
OLR Bill Analysis

sHB 6978

AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S RECOMMENDATIONS REGARDING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.

TABLE OF CONTENTS:

SUMMARY

§ 1 — RARE DISEASE ADVISORY COUNCIL

Allows the Rare Disease Advisory Council to apply for and accept grants and other funds from various sources to carry out its responsibilities

§§ 2-4 — MATERNAL MORTALITY REVIEW PROGRAM AND REVIEW COMMITTEES

Allows DPH to use information it obtains for the Maternal Mortality Review Program, and findings of the Maternal Mortality Review Committee, to improve the accuracy of vital statistics data

§ 5 — INSPECTIONS AND LICENSE RENEWALS

Allows DPH to renew licenses for additional types of facilities without performing an inspection if the facility is federally certified under Medicare or Medicaid (which requires its own inspection)

§ 6 — DPH DISBURSEMENT OF FUNDS

Specifically allows DPH to enter into contracts or agreements as needed to distribute or use funds received from gifts, grants, or contracts

§ 7 — BOARD OF EXAMINERS FOR NURSING

Allows the Board of Examiners for Nursing to hold contested case hearings before hearing officers as well as board members

§ 8 — DISCIPLINARY ACTION AGAINST HEALTH CARE INSTITUTIONS

Expands the grounds upon which DPH may take disciplinary action against health care institutions to include substantial failure to comply with the public health statutes generally

§ 9 — TECHNICAL CHANGE

Corrects an inaccurate statutory reference

SUMMARY

This bill makes various changes in Department of Public Health

(DPH)-related statutes and programs, as described in the section-by-section analysis below.

EFFECTIVE DATE: Various, see below.

§ 1 — RARE DISEASE ADVISORY COUNCIL

Allows the Rare Disease Advisory Council to apply for and accept grants and other funds from various sources to carry out its responsibilities

The bill allows the Rare Disease Advisory Council to apply for and accept grants, gifts, bequests (i.e. distributions through a will), sponsorships, and in-kind donations of funds from various sources to carry out its responsibilities. These sources include federal and interstate agencies, private firms, individuals, and foundations.

By law, the council must advise and make recommendations to DPH and other state agencies on the needs of residents living with rare diseases and their caregivers. The council is within DPH for administrative purposes only.

EFFECTIVE DATE: Upon passage

§§ 2-4 — MATERNAL MORTALITY REVIEW PROGRAM AND REVIEW COMMITTEES

Allows DPH to use information it obtains for the Maternal Mortality Review Program, and findings of the Maternal Mortality Review Committee, to improve the accuracy of vital statistics data

Under existing law, all information DPH obtains for the Maternal Mortality Review Program, including personal information from medical records, must be kept confidential and used solely for specified purposes (e.g., medical or scientific research). The same is true for findings of DPH's Maternal Mortality Review Committee.

The bill allows DPH to use information it obtains for the Maternal Mortality Review Program, and findings of the Maternal Mortality Review Committee, to improve the accuracy of vital statistics data. In practice, this allows DPH to share this information and findings with its Vital Records Office's Surveillance Analysis and Reporting Unit, which tracks data on causes of death.

By law, DPH's Maternal Mortality Review Program identifies maternal deaths in Connecticut and reviews related medical records and other relevant data. The department's Maternal Mortality Review Committee conducts comprehensive, multidisciplinary reviews of maternal deaths to identify associated factors and make recommendations to reduce these deaths.

EFFECTIVE DATE: July 1, 2025

§ 5 — INSPECTIONS AND LICENSE RENEWALS

Allows DPH to renew licenses for additional types of facilities without performing an inspection if the facility is federally certified under Medicare or Medicaid (which requires its own inspection)

Current law allows DPH to waive the required inspection for a hospital or home health care or home health aide agency applying for license renewal if the entity has been federally certified under Medicare or Medicaid within the prior year. (The federal recertification process requires an inspection, which in practice is done by DPH.) The bill instead requires these entities to be federally certified when they apply for license renewal in order to receive the waiver.

The bill also generally expands this provision by allowing DPH to waive the required inspection for other DPH-licensed institutions (such as hospice facilities and outpatient surgical facilities), except for nursing homes, that are federally certified when they apply for license renewal.

By law, most DPH-licensed health care institutions must renew their licenses every two years.

EFFECTIVE DATE: October 1, 2025

§ 6 — DPH DISBURSEMENT OF FUNDS

Specifically allows DPH to enter into contracts or agreements as needed to distribute or use funds received from gifts, grants, or contracts

The bill specifically allows the DPH commissioner, under any established procedures, to enter into contracts or agreements as may be needed to distribute or use money, services, or property in line with any required conditions of a gift, grant, or contract.

EFFECTIVE DATE: Upon passage

§ 7 — BOARD OF EXAMINERS FOR NURSING

Allows the Board of Examiners for Nursing to hold contested case hearings before hearing officers as well as board members

The bill specifically allows the state Board of Examiners for Nursing to hold contested case hearings before hearing officers, not just board members.

By law, the board has jurisdiction to hear charges that a nurse failed to conform to the profession's accepted standards. The board may take disciplinary action against a nurse after a hearing under the Uniform Administrative Procedure Act (UAPA) and DPH regulations.

EFFECTIVE DATE: Upon passage

§ 8 — DISCIPLINARY ACTION AGAINST HEALTH CARE INSTITUTIONS

Expands the grounds upon which DPH may take disciplinary action against health care institutions to include substantial failure to comply with the public health statutes generally

Under existing law, the DPH commissioner, after a hearing held under the UAPA, may impose a range of disciplinary actions against a licensed health care institution that substantially fails to comply with statutory requirements in the health care institutions chapter, the Public Health Code, or licensing regulations. The bill additionally allows the commissioner to take these actions if an institution substantially fails to comply with applicable requirements throughout the public health statutes generally (Title 19a of the Connecticut General Statutes). Title 19a includes requirements for health care institutions, or a subset of them, on various topics, such as reporting on opioid overdoses (by hospitals) or transferring an electronic copy of medical records within certain timeframes after a patient's request (by most institutions).

As under existing law, these disciplinary actions may include, among other things; (1) revoking or suspending a license; (2) placing a licensee on probationary status; (3) imposing a correction plan; or (4) assessing a civil penalty of up to \$25,000.

EFFECTIVE DATE: Upon passage

§ 9 — TECHNICAL CHANGE

Corrects an inaccurate statutory reference

The bill makes a technical change by correcting an inaccurate statutory reference.

EFFECTIVE DATE: Upon passage

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 24 Nay 8 (03/05/2025)