

1624 government in each compact state shall enforce the compact and take all
1625 actions necessary and appropriate to effectuate the compact's purposes
1626 and intent. The provisions of the compact and the rules promulgated
1627 under the compact shall have standing as statutory law.

1628 (2) All courts shall take judicial notice of the compact and the rules in
1629 any judicial or administrative proceeding in a compact state pertaining
1630 to the subject matter of the compact that may affect the powers,
1631 responsibilities or actions of the commission.

1632 (3) The commission shall be entitled to receive service of process in
1633 any such proceeding, and shall have standing to intervene in such
1634 proceeding for all purposes. Failure to provide service of process to the
1635 commission shall render a judgment or order void as to the commission,
1636 the compact or promulgated rules.

1637 (b) (1) If the commission determines that a compact state has
1638 defaulted in the performance of its obligations or responsibilities under
1639 the compact or the promulgated rules, the commission shall perform the
1640 following actions:

1641 (A) Provide written notice to the defaulting state and other compact
1642 states of the nature of the default, the proposed means of remedying the
1643 default or any other action to be taken by the commission; and

1644 (B) Provide remedial training and specific technical assistance
1645 regarding the default.

1646 (2) If a state in default fails to remedy the default, the defaulting state
1647 may be terminated from the compact upon an affirmative vote of a
1648 majority of the compact states, and all rights, privileges and benefits
1649 conferred by the compact shall be terminated on the effective date of
1650 termination of the defaulting state. A remedy of the default does not
1651 relieve the offending state of obligations or liabilities incurred during
1652 the period of default.

1653 (3) Termination of membership in the compact shall be imposed only
1654 after all other means of securing compliance have been exhausted.

1655 Notice of intent to suspend or terminate shall be submitted by the
1656 commission to the governor, the majority and minority leaders of the
1657 defaulting state's legislature, and each of the compact states.

1658 (4) A compact state that has been terminated shall be responsible for
1659 all assessments, obligations and liabilities incurred through the effective
1660 date of termination, including, but not limited to, obligations that extend
1661 beyond the effective date of termination.

1662 (5) The commission shall not bear any costs incurred by the state that
1663 is found to be in default or that has been terminated from the compact,
1664 unless agreed upon in writing between the commission and the
1665 defaulting state.

1666 (6) The defaulting state may appeal the action of the commission by
1667 petitioning the United States District Court for the State of Georgia or
1668 the federal district where the compact has its principal offices. The
1669 prevailing member shall be awarded all costs of such litigation,
1670 including, but not limited to, reasonable attorney's fees.

1671 (c) (1) Upon request by a compact state, the commission shall attempt
1672 to resolve disputes related to the compact that arise among compact
1673 states and between compact and noncompact states.

1674 (2) The commission shall promulgate a rule providing for both
1675 mediation and binding dispute resolution for disputes that arise before
1676 the commission.

1677 (d) (1) The commission, in the reasonable exercise of its discretion,
1678 shall enforce the provisions and rules of the compact.

1679 (2) By majority vote, the commission may initiate legal action in the
1680 United States District Court for the State of Georgia or the federal district
1681 where the compact has its principal offices against a compact state in
1682 default to enforce compliance with the provisions of the compact and its
1683 promulgated rules and bylaws. The relief sought may include both
1684 injunctive relief and damages. In the event judicial enforcement is
1685 necessary, the prevailing member shall be awarded all costs of such

1686 litigation, including, but not limited to, reasonable attorney's fees.

1687 (3) The remedies set forth in the compact shall not be the exclusive
1688 remedies of the commission. The commission may pursue any other
1689 remedies available under federal or state law.

1690 ARTICLE XIII

1691 DATE OF IMPLEMENTATION OF THE PSYCHOLOGY
1692 INTERJURISDICTIONAL COMPACT COMMISSION AND
1693 ASSOCIATED RULES, WITHDRAWAL AND AMENDMENTS

1694 (a) The compact shall come into effect on the date on which the
1695 compact is enacted into law in the seventh compact state. The provisions
1696 that become effective at such time shall be limited to the powers granted
1697 to the commission relating to assembly and the promulgation of rules.
1698 Thereafter, the commission shall meet and exercise rulemaking powers
1699 necessary to the implementation and administration of the compact.

1700 (b) Any state that joins the compact subsequent to the commission's
1701 initial adoption of the rules shall be subject to the rules as they exist on
1702 the date on which the compact becomes law in such state. Any rule that
1703 has been previously adopted by the commission shall have the full force
1704 and effect of law on the day the compact becomes law in such state.

1705 (c) Any compact state may withdraw from the compact by enacting a
1706 statute repealing the same.

1707 (1) A compact state's withdrawal shall not take effect until six months
1708 after enactment of the repealing statute.

1709 (2) Withdrawal shall not affect the continuing requirement of the
1710 withdrawing state's psychology regulatory authority to comply with the
1711 investigative and adverse action reporting requirements set forth in
1712 Article VII of this section prior to the effective date of withdrawal.

1713 (d) Nothing contained in the compact shall be construed to invalidate
1714 or prevent any psychology licensure agreement or other cooperative

1715 arrangement between a compact state and a noncompact state that does
1716 not conflict with the provisions of the compact.

1717 (e) The compact may be amended by the compact states. No
1718 amendment to the compact shall become effective and binding upon
1719 any compact state until it is enacted into the law of all compact states.

1720 ARTICLE XIV

1721 CONSTRUCTION AND SEVERABILITY

1722 The compact shall be liberally construed so as to effectuate the
1723 purposes thereof. If the compact is held contrary to the constitution of
1724 any state member of the compact, the compact shall remain in full force
1725 and effect as to the remaining compact states."

1726 Sec. 37. (*Effective July 1, 2022*) The sum of two million six hundred
1727 thousand dollars is appropriated to the Department of Children and
1728 Families from the General Fund, for the fiscal year ending June 30, 2023,
1729 to offset funds lost due to the prohibition on the use of Social Security
1730 disability benefits to cover the costs of care of children and youths in the
1731 care and custody of the Commissioner of Children and Families
1732 pursuant to section 25 of this act.

1733 Sec. 38. (*Effective from passage*) The sum of twenty million dollars is
1734 allocated, in accordance with the provisions of special act 21-1, from the
1735 federal funds designated for the state pursuant to the provisions of
1736 section 602 of Subtitle M of Title IX of the American Rescue Plan Act of
1737 2021, P.L. 117-2, as amended from time to time, to the Office of Early
1738 Childhood, for the fiscal year ending June 30, 2023, for emergency
1739 support grants for child care centers in the state.

1740 Sec. 39. (*Effective from passage*) The sum of one hundred sixty
1741 thousand dollars is appropriated to the Office of Early Childhood from
1742 the General Fund, for the fiscal year ending June 30, 2023, for technical
1743 assistance and business consulting services for child care centers in the
1744 state.

1745 Sec. 40. (*Effective from passage*) The sum of three million dollars is
1746 allocated, in accordance with the provisions of special act 21-1, from the
1747 federal funds designated for the state pursuant to the provisions of
1748 section 602 of Subtitle M of Title IX of the American Rescue Plan Act of
1749 2021, P.L. 117-2, as amended from time to time, to the Department of
1750 Mental Health and Addiction Services, for the fiscal year ending June
1751 30, 2023, to enhance mobile crisis services in accordance with the
1752 provisions of section 6 of this act.

1753 Sec. 41. (*Effective from passage*) The sum of three million dollars is
1754 allocated, in accordance with the provisions of special act 21-1, from the
1755 federal funds designated for the state pursuant to the provisions of
1756 section 602 of Subtitle M of Title IX of the American Rescue Plan Act of
1757 2021, P.L. 117-2, as amended from time to time, to the Department of
1758 Mental Health and Addiction Services, for the fiscal year ending June
1759 30, 2024, to enhance mobile crisis services in accordance with the
1760 provisions of section 6 of this act.

1761 Sec. 42. (*Effective from passage*) The sum of one million dollars is
1762 allocated, in accordance with the provisions of special act 21-1, from the
1763 federal funds designated for the state pursuant to the provisions of
1764 section 602 of Subtitle M of Title IX of the American Rescue Plan Act of
1765 2021, P.L. 117-2, as amended from time to time, to the Department of
1766 Children and Families, for the fiscal year ending June 30, 2023, for the
1767 purpose of administering the Social Determinants of Mental Health
1768 Fund pursuant to section 7 of this act.

1769 Sec. 43. (*Effective from passage*) The sum of one million dollars is
1770 allocated, in accordance with the provisions of special act 21-1, from the
1771 federal funds designated for the state pursuant to the provisions of
1772 section 602 of Subtitle M of Title IX of the American Rescue Plan Act of
1773 2021, P.L. 117-2, as amended from time to time, to the Department of
1774 Children and Families, for the fiscal year ending June 30, 2024, for the
1775 purpose of administering the Social Determinants of Mental Health
1776 Fund pursuant to section 7 of this act.

1777 Sec. 44. (*Effective July 1, 2022*) The sum of thirty thousand dollars is

1778 appropriated to the Department of Education from the General Fund,
 1779 for the fiscal year ending June 30, 2023, for the purpose of hiring a full-
 1780 time employee to administer the minority teacher candidate scholarship
 1781 program established pursuant to section 8 of this act.

