



# Senate

General Assembly

**File No. 77**

January Session, 2023

Senate Bill No. 2

*Senate, March 15, 2023*

The Committee on Children reported through SEN. MAHER, C. of the 26th Dist., Chairperson of the Committee on the part of the Senate, that the bill ought to pass.

***AN ACT CONCERNING THE MENTAL, PHYSICAL AND EMOTIONAL WELLNESS OF CHILDREN.***

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

1 Section 1. (*Effective July 1, 2023*) For the fiscal year ending June 30,  
2 2024, the Department of Public Health shall hire, on or before January 1,  
3 2024, a full-time employee to assist in the licensure of social workers  
4 pursuant to chapter 383b of the general statutes.

5 Sec. 2. Section 11-24a of the general statutes is repealed and the  
6 following is substituted in lieu thereof (*Effective July 1, 2023*):

7 (a) As used in sections 11-24b, as amended by this act, 11-24c and 11-  
8 31a:

9 (1) "Board" means the State Library Board.

10 (2) "Public library" means a library that serves its residents through  
11 its outlet or outlets without charging a borrower's card fee and which  
12 receives its financial support in whole or in part from local tax funds.

13 (3) "Principal public library" means the public library which has been  
14 so designated by the local municipal governing board.

15 (4) "Local funds" means moneys received by a public library from any  
16 source, public or private, excluding state or federal grants.

17 (5) "General library purposes" means all functions of a public library,  
18 including the purchase of land or the construction, alteration or  
19 remodeling of buildings.

20 (6) "Sanctuary public library" means a principal public library that  
21 makes available and lends any book that has been banned, censored or  
22 challenged by a person, organization or entity and any related library  
23 materials and does not prohibit or otherwise limit the availability of any  
24 book or related library materials by banning, censoring or challenging  
25 such book or related library materials at such library.

26 (b) A municipality may have more than one public library, but may  
27 designate only one library as its principal public library. A principal  
28 public library may be designated for more than one town if it meets  
29 conditions established and approved by the State Library Board. In any  
30 town or municipality where there are multiple libraries, there shall be a  
31 separate board or governing body and a different library director and  
32 staff for each public library. Each public library shall be a separate  
33 library facility and there shall be a separate town appropriation to each  
34 public library.

35 (c) Any public library not designated as a principal public library  
36 shall be a "nonprincipal public library". A nonprincipal public library in  
37 a municipality may be eligible to receive a state grant, construction cost  
38 grant, emergency repair grant or Connecticut grant provided it meets  
39 the following conditions: There is a separate board of trustees or  
40 governing body for each such nonprincipal public library; there is a  
41 different library director and staff for each such library; there is a  
42 separate library facility; and there is a separate town appropriation to  
43 each such library.

44 Sec. 3. Section 11-24b of the general statutes is repealed and the  
45 following is substituted in lieu thereof (*Effective July 1, 2023*):

46 (a) Each principal public library, as defined in section 11-24a, as  
47 amended by this act, shall be eligible to receive a state grant in  
48 accordance with the provisions of subsections (b) [.] and (c) [and (d)] of  
49 this section provided the following requirements are met:

50 (1) An annual statistical report which includes certification that the  
51 grant, when received, shall be used for library purposes is filed with the  
52 State Library Board in such manner as the board may require. The report  
53 shall include information concerning local library governance, hours of  
54 service, type of facilities, library policies, resources, programs and  
55 services available, measurement of levels of services provided,  
56 personnel and fiscal information concerning library receipts and  
57 expenditures;

58 (2) Documents certifying the legal establishment of the principal  
59 public library in accordance with the provisions of section 11-20 are filed  
60 with the board;

61 (3) The library is a participating library in the Connecticard program  
62 established pursuant to section 11-31b;

63 (4) Except for the fiscal years ending June 30, 2010, to June 30, 2015,  
64 inclusive, the principal public library shall not have had the amount of  
65 its annual tax levy or appropriation reduced to an amount which is less  
66 than the average amount levied or appropriated for the library for the  
67 three fiscal years immediately preceding the year of the grant, except  
68 that if the expenditures of the library in any one year in such three-year  
69 period are unusually high as compared with expenditures in the other  
70 two years, the library may request an exception to this requirement and  
71 the board, upon review of the expenditures for that year, may grant an  
72 exception;

73 (5) State grant funds shall be expended within two years of the date  
74 of receipt of such funds. If the funds are not expended in that period,

75 the library shall submit a plan to the State Librarian for the expenditure  
76 of any unspent balance;

77 (6) Principal public libraries shall not charge individuals residing in  
78 the town in which the library is located or the town in which the contract  
79 library is located for borrowing and lending library materials, accessing  
80 information, advice and assistance and programs and services which  
81 promote literacy; and

82 (7) Principal public libraries shall provide equal access to library  
83 service for all individuals and shall not discriminate upon the basis of  
84 age, race, sex, gender identity or expression, religion, national origin,  
85 handicap or place of residency in the town in which the library is located  
86 or the town in which the contract library is located.

87 (b) Within the limits of amounts appropriated and subject to the  
88 provisions of subsection (d) of this section, the amount each principal  
89 public library shall be eligible to receive annually as a state grant shall  
90 be determined by the State Library Board as follows:

91 (1) Principal public libraries, as defined in section 11-24a, as amended  
92 by this act, shall receive a base grant of one thousand two hundred  
93 dollars for each fiscal year.

94 (2) Of the amount appropriated for purposes of this section less the  
95 amount distributed as base grants, sixty per cent shall be set aside and  
96 paid in accordance with the provisions of subsection (c) of this section  
97 to principal public libraries. [pursuant to subsection (c) of this section.]

98 (3) Of the amount appropriated for purposes of this section less the  
99 amount distributed as base grants, forty per cent shall be set aside and  
100 paid in accordance with the provisions of subsection (d) of this section  
101 to principal public libraries [pursuant to subsection (d) of this section]  
102 that receive a grant under this subsection and subsection (c) of this  
103 section and that are sanctuary public libraries.

104 (c) The principal public library for each town shall be eligible to  
105 receive an equalization grant in an amount determined as follows:

106 (1) The adjusted equalized net grand list per capita, as defined in  
107 subsection (a) of section 10-261, for all towns in the state shall be ranked  
108 from highest to lowest.

109 (2) The adjusted equalized net grand list per capita, as ranked for all  
110 towns in the state from highest to lowest shall be divided into the  
111 following four classes: Class A, towns ranked from one to forty-two,  
112 inclusive; class B, towns ranked from forty-three to eighty-four,  
113 inclusive; class C, towns ranked from eighty-five to one hundred  
114 twenty-six, inclusive; and, class D, towns ranked from one hundred  
115 twenty-seven to one hundred sixty-nine, inclusive. Funds available for  
116 purposes of this subsection pursuant to subdivision (2) of subsection (b)  
117 of this section shall be distributed among the four classes so that  
118 principal public libraries for class B, C, and D towns, respectively, shall  
119 receive two times, three times and four times as much on a per capita  
120 basis as principal public libraries for class A towns.

121 (3) Grants to the principal public library for each town shall be  
122 determined as follows: Said funds available for purposes of this  
123 subsection shall be multiplied by the per cent of funds for each class to  
124 determine an appropriation per class; the appropriation per class shall  
125 be divided by the total population per class to determine an amount per  
126 capita; the grant for the principal public library for each town shall be  
127 the town's total population multiplied by the amount per capita. For  
128 purposes of this subdivision, "total population" of a town means that  
129 enumerated in the most recent federal decennial census of population.

