



STATE OF CONNECTICUT Department of Mental Health & Addiction Services



Legislative Update # 17

April 8, 2015

Most committees have finished their work and the legislative process begins to focus on the work of the House and Senate. The Judiciary Committee's deadline is April 13th, Appropriations Committee's deadline is April 30th and the Finance Committee's deadline is April 31st.

These bills have made it out of Committee and are winding their way through the process.

SB 16 AN ACT CONCERNING BENEFITS PAYABLE FOR ASSESSMENTS TO DETERMINE A DIAGNOSIS OF A MENTAL OR NERVOUS CONDITION AND RELATED CONSULTATIONS.

SUMMARY: This bill expands coverage under certain health insurance policies for the assessment and diagnosis of mental or nervous conditions by prohibiting insurers from limiting the number of visits to assess an insured for such a diagnosis

SB 18 AN ACT ESTABLISHING A TASK FORCE TO STUDY HOARDING.

SUMMARY: DMHAS will be included as a member of this study.

SB 386 AN ACT CONCERNING ALCOHOLIC LIQUOR.

SUMMARY: This bill makes several unrelated changes to the Liquor Control Act but one that would be of interest to the behavioral health community is the banning powdered alcohol;

SB 408 AN ACT CONCERNING YOUTH HOMELESSNESS.

SUMMARY: This bill transfers, from the Department of Children and Families (DCF) to the Department of Housing (DOH), responsibility for administering the state's homeless youth program. As does the DCF commissioner, the DOH commissioner must (1) run the program within available appropriations and (2) by February 1 annually, submit a report with recommendations for programmatic changes, outcome indicators and measures, and benchmarks for evaluating progress. Under the bill, the commissioner must submit the report to the Housing Committee instead of the Committee on Children.

By law, the program may provide public outreach, respite housing, or transitional living services to youth under age 21 who are homeless or at risk of homelessness.

SB 810 AN ACT ESTABLISHING A SPECIAL COMMISSION ON PROVIDER PRICE VARIATION AND REFORM. Bill would study the extent of price variation between providers of health care services, identify the causes of such price variation and recommend policy changes to reduce such variation and ensure that prices fairly relate to actual cost and quality.

SB 878 AN ACT REQUIRING COMMUNITY NOTIFICATION OF NEW RESIDENTIAL FACILITIES FOR OFFENDERS.

SUMMARY: This bill requires the Department of Correction (DOC) to notify certain municipal officials before placing a community residence for released inmates in the municipality.

Under the bill, the correction commissioner, or his designee, must provide written notice to the municipality's chief elected official and chief executive officer about DOC's plans to place a community residence (e.g., halfway house) for released inmates in the municipality. He must provide the notice at least 30 days before DOC enters into an agreement with the facility's operator.

SB 888 AN ACT CONCERNING ADEQUATE AND SAFE HOUSING FOR THE ELDERLY AND YOUNGER PERSONS WITH DISABILITIES.

SUMMARY: Would require DMHAS and DOH to look at the issue of senior disabled housing

SB 1004 AN ACT CONCERNING SENIOR HOUSING.

SUMMARY: Would require DMHAS and DOH to look at the issue of senior disabled housing with different focus than SB 888

SB 1015 AN ACT CONCERNING PROGRAMS FOR VETERANS IN THE CRIMINAL JUSTICE SYSTEM.

SUMMARY: This bill requires the Department of Mental Health and Addiction Services (DMHAS) to develop and administer a jail diversion program for veterans with trauma-related symptoms. The program's purpose is to divert or refer such veterans from the criminal justice system into treatment and recovery services. The program must (1) be modeled after the New London Judicial District's Veterans' Jail Diversion Program and (2) include a DMHAS representative specializing in veterans' jail diversion in each of the state's geographical area court facilities.

The bill also requires the Judicial Branch's Court Support Services Division (CSSD) to report, by January 15, 2016, to the Judiciary and Veterans' Affairs committees, the number of veterans and nonveterans admitted or denied admission to certain pretrial diversionary programs during the preceding calendar year. CSSD must report these statistics for the (1) pretrial supervised diversionary program for individuals with psychiatric disabilities and veterans, (2) accelerated rehabilitation program, and (3) pretrial drug education and community service program.

SB 1085 AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR MENTAL OR NERVOUS CONDITIONS.

SUMMARY: This bill expands the services certain health insurance policies must cover for mental and nervous conditions (see BACKGROUND). By law, a policy must cover the diagnosis of and treatment for mental or nervous conditions on the same basis as for medical, surgical, or other physical conditions (i.e., parity).

The bill requires insurers to cover, among other things:

1. certain acute (e.g., substance use disorder) treatment and clinical stabilization (e.g., postdetoxification) services for up to 14 days without preauthorization;
2. services provided by advanced practice registered nurses (APRNs) for mental and nervous conditions; and
3. programs to improve health outcomes for mothers, children, and families.

Under the bill, a policy cannot prohibit an insured from getting, or a provider getting reimbursed for, multiple screening services as part of a single-day visit to a health care provider or multicare institution (e.g., hospital, psychiatric outpatient clinic, or free standing facility for substance use treatment).