1782 Sec. 45. (*Effective from passage*) The sum of three million ninety-three
 1783 thousand nine hundred seventy-three dollars is allocated, in accordance
 1784 with the provisions of special act 21-1, from the federal funds designated
 1785 for the state pursuant to the provisions of section 602 of Subtitle M of
 1786 Title IX of the American Rescue Plan Act of 2021, P.L. 117-2, as amended
 1787 from time to time, to the Department of Children and Families, for the
 1788 fiscal year ending June 30, 2023, for youth service bureau enhancement.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2022</i>	10-16q(b)(1)
Sec. 2	<i>July 1, 2022</i>	10-16p(l)
Sec. 3	<i>July 1, 2022</i>	8-210(b)
Sec. 4	<i>July 1, 2022</i>	New section
Sec. 5	<i>July 1, 2022</i>	10-21k
Sec. 6	<i>July 1, 2022</i>	New section
Sec. 7	<i>July 1, 2022</i>	New section
Sec. 8	<i>July 1, 2022</i>	New section
Sec. 9	<i>July 1, 2022</i>	New section
Sec. 10	<i>from passage</i>	New section
Sec. 11	<i>from passage</i>	New section
Sec. 12	<i>September 1, 2022</i>	18-69e
Sec. 13	<i>July 1, 2022</i>	New section
Sec. 14	<i>July 1, 2022</i>	New section
Sec. 15	<i>September 1, 2022</i>	8-359a
Sec. 16	<i>from passage</i>	12-412(122)
Sec. 17	<i>from passage</i>	New section
Sec. 18	<i>July 1, 2022</i>	New section
Sec. 19	<i>July 1, 2022</i>	19a-77(a)(3)
Sec. 20	<i>July 1, 2022</i>	10-16r
Sec. 21	<i>July 1, 2022</i>	New section

Sec. 22	<i>October 1, 2022, and applicable to assessment years commencing on or after October 1, 2022</i>	New section
Sec. 23	<i>July 1, 2022</i>	19a-79(a)
Sec. 24	<i>July 1, 2022</i>	New section
Sec. 25	<i>July 1, 2022</i>	New section
Sec. 26	<i>July 1, 2022</i>	New section
Sec. 27	<i>July 1, 2022</i>	New section
Sec. 28	<i>July 1, 2022</i>	New section
Sec. 29	<i>July 1, 2022</i>	New section
Sec. 30	<i>October 1, 2022</i>	New section
Sec. 31	<i>July 1, 2022</i>	New section
Sec. 32	<i>from passage</i>	New section
Sec. 33	<i>from passage</i>	New section
Sec. 34	<i>from passage</i>	New section
Sec. 35	<i>July 1, 2022</i>	17b-28e
Sec. 36	<i>October 1, 2022</i>	New section
Sec. 37	<i>July 1, 2022</i>	New section
Sec. 38	<i>from passage</i>	New section
Sec. 39	<i>from passage</i>	New section
Sec. 40	<i>from passage</i>	New section
Sec. 41	<i>from passage</i>	New section
Sec. 42	<i>from passage</i>	New section
Sec. 43	<i>from passage</i>	New section
Sec. 44	<i>July 1, 2022</i>	New section
Sec. 45	<i>from passage</i>	New section

Statement of Legislative Commissioners:

In Section 17, "subdivision (1) of this subsection" was changed to "this section" for accuracy; in Section 19(a)(3)(C), "provider's children" was changed to "provider's own children" for clarity; and in Section 45, "nine hundred seventy-three million dollars" was changed to "nine hundred seventy-three dollars", for accuracy.

KID *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: See Below

Explanation

The bill results in increased costs to the state and towns in FY 23 and FY 24, most notably: (1) \$202 - \$210 million across both years due to increasing child care rates for providers and their employees, (2) \$13.2 million to expand access to DCF mobile crisis services, (3) up to \$1 million to evaluate the impact of social media and mobile phone use on students' mental health, and (4) \$2.8 million in increased General Fund appropriations and \$31.1 million in increased state fiscal recovery American Rescue Plan Act (ARPA) allocations

The bill also results in revenue losses associated with: (1) allowing municipalities to abate up to 100% of property taxes due for child care centers or child care group homes, and (2) prohibiting DCF from using certain benefits towards the cost of a child's care (resulting in a General Fund loss of \$2.6 million to \$3.2 million annually).

The various impacts to the state and towns are described by relevant sections, below.

Section 1 results in a cost of \$54.7 million to the Office of Early Childhood (OEC) by increasing the maximum annual, per child cost for School Readiness and child day care center seats from \$9,027 to \$14,500. This assumes the increase is applied to approximately 7,800 full-day spaces. Town based providers will receive a corresponding revenue gain associated with the increased rate. Section 2 directs any increase in

the full-day rate above \$14,210 to be used to support direct teacher and caretaker salaries.

Section 3 results in a cost to OEC of \$9.1 million annually due to increasing the annual infant and toddler full-time rate at child day care centers from approximately \$10,000 to \$16,000 per child. This assumes the increase is applied to approximately 1,520 spaces for children under age three. Beginning in FY 24, any increase above the FY 23 rate is directed to increase the salaries of educators employed at child care centers.

Section 4 results in a cost to OEC of between \$37 million and \$41 million in both FY 23 and FY 24 associated with a wage supplement grant program for employees of child-care service providers and early childhood education programs. The wage supplement grant program would increase the hourly wage by \$1 per hour for 19,000 to 21,000 employees. OEC would incur additional staffing costs of approximately \$164,000 (and associated fringe benefits of \$66,500 in both years) for two fiscal staff to support the administration of the program.

Section 5 requires the State Department of Education (SDE) to administer a “Pipeline for Connecticut’s Future” program. This would result in an additional state cost of approximately \$126,477, annually. SDE does not currently have staff available to administer the program and would require one full-time consultant with an annual salary of approximately \$90,000 and corresponding fringe benefits of \$36,477, in order to meet the requirements contained within the bill.

Section 6 results in a cost to the Department of Children and Families (DCF) associated with making mobile crisis response services available 24/7. Based on current efforts, this expansion is anticipated to cost \$6.6 million in both FY 23 and FY 24 and \$8 million annually thereafter.

Section 7 establishes the Social Determinants of Mental Health Fund from which DCF will provide grants to assist families in covering the cost of mental health services and treatment for their children. Sections 42 and 43 allocate \$1 million in both FY 23 and FY 24 in ARPA funds to

administer the Social Determinants of Mental Health Fund.

Sections 8 and 9 require SDE to establish mental health plans for student athletes. This would result in an additional state cost of approximately \$63,239, annually. SDE does not currently have staff available to develop and assist local and regional board of education with mental health plans for student athletes, and would require one part-time consultant with an annual salary of approximately \$45,000 and corresponding fringe benefits of \$18,239 in order to meet the requirements contained within the bill. Additionally, the bill requires beginning in FY 24, local and regional boards of education to implement the provisions of the mental health plans. This could result in additional costs to local and regional schools associated with expanded mental health services to student athletes. The scope of the costs would be dependent upon the provisions of the plan, the size of the district, and the additional services provided to students.

Section 10 results in a cost to DCF of approximately \$160,000 to conduct an instructional train-the-trainer program to enable participants to provide training in adolescent screening, brief intervention and referral to treatment (SBIRT). DCF must offer the training at least four times per year, free of charge, to employees of local health departments, district departments of health, youth service bureaus, municipalities, municipal or volunteer fire departments, local police departments and local or regional boards of education. To the extent additional trainings occur, DCF would incur additional costs. The bill also requires local health departments to offer free trainings to their employees or members of the public, resulting in associated training costs to towns.

Sections 12-17 require the distribution of free menstrual products in various settings, following the guidelines required to be developed by the Department of Public Health (DPH) under section 11. Sections 13 and 14 result in the following costs:

Section 13 requires local and regional boards of education to offer free menstrual products, and results in annual costs beginning in FY

2ww23. Most local and regional school districts currently offer free menstrual products through the nurses office, with annual costs ranging from approximately \$250 to \$1,000. If local and regional school districts are required to install dispensers in restrooms this would result in additional costs. It is estimated that on average a dispenser costs between \$200-\$400. If any donations or grants are available to meet the bill's requirements, the costs to the districts may be lower.

Section 14 requires each public college or university to offer free menstrual products at one location per campus, and results in annual costs to the constituent units beginning in FY 23. The costs to the University of Connecticut (UConn) and UConn Health Center are anticipated to be minimal, based on a temporary pilot at two UConn campuses. An annual cost of less than \$10,000 to the Board of Regents (BOR) across all institutions is expected, provided the bill's provisions are implemented through a dispenser method or a single location that is not a campus food pantry. Most of the 16 BOR institutions with student campuses currently offer free menstrual products in at least one such location, with annual costs at a few ranging from approximately \$250 to \$1,000. If any donations or grants are available to meet the bill's requirements, the costs to the constituent units may be lower.