130 (d) [The] A principal public library [for each town] that receives a  
131 grant under subsections (b) and (c) of this section and is a sanctuary  
132 public library shall be eligible to receive an incentive grant in an amount  
133 to be determined as follows:

134 (1) The State Library Board shall, in such manner as prescribed by the  
135 board, determine for each fiscal year, a state-wide average for per capita  
136 library expenditures and each town's individual per capita library  
137 expenditure based on the annual statistical report filed in accordance  
138 with subsection (a) of this section.

139 (2) The per capita library expenditure of each town shall be ranked  
140 from highest to lowest and the ranked expenditures shall be divided  
141 into the following classes: Class A, towns which meet or exceed the  
142 state-wide average for per capita library expenditures; class B, towns  
143 which meet seventy-five to ninety-nine per cent, inclusive, of the state-  
144 wide average; class C, towns which meet fifty to seventy-four per cent,  
145 inclusive, of the state-wide average; and, class D, towns which fall below  
146 fifty per cent of the state-wide average. Funds available for purposes of  
147 this subsection pursuant to subdivision (3) of subsection (b) of this  
148 section shall be distributed among the four classes so that such principal  
149 public libraries for class A and B towns, respectively, shall receive three  
150 times and two times as much on a per capita basis as such principal  
151 public libraries for class C towns.

152 (3) Grants to [the] such principal public [library for each town]  
153 libraries under this subsection shall be determined as follows: Said  
154 funds available for purposes of this subsection shall be multiplied by the  
155 per cent of funds per class to determine an appropriation per class; the  
156 appropriation per class shall be divided by the total population per class  
157 to determine an amount per capita; the grant for [the] each such  
158 principal public library [for each town] shall be the town's total  
159 population multiplied by the amount per capita. For purposes of this  
160 subdivision, "total population" of a town means that enumerated in the  
161 most recent federal decennial census of population.

162 (e) Application for grants under this section shall be made to the State  
163 Library Board in such form and at such time as the board designates.  
164 The grant may be used for general library purposes and no portion of  
165 the grant money shall revert to the general fund of the town or towns  
166 normally served by such library.

167 (f) The Secretary of the Office of Policy and Management shall make  
168 available, upon the request of the State Library Board, such information  
169 as is needed by the board to determine grant payments in accordance  
170 with the provisions of subsections (c) and (d) of this section.

171 (g) The State Library Board shall report triennially to the joint

172 standing committee of the General Assembly having cognizance of  
173 matters relating to education on the impact of the state grants  
174 distributed pursuant to this section.

175 (h) The State Library Board shall, in accordance with the provisions  
176 of chapter 54, adopt regulations to implement the provisions of this  
177 section.

178 Sec. 4. Subsection (h) of section 17a-248g of the general statutes is  
179 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
180 *2023*):

181 (h) For the fiscal [years] year ending June 30, 2023, and [June 30, 2024]  
182 each fiscal year thereafter, the commissioner shall make a general  
183 administrative payment to providers in the amount of two hundred  
184 dollars for each child with an individualized family service plan on the  
185 first day of the billing month and whose plan accounts for less than nine  
186 hours of service during such billing month, provided at least one service  
187 is provided by such provider during such billing month.

188 Sec. 5. Section 17a-248 of the general statutes is repealed and the  
189 following is substituted in lieu thereof (*Effective July 1, 2023*):

190 As used in this section, [and] sections 17a-248b to 17a-248g, inclusive,  
191 as amended by this act, 38a-490a and 38a-516a and section 7 of this act,  
192 unless the context otherwise requires:

193 (1) "Commissioner" means the Commissioner of Early Childhood.

194 (2) "Council" means the State Interagency Birth-to-Three  
195 Coordinating Council established pursuant to section 17a-248b.

196 (3) "Early intervention services" means early intervention services, as  
197 defined in 34 CFR Part 303.13, as from time to time amended.

198 (4) "Eligible children" means children (A) (i) from birth to thirty-six  
199 months of age, who are not eligible for special education and related  
200 services pursuant to sections 10-76a to 10-76h, inclusive, and (ii) thirty-

201 six months of age or older, who are receiving early intervention services  
202 and are eligible or being evaluated for participation in preschool  
203 services pursuant to Part B of the Individuals with Disabilities  
204 Education Act, 20 USC 1411 et seq., until such children are enrolled in  
205 such preschool services, and (B) who need early intervention services  
206 because such children are:

207 [(I)] (i) Experiencing a significant developmental delay as measured  
208 by standardized diagnostic instruments and procedures, including  
209 informed clinical opinion, in one or more of the following areas:  
210 Cognitive development; physical development, including vision or  
211 hearing; communication development; social or emotional  
212 development; or adaptive skills; or

213 [(II)] (ii) Diagnosed as having a physical or mental condition that has  
214 a high probability of resulting in developmental delay.

215 (5) "Evaluation" means a multidisciplinary professional, objective  
216 assessment conducted by appropriately qualified personnel in order to  
217 determine a child's eligibility for early intervention services.

218 (6) "Individualized family service plan" means a written plan for  
219 providing early intervention services to an eligible child and the child's  
220 family.

221 (7) "Lead agency" means the Office of Early Childhood, the public  
222 agency responsible for the administration of the birth-to-three system in  
223 collaboration with the participating agencies.

224 (8) "Parent" means (A) a biological, adoptive or foster parent of a  
225 child; (B) a guardian, except for the Commissioner of Children and  
226 Families; (C) an individual acting in the place of a biological or adoptive  
227 parent, including, but not limited to, a grandparent, stepparent, or other  
228 relative with whom the child lives; (D) an individual who is legally  
229 responsible for the child's welfare; or (E) an individual appointed to be  
230 a surrogate parent.

231 (9) "Participating agencies" includes, but is not limited to, the



232 Departments of Education, Social Services, Public Health, Children and  
233 Families and Developmental Services, the Office of Early Childhood, the  
234 Insurance Department and the Department of Aging and Disability  
235 Services.

236 (10) "Qualified personnel" means persons who meet the standards  
237 specified in 34 CFR Part 303.31, as from time to time amended, and who  
238 are licensed physicians or psychologists or persons holding a state-  
239 approved or recognized license, certificate or registration in one or more  
240 of the following fields: (A) Special education, including teaching of the  
241 blind and the deaf; (B) speech and language pathology and audiology;  
242 (C) occupational therapy; (D) physical therapy; (E) social work; (F)  
243 nursing; (G) dietary or nutritional counseling; and (H) other fields  
244 designated by the commissioner that meet requirements that apply to  
245 the area in which the person is providing early intervention services,  
246 provided there is no conflict with existing professional licensing,  
247 certification and registration requirements.

248 (11) "Service coordinator" means a person carrying out service  
249 coordination services, as defined in 34 CFR Part 303.34, as from time to  
250 time amended.

251 (12) "Primary care provider" means physicians and advanced practice  
252 registered nurses, licensed by the Department of Public Health, who are  
253 responsible for performing or directly supervising the primary care  
254 services for children enrolled in the birth-to-three program.