The bill substitutes the term “benefits payable” for “covered expenses” as it pertains to the mental or nervous conditions coverage provisions. By law, these are the usual, customary, and reasonable charges for medically necessary treatment or, in the case of a managed care plan, the contracted rates.

The bill also makes technical and conforming changes.

The bill applies to individual and group health insurance policies issued, delivered, renewed, amended, or continued in Connecticut that cover (1) basic hospital expenses, (2) basic medical-surgical expenses, (3) major medical expenses, or (4) hospital or medical services, including those provided through an HMO. Due to the federal Employee Retirement Income Security Act, state insurance mandates do not apply to self-insured benefit plans.

SB 1090 AN ACT CONCERNING GAMING.

SUMMARY: This bill authorizes off-reservation casino gaming at up to three unspecified locations in Connecticut, subject to regulation by the Department of Consumer Protection (DCP), which regulates all gambling in the state, except gambling at the state's two casinos. Under the federal Indian Gaming Regulatory Act (IGRA), the Mashantucket Pequots and Mohegans currently operate the Foxwoods and Mohegan Sun casinos, respectively, on their reservations (see BACKGROUND).

SB 1129 AN ACT ESTABLISHING A PILOT PROGRAM TO IDENTIFY AND TRACK THE HOMELESS, ADDICTED OR MENTALLY ILL PERSONS ENTERING THE JUSTICE SYSTEM AND CONCERNING THE EARNED RISK REDUCTION CREDIT PROGRAM.

SUMMARY: To create a pilot program to identify and track the homeless, addicted or mentally ill persons entering the criminal justice system, with the intention of referring them to treatment and assistance as an alternative to incarceration and to reduce recidivism and to add to the list of crimes for which an inmate is sentenced and becomes ineligible to earn risk reduction credits and to require the warden to review and verify an inmate's record, if risk reduction credits are being applied to reduce such inmate's sentence.

HB 5449 AN ACT PROHIBITING THE USE OF ELECTRONIC CIGARETTES IN THE SAME PLACES WHERE SMOKING IS PROHIBITED.

SUMMARY: To support public health and close a loophole in the smoking ban by prohibiting the use of electronic cigarettes in the same places where smoking is prohibited.

HB 6276 AN ACT CONCERNING TRAINING IN YOUTH SUICIDE PREVENTION.

SUMMARY: This bill requires the Department of Children and Families' Youth Suicide Advisory Board to offer a youth suicide prevention training course at least quarterly. The course must be open to anyone, free of charge.

The board's existing duties include, among other things, (1) increasing public awareness of youth suicide and ways to prevent it and (2) making recommendations on such things as developing statewide training in youth suicide prevention and implementing suicide prevention procedures in schools.

HB 6283 AN ACT REGULATING ELECTRONIC NICOTINE DELIVERY SYSTEMS AND VAPOR PRODUCTS.

SUMMARY: To protect nonusers from exposure to electronic nicotine delivery systems and vapor products.

HB 6391 AN ACT INCREASING MENTAL HEALTH SERVICES FOR VETERANS AND MEMBERS OF THE ARMED FORCES.

SUMMARY: Requires DMHAS to study the Military Support Program

HB 6483 AN ACT ESTABLISHING A TASK FORCE TO STUDY GROUP HOME DISTRIBUTION.

SUMMARY: Would set up a group to look at the location of all state funded and operated group homes

HB 6708 AN ACT CONCERNING VARIOUS REVISIONS TO THE MENTAL HEALTH AND ADDICTION STATUTES.

SUMMARY: This bill makes several changes in the Department of Mental Health and Addiction Services (DMHAS) statutes. It:

1. specifies that all private agencies treating psychiatric disabilities or substance abuse, regardless of whether they are state-funded, must comply with the commissioner's data collection requirements (§ 1);
2. authorizes the DMHAS commissioner to designate any employee, instead of only a deputy commissioner, to sign a contract, agreement, or settlement on the department's behalf (§ 2); and
3. repeals the commissioner's ability to appoint two deputy commissioners and a medical director but retains the provision allowing the commissioner to appoint any personnel necessary to carry out her duties (§§ 3-5).

HB 6856 AN ACT CONCERNING SUBSTANCE ABUSE AND OPIOID OVERDOSE PREVENTION.

SUMMARY: To implement the Governor's budget recommendations.

HB 6909 AN ACT ESTABLISHING THE CONNECTICUT TRAUMATIC BRAIN INJURY ADVISORY BOARD.

SUMMARY: This bill establishes in statute a 26-member Connecticut Traumatic Brain Injury Advisory Board to address the needs of those with traumatic brain injuries (TBI). (In practice, a TBI advisory board already exists informally within the Department of Social Services (DSS)). The board must make recommendations for implementing a state-wide plan to address these needs and report annually to the governor and the Human Services and Public Health committees.

The bill also requires the board, the Department of Public Health (DPH), and other state or private entities to enter into memoranda of understanding to share information and resources necessary to accomplish the board's goals, subject to state and federal laws concerning privacy, security, confidentiality, and individually identifiable information.

Under the bill, DPH must provide administrative support to the board, including meeting space, a place to house records, and space on its website.

HB 6976 AN ACT CONCERNING A STUDY OF RECOVERY HIGH SCHOOL PROGRAMS.

SUMMARY: Bill would require the State Department of Education to look at this model

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