Section 18 requires UConn to evaluate and report on the impact of social media and mobile phone use on students' mental health, which is anticipated to result in a total cost of up to \$972,394 (\$665,929 in FY 23 and \$306,465 in FY 24). It is expected that carrying out the mandated research and report requires two professors with an average annual salary of \$90,711, and two graduate students, each with a salary of \$62,729. Anticipated personnel costs by year are: (1) \$612,929 in FY 23 (wage costs of \$306,879 and fringe benefits costs of \$306,050), and (2) \$306,465 in FY 24 for half-year costs, because the report is due January 1, 2024.¹ Other expenses totaling \$53,000 in FY 23 are expected for travel

¹ The fringe benefit costs for employees funded out of other appropriated funds are budgeted within the fringe benefit account of those funds, as opposed to the fringe benefit accounts within the Office of the State Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes for other appropriated fund employees is 99.73% of payroll in FY 23.

costs, study participation incentives, equipment, and similar aspects of a research project.

These personnel and other costs may be funded by either the General Fund or other UConn revenues (e.g., tuition). If wage costs are funded through the General Fund, then the fringe benefits costs will be incurred within the Office of the State Comptroller.

Section 19, which makes changes to family child care home staffing and enrollment, has no fiscal impact as it does not impact subsidy eligibility requirements.

Section 20 requires local school readiness councils to conduct a needs assessment for early childhood education for children and families in the community, as needed. Following such assessment, councils may convert unused School Readiness spaces to infant and toddler spaces if the cost for conversion does not exceed the per child cost for infant and toddler spaces for state-funded child care centers. Towns could incur costs associated with conducting a needs assessment. To the extent an assessment shows unused School Readiness spaces and local school readiness councils choose to convert such spaces to infant and toddler spaces, the state could forgo savings associated with unused School Readiness seats.

Section 21 could result in a cost to local and regional boards of education to the extent they hire rather than designate an existing employee to serve as the district's family care coordinator.

Section 22 allows municipalities to abate up to 100% of property taxes due for any property or portion of property used as a child care center or child care group home.

The revenue loss to a municipality would vary based on the amount of property tax abated, but could be significant (in excess of \$1 million) in a municipality with a high number of such taxable facilities. There are approximately 1,400 child care centers and 1,900 family day care homes

licensed in the state. It is not known which of these facilities: 1) currently pay property taxes directly by virtue of owning the building they operate in, 2) pay property taxes indirectly through leases with commercial real estate owners, or 3) do not pay property taxes at all due to an association with a tax exempt organization, such as a religious institution or private university.

Section 24 could result in a cost to DCF to provide support staff to the Children's Behavioral Health Cabinet established by the bill. The extent of the potential cost is dependent on the scope of work of the cabinet, which must meet at least quarterly. Cabinet members are not compensated.

Section 25 prohibits DCF from using a child's Social Security Disability Benefits (SSDI) to reduce their cost of care, resulting in a revenue loss to DCF of approximately \$2.6 million to \$3.2 million annually. Section 37 appropriates \$2.6 million from the General Fund to offset losses associated with the prohibition. It should be noted that section 25 results in a revenue loss while section 37 increases appropriations.

Section 26 results in a cost to the Department of Social Services (DSS) to establish a pilot grant program to expand behavioral health care offered to children at federally qualified health centers (FQHCs). The bill requires DSS, within available appropriations, to provide a 50% match for the cost of hiring licensed social workers to provide counseling and other services to children receiving primary health care at such health centers. The extent of the cost depends on the scope of the program and available funding.

Section 31 results in a potential cost of up to \$50,000 to the Department of Housing (DOH) to adopt regulations, as the agency has required legal services to adopt regulations in the past. The section 1) establishes the Transitional Housing for Youths Experiencing Homelessness Account as a separate, nonlapsing General Fund account, and 2) directs DOH to provide grants from the account for transitional housing for homeless persons under age 21; however, the bill does not

provide any funding for the program. Should the program be funded, DOH is anticipated to incur administration costs of about 10% of the grant funding total, annually.

Section 32 requires the Department of Revenue Services to study options for establishing a tax credit against the personal income tax for taxpayers with dependent children enrolled in child care and report its findings. This does not result in any fiscal impact to the state or municipalities as the agency can accomplish this requirement without the need for additional resources.

Section 34, which establishes a task force to study the comprehensive needs of children in the state, has no fiscal impact as PA 17-236 prohibits transportation allowances for task force members. The task force terminates by 1/1/23.

Section 35 results in a cost to DSS by requiring Medicaid coverage for services provided by licensed master social workers working under the supervision of licensed psychologists or licensed clinical social workers. The extent of the cost depends on the Medicaid rate for such services and associated utilization.

Section 36, which enters Connecticut into the Psychology Interjurisdictional Compact and provides a process authorizing psychologists to practice by (1) telehealth and (2) temporary in-person, face-to-face services across state boundaries, without the psychologist having to be licensed in each state, is not anticipated to result in a fiscal impact.

Sections 37 - 45 appropriate General Funds (GF) and allocate State Fiscal Recovery- ARPA funding for various purposes as outlined in the table below (\$ in millions):

Sec. #	Fund	FY 23 \$	FY 24 \$	Purpose
37	GF	2.6	-	Offset losses to DCF in Sec 25
38	ARPA	20.0	-	Emergency support grants for child care centers, distributed by OEC
39	GF	0.2	-	Technical assistance and business consulting services for child care centers via OEC
40-41	ARPA	3.0	3.0	Enhance DMHAS mobile crisis services
42-43	ARPA	1.0	1.0	Administration of the Social Determinants of Mental Health Fund by DCF
44	GF	0.03	-	Full-time SDE employee to administer a minority teacher candidate scholarship program
45	ARPA	3.1	-	Youth service bureau enhancement via DCF, with corresponding increase to affiliated towns

The bill makes various other changes that are technical or conforming in nature, do not apply to the state or municipalities, or can be accomplished with current agency expertise, and therefore have no fiscal impact.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

OLR Bill Analysis

SB 2

AN ACT EXPANDING PRESCHOOL AND MENTAL AND BEHAVIORAL SERVICES FOR CHILDREN.

TABLE OF CONTENTS:

[§§ 1-3 — SCHOOL READINESS GRANTS](#)

Raises the per child cost cap for the school readiness program beginning FY 23; increases two early childhood grants related to the per child cost cap; and increases the amounts from the grants that must be used exclusively for staff salary increases.

[§ 4 — OEC WAGE SUPPLEMENT GRANT PROGRAM](#)

Creates a wage supplement grant of \$1 an hour for employees of child care services providers and early childhood education programs; requires OEC to develop a policy for, and to administer, the grant program

[§ 5 — PIPELINE FOR CONNECTICUT'S FUTURE PROGRAM](#)

Requires SDE, collaborating with DOL, to administer the Pipeline for Connecticut's Future Program

[§ 6 — DCF MOBILE CRISIS RESPONSE SERVICES](#)

Requires DCF to make mobile crisis response services available to the public 24 hours a day, seven days a week

[§ 7 — SOCIAL DETERMINANTS OF MENTAL HEALTH FUND](#)

Establishes a "Social Determinants of Mental Health Fund" and requires the DCF commissioner to use the funds to assist families in covering the costs of mental health services and treatment for their children

[§§ 8-9 — MENTAL HEALTH PLAN FOR STUDENT ATHLETES](#)

Requires SDE to establish, and boards of education to implement, a mental health plan for student athletes to raise awareness about available resources

[§ 10 — DCF INSTRUCTIONAL PROGRAM](#)

Requires DCF to conduct an instructional program using a training model that enables participants to provide adolescent screening, brief intervention, and referral to treatment training to others

[BACKGROUND](#)

[§§ 11-17 — PROVISION OF FREE MENSTRUAL PRODUCTS](#)

Requires (1) certain government agencies and public and private organizations to provide free menstrual products to the individuals they serve and (2) DPH to set guidelines on how to do this

[§ 18 — UCONN STUDY – SOCIAL MEDIA AND TELEPHONE IMPACT](#)

Requires UConn to study the impact of social media and mobile telephone use on the mental health of K-12 students

[§ 19 — FAMILY CHILD CARE HOME STAFFING AND ENROLLMENT](#)

[§ 20 — EARLY CHILDHOOD EDUCATION NEEDS ASSESSMENTS](#)

Allows local and regional school readiness councils to convert surplus unused school readiness spaces to infant and toddler spaces following a local needs assessment and requires school readiness councils to conduct needs assessments as necessary

[BACKGROUND](#)

[§ 21 — FAMILY CARE COORDINATORS](#)

Requires local and regional boards of education to hire or designate an existing employee to serve as the district's family care coordinator

[§ 22 — CHILD CARE CENTER TAX ABATEMENT](#)

Authorizes municipalities to establish a property tax abatements for properties used for child care centers, group child care homes, or family child care homes

[§ 23 — OEC REGULATIONS ON PARENTAL NOTIFICATION](#)

Requires the OEC commissioner to adopt regulations requiring child facilities to notify parents about certain incidents resulting in a child's injury or illness

[BACKGROUND](#)

[§ 24 — CHILDREN'S BEHAVIORAL HEALTH CABINET](#)