255 Sec. 6. Subsection (b) of section 17a-248e of the general statutes is  
256 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
257 *2023*):

258 (b) The individualized family service plan shall be in writing and  
259 contain: (1) A statement of the child's present level of physical  
260 development, cognitive development, language and speech  
261 development and self-help skills, based on acceptable objective criteria;  
262 (2) a statement of the family's priority, resources and concerns relating  
263 to enhancing the development of the eligible child; (3) a statement of the

264 major outcomes expected to be achieved for the child and the family and  
265 the criteria, procedures and timelines used to determine the degree to  
266 which progress toward achieving the outcomes are being made, and  
267 whether modifications or revisions of the outcomes are necessary; (4) a  
268 statement of specific early intervention services necessary to meet the  
269 unique needs of the eligible child and the family, including the  
270 frequency, intensity and the method of delivering services; (5) a  
271 statement of the natural environments in which the services shall be  
272 provided; (6) the projected dates for initiation of services and the  
273 anticipated duration of such services; (7) the name of the approved  
274 comprehensive service provider that will provide or procure the  
275 services specified in the individualized family service plan; (8) the name  
276 of the individual service coordinator from the profession most  
277 immediately relevant to the eligible child's or the family's needs who  
278 will be responsible for the implementation of the plan and coordination  
279 with the other agencies and providers or an otherwise qualified  
280 provider selected by a parent; and (9) the steps to be taken to support  
281 the transition of the child who is eligible for participation in preschool  
282 programs under Part B of the Individuals with Disabilities Act, 20 USC  
283 1471 et seq., as appropriate. The individualized family service plan shall  
284 be translated into and provided in Spanish for any family whose  
285 primary language is Spanish.

286 Sec. 7. (NEW) (*Effective July 1, 2023*) On and after July 1, 2023, an  
287 eligible child whose primary language is Spanish shall be entitled to  
288 receive early intervention services from Spanish-speaking qualified  
289 personnel and a Spanish-speaking service coordinator.

290 Sec. 8. Section 31-57r of the general statutes is repealed and the  
291 following is substituted in lieu thereof (*Effective October 1, 2023*):

292 As used in this section and sections 31-57s to 31-57w, inclusive:

293 (1) "Child" means a biological, adopted or foster child, stepchild, legal  
294 ward of a service worker, or a child of a service worker standing in loco  
295 parentis, who is (A) under eighteen years of age; or (B) eighteen years  
296 of age or older and incapable of self-care because of a mental or physical

297 disability;

298 (2) "Day or temporary worker" means an individual who performs  
299 work for another on (A) a per diem basis, or (B) an occasional or  
300 irregular basis for only the time required to complete such work,  
301 whether such individual is paid by the person for whom such work is  
302 performed or by an employment agency or temporary help service, as  
303 defined in section 31-129;

304 (3) "Employee" means an individual engaged in service to an  
305 employer in the business of the employer;

306 (4) "Employer" means any person, firm, business, educational  
307 institution, nonprofit agency, corporation, limited liability company or  
308 other entity that employs fifty or more individuals in the state, which  
309 shall be determined based on such person's, firm's, business',  
310 educational institution's, nonprofit agency's, corporation's, limited  
311 liability company's or other entity's payroll for the week containing  
312 October first, annually. "Employer" does not include: (A) Any business  
313 establishment classified in sector 31, 32 or 33 in the North American  
314 Industrial Classification System, or (B) any nationally chartered  
315 organization exempt from taxation under Section 501(c)(3) of the  
316 Internal Revenue Code of 1986, or any subsequent corresponding  
317 internal revenue code of the United States, as from time to time  
318 amended, that provides all of the following services: Recreation, child  
319 care and education;

320 (5) "Family violence" has the same meaning as provided in section  
321 46b-38a;

322 (6) "Mental health wellness day" means a day during which a service  
323 worker attends to such service worker's emotional and psychological  
324 well-being in lieu of attending a regularly scheduled shift;

325 [(6)] (7) "Retaliatory personnel action" means any termination,  
326 suspension, constructive discharge, demotion, unfavorable  
327 reassignment, refusal to promote, disciplinary action or other adverse

328 employment action taken by an employer against an employee or a  
329 service worker;

330 [(7)] (8) "Service worker" means an employee primarily engaged in  
331 an occupation with one of the following broad or detailed occupation  
332 code numbers and titles, as defined by the federal Bureau of Labor  
333 Statistics Standard Occupational Classification system or any successor  
334 system: (A) 11-9050 Food Service Managers; (B) 11-9110 Medical and  
335 Health Services Managers; (C) 21-1020 Social Workers; (D) 21-1093  
336 Social and Human Service Assistants; (E) 21-1094 Community Health  
337 Workers; (F) 21-1099 Community and Social Service Specialists, All  
338 Other; (G) 25-4020 Librarians; (H) 29-1050 Pharmacists; (I) 29-1070  
339 Physician Assistants; (J) 29-1120 Therapists; (K) 29-1140 Registered  
340 Nurses; (L) 29-1150 Nurse Anesthetists; (M) 29-1160 Nurse Midwives;  
341 (N) 29-1170 Nurse Practitioners; (O) 29-2020 Dental Hygienists; (P) 29-  
342 2040 Emergency Medical Technicians and Paramedics; (Q) 29-2050  
343 Health Practitioner Support Technologists and Technicians; (R) 29-2060  
344 Licensed Practical and Licensed Vocational Nurses; (S) 31-1011 Home  
345 Health Aides; (T) 31-1012 Nursing Aides, Orderlies and Attendants; (U)  
346 31-1013 Psychiatric Aides; (V) 31-9091 Dental Assistants; (W) 31-9092  
347 Medical Assistants; (X) 33-9032 Security Guards; (Y) 33-9091 Crossing  
348 Guards; (Z) 35-1010 Supervisors of Food Preparation and Serving  
349 Workers; (AA) 35-2010 Cooks; (BB) 35-2020 Food Preparation Workers;  
350 (CC) 35-3010 Bartenders; (DD) 35-3020 Fast Food and Counter Workers;  
351 (EE) 35-3030 Waiters and Waitresses; (FF) 35-3040 Food Servers,  
352 Nonrestaurant; (GG) 35-9010 Dining Room and Cafeteria Attendants  
353 and Bartender Helpers; (HH) 35-9020 Dishwashers; (II) 35-9030 Hosts  
354 and Hostesses, Restaurant, Lounge and Coffee Shop; (JJ) 35-9090  
355 Miscellaneous Food Preparation and Serving Related Workers; (KK) 37-  
356 2011 Janitors and Cleaners, Except Maids and Housekeeping Cleaners;  
357 (LL) 37-2019 Building Cleaning Workers, All Other; (MM) 39-3030  
358 Ushers, Lobby Attendants and Ticket Takers; (NN) 39-5010 Barbers,  
359 Hairdressers, Hairstylists and Cosmetologists; (OO) 39-6010 Baggage  
360 Porters, Bellhops and Concierges; (PP) 39-9010 Child Care Workers;  
361 (QQ) 39-9021 Personal Care Aides; (RR) 41-1010 First-Line Supervisors  
362 of Sales Workers; (SS) 41-2011 Cashiers; (TT) 41-2021 Counter and

