
OLR Bill Analysis

SB 331

AN ACT CONCERNING THE PROVISION OF DEVELOPMENTAL SERVICES AND MENTAL AND BEHAVIORAL HEALTH SERVICES.

SUMMARY

This bill makes various changes affecting developmental, social, and behavioral health services. Specifically, it:

1. requires the Department of Developmental Services (DDS) commissioner to develop a strategic plan to reduce the wait time for DDS services and submit the plan, and any related legislative recommendations, to the Public Health Committee by January 1, 2023 (§ 1);
2. starting October 1, 2022, requires the Office of Policy and Management (OPM) secretary, notwithstanding existing laws, to consult with all relevant stakeholders before implementing any plan to close a DDS-operated facility (§ 2);
3. requires the DDS commissioner, notwithstanding existing law, to notify individuals with intellectual disability, or their legal representatives, before their eligibility for state assistance ends (§ 3);
4. establishes a nine-member task force to study the DDS level of need assessment system and requires the task force to report its findings and recommendations to the Public Health Committee by January 1, 2023 (§ 4);
5. permits the Department of Social Services (DSS) commissioner to contract with a hospital or nonprofit organization to provide social services and referrals to frequent users of hospitals services (e.g., emergency department services) (§ 5);

6. starting October 1, 2022, requires physicians, physician assistants, and advanced practice registered nurses to conduct a mental health examination of a patient during the patient's annual physical examination (§ 6);
7. prohibits insurers who provide prescription drug coverage from requiring the use of step therapy to treat a behavioral health condition (§§ 7 & 8); and
8. specifies that substance use disorder is a disease in the alcohol and drug counselor licensure and certification laws (§ 9).

EFFECTIVE DATE: Upon passage, except that provisions on (1) DDS facility closures, notification requirements for DDS service recipients, and DSS referrals to frequent hospital service users take effect October 1, 2022, and (2) step therapy take effect January 1, 2023.

§ 4 – DDS LEVEL OF NEED TASK FORCE

Duties

The bill establishes a nine-member task force to study the DDS level of need (LON) assessment system. The study must include:

1. an examination of the instrument, policies, procedures, training, and education materials related to the LON assessment system and the diverse behavioral and medical issues the system assesses and
2. recommendations for improvement and greater consistency in the system's administration and results.

Membership

Under the bill, task force members include:

1. two members each appointed by the Senate president pro tempore and House speaker;
2. one member each appointed by the House and Senate majority and minority leaders; and

3. the DDS commissioner, or her designee.

Under the bill, appointing authorities must make initial appointments within 30 days after the bill takes effect and fill any vacancies. Appointed task force members may be legislators.

Meetings and Leadership

The bill requires the Senate president pro tempore and House speaker to select the task force chairpersons from among its members. The chairpersons must schedule the first task force meeting within 60 days after the bill takes effect.

Under the bill, the Public Health Committee administrative staff serve as the task force's administrative staff.

Report

The bill requires the task force to report its findings and recommendations to the Public Health Committee by January 1, 2023, and terminates on that date or the date it submits its report, whichever is later.

§ 5 – DSS REFERRALS FOR CERTAIN HOSPITAL SERVICE USERS

The bill permits the DSS commissioner to contract with hospitals and nonprofit organizations to provide social services and referrals to frequent users of hospital services (e.g., emergency department services). Subject to federal approval, DSS must use the provider networks and billing systems of these hospitals and organizations in doing so.

The bill also allows the commissioner to set payment rates to social service providers if it is required to ensure that any contract entered into (1) is cost neutral to these providers in the aggregate and (2) ensures patient access to the services and referrals. It specifies that the commissioner may consider utilization when determining a contract's cost neutrality.

§§ 7 & 8 – STEP THERAPY FOR BEHAVIORAL HEALTH CONDITIONS

The bill prohibits individual and group health insurance policies from requiring the use of step therapy for drugs prescribed to treat covered individuals with mental or behavioral health conditions, provided the drugs comply with approved Federal Drug Administration indications. (Step therapy establishes a sequence for prescribing drugs for specific medical conditions that generally requires patients to try less expensive drugs before higher cost drugs.)

The bill applies to individual and group health insurance policies delivered, issued, renewed, amended, or continued by an insurer, hospital or medical service corporation, HMO, or other entity that provides prescription drug coverage.

§ 9 – SUBSTANCE USE DISORDER DEFINITION

By law, licensed or certified alcohol and drug counselors work with individuals with substance use disorders and co-occurring disorders. Current law defines “substance use disorder” as the recurrent use of alcohol or drugs that leads to clinically and functionally significant impairment (e.g., health problems, disability, and failure to meet responsibilities). The bill specifies that a substance use disorder is a disease.

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 29 Nay 2 (03/16/2022)