Establishes a 15-member cabinet to assess children's behavioral health services in the state

[§§ 25 & 37 — DCF COST OFFSET](#)

Prohibits DCF from using a child's Social Security disability benefits to offset the cost of their care while in DCF care and custody and appropriates \$2.6million to DCF to offset funds lost due to this prohibition

[§ 26 — DSS PILOT PROGRAM EXPANDING BEHAVIORAL HEALTH CARE FOR CERTAIN CHILDREN](#)

Requires DSS, in consultation with DPH, to establish a pilot program to expand behavioral health care to children at federally qualified health centers

[§§ 27-29 — SAFE STORAGE OF PRESCRIPTION DRUGS AND CANNABIS](#)

Requires (1) DCP, by December 1, 2022, to develop documents on the safe storage and disposal of opioid drugs and cannabis and cannabis products and, by December 15, 2022, post the documents on the department's website; and (2) pharmacies and cannabis retailers and hybrid retailers, by January 1, 2023, to post notices about these documents on their premises

[BACKGROUND](#)

[§ 30 — HOSPICE DISPOSAL OF CONTROLLED SUBSTANCE](#)

Requires certain hospice and hospice care programs to dispose of any unconsumed (presumably) controlled substance they dispensed or administered to a terminally ill person

§ 31 — TRANSITIONAL HOUSING GRANTS FOR HOMELESS YOUTH

Establishes a "transitional housing for youths experiencing homelessness account" and requires DOH to use the funds to provide grants for transitional housing for individuals under age 21 experiencing homelessness

§ 32 — CHILD CARE TAX CREDIT STUDY

Requires DRS to conduct a study to identify options for establishing a personal income tax credit for taxpayers with dependent children enrolled in child care

§ 33 — FINANCIAL ASSISTANCE FOR CHILD CARE FACILITY EMPLOYEES' OUT-OF-POCKET MEDICAL COSTS

Requires DSS, in consultation with the State Comptroller, to conduct a study to identify ways the state can financially assist child care facility employees with out-of-pocket medical costs

§ 34 — TASK FORCE TO STUDY CHILDREN'S NEEDS

Reconvenes a 25-member task force to continue to study the (1) comprehensive needs of children in the state and (2) extent to which educators, community members, and local and state agencies are meeting them

§ 35 — MEDICAID STATE PLAN EXPANSION

Expands the Medicaid state plan to include services provided by certain licensed master social workers

§ 36 — PSYCHOLOGY INTERJURISDICTIONAL COMPACT

Enters Connecticut into the Psychology Interjurisdictional Compact, which provides a process authorizing psychologists to practice by (1) telehealth and (2) temporary in-person, face-to-face services across state boundaries, without the psychologist having to be licensed in each state

§§ 38, 40-43 & 45 — AMERICAN RESCUE PLAN ACT OF 2021 ALLOCATIONS TO OEC, DMHAS, AND DCF

Allocates funds from federal COVID-19 relief funds for emergency support grants to state child care centers to OEC for emergency support grants to state child care workers; DMHAS to enhance mobile crisis services, and DCF (1) to administer the Social Determinants of Mental Health Fund and (2) for youth service bureau enhancement

BACKGROUND**§ 39 — CHILD CARE CENTER TECHNICAL ASSISTANCE AND BUSINESS CONSULTING**

Appropriates \$160,000 to OEC for technical assistance and business consulting services for child care centers

§ 44 — MINORITY TEACHER SCHOLARSHIP PROGRAM

Appropriates \$30,000 to SDE for the hiring of a full-time employee to administer the minority teacher candidate scholarship program

§§ 1-3 — SCHOOL READINESS GRANTS

Raises the per child cost cap for the school readiness program beginning FY 23; increases two early childhood grants related to the per child cost cap; and increases the amounts from the grants that must be used exclusively for staff salary increases.

The bill raises the per child cost cap for the OEC school readiness program and increases two related grants and increases the amounts from the grants that must be used exclusively for staff salary increases.

School Readiness Per Child Cost (§ 1)

Beginning with FY 23 and for each year after, the bill raises the cap for the per child cost of the OEC school readiness program from current law's \$9,027 to \$14,500. The per child cost cap is used in two school readiness grants changed under the bill.

School Readiness Grants (§ 2)

The bill increases the amount, from \$100 to \$290, that programs must use for salary increases.

Under the bill, beginning in FY 23, state-licensed school readiness programs that operate full-day, year-round programs and get school readiness per-pupil state grants must use any grant amount over \$14,210 per child only to increase the salary of people directly responsible for teaching or caring for children in school readiness program classrooms. Under current law, this amount is \$8,927.

Under current law, the difference in the cost (\$9,027) and the grant threshold amount that anything above which must be used for salary increases (\$8,927) is \$100. Under the bill, the difference between the cost (\$14,500) and the threshold amount for salary increases (\$14,210) is \$290.

By law, a school readiness program is a nonreligious, state-funded program that provides a developmentally appropriate learning experience for children ages 3 to 5 who are too young to enroll in kindergarten (CGS § 10-16p).

Grants for Child Care Centers for Disadvantaged Children (§ 3)

The bill changes certain factors in state financial assistance for state-licensed child care centers for disadvantaged children. By law the state, through the OEC commissioner, can enter into contracts with municipalities, human resource development agencies, or nonprofit corporations for state financial assistance (i.e., grants) for developing

and operating these centers.

Current law requires that the contracts provide for a state grant for:

1. part of the program's cost, as determined by the OEC commissioner, if the program is not federally assisted;
2. half the amount by which the program's net cost, as approved by the commissioner, exceeds its federal grant; or
3. at least equal to the per child cost established in state law (§ 1) for each child ages 3 to 5, who is not yet eligible to enroll in school.

The act requires that the third state grant option, the per child cost grant, be in an amount that is at least equal to the per child cost that is raised in the bill (§ 1) to \$14,500. The bill also creates a separate \$16,000 grant amount for children age 3 and under who are in toddler or infant care and not in a preschool program.

Additionally, the bill makes changes to the law regarding how part of the grants must be used for salary increases.

Beginning in FY 20 and each year after, current law requires that any state financial assistance for these centers received under the third state grant option that exceeds the funding the center received in FY 19 be used exclusively to increase the salaries of educators at the centers. The bill provides the same mechanism, but requires it be applied starting in FY 24 using the funding received in FY 23, and each year after.

EFFECTIVE DATE: July 1, 2022

§ 4 — OEC WAGE SUPPLEMENT GRANT PROGRAM

Creates a wage supplement grant of \$1 an hour for employees of child care services providers and early childhood education programs; requires OEC to develop a policy for, and to administer, the grant program

The bill requires OEC to administer a new wage supplement grant program for FYs 23 and 24 for employees of child care services providers and early childhood education programs. Grants under the program must be calculated to increase each employee's hourly salary by \$1.

Under the bill, “child care services providers” are:

1. the employers of a child care facility’s employees;
2. family child care providers; and
3. people who provide child care services under the Care 4 Kids child care subsidy program, excluding providers who provide these services only to children to whom they are related and who operate without an OEC child care services license.

The bill defines “child care facilities” as:

1. child care centers (i.e., a program of supplementary care for more than 12 children outside their homes),
2. group child care homes (i.e., program of supplementary care (a) for not less than seven or more than 12 children or (b) that meets the definition of a family child care home (generally for six or fewer children) and does not operate from a private family home);
3. family child care home (generally for six or fewer children, including the provider’s own children who are not in school full-time, and operated from a private family home) and
4. Care 4 Kids child care service providers.

Care 4 Kids is a child care subsidy program for low and moderate income families.

The bill defines “early childhood education program” as any privately operated or state-funded preschool program, including school readiness programs as defined in state law.

Policy

By October 1, 2022, the bill requires the OEC commissioner to develop a policy to administer the grant program. For FYs 23 and 24, the commissioner must pay the grants to the services providers and

program operators and, in turn, the providers and operators must distribute the funds to their employees in accordance with the OEC policy.

The policy must include program eligibility requirements, the program registration process, the grant distribution requirements, and any other requirements the commissioner deems necessary.

Registration

The bill requires each child care services provider and early childhood education program operator to register, at the time and in the way the OEC commissioner prescribes, to receive a grant under the program. Upon registration, a provider or operator must give any information OEC requires, according to the policy developed under the bill.

EFFECTIVE DATE: July 1, 2022

§ 5 — PIPELINE FOR CONNECTICUT'S FUTURE PROGRAM

Requires SDE, collaborating with DOL, to administer the Pipeline for Connecticut's Future Program

Current law allows local or regional boards of education to set up a "Pipeline for Connecticut's Future" program with local business to create onsite student training opportunities for course credit. The bill instead requires SDE, in collaboration with DOL, to administer this program. Specifically, it requires SDE to incentivize boards of education to participate in the program and help them establish business partnerships for the program.