363 Rental Clerks; (UU) 41-2030 Retail Salespersons; (VV) 43-3070 Tellers;  
364 (WW) 43-4080 Hotel, Motel and Resort Desk Clerks; (XX) 43-4170  
365 Receptionists and Information Clerks; (YY) 43-5020 Couriers and  
366 Messengers; (ZZ) 43-6010 Secretaries and Administrative Assistants;  
367 (AAA) 43-9010 Computer Operators; (BBB) 43-9020 Data Entry and  
368 Information Processing Workers; (CCC) 43-9030 Desktop Publishers;  
369 (DDD) 43-9040 Insurance Claims and Policy Processing Clerks; (EEE)  
370 43-9050 Mail Clerks and Mail Machine Operators, Except Postal Service;  
371 (FFF) 43-9060 Office Clerks, General; (GGG) 43-9070 Office Machine  
372 Operators, Except Computer; (HHH) 43-9080 Proofreaders and Copy  
373 Markers; (III) 43-9110 Statistical Assistants; (JJJ) 43-9190 Miscellaneous  
374 Office and Administrative Support Workers; (KKK) 51-3010 Bakers;  
375 (LLL) 51-3020 Butchers and Other Meat, Poultry and Fish Processing  
376 Workers; (MMM) 51-3090 Miscellaneous Food Processing Workers;  
377 (NNN) 53-3010 Ambulance Drivers and Attendants, Except Emergency  
378 Medical Technicians; (OOO) 53-3020 Bus Drivers; (PPP) 53-3040 Taxi  
379 Drivers and Chauffeurs; or (QQQ) 29-2034 Radiologic Technologists,  
380 and is (i) paid on an hourly basis, or (ii) not exempt from the minimum  
381 wage and overtime compensation requirements of the Fair Labor  
382 Standards Act of 1938 and the regulations promulgated thereunder, as  
383 amended from time to time. "Service worker" does not include day or  
384 temporary workers;

385 [(8)] (9) "Sexual assault" means any act that constitutes a violation of  
386 section 53a-70b of the general statutes, revision of 1958, revised to  
387 January 1, 2019, or section 53a-70, 53a-70a, 53a-71, 53a-72a, 53a-72b or  
388 53a-73a;

389 [(9)] (10) "Spouse" means a husband or wife, as the case may be; and

390 [(10)] (11) "Year" means any three-hundred-sixty-five-day period  
391 used by an employer to calculate employee benefits.

392 Sec. 9. Subsection (a) of section 31-57t of the general statutes is  
393 repealed and the following is substituted in lieu thereof (*Effective October*  
394 *1, 2023*):

395 (a) An employer shall permit a service worker to use the paid sick  
396 leave accrued pursuant to section 31-57s:

397 (1) For (A) a service worker's illness, injury or health condition, (B)  
398 the medical diagnosis, care or treatment of a service worker's mental  
399 illness or physical illness, injury or health condition, [or] (C)  
400 preventative medical care for a service worker, or (D) a mental health  
401 wellness day;

402 (2) For (A) a service worker's child's or spouse's illness, injury or  
403 health condition, (B) the medical diagnosis, care or treatment of a service  
404 worker's child's or spouse's mental or physical illness, injury or health  
405 condition, or (C) preventative medical care for a child or spouse of a  
406 service worker; and

407 (3) Where a service worker is a victim of family violence or sexual  
408 assault (A) for medical care or psychological or other counseling for  
409 physical or psychological injury or disability, (B) to obtain services from  
410 a victim services organization, (C) to relocate due to such family  
411 violence or sexual assault, or (D) to participate in any civil or criminal  
412 proceedings related to or resulting from such family violence or sexual  
413 assault.

414 Sec. 10. (NEW) (*Effective July 1, 2023*) (a) The Commissioner of Social  
415 Services shall provide Medicaid reimbursement, to the extent  
416 permissible under federal law, for suicide risk assessments and other  
417 mental health evaluations and services provided at a school-based  
418 health center or public school.

419 (b) The Commissioner of Social Services shall (1) amend the Medicaid  
420 state plan, if necessary, to provide reimbursement for the suicide risk  
421 assessments and mental health evaluations and services described in  
422 subsection (a) of this section, and (2) set reimbursement at a level that  
423 ensures an adequate pool of providers for such suicide risk assessments  
424 and mental health evaluations and services.

425 Sec. 11. (NEW) (*Effective July 1, 2023*) (a) There is established an Office

426 of the Behavioral Health Advocate which shall be within the Insurance  
427 Department for administrative purposes only.

428 (b) The Office of the Behavioral Health Advocate may:

429 (1) Assist mental and behavioral health care providers, who are  
430 licensed, certified or registered in the state, with receiving payments for  
431 claims submitted to health carriers for services provided to covered  
432 patients;

433 (2) Provide information to the public, agencies, legislators and others  
434 regarding the problems and concerns of mental and behavioral health  
435 care providers and make recommendations for resolving such problems  
436 and concerns;

437 (3) Analyze and monitor the development and implementation of  
438 federal, state and local laws, regulations and policies relating to mental  
439 and behavioral health care providers and recommend changes as  
440 necessary;

441 (4) Facilitate public comment by mental and behavioral health care  
442 providers on laws, regulations and policies, including, but not limited  
443 to, the policies and actions of health carriers;

444 (5) Coordinate services with the Healthcare Advocate to assist  
445 individuals with obtaining access to and coverage for mental and  
446 behavioral health care services and to fulfill the duties set forth in  
447 subsections (e) and (g) of section 38a-1041 of the general statutes;

448 (6) Ensure that mental and behavioral health care providers have  
449 timely access to the services provided by the office;

450 (7) Establish a toll-free number, or any other free calling option, to  
451 allow access to the services provided by the Behavioral Health  
452 Advocate;

453 (8) Pursue administrative remedies on behalf of and with the consent  
454 of any mental and behavioral health care providers;

455 (9) Adopt regulations, pursuant to chapter 54 of the general statutes,  
456 to carry out the provisions of this section; and

457 (10) Take any other actions necessary to fulfill the purposes of this  
458 section.

459 (c) The Office of the Behavioral Health Advocate shall make a referral  
460 to the Insurance Commissioner if the Behavioral Health Advocate finds  
461 that a health carrier may have engaged in a pattern or practice that is in  
462 violation of any provision of section 38a-476a or sections 38a-488a to  
463 38a-489, inclusive, of the general statutes.

464 (d) All state agencies shall comply with reasonable requests of the  
465 Office of the Behavioral Health Advocate for information and  
466 assistance.

467 (e) Not later than January 1, 2024, and annually thereafter, the  
468 Behavioral Health Advocate shall submit, in accordance with the  
469 provisions of section 11-4a of the general statutes, to the joint standing  
470 committees of the General Assembly having cognizance of matters  
471 relating to children, public health, and insurance and real estate a report  
472 concerning the activities of the Behavioral Health Advocate. The report  
473 shall include, but need not be limited to, (1) the subject matter,  
474 disposition and number of claims processed by the Behavioral Health  
475 Advocate on behalf of mental and behavioral health care providers, (2)  
476 common problems and concerns discerned by the Behavioral Health  
477 Advocate from mental and behavioral health care providers or other  
478 relevant sources, and (3) the need, if any, for administrative, legislative  
479 or executive remedies to assist mental and behavioral health care  
480 providers.

481 Sec. 12. (NEW) (*Effective July 1, 2023*) (a) The Office of the Behavioral  
482 Health Advocate shall be under the direction of the Behavioral Health  
483 Advocate who shall be appointed by the Governor, with the approval  
484 of the General Assembly. The Behavioral Health Advocate shall be an  
485 elector of the state with expertise and experience in the fields of mental  
486 or behavioral health care, health insurance and advocacy for parity in



487 mental and behavioral health access and outcomes. In addition to the  
488 Behavioral Health Advocate, the Office of the Behavioral Health  
489 Advocate shall consist of a staff of not more than three persons, which  
490 staff may be increased as the requirements and resources of the office  
491 permit.

492 (b) If the General Assembly is not in session at the time of the  
493 Governor's designation of a candidate for Behavioral Health Advocate,  
494 the candidate shall serve as the acting Behavioral Health Advocate until  
495 the General Assembly meets and confirms the candidate as Behavioral  
496 Health Advocate. A candidate serving as acting Behavioral Health  
497 Advocate is entitled to compensation and has all the powers, duties and  
498 privileges of the Behavioral Health Advocate. A Behavioral Health  
499 Advocate shall serve a term of four years, not including any time served  
500 as acting Behavioral Health Advocate, and may be reappointed by the  
501 Governor or shall remain in the position until a successor is confirmed.

