
OLR Bill Analysis

HB 6835

AN ACT CONCERNING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.

SUMMARY

This bill makes various revisions in the public health and vital records statutes. Principally, it:

1. prohibits outpatient surgical facilities and certain hospitals from employing a person to provide surgical technology services unless the person completed a nationally accredited surgical technology program and holds a current surgical technologist certification (§ 1);
2. increases, from six to 18, the number of continuing education units a licensed massage therapist may complete via the Internet or distance learning (§ 2);
3. allows a psychologist, before his or her license renewal date, to submit to the Department of Public Health (DPH) a retirement application and one-time \$50 fee to be recorded as having been retired from practice in good standing (§ 3); and
4. authorizes vital records registrars for the Mashantucket Pequot and Mohegan tribes to issue birth and death certificates and makes related technical and conforming changes (§§ 4-29).

The bill also makes various technical changes in statutes related to, among other things, opioid patient treatment agreements, collaborative care models, social worker licensure examinations, maternal mental health day, and regional behavioral health action organizations (§§ 30-39).

EFFECTIVE DATE: October 1, 2023, except that the provision on massage therapist continuing education (§ 2) takes effect July 1, 2023.

§ 1 — SURGICAL TECHNOLOGISTS

The bill prohibits outpatient surgical facilities and hospitals (excluding chronic disease hospitals) from employing, or otherwise retaining, a person to perform surgical technology services unless the person (1) successfully completed a nationally accredited surgical technology program and (2) maintains a surgical technologist certification from a DPH-recognized national certifying body.

Under the bill, “surgical technology services” are surgical patient care services, such as the following:

1. preparing an operating room and the sterile operating field for surgical procedures by (a) ensuring that surgical equipment is functioning properly and safely and (b) using sterile techniques to prepare surgical supplies, instruments, and equipment;
2. anticipating and responding to surgeons’ and other surgical team members’ needs during surgery by monitoring the sterile operating field in an operating room and providing the required instruments or supplies; and
3. performing tasks at the sterile operating field, as directed, in an operating room setting, including (a) passing surgical supplies, instruments, and equipment directly to a health care provider, (b) sponging or suctioning an operative site, (c) preparing and cutting suture material, (d) transferring and irrigating with fluids, (e) transferring, but not administering, drugs within a sterile field, and (f) handling surgical specimens.

§ 2 — MASSAGE THERAPIST CONTINUING EDUCATION

By law, licensed massage therapists must complete at least 24 hours of continuing education (CE) every four years, starting on the date of their first license renewal. The bill increases, from six to 18, the number of CE units (i.e., one unit is 50-60 minutes of participation) that may be completed via the Internet or distance learning.

As under current law, CE must be in areas related to the massage therapist's practice and no more than 12 units can be obtained from providers not approved by the National Certification Board for Therapeutic Massage and Bodywork.

§ 3 — PSYCHOLOGIST LICENSURE FOR RETIREES

The bill creates a new retirement licensure category for psychologists. It allows a licensee, prior to his or her renewal date, to submit to DPH a retirement application and one-time \$50 fee. Upon doing so, DPH must record the psychologist as having retired from practice in good standing.

Under current practice, when a psychologist retires, his or her license is not renewed and is recorded by DPH as "lapsed due to non-renewal."

§§ 4-29 — VITAL RECORDS

The bill authorizes vital records registrars for the Mashantucket Pequot and Mohegan tribes to issue birth and death certificates. Existing law already allows these registrars to issue tribal marriage certificates (CGS §§ 46b-28a & -28d).

The bill makes related conforming changes, including extending to tribal registrars the following requirements that apply under existing law to municipal vital records registrars:

1. birth certificates must be filed with the registrar within (a) 10 days after a live birth and (b) five business days after a death for paper filings, and three calendar days for electronic filings;
2. required medical and health information must be recorded on the birth certificate's confidential section and can only be disclosed for specified purposes DPH authorizes (e.g., for statistical and health purposes or tribal records);
3. for children born under a surrogacy agreement, DPH must replace the birth certificate and immediately send a copy to the tribal registrar;

4. tribal registrars must issue an original or copy of a birth certificate to specified people (e.g., the person, if over 16; an adult person's parent, guardian, spouse, or child; and certain local government officials);
5. only specified parties can obtain, access, or examine copies of birth and fetal death records and certificates less than 100 years old (e.g., the child's parents, children, or surviving spouse; authorized federal and state officials; and local health directors);
6. certified homeless youth (i.e., under age 18) must request their birth certificates from a tribal registrar in person and be accompanied by the person certifying him or her as homeless;
7. tribal registrars may waive the fee for issuing a certified copy of a birth certificate to a certified homeless youth;
8. birth certificates issued by tribal registrars are prima facie evidence in court and any judicial, administrative, or other actions, proceedings, and applications;
9. funeral directors and embalmers who take custody of a deceased body must obtain a removal, transit, and burial permit from the tribal registrar and file a death certificate with them; and
10. the Office of the Chief Medical Examiner, after completing an investigation that occurred on tribal land, must file a death certificate, or amend an existing one, with the tribal registrar.

The bill also eliminates DPH's and municipal registrars' authority under current law to waive the fee for issuing a certified copy of a birth certificate to a certified homeless young adult (ages 18-25) but continues to allow them to do so for certified homeless youth (under age 18).

Additionally, the bill makes technical changes, including replacing the term "town" with "municipality" in various vital records statutes.

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 31 Nay 6 (03/27/2023)