Under the bill, SDE must help boards of education enhance existing partnerships or make new ones with child care providers and early childhood education programs, as well as partnerships with more fields, such as manufacturing, computer programming, or culinary arts, and one or more local businesses, to offer a pathways program. This program must:

1. help students obtain occupational licenses, participate in

- apprenticeship opportunities, and gain immediate job skills;
2. provide industry-specific class time and cooperative work placements, onsite and apprenticeship training, and course credit and occupational licenses to students upon completion; and
 3. be a pathways program in early childhood care and education and any additional fields that may lead to a diploma, credential, certificate, or license upon graduation, such as manufacturing, computer programming, or the culinary arts.

Additionally, SDE must provide incentives to boards of education for establishing these partnerships.

EFFECTIVE DATE: July 1, 2022

§ 6 — DCF MOBILE CRISIS RESPONSE SERVICES

Requires DCF to make mobile crisis response services available to the public 24 hours a day, seven days a week

The bill requires, for FY 23, and each year after, DCF to make mobile crisis response services available to the public 24 hours a day, seven days a week.

The bill also allocates \$3 million, for FYs 23-24, to DMHAS to enhance mobile crisis services, from the federal funds the state received pursuant to the American Rescue Plan Act of 2021 (P.L. 117-2)(see §§ 40-41).

EFFECTIVE DATE: July 1, 2022

§ 7 — SOCIAL DETERMINANTS OF MENTAL HEALTH FUND

Establishes a "Social Determinants of Mental Health Fund" and requires the DCF commissioner to use the funds to assist families in covering the costs of mental health services and treatment for their children

The bill creates a "Social Determinants of Mental Health Fund" as a separate, nonlapsing General Fund account that must contain any money the law requires to be deposited into it. The DCF commissioner (1) must use the funds to help families cover the cost of mental health services and treatment for their children and (2) can accept federal funds or private grants or gifts to do so.

The bill requires the DCF commissioner to set eligibility criteria for families to receive assistance based on social determinants of health, with the goal of reducing racial, ethnic, gender, and socioeconomic mental health disparities. Under the bill, social determinants of mental health include discrimination and social exclusion, adverse early life experiences, low educational attainment, poor educational quality and educational inequality, poverty, income inequality and neighborhood deprivation, food insecurity, unemployment, underemployment and job insecurity, poor housing quality and housing instability, impact of climate change, adverse features of the built environment, and poor access to health care.

The bill also allocates \$1 million, for FYs 23-24, to DCF to administer the fund from the federal funds the state received pursuant to the American Rescue Plan Act of 2021 (P.L. 117-2) (see §§ 42-43):

EFFECTIVE DATE: July 1, 2022

§§ 8-9 — MENTAL HEALTH PLAN FOR STUDENT ATHLETES

Requires SDE to establish, and boards of education to implement, a mental health plan for student athletes to raise awareness about available resources

Under the bill, SDE must establish a mental health plan for student athletes in collaboration with the intramural and interscholastic athletics governing authority. (A local or regional board of education governs its own intramural athletics. The Connecticut Interscholastic Athletics Conference (CIAC), a private nonprofit organization, governs high school interscholastic athletics.)

The plan must be made available to local and regional boards of education to raise awareness about available mental health resources for student athletes, and all boards of education must implement it beginning in the 2023-24 school year. SDE must also post the plan on its website and provide technical assistance to boards of education implementing the plan.

The plan must cover:

1. access to the school district's mental health services team,
2. screening and recognizing appropriate referrals for student athletes,
3. communication among mental health services team members,
4. student athlete medication management,
5. crisis intervention services,
6. mitigation of student athletes' risk, and
7. transition care for student athletes leaving athletics due to graduation, dismissal, or suspension.

EFFECTIVE DATE: July 1, 2022

§ 10 — DCF INSTRUCTIONAL PROGRAM

Requires DCF to conduct an instructional program using a training model that enables participants to provide adolescent screening, brief intervention, and referral to treatment training to others

The bill requires DCF to conduct an instructional program using a training model that enables participants to provide adolescent screening, brief intervention, and referral to treatment training to other people after they complete the program. DCF must offer the program to employees of:

1. local or district health departments,
2. youth service bureaus,
3. municipalities,
4. paid municipal or volunteer fire departments,
5. local police departments, and
6. local or regional boards of education.

DCF must conduct the instructional program at least four times a

year, at no charge to participants, and may conduct each session in a different region of the state during the year.

The bill (1) requires local health departments to offer free training in adolescent screening, brief intervention, and referral to treatment to their employees or members of the public and (2) allows district health departments, youth service bureaus, municipalities, paid municipal or volunteer fire departments, local police departments, or boards of education to provide these trainings. The employee providing the instructional program must have participated in the program conducted by DCF.

EFFECTIVE DATE: Upon passage

BACKGROUND

Related Bill

sHB 5244 (§ 4), reported favorably by the Children's Committee, contains an identical provision requiring DCF to conduct an instructional program that teaches participants how to provide adolescent screening, brief intervention, and referral to treatment training to other individuals.

§§ 11-17 — PROVISION OF FREE MENSTRUAL PRODUCTS

Requires (1) certain government agencies and public and private organizations to provide free menstrual products to the individuals they serve and (2) DPH to set guidelines on how to do this

This bill requires the Department of Public Health (DPH) commissioner, by July 1, 2022, to (1) set guidelines on how free menstrual products (i.e., tampons and sanitary napkins) may be provided without stigmatizing the individuals requesting or seeking them and (2) post the guidelines on the department's website (§ 11).

The bill also requires certain government agencies and public or private organizations to provide free menstrual products to the individuals they serve without stigmatizing them in accordance with the DPH guidelines. Under the bill, the agencies and organizations must provide free menstrual products as follows:

1. as is currently law, York Correctional Institution, to inmates upon request (§ 12);
2. local and regional boards of education, in restrooms that are accessible to students, beginning with the 2022-2023 school year (§ 13);
3. public higher education institutions, in at least one designated and accessible central location on each campus and they must post notice of the location on their websites (§ 14);
4. public or private homeless shelters that receive grants from the housing commissioner, in each restroom that is accessible to residents (§ 15); and
5. domestic violence emergency shelters, in each restroom that is accessible to residents (§ 17).

The bill allows the Department of Corrections (DOC), local and regional boards of education, public institutions of higher education, and homeless and domestic violence shelters to (1) accept donations of menstrual products and grants from any source to purchase menstrual products and (2) partner with a nonprofit or community-based organization to carry out the bill's requirements.

It also makes a technical change by replacing the term "feminine hygiene" with the term "menstrual" throughout the statutes (§§ 12 & 16).

EFFECTIVE DATE: September 1, 2022, except the provisions (1) regarding the DPH guidelines and one technical change are effective upon passage and (2) on the local and regional boards of education and the public higher education institutions provision of free menstrual products are effective July 1, 2022.

§ 18 — UCONN STUDY – SOCIAL MEDIA AND TELEPHONE IMPACT

Requires UConn to study the impact of social media and mobile telephone use on the mental health of K-12 students

The bill requires UCONN's Neag School of Education to (1) study and evaluate the impact of social media and mobile telephone usage on a student's mental health from kindergarten through grade 12, and (2) by January 1, 2024, report its findings and any recommendations to the Children and Public Health committees.

Under the bill, the study must include how it impacts the student's educational experience and the school's climate.

EFFECTIVE DATE: July 1, 2022

§ 19 — FAMILY CHILD CARE HOME STAFFING AND ENROLLMENT

Requires family child care homes to employ an OEC-approved assistant to care for more than six and up to nine children year round rather than only during the summer and for children that are not the provider's own children; allows all of a family child care home provider's own children to attend during any time of year

Under current law, a family child care home may care for up to six children, including the provider's own children who are not in school full time, plus three additional children during the regular school year who are in school full time. However, if the provider has more than three children who are in school full time, then all of the provider's children may attend.

During the summer months when school is not in session, current law requires the family child care home to employ an OEC-approved assistant or substitute staff member for up to three additional school-aged children beyond the six to attend, including the provider's own children. However, currently, additional staff is not required if all the additional children are the provider's own.

The bill maintains the base maximum number of enrolled children at six throughout the year, including the provider's own children who are not enrolled in school full time. However, the bill requires the employment of an OEC-approved assistant or substitute at all times of the year, rather than only in the summer as under current law, to enroll up to three more children, for a maximum total of nine. It also allows the three additional children to be any mix of ages, rather than specifying that they must be enrolled in school full time as required

under current law. (It is unclear whether the assistant or substitute staff member must be present in addition to and simultaneously with the provider.)

Additionally, the bill allows all of the family child care home provider's own children to attend at any time of the year, regardless of their school enrollment status. (It is unclear whether the six-child, year-round cap and the nine-child, year-round cap include all of the provider's children (see COMMENT).)

EFFECTIVE DATE: July 1, 2022

COMMENT

Conflict

The bill allows all of the child care provider's own children of any age to attend the family child care home at any point in the year; however, it simultaneously caps the number of children attending at six (including the provider's own children who are not in school full time) or at nine with an assistant present. It is unclear whether the six- or nine-child cap includes any of the provider's own children.

BACKGROUND

Related Bill

HB 5465, § 11, favorably reported by the Education Committee, contains an identical provision to § 19 in this bill on family child care home staffing and enrollment.