502 (c) Upon a vacancy in the position of the Behavioral Health Advocate,  
503 the most senior attorney in the Office of the Behavioral Health Advocate  
504 shall serve as the acting Behavioral Health Advocate until the vacancy  
505 is filled pursuant to subsection (a) or (b) of this section. The acting  
506 Behavioral Health Advocate has all the powers, duties and privileges of  
507 the Behavioral Health Advocate.

508 Sec. 13. Subsection (a) of section 20-195o of the general statutes is  
509 repealed and the following is substituted in lieu thereof (*Effective July 1,*  
510 *2023*):

511 (a) Application for licensure shall be on forms prescribed and  
512 furnished by the commissioner. Each applicant shall furnish evidence  
513 satisfactory to the commissioner that he or she has met the requirements  
514 of section 20-195n. The application fee for a clinical social worker license  
515 shall be [~~three hundred fifteen~~] two hundred dollars. The application fee  
516 for a master social worker license shall be [~~two hundred twenty~~] one  
517 hundred fifty dollars.

518 Sec. 14. Subdivisions (1) and (2) of subsection (e) of section 19a-88 of

519 the general statutes are repealed and the following is substituted in lieu  
520 thereof (*Effective July 1, 2023*):

521 (e) (1) Each person holding a license or certificate issued under  
522 section 19a-514, 20-65k, 20-74s, 20-185k, 20-185l, 20-195cc or 20-206ll and  
523 chapters 370 to 373, inclusive, 375, 378 to 381a, inclusive, 383, [to 383c,  
524 inclusive] 383a, 383c, 383g, 384, 384a, 384b, 385, 393a, 395, 399 or 400a  
525 and section 20-206n or 20-206o shall, annually, or, in the case of a person  
526 holding a license as a marital and family therapist associate under  
527 section 20-195c on or before twenty-four months after the date of initial  
528 licensure, during the month of such person's birth, apply for renewal of  
529 such license or certificate to the Department of Public Health, giving  
530 such person's name in full, such person's residence and business address  
531 and such other information as the department requests.

532 (2) Each person holding a license or certificate issued under section  
533 19a-514, and chapters 383b, 384a, 384c, 384d, 386, 387, 388 and 398 shall  
534 apply for renewal of such license or certificate once every two years,  
535 during the month of such person's birth, giving such person's name in  
536 full, such person's residence and business address and such other  
537 information as the department requests.

538 Sec. 15. Section 24 of public act 22-81 is repealed and the following is  
539 substituted in lieu thereof (*Effective from passage*):

540 (a) There is established a task force to continue to study the  
541 comprehensive needs of children in the state and the extent to which  
542 such needs are being met by educators, community members and local  
543 and state agencies. The task force shall (1) address subdivisions (1) to  
544 (6), inclusive, of subsection (a) of section 30 of public act 21-46, (2)  
545 provide recommendations to meet the demand for infant and toddler  
546 care in the state by increasing access to and enrollment in child care  
547 centers, group child care homes and family child care homes, and  
548 identify resources to assist such centers and homes in meeting such  
549 demand, [and] (3) study the feasibility of adjusting school start times to  
550 improve students' mental and physical well-being, and (4) review and  
551 analyze the efficacy of those programs designed to assist and support

552 the needs of children and their families that have received and expended  
553 federal funds received pursuant to the Coronavirus Aid, Relief, and  
554 Economic Security Act, P.L. 116-136, as amended from time to time, the  
555 Coronavirus Response and Relief Supplemental Appropriations Act,  
556 P.L. 116-260, as amended from time to time, and the American Rescue  
557 Plan Act of 2021, P.L. 117-2, as amended from time to time, and, based  
558 on such analysis, make recommendations about which of those  
559 programs should receive a more permanent funding structure from the  
560 state.

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

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

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

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

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

582 (g) Not later than January 1, 2023, and January 1, 2024, the task force

583 shall update the report issued pursuant to subsection (g) of section 30 of  
584 public act 21-46, and submit such updated report and any additional  
585 findings and recommendations to the joint standing committee of the  
586 General Assembly having cognizance of matters relating to children, in  
587 accordance with the provisions of section 11-4a of the general statutes.  
588 The task force shall terminate on the date that it submits such report or  
589 January 1, 2024, whichever is later.

590       Sec. 16. (*Effective July 1, 2023*) For the fiscal year ending June 30, 2024,  
591 the Department of Social Services shall hire temporary and part-time  
592 employees who will be responsible for collaborating with nonprofit  
593 organizations to identify and enroll eligible children in the HUSKY  
594 Health program.

595       Sec. 17. (*Effective July 1, 2023*) For the fiscal year ending June 30, 2024,  
596 the Department of Education shall hire one full-time employee who will  
597 be responsible for awarding a grant to and collaborating with a  
598 nonprofit organization that specializes in identifying and providing  
599 services for at-risk teenage students who are experiencing depression,  
600 anxiety, substance abuse struggles and trauma and conflict-related  
601 stresses, for the purpose of training school behavioral health providers  
602 to be able to identify and provide services for such at-risk teenage  
603 students.

604       Sec. 18. (*Effective from passage*) The sum of one hundred fifty thousand  
605 dollars is allocated, in accordance with the provisions of special act 21-  
606 1, from the federal funds designated for the state pursuant to the  
607 provisions of Section 602 of Subtitle M of Title IX of the American Rescue  
608 Plan Act of 2021, P.L. 117-2, as amended from time to time, to the  
609 Department of Social Services, for the fiscal year ending June 30, 2024,  
610 for the purpose of hiring temporary and part-time employees who will  
611 be responsible for collaborating with nonprofit organizations to identify  
612 and enroll eligible children in the HUSKY Health program, in  
613 accordance with the provisions of section 16 of this act.

614       Sec. 19. (*Effective July 1, 2023*) The sum of fifteen thousand dollars is  
615 appropriated to the Department of Education from the General Fund,

616 for the fiscal year ending June 30, 2024, for the purpose of awarding a  
 617 grant to a nonprofit organization described in section 17 of this act, for  
 618 the training of school behavioral health providers to identify and  
 619 provide services for at-risk teenage students who are experiencing  
 620 depression, anxiety, substance abuse struggles, and trauma and conflict-  
 621 related stresses.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>July 1, 2023</i>	New section
Sec. 2	<i>July 1, 2023</i>	11-24a
Sec. 3	<i>July 1, 2023</i>	11-24b
Sec. 4	<i>July 1, 2023</i>	17a-248g(h)
Sec. 5	<i>July 1, 2023</i>	17a-248
Sec. 6	<i>July 1, 2023</i>	17a-248e(b)
Sec. 7	<i>July 1, 2023</i>	New section
Sec. 8	<i>October 1, 2023</i>	31-57r
Sec. 9	<i>October 1, 2023</i>	31-57t(a)
Sec. 10	<i>July 1, 2023</i>	New section
Sec. 11	<i>July 1, 2023</i>	New section
Sec. 12	<i>July 1, 2023</i>	New section
Sec. 13	<i>July 1, 2023</i>	20-195o(a)
Sec. 14	<i>July 1, 2023</i>	19a-88(e)(1) and (2)
Sec. 15	<i>from passage</i>	PA 22-81, Sec. 24
Sec. 16	<i>July 1, 2023</i>	New section
Sec. 17	<i>July 1, 2023</i>	New section
Sec. 18	<i>from passage</i>	New section
Sec. 19	<i>July 1, 2023</i>	New section