§ 20 — EARLY CHILDHOOD EDUCATION NEEDS ASSESSMENTS

Allows local and regional school readiness councils to convert surplus unused school readiness spaces to infant and toddler spaces following a local needs assessment and requires school readiness councils to conduct needs assessments as necessary

By law, a town seeking to apply for certain grants must establish a regional school readiness council or convene a local school council. The bill requires local school readiness councils to conduct, as needed, a needs assessment for early childhood education for children and families in the community. It also allows a regional school readiness council to conduct this needs assessment.

The bill allows a local regional school readiness council, on and after July 1, 2022, and following a local needs assessment that reveals a surplus of unused school readiness space, to convert the unused spaces to infant and toddler spaces. The council may do so, as long as the per child cost for the converted space does not exceed the per child cost for infant and toddler spaces for state-funded child care centers.

EFFECTIVE DATE: July 1, 2022

BACKGROUND

Related Bills

SB 1 (§ 12), reported favorably by the Education Committee, contains similar provisions allowing local and regional boards of education to convert surplus unused school readiness spaces to infant and toddler spaces following a needs assessment.

HB 5465 (§ 12), reported favorably by the Education Committee, contains an identical provision allowing local and regional boards of education to convert surplus unused school readiness spaces to infant and toddler spaces following a local needs assessment.

§ 21 — FAMILY CARE COORDINATORS

Requires local and regional boards of education to hire or designate an existing employee to serve as the district's family care coordinator

The bill requires, beginning in the 2022-23 school year and for each subsequent school year, each local and regional board of education to hire or designate an existing employee to serve as the district's family care coordinator. The family care coordinator must work with school social workers and school psychologists under the board's jurisdiction and serve as the school system's liaison with mental health service providers to (1) provide students with access to mental health resources in the community and (2) bring mental health services to students in school.

EFFECTIVE DATE: July 1, 2022

§ 22 — CHILD CARE CENTER TAX ABATEMENT

Authorizes municipalities to establish a property tax abatements for properties used for child care centers, group child care homes, or family child care homes

The bill authorizes municipalities to establish a property tax abatement for property or part of a property (1) used for operating a child care center, group child care home, or family child care home and (2) owned by the person, persons, association, organization, corporation, institution, or agency holding the child care license. Under this program, municipalities may abate up to 100% of property taxes due on the property for up to five tax years.

Municipalities may establish the program by vote of their legislative bodies, or board of selectmen where the town meeting is the legislative body.

EFFECTIVE DATE: October 1, 2022, and applicable to assessment years beginning on or after that date.

§ 23 — OEC REGULATIONS ON PARENTAL NOTIFICATION

Requires the OEC commissioner to adopt regulations requiring child facilities to notify parents about certain incidents resulting in a child's injury or illness

The bill requires the Office of Early Childhood (OEC) commissioner to adopt regulations requiring child care centers or group child care homes (see definitions below) to:

1. immediately notify an enrolled child's parent or guardian if the child becomes ill or is injured while in the care of the center or home and
2. create a specific written record of the illness or injury.

Under the bill the written record must:

1. include (a) a description of the illness or injury; (b) the date, time, and location of the incident, (c) any action an employee takes in response; and (d) whether the child was transported to an emergency room, a doctor's office, or other medical facility because of the illness or injury;

2. be provided to the child's parent or guardian by the next business day; and
3. be kept by the center or home for at least two years, and
4. be made immediately available upon OEC's request.

The bill also requires OEC to specify in its regulations that a child care center or group child care home must (1) maintain any video recordings created at the center or home for at least 30 days and (2) make the recordings immediately available upon OEC's request.

It also makes conforming changes.

EFFECTIVE DATE: July 1, 2022

DEFINITIONS

Child Care Facilities

By law, a "child care center" is a one that offers or provides supplementary care to more than 12 children outside their own homes on a regular basis.

A "group child care home" is one that (1) offers or provides supplementary care to between seven and 12 children on a regular basis or (2) meets the "family child care home" definition, but does not operate in a private family home.

A "family child care home" generally is a private family home where care is provided on a regular basis to up to six children, including the provider's own children not in school full time, where the children are cared for at least three, but no more than 12, hours during a 24-hour period. There are some exceptions, including for cases involving extended care or intermittent short-term overnight care (CGS § 19a-77).

BACKGROUND

Related Bill

SB 122, favorably reported by the Children's Committee contains similar provisions.

§ 24 — CHILDREN’S BEHAVIORAL HEALTH CABINET

Establishes a 15-member cabinet to assess children’s behavioral health services in the state

The bill establishes a 15-member Children’s Behavioral Health Cabinet to assess children’s behavioral health services in the state, make recommendations for improvements, and ensure timely access to services for children in need of these services.

Responsibilities

The bill requires the cabinet to:

1. assess children’s behavioral health services in the state to identify areas for improving (a) their delivery, (b) their policies and practices, (c) outcomes for children receiving these services, and (d) patient experiences;
2. make recommendations for improvements; and
3. consult with private insurances, the DSS commissioner, and the Behavioral Health Partnership to ensure timely access to behavioral health services for children who need them.

Membership

Under the bill, the cabinet members must include the following, or their designees:

1. DCF, DMHAS, DPH, Department of Developmental Service (DDS), DSS, OEC, DOC, SDE, and Insurance commissioners;
2. OPM secretary;
3. healthcare advocate;
4. child advocate;
5. chief court administrator;
6. Office of Health Strategy executive director; and
7. Commission on Women, Children, Seniors, Equity, and

Opportunity executive director.

The DCF commissioner or her designee, serves as the cabinet chairperson, and the department must provide support staff to the cabinet. Under the bill, the cabinet must meet at least quarterly, and members are not compensated for their services.

Reporting

The bill requires the cabinet, by January 1, 2023 and quarterly after that, to submit a status report to the Children's, Insurance, and Public Health committees that includes the previous quarter's findings and recommendations.

EFFECTIVE DATE: July 1, 2022

§§ 25 & 37 — DCF COST OFFSET

Prohibits DCF from using a child's Social Security disability benefits to offset the cost of their care while in DCF care and custody and appropriates \$2.6million to DCF to offset funds lost due to this prohibition

The bill prohibits DCF from using Social Security disability benefits received by a child or youth in DCF care and custody to offset the cost of his or her care, and appropriates \$2.6 million to DCF from the General Fund, for FY 23 to offset funds lost due to the prohibition.

EFFECTIVE DATE: July 1, 2022

§ 26 — DSS PILOT PROGRAM EXPANDING BEHAVIORAL HEALTH CARE FOR CERTAIN CHILDREN

Requires DSS, in consultation with DPH, to establish a pilot program to expand behavioral health care to children at federally qualified health centers

The bill requires the DSS commissioner, in consultation with the DPH commissioner, to establish a pilot grant program to expand behavioral health care offered to children at federally qualified health centers.

Under the bill, the DSS commissioner, must:

1. within available appropriations, establish a grant program to provide the health centers a 50% match for the cost of hiring licensed social workers to provide counseling and other services

to children receiving primary health care at the health centers;

2. prescribe forms and criteria for the health centers to apply and qualify for grant funds; and
3. require the centers to report to her on the use of the funds to expand behavioral health care for children.

EFFECTIVE DATE: July 1, 2022

§§ 27-29 — SAFE STORAGE OF PRESCRIPTION DRUGS AND CANNABIS

Requires (1) DCP, by December 1, 2022, to develop documents on the safe storage and disposal of opioid drugs and cannabis and cannabis products and, by December 15, 2022, post the documents on the department's website; and (2) pharmacies and cannabis retailers and hybrid retailers, by January 1, 2023, to post notices about these documents on their premises

The bill requires DCP, by December 1, 2022, to develop documents on consumers' safe storage and disposal of opioid drugs, cannabis, and cannabis products that include information on best practices for:

1. safely storing these drugs, cannabis, and products in a way that makes them inaccessible to children and
2. disposing of the unused and expired ones.

The bill also requires the DCP commissioner to post the documents on the DCP website by December 15, 2022.

It also requires pharmacies and cannabis retailers and hybrid retailers, by January 1, 2023, to post a sign in a conspicuous place on their premises notifying consumers that they may visit DCP's website for information on safe storage and disposal.

EFFECTIVE DATE: July 1, 2022

BACKGROUND

Related Bill

sHB 5155, favorably reported by the Children's Committee, contains similar provisions.

§ 30 — HOSPICE DISPOSAL OF CONTROLLED SUBSTANCE

Requires certain hospice and hospice care programs to dispose of any unconsumed (presumably) controlled substance they dispensed or administered to a terminally ill person

The bill requires licensed hospice and hospice care programs that provide hospice home care services for terminally ill people to dispose any controlled substance that they dispensed or administered to a terminally ill person. They must do so as soon as practicable after the person's death, in a way that complies with applicable state and federal laws. (Presumably, this refers to remaining amounts of controlled substances not consumed by the deceased.)

Under the bill, a "controlled substance" is a drug, substance, or immediate precursor in schedules I to V of the Connecticut controlled substance scheduling regulations. The term does not include alcohol, nicotine, or caffeine.