**KID**      *Joint Favorable*

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:**

Agency Affected	Fund-Effect	FY 24 \$	FY 25 \$
Public Health, Dept.	GF - Cost	34,929	62,375
State Comptroller - Fringe Benefits <sup>1</sup>	GF - Cost	13,301	26,602
Library, CT State	GF - Potential Cost	See Below	See Below
Office of Early Childhood	GF - Cost	1.5 million	6.5 million
Social Services, Dept.	GF - Potential	See Below	See Below
Resources of the Insurance Fund	IF - Cost	Up to 857,000	Up to 876,000
Resources of the General Fund	GF - Revenue Loss	970,188	970,188
Education, Dept.	GF - Cost	Up to 75,000	None
State Comptroller - Fringe Benefits	GF - Cost	Up to 32,115	None
Social Services, Dept.	ARPA - Cost	150,000	None
Education, Dept.	GF - Cost	15,000	None

Note: GF=General Fund; IF=Insurance Fund

**Municipal Impact:**

Municipalities	Effect	FY 24 \$	FY 25 \$
Various Municipalities	Potential Revenue Gain	See Below	See Below

**Explanation**

The bill results in various fiscal impacts as described by section below:

<sup>1</sup>The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 42.82% of payroll in FY 24.

**Section 1**, which requires the Department of Public Health (DPH) to hire a full-time employee to assist in licensing Social Workers (SWs) by 1/1/24, results in a cost to the agency of \$34,929 in FY 24 (for half a fiscal year) and \$62,375 in FY 25 (annualized) for a Processing Technician I and associated other expenses. Costs to the Office of State Comptroller – Fringe Benefits for this position are \$13,301 in FY 24 and \$26,602 in FY 25.

**Sections 2 and 3** allow a municipality to designate their public library as a sanctuary library. Additionally, the bill limits incentive library grants exclusively to sanctuary libraries. The incentive portion of public library grant funding was last funded in FY 15 at approximately \$225,000. If incentive grants were to be awarded to sanctuary libraries, it would result in an additional cost to the State Library. This additional cost to the State Library would result in a corresponding revenue gain to municipalities which designated their public library as a sanctuary library. If the incentive grant were funded with \$225,000 annually, the corresponding revenue gain would be approximately \$1,300 to \$3,000 per sanctuary library.

**Section 4** results in an annual cost to the Office of Early Childhood (OEC) of approximately \$5 million beginning in FY 25 by requiring a permanent increase in general administrative payments to Birth to Three providers for certain children.

**Section 5** makes technical and conforming changes and has no fiscal impact.

**Section 6**, which requires individualized family service plans to be translated and provided in Spanish, has no fiscal impact as the agency is currently in the process of revising the form to be available in several languages, including Spanish.

**Section 7** results in a cost of up to \$1.5 million per year to OEC associated with providing early intervention services in Spanish to those families who indicated Spanish is their primary language. For context, the estimate assumes a rate of \$75 per hour for interpreter

services. There were approximately 177 students served monthly in FY 22 who indicated their primary language is Spanish with each child receiving an average of eight service hours per month.

**Sections 8 and 9** require employers to allow certain workers to utilize accrued paid sick leave for a "mental health wellness day." This does not result in a fiscal impact to the Labor Department as it can administer this provision without the need for additional resources.

**Section 10** could result in a fiscal impact to the Department of Social Services (DSS) associated with establishing Medicaid coverage for suicide risk assessments and mental health evaluations provided at school-based health centers or public schools. DSS currently covers comprehensive psychiatric diagnostic evaluations at these locations. To the extent the bill requires DSS to establish coverage for a new, less comprehensive screening DSS could experience a fiscal impact. This impact is dependent on the utilization of the service and rate established for such screening.

The bill could also result in a revenue gain to towns to the extent they would receive Medicaid reimbursement for services currently provided by schools but are not reimbursable.

**Sections 11 and 12** establish an Office of the Behavioral Health Advocate (OBHA) within the Insurance Department for administrative purposes only, which would be staffed by a Behavioral Health Advocate and up to three additional staff initially. This is anticipated to result in total costs of up to \$857,000 in FY 24 and up to \$876,000 in FY 25, and annually thereafter, presumably to the Insurance Fund.

The estimate assumes the hiring of a Behavioral Health Advocate, a staff attorney 3, a nurse consultant, and a consumer information representative, with salaries totaling approximately \$378,000 in FY 24 and \$387,000 in FY 25. An office with those four staff would incur fringe benefit costs of about \$391,000 in FY 24 and \$401,000 in FY 25, as well as Other Expenses and Indirect Overhead costs together totaling



approximately \$88,000 per year.<sup>2</sup> To the extent fewer staff are hired, costs would be correspondingly lower.

The estimate is based on the budget and staff positions for the existing Office of the Healthcare Advocate, which assists consumers with insurance claims.

**Section 13** reduces initial licensure fees, from \$350 to \$200, for Clinical Social Workers (SWs), which results in an annual General Fund revenue loss of \$7,000. It also reduces, from \$220 to \$150, the initial licensure fees for Master SWs, which results in an annual General Fund revenue loss of \$30,000. There are approximately 100 new Clinical SW and 100 new Master SW licenses issued by DPH every year.

**Section 14** changes the Clinical and Master SW licensure renewal from annual to biannual. The license renewal fee for both is \$195. Based on the average number of SW renewal transactions (4,863), this provision is anticipated to result in an annual General Fund revenue loss of \$948,188.

**Section 15** requires the children's task force to review the efficacy of certain programs that received Coronavirus Aid resulting in no fiscal impact to the state because the task force has the expertise to carry out the requirements of the bill.

**Section 17** results in costs of up to \$107,115 in FY 24 associated with the requirement for the State Department of Education (SDE) to hire an employee to administer a grant program created by Section 19. These costs include \$75,000 in salary and an associated \$32,115 in fringe benefits. Due to the temporary nature of the grant funding, it is anticipated that SDE will hire a durational employee, resulting in no cost to the agency in FY 25 and annually thereafter.

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<sup>2</sup>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 103.41% of payroll in FY 23.

SDE is currently projected to lapse approximately \$1.5 million in FY 23 associated with funded vacancies in the agency.

**Section 18** allocates ARPA funding of \$150,000 to DSS in FY 24 for the agency to hire temporary and part-time employees to collaborate with nonprofit organizations to identify and enroll eligible children in the HUSKY Health program.

**Section 19** appropriates \$15,000 from the General Fund to the State Department of Education in FY 24 to provide a grant to a nonprofit for the training of school behavioral health providers.

### ***The Out Years***

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation, the number of Clinical and Master SWs that apply for and renew their licenses, Medicaid-covered service utilization, and the Medicaid rate established for suicide risk assessments and mental health evaluations.

**OLR Bill Analysis****SB 2*****AN ACT CONCERNING THE MENTAL, PHYSICAL AND EMOTIONAL WELLNESS OF CHILDREN.***

## TABLE OF CONTENTS:

[§§ 1 & 13-14 — SOCIAL WORK LICENSURE](#)

For FY 24, requires the Department of Public Health to hire a full-time employee, by January 1, 2024, to assist in licensing clinical and master social workers; reduces initial social worker license fees; and requires social workers to renew their licenses biennially, rather than annually

[§§ 2-3 — SANCTUARY LIBRARIES](#)

Allows a municipality to designate its principal public library as a “sanctuary public library” and makes these libraries eligible to receive certain state library grants

[§§ 4-5 — PAYMENT TO BIRTH TO THREE PROGRAM EARLY INTERVENTION SERVICE PROVIDERS](#)

Makes permanent the \$200 general administrative payment the Office of Early Childhood commissioner must make to Birth-to-Three program early intervention service providers for each child with an individualized family service plan that accounts for less than nine service hours during the billing month

[§§ 6-7 — INDIVIDUALIZED FAMILY SERVICE PLANS](#)

Requires each individualized family service plan to be translated into and provided in Spanish for any family whose primary language is Spanish; requires an eligible child whose primary language is Spanish to receive early intervention services from Spanish-speaking personnel and coordinators

[§§ 8-9 — MENTAL HEALTH WELLNESS DAY](#)

Requires employers to permit service workers to use accrued paid sick leave to take a mental health wellness day to attend to their emotional or psychological well-being

**§ 10 — MEDICAID REIMBURSEMENT FOR SCHOOL-BASED MENTAL HEALTH ASSESSMENTS**

Requires the Department of Social Services commissioner to (1) provide, to the extent federal law allows, Medicaid reimbursement for certain mental health evaluations and services at school-based health centers or public schools; (2) if necessary, amend the Medicaid state plan to do so; and (3) set the reimbursement at a level to ensure adequate providers for these evaluations and services

**§§ 11-13 — OFFICE OF THE BEHAVIORAL HEALTH ADVOCATE**

Establishes the Office of the Behavioral Health Advocate within the Insurance Department for administrative purposes only, to advocate for and assist behavioral and mental health care providers

**§ 15 — TASK FORCE TO STUDY CHILDREN’S NEEDS**

Expands the duties of the Task Force to Study Children’s Needs to include reviewing and analyzing certain programs that received pandemic-related federal funding and make recommendations on which programs should receive a more permanent funding structure

**§§ 16 & 18 — DSS HUSKY HEALTH CHILD ENROLLMENT**

Requires DSS, for FY 24, to hire temporary and part-time employees to collaborate with nonprofit organizations to identify and enroll eligible children in the HUSKY Health program; allocates to DSS \$150,000 in federal American Rescue Plan Act funds for the hiring

**§§ 17 & 19 — SERVICES FOR AT-RISK TEENAGE STUDENTS**

Requires the State Department of Education, for FY 24, to hire a full-time employee to award a grant to, and collaborate with, a nonprofit organization specializing in identifying and providing services to certain at-risk teenage students; allocates \$15,000 in federal American Rescue Plan Act funds for the hiring

**§§ 1 & 13-14 — SOCIAL WORK LICENSURE**

*For FY 24, requires the Department of Public Health to hire a full-time employee, by January 1, 2024, to assist in licensing clinical and master social workers; reduces initial social worker license fees; and requires social workers to renew their licenses biennially, rather than annually*

The bill reduces the initial license fees for social workers as follows:

1. from \$315 to \$200 for clinical social workers and
2. \$220 to \$150 for master social workers.

It also requires social workers to renew their licenses every two years, instead of annually as under current law.

Under existing law, unchanged by the bill, clinical and master social workers must pay a \$195 license renewal fee.

Additionally, for FY 24, the bill requires the Department of Public Health, by January 1, 2024, to hire a full-time employee to assist in licensing these social workers.

EFFECTIVE DATE: July 1, 2023

### **§§ 2-3 — SANCTUARY LIBRARIES**

*Allows a municipality to designate its principal public library as a “sanctuary public library” and makes these libraries eligible to receive certain state library grants*

By law, a municipality may have multiple public libraries, but its governing board must designate one as its principal public library. The bill allows a municipality to also designate its principal public library as a “sanctuary public library,” which means that the library does the following:

1. makes available and lends books that have been banned, censored, or challenged by a person, organization, or entity and any related library materials and
2. does not prohibit or otherwise limit the availability of books or related library materials by banning, censoring, or challenging them.

In doing so, the bill extends eligibility for annual state operating, equalization, and incentive grants to these sanctuary public libraries.

Under current law, the State Library Board appropriates funds to each principal public library. After appropriating each library a \$1,200 base operating grant, the board uses 60% of the remaining funds for equalization grants and 40% for incentive grants to the libraries. The bill limits eligibility for incentive grants to only sanctuary public libraries instead of any principal public library, as under current law.

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EFFECTIVE DATE: July 1, 2023

#### **§§ 4-5 — PAYMENT TO BIRTH TO THREE PROGRAM EARLY INTERVENTION SERVICE PROVIDERS**

*Makes permanent the \$200 general administrative payment the Office of Early Childhood commissioner must make to Birth-to-Three program early intervention service providers for each child with an individualized family service plan that accounts for less than nine service hours during the billing month*

The bill makes permanent the \$200 general administrative payment the Office of Early Childhood commissioner must make to certain Birth to Three early intervention service providers that will sunset under current law on June 30, 2024.

Under the bill and current law, the commissioner must make these payments to providers for each child (1) with an individualized family service plan on the first day of the billing month and (2) whose plan accounts for less than nine service hours during the billing month, as long as the provider delivers at least one service during the month.

EFFECTIVE DATE: July 1, 2023

#### **§§ 6-7 — INDIVIDUALIZED FAMILY SERVICE PLANS**

*Requires each individualized family service plan to be translated into and provided in Spanish for any family whose primary language is Spanish; requires an eligible child whose primary language is Spanish to receive early intervention services from Spanish-speaking personnel and coordinators*

The bill requires Birth to Three program individualized family service plans to be translated into and provided in Spanish for any family whose primary language is Spanish.

By law, eligible children in the program (see BACKGROUND), and their families, must generally receive a (1) multidisciplinary assessment, (2) written individualized family service plan, and (3) review of the plan within set timeframes.

Additionally, the bill requires an eligible child whose primary language is Spanish to receive early intervention services from Spanish-speaking personnel and a Spanish-speaking service coordinator.

#### ***Background — Birth to Three Eligibility***

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By law, an “eligible child” for the Birth to Three program is a child up to age 36 months, who is not eligible for special education and related services and who needs early intervention services because he or she is (1) experiencing a significant developmental delay as measured by standardized diagnostic instruments and procedures or (2) diagnosed as having a physical or mental condition that has a high probability of resulting in a developmental delay (CGS § 17a-248(4)).

EFFECTIVE DATE: July 1, 2023

### **§§ 8-9 — MENTAL HEALTH WELLNESS DAY**

*Requires employers to permit service workers to use accrued paid sick leave to take a mental health wellness day to attend to their emotional or psychological well-being*

The bill requires employers to allow service workers to use accrued paid sick leave for a “mental health wellness day” to attend to their emotional or psychological well-being.

Existing law already allows service workers to use paid sick leave for their, or their spouse’s or child’s (1) illness, injury or health condition; (2) medical diagnosis, care, or treatment of a physical or mental illness, injury, or health condition; or (3) preventive care.

The bill applies to specified service worker occupations covered by existing law (e.g., certain food, health care, hospitality, retail, and sanitation industry workers).

EFFECTIVE DATE: October 1, 2023

### **§ 10 — MEDICAID REIMBURSEMENT FOR SCHOOL-BASED MENTAL HEALTH ASSESSMENTS**

*Requires the Department of Social Services commissioner to (1) provide, to the extent federal law allows, Medicaid reimbursement for certain mental health evaluations and services at school-based health centers or public schools; (2) if necessary, amend the Medicaid state plan to do so; and (3) set the reimbursement at a level to ensure adequate providers for these evaluations and services*

The bill requires the Department of Social Services (DSS) commissioner, to the extent allowed under federal law, to provide Medicaid reimbursement for suicide risk assessments and other mental health evaluations and services provided at a school-based health center

or public school.