EFFECTIVE DATE: October 1, 2022

§ 31 — TRANSITIONAL HOUSING GRANTS FOR HOMELESS YOUTH

Establishes a "transitional housing for youths experiencing homelessness account" and requires DOH to use the funds to provide grants for transitional housing for individuals under age 21 experiencing homelessness

The bill creates a "transitional housing for youths experiencing homelessness account" as a separate, nonlapsing account in the General Fund, which must contain any money the law requires to be deposited into it. Under the bill, the DOH commissioner must use the funds to provide grants for transitional housing for individuals under age 21 experiencing homelessness. The DOH commissioner must establish a grant application process, eligibility criteria, and a formula for determining the grant amount to be awarded.

The bill requires DOH to implement policies and procedures to implement the program while adopting regulations, provided the department posts notice of intent to adopt the regulations on the state's eRegulations System within 20 days of implementing them. The policies and procedures are valid until regulations are adopted.

EFFECTIVE DATE: July 1, 2022

§ 32 — CHILD CARE TAX CREDIT STUDY

Requires DRS to conduct a study to identify options for establishing a personal income tax credit for taxpayers with dependent children enrolled in child care

The bill requires the DRS commissioner to conduct a study to identify options for establishing a personal income tax credit against for taxpayers with dependent children enrolled in child care. By January 1, 2023, the commissioner must report on the study's findings and any recommendations to the Children's Committee.

EFFECTIVE DATE: Upon passage

§ 33 — FINANCIAL ASSISTANCE FOR CHILD CARE FACILITY EMPLOYEES' OUT-OF-POCKET MEDICAL COSTS

Requires DSS, in consultation with the State Comptroller, to conduct a study to identify ways the state can financially assist child care facility employees with out-of-pocket medical costs

The bill requires the DSS commissioner, in consultation with the State Comptroller, to study ways the state can provide financial assistance to child care facility employees for out-of-pocket medical costs.

By January 1, 2023, the commissioner must report to the Children's Committee on the study's findings, which must include an analysis of whether child care facility employees are eligible to participate in the State Partnership Plan 2.0, and any legislative recommendations.

EFFECTIVE DATE: Upon passage

§ 34 — TASK FORCE TO STUDY CHILDREN'S NEEDS

Reconvenes a 25-member task force to continue to study the (1) comprehensive needs of children in the state and (2) extent to which educators, community members, and local and state agencies are meeting them

PA 21-46 (§ 30) established a 25-member task force to study the (1) comprehensive needs of children in the state and (2) extent to which the needs are being met by educators, community members, and local and state agencies. The task force submitted its findings to the Children's Committee in December of 2021 and terminated on January 1, 2022.

The bill reconvenes the task force to continue to study children's needs and tasks them with the same responsibilities as before.

Task Force Duties

As under PA 21-46 (§ 30), the bill requires the task force to:

1. identify children's needs using certain tenets of the whole child initiative developed by the Association for Supervision and Curriculum Development;
2. recommend new programs or changes to existing programs run by educators or local or state agencies to better address children's needs;
3. recognize any exceptional efforts to meet the comprehensive needs of children by educators, local or state agencies, and community members (i.e., any individual or private organization that provides services or programs for children);
4. identify and advocate for funds and other resources required to meet the needs of children in the state;
5. identify redundancies in existing services or programs for children and advocate for eliminating them; and
6. assess all publicly available data on the identified needs and collect, or make recommendations for the state to collect, any data that is not being collected by educators, community members, or local or state agencies.

Membership and Appointing Authorities

As under PA 21-46 (§ 30), the bill requires the task force to consist of the following members:

1. two, appointed by the House speaker, one of whom is an educator employed by a local or regional board of education, and one of whom is a licensed social worker working with children;

2. two, appointed by the senate president pro tempore, one of whom is a representative of the board of directors of the Association for Supervision and Curriculum development affiliate in the state, and one of whom is a representative of a higher education institution in the state;
3. one, appointed by the House majority leader, who is a school administrator employed by a local or regional board of education;
4. one, appointed by the Senate majority leader, who is a chairperson of a local or regional board of education;
5. one, appointed by the House minority leader, who is a director or employee of a private nonprofit organization in the state that provides services or programs for children;
6. one, appointed by the Senate minority leader, who is a director or employee of a private nonprofit organization in the state that provides health-related services or programs for children;
7. the agriculture, children and families, developmental services, early childhood, economic and community development, education, housing, labor, mental health and addiction services, public health, social services, and transportation commissioners or their designees;
8. the healthcare advocate, or his designee;
9. the Commission on Human Rights and Opportunities executive director, or her designee;
10. the Technical Education and Career System superintendent, or his designee;
11. the chief court administrator, or his designee; and
12. the director of Special Education Equity for Kids of Connecticut, or the director's designee.

Under the bill, if any member declines an appointment, the appointing authority must select a new appointee. All initial appointments must be made within 30 days after the bill passes. The appointing authority must fill any vacancy within 30 days after the vacancy. Task force chairpersons may fill a vacancy if it is not filled by the appointing authority.

The House speaker and the Senate president pro tempore must select the chairpersons of the task force from among its members. The chairpersons must schedule and hold the task force's first meeting within 60 days after the bill passes.

The Children's Committee administrative staff must serve as administrative staff of the task force.

Reporting Requirements

The bill requires the task force to update the report under PA 21-46 (§ 30) and submit it and any additional findings and recommendations to the Children's Committee by January 1, 2023. The task force terminates on the date that it submits the report or January 1, 2023, whichever is later.

EFFECTIVE DATE: Upon passage

§ 35 — MEDICAID STATE PLAN EXPANSION

Expands the Medicaid state plan to include services provided by certain licensed master social workers

Existing law requires the DSS commissioner to include in the Medicaid state plan, services provided by certain licensed behavioral health clinicians in independent practice to Medicaid recipients age 21 or older. Under current law, the Medicaid state plan includes such services provided by licensed psychologists, clinical social workers, alcohol and drug counselors, professional counselors, and marital and family therapists. The bill expands the Medicaid state plan by requiring the DSS commissioner, by October 1, 2022, to include services provided by licensed master social workers working under the supervision of licensed psychologists or licensed clinical social workers.

As under existing law for the other licensed behavioral health clinicians, the bill requires the commissioner to (1) include the licensed master social workers' services as optional services covered under the Medicaid program and (2) provide direct Medicaid reimbursements to those who are enrolled as Medicaid providers and who treat the Medicaid recipients in independent practice settings.

The law also authorizes the commissioner to adopt implementing policies, procedures, and regulations.

EFFECTIVE DATE: July 1, 2022

§ 36 — PSYCHOLOGY INTERJURISDICTIONAL COMPACT

Enters Connecticut into the Psychology Interjurisdictional Compact, which provides a process authorizing psychologists to practice by (1) telehealth and (2) temporary in-person, face-to-face services across state boundaries, without the psychologist having to be licensed in each state

The bill enters Connecticut into the Psychology Interjurisdictional Compact (PSYPACT). The compact provides a process authorizing psychologists to practice by (1) telehealth (unlimited) and (2) temporary in-person, face-to-face services (30 days per year per state) across state boundaries, without the psychologist having to be licensed in each state. A psychologist can apply for authorization for either or both types of interjurisdictional practice under the compact.

Among various other provisions, the compact:

1. provides eligibility criteria for psychologists to practice under the compact;
2. is overseen by a commission made up of representatives from the participating states;
3. addresses several matters related to disciplinary actions for psychologists practicing under the compact, such as information sharing among participating states and automatic suspension of practice in some circumstances;
4. allows the commission to levy an annual assessment on

- participating states to cover the cost of its operations;
5. provides that amendments to the compact only take effect if all participating states adopt them into law; and
 6. provides a process for states to withdraw from the compact.

A broad overview of the compact appears below.

EFFECTIVE DATE: October 1, 2022

Compact Overview

The Psychology Interjurisdictional Compact provides a process authorizing (1) telepsychology or (2) temporary in-person, face-to-face practice in other compact states, without the psychologist having to be licensed in each of the states.

Under the compact, “telepsychology” is the provision of psychological services using telecommunication technologies. “Temporary in-person, face-to-face practice” is the practice of psychology by a psychologist who is physically present, not through telecommunications technologies, in another state for up to 30 days in a calendar year and based on notification to that state.

Under the compact, a “state” is a U.S. state, commonwealth, territory, or possession or the District of Columbia. A “compact state” is a U.S. state, the District of Columbia, or a U.S. territory that is part of the compact (and has not withdrawn or been terminated from it).

A “home state” is a compact state where a psychologist is licensed. If a psychologist is licensed in multiple compact states, (1) for telepsychology, the home state is the compact state where the psychologist is physically present when delivering those services, and (2) for temporary in-person practice, the home state is any state where the psychologist is licensed and practicing under the compact.

A “receiving state” is a compact state where the client or patient is physically located when the telepsychological services are delivered. A

“distant state” is the compact state where a psychologist is physically present to provide temporary in-person, face-to-face services.