Under the bill, the commissioner must also (1) amend the Medicaid state plan, if necessary to provide the reimbursement and (2) set the reimbursement at a level that ensures an adequate pool of providers to provide the assessments, evaluations, and services.

EFFECTIVE DATE: July 1, 2023

### **§§ 11-13 — OFFICE OF THE BEHAVIORAL HEALTH ADVOCATE**

*Establishes the Office of the Behavioral Health Advocate within the Insurance Department for administrative purposes only, to advocate for and assist behavioral and mental health care providers*

The bill establishes the Office of the Behavioral Health Advocate to advocate for and assist behavioral health providers. The office is within the Insurance Department for administrative purposes only and under the direction of the Behavioral Health Advocate.

Under the bill, the office is staffed by up to three people and may increase its staff as its resources and requirements allow.

#### ***Behavioral Health Advocate***

The bill requires the advocate to be a Connecticut elector who is appointed by the governor and approved by the General Assembly. The advocate must have expertise and experience in mental or behavioral health care, health insurance, and advocacy for parity in mental and behavioral health access and outcomes.

Under the bill, if the General Assembly is not in session when the governor designates a candidate to serve as advocate, the candidate serves as the acting advocate until the General Assembly meets and confirms them. The acting advocate is entitled to compensation and has all the powers, duties, and privileges of the advocate.

Under the bill, the advocate serves a four-year term that excludes any time he or she served as acting advocate. The governor may reappoint the advocate or the advocate must remain in the position until a successor is confirmed.



In the case of a vacancy, the office's most senior attorney serves as the acting advocate until the vacancy is filled.

**Office Powers**

Under the bill, the office may do the following:

1. assist state-licensed, -certified, or -registered mental and behavioral health care providers with receiving payments for claims submitted to health carriers (i.e., insurers and HMOs) for services provided to covered patients;
2. provide information to the public, agencies, legislators, and others on mental and behavioral health care providers' problems and concerns and make recommendations to resolve them;
3. analyze and monitor the development and implementation of federal, state and local laws, regulations, and policies relating to mental and behavioral health care providers and recommend changes as necessary;
4. facilitate public comment by mental and behavioral health care providers on laws, regulations and policies, including health carrier policies and actions;
5. coordinate services with the Office of the Healthcare Advocate (OHA) to help people obtain access to, and coverage for, mental and behavioral health care services to fulfill OHA's duties;
6. ensure that mental and behavioral health care providers have timely access to the office's services;
7. establish a toll-free number, or other free calling option, that allows access to the office's services;
8. pursue administrative remedies on behalf of, and with the consent of, mental and behavioral health care providers;
9. adopt regulations to implement the bill's provisions; and

10. take any other actions necessary to fulfill the office's purposes.

### ***Referrals to the Insurance Department***

The bill requires the office to make a referral to the Insurance commissioner if it finds that a health carrier may have engaged in a pattern or practice that violates the following insurance laws:

1. compliance with federal Health Insurance Portability and Accountability Act provisions on guaranteed renewability and certification of insurance coverage and
2. state coverage requirements for individual policies on autism spectrum disorder therapies, diagnosing and treating mental or nervous conditions, court-ordered substance abuse services, mental health and substance use disorder benefits, mental health wellness examinations, Collaborative Care Model services, acute inpatient psychiatric services, and continued coverage for children with a mental or physical handicap.

### ***Requests for Information***

The bill requires all state agencies to comply with the office's reasonable requests for information and help in performing its duties.

### ***Reporting Requirements***

The bill requires the Behavioral Health Advocate to report annually, starting by January 1, 2024, to the Children's, Public Health, and Insurance and Real Estate committees on the office's activities, including the following:

1. the subject matter, disposition, and number of claims the advocate processed on behalf of mental and behavioral health care providers;
2. common problems and concerns the advocate discerned from mental and behavioral health care providers or other relevant sources; and
3. the need, if any, for administrative, legislative, or executive

remedies to assist mental and behavioral health care providers.

EFFECTIVE DATE: July 1, 2023

## **§ 15 — TASK FORCE TO STUDY CHILDREN’S NEEDS**

*Expands the duties of the Task Force to Study Children’s Needs to include reviewing and analyzing certain programs that received pandemic-related federal funding and make recommendations on which programs should receive a more permanent funding structure*

The bill expands the duties of the Task Force to Study Children’s Needs (see BACKGROUND) to include reviewing and analyzing the efficacy of programs designed to assist and support the needs of children and families that have received and spent funds they received pursuant to the following federal laws:

1. Coronavirus Aid, Relief, and Economic Security Act (P.L. 116-136);
2. Coronavirus Response and Relief Supplemental Appropriations Act (P.L. 116-260); and
3. American Rescue Plan Act of 2021 (P.L. 117-2).

Based on its analysis, the bill requires the task force to make recommendations on which programs should receive a more permanent funding structure from the state.

Under current law, the task force must also, among other things (1) recommend new programs or changes to programs run by educators or local or state agencies to better address children’s needs, (2) identify and advocate for funds and other resources to meet children’s needs in the state, and (3) study the feasibility of adjusting school start times to improve students’ mental and physical well-being.

### ***Background — Task Force to Study Children’s Needs***

PA 21-46 established the task force to study the comprehensive needs of children in the state and the extent to which these needs are being met by educators, community, members, and local and state agencies. The task force originally terminated on January 1, 2022, but was reconvened

by PA 22-81. It must submit its findings and recommendations to the Children’s Committee by January 1, 2024, and terminates on that date or the date it submits the report, whichever is later.

### **§§ 16 & 18 — DSS HUSKY HEALTH CHILD ENROLLMENT**

*Requires DSS, for FY 24, to hire temporary and part-time employees to collaborate with nonprofit organizations to identify and enroll eligible children in the HUSKY Health program; allocates to DSS \$150,000 in federal American Rescue Plan Act funds for the hiring*

The bill requires DSS, for FY 24, to hire temporary and part-time employees responsible for collaborating with nonprofit organizations to identify and enroll eligible children in the HUSKY Health program.

For FY 24, it allocates to DSS \$150,000 in federal American Rescue Plan Act of 2021 funds to hire these employees.

EFFECTIVE DATE: Upon passage, except that the provision requiring DSS to hire employees takes effect July 1, 2023.

### **§§ 17 & 19 — SERVICES FOR AT-RISK TEENAGE STUDENTS**

*Requires the State Department of Education, for FY 24, to hire a full-time employee to award a grant to, and collaborate with, a nonprofit organization specializing in identifying and providing services to certain at-risk teenage students; allocates \$15,000 in federal American Rescue Plan Act funds for the hiring*

For FY 24, the bill requires the State Department of Education (SDE) to hire one full-time employee responsible for awarding a grant to, and collaborating with, a nonprofit organization specializing in identifying and providing services for at-risk teenage students with depression, anxiety, substance abuse struggles, and trauma and conflict-related stresses. The organization must use the grant to train school behavioral health providers to provide them services.

The bill allocates \$15,000, for FY 24, to SDE from the federal funds the state received under the American Rescue Plan Act of 2021 (P.L. 117-2) to fund the awarding of a grant to a nonprofit organization to train school behavioral health providers to identify and provide services for these students.

EFFECTIVE DATE: July 1, 2023

**COMMITTEE ACTION**

Committee on Children

Joint Favorable

Yea 13 Nay 6 (02/28/2023)