Eligibility and Conditions of Practice (§ 36, Art. III-VI)

Under the compact, a home state’s license authorizes a psychologist to practice in a receiving state (for telepsychology) or distant state (for temporary in-person services) only if the compact state:

1. requires the psychologist to hold an active E.Passport (for telepsychology) or Interjurisdictional Practice Certificate (IPC) (for temporary in-person services);
2. has a mechanism to receive and investigate complaints about licensed individuals;
3. notifies the commission (see below), in compliance with the compact’s terms, of any adverse action (generally, public disciplinary action) or significant investigatory information regarding a licensed individual;
4. requires an identity history summary (e.g., FBI data on arrests) of all applicants at initial licensure (including fingerprints or other biometric data checks), no later than 10 years after the compact’s activation; and
5. complies with the commission’s rules and bylaws.

To be eligible to practice interjurisdictional telepsychology or through temporary in-person services under the compact, a psychologist must hold an unrestricted license in a compact state and hold a graduate psychology degree.

The degree-granting higher education institution must meet specified accreditation or similar requirements (depending on whether it is a domestic or foreign school). The psychology program itself also must meet several requirements, such as that it (1) is clearly identified and labeled as a psychology program, (2) includes a curriculum of at least three academic years of full-time graduate study for a doctorate,

and (3) includes an acceptable residency.

The psychologist also must:

1. have no adverse action or criminal record history that violates the commission's rules;
2. possess a current, active E.Passport (for telepsychology) or IPC (for temporary in-person practice);
3. provide attestations on specified matters (e.g., areas of intended practice) and an information release; and
4. meet other criteria as defined by commission rules.

Under the compact, "E.Passport" is the Interjurisdictional Practice Certificate issued by the Association of State and Provincial Psychology Boards (ASPPB) that promotes standardization in interjurisdictional telepsychology practice criteria and facilitates the process for licensed psychologists to provide telepsychological services across state lines. The "IPC" is the certificate issued by the ASPPB that grants temporary authority to practice based on notification to the state psychology regulatory authority of intention to practice temporarily and verification of qualification for that practice.

Currently, many of the specific requirements for the E.Passport and IPC are similar. For example, both require the psychologist to have a current license based on a doctorate. Both the E.Passport and IPC require annual renewal; the former requires three hours of continuing education on use of technology in psychology.

The compact establishes certain other rules for which states maintains authority over a psychologist practicing under the compact. For example, it provides that:

1. the home state maintains authority over the license of any psychologist practicing in a receiving state under the authority to practice interjurisdictional telepsychology;

2. a psychologist practicing in a distant state under the temporary authorization to practice is subject to that state's authority and law; and
3. a psychologist practicing under the compact must do so within the scope of practice of the receiving or distant state (for telepsychology or temporary in-person practice, respectively).

For telepsychology under the compact, the psychologist also must (1) initiate the client or patient contact in a home state via telecommunications technologies and (2) comply with other commission rules.

Adverse Actions, Regulatory Board Authority, and Coordinated Licensure Information System (§ 36, Art. IV-V, VII-IX)

The compact addresses several matters related to investigation and discipline of psychologists practicing under its procedures. For example:

1. a home state may take adverse action against a psychologist license issued by that state, and a receiving or distant state may take adverse action on a psychologist's authority to practice interjurisdictional telepsychology or temporary authorization to practice in that state under the compact;
2. if the home state or a receiving or distant state takes such action, the psychologist's E.Passport or IPC is revoked;
3. a home state's psychology regulatory authority must investigate and take appropriate action with respect to reported inappropriate conduct in a receiving state as if the conduct had happened in the home state, and the home state's law controls in determining any adverse action against the license;
4. a distant state's psychology regulatory authority must investigate and take appropriate action with respect to reported inappropriate conduct in that state as if the conduct had happened in the home state, and the distant state's law controls

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- in determining any adverse action against the authorization to practice;
5. in addition to authority granted under state laws, psychology regulatory boards have specified authority under the compact, such as issuing cease and desist or injunctive relief orders to revoke a psychologist's authority to practice interjurisdictional telepsychology or temporary authorization to practice;
 6. psychologists are prohibited from changing their home state licensure during an investigation, and home state regulatory authorities must promptly report the conclusion of investigations to the commission;
 7. the commission must provide for the development of a coordinated database for compact states to report and share information on disciplinary action against psychologists; and
 8. compact states must submit the same information on all licensees for inclusion in the database, and the database administrator must promptly notify all compact states of any adverse action against, or significant investigative information on, any licensee in a compact state.

Psychology Interjurisdictional Compact Commission (§ 36, Art. X-XI)

The compact is administered by the Psychology Interjurisdictional Compact Commission, which consists of one voting member appointed by each compact state's psychology regulatory authority. The compact sets forth several powers, duties, and procedures for the commission. For example, the commission:

1. may promulgate rules to facilitate and coordinate the compact's implementation and administration (a rule has no effect if a majority of the legislatures of the compact states reject it in the same manner used to adopt the compact),
2. may levy and collect an annual assessment from each compact

state and impose fees on other parties to cover the costs of its operations, and

3. must have its receipts and disbursements audited yearly and the audit report included in the commission's annual report.

The compact addresses several other matters regarding the commission and its operations, such as establishing conditions under which its officers and employees are immune from civil liability.

Compact Oversight, Enforcement, Member Withdrawal, and Related Matters (§ 36, Art. XII-XIV)

Among other related provisions, the compact provides that:

1. each compact state's executive, legislative, and judicial branches must enforce the compact and take necessary steps to carry out its purposes (§ 36, Art. XII(a));
2. the commission must take specified steps against a compact state in default, and after all other means of securing compliance have been exhausted, a defaulting state is terminated from the compact upon a majority vote of the compact states (§ 36, Art. XII(b));
3. upon a compact state's request, the commission must attempt to resolve a compact-related dispute among compact states or between compact and non-compact states (§ 36, Art. XII(c));
4. the commission must enforce the compact and rules, and may bring legal action against a compact state in default upon a majority vote of its commissioners (the case may be brought in the U.S. District Court in Georgia or the federal district where the commission's principal offices are located) (§ 36, Art. XII(d));
5. a compact state may withdraw from the compact by repealing that state's enabling legislation, but withdrawal does not take effect until six months after enactment of the repealing statute (§ 36, Art. XIII(c));

6. the compact states may amend the compact, but no amendment takes effect until it is enacted into law by all compact states (§ 36, Art. XIII(e)); and
7. the compact's provisions must be liberally construed to carry out its purposes, and if the compact is held to violate a compact state's constitution, the compact remains in effect in the remaining compact states (§ 36, Art. XIV).

Background — Related Bills

HB 5046 (§ 2) and HB 5395 (§ 2), each favorably reported by the Public Health Committee, contain identical provisions on the Psychology Interjurisdictional Compact.

§§ 38, 40-43 & 45 — AMERICAN RESCUE PLAN ACT OF 2021 ALLOCATIONS TO OEC, DMHAS, AND DCF

Allocates funds from federal COVID-19 relief funds for emergency support grants to state child care centers to OEC for emergency support grants to state child care workers; DMHAS to enhance mobile crisis services, and DCF (1) to administer the Social Determinants of Mental Health Fund and (2) for youth service bureau enhancement

The bill allocates the following from the federal funds the state received pursuant to the American Rescue Plan Act of 2021 (P.L. 117-2) (see BACKGROUND):

1. \$20 million, for FY 23, to OEC for emergency support grants to state child care centers (§ 38);
2. \$3 million, for FYs 23-24, to DMHAS to enhance mobile crisis services (§§ 40 & 41);
3. \$1 million, for FYs 23-24, to DCF to administer the Social Determinants of Mental Health Fund (§§ 42 & 43); and
4. \$3,093,973, for FY 23, to DCF for youth service bureau enhancement (§ 45).

EFFECTIVE DATE: Upon passage

BACKGROUND***Allocation of Federal COVID-19 Relief Funds***

Special Act 21-1 establishes a process for legislative review and approval of most allocations of American Rescue Plan funds. Under the act, the governor must submit to the legislature recommended allocations by April 26, 2021, and the Appropriations Committee must review them and recommend changes. The act requires that final allocations of the funds be authorized by a public or special act and prohibits the disbursement of funds prior to the passage of such an act. It also requires the OPM secretary to submit a report, by the same deadline, with a (1) full accounting of funds spent from the CARES Act and the Coronavirus Response and Relief Supplemental Appropriations act and (2) plan for disbursing any remaining funds.

§ 39 — CHILD CARE CENTER TECHNICAL ASSISTANCE AND BUSINESS CONSULTING

Appropriates \$160,000 to OEC for technical assistance and business consulting services for child care centers

The bill appropriates \$160,000 to OEC from the General Fund, for FY 23, for technical assistance and business consulting services for state child care centers.

EFFECTIVE DATE: Upon passage

§ 44 — MINORITY TEACHER SCHOLARSHIP PROGRAM

Appropriates \$30,000 to SDE for the hiring of a full-time employee to administer the minority teacher candidate scholarship program

The bill appropriates \$30,000 to SDE from the General Fund for FY 23 to hire a full-time employee to administer the minority teacher candidate scholarship program.

COMMITTEE ACTION

Committee on Children

Joint Favorable

Yea 11 Nay 2 (03/15/2022)