OLR Bill Analysis

HB 8004 (as amended by House "A")*

AN ACT CONCERNING CHILDREN'S BEHAVIORAL HEALTH, A STANDARD SELF-EMPLOYMENT EXPENSE DEDUCTION FOR TEMPORARY FAMILY ASSISTANCE, THE TELECOMMUNICATIONS SURCHARGE TO SUPPORT THE FIREFIGHTERS CANCER RELIEF PROGRAM, COURTHOUSE OPERATIONS, DATA PROTECTION AND PROCEDURES FOR REDISTRICTING AND CORRECTING DISTRICTING ERRORS.

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§ 3 — CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS PLANNING GRANT

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Generally prohibits a public agency from disclosing a person's nonpublic home, work, school, or agency appointment information; requires the attorney general to give public agencies guidance on how to comply

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Requires various entities to give the secretary of the state all information she finds necessary to implement a new redistricting plan; requires the secretary of the state to update CVRS accordingly; requires registrars and the secretary to notify each other about errors they find and update CVRS as applicable; requires registrars to notify voters if their polling place changed due to a corrected error

SUMMARY

A section-by-section analysis follows.

*House Amendment "A" expands the circumstances under which public agencies may disclose certain personal locational information and requires the attorney general to give the agencies guidance on how to comply with the bill's restrictions on disclosing this information (§ 14).

EFFECTIVE DATE: Various, see below.

§§ 1, 2 & 9 — TRANSFORMING CHILDREN'S BEHAVIORAL HEALTH POLICY AND PLANNING COMMITTEE DUTIES AND MEMBERSHIP

Requires the behavioral health committee to (1) conduct a study on existing children's behavioral health services and anticipated future demand for them and (2) develop a survey for school-based health centers to get information on existing data collection practices and challenges for practice improvement; requires related reporting on the study and the survey; adds three new members to the committee

Children's Behavioral Health Crisis Services Study (§ 1)

The bill requires the Transforming Children's Behavioral Health Policy and Planning Committee (the "behavioral health committee") to conduct a study on existing children's behavioral health crisis services and anticipated future demand for them. The committee, established by the legislature in 2023, is charged with evaluating the availability and efficacy of prevention, early intervention, and behavioral health services for children up to age 18 and advising the General Assembly and executive agencies.

The study must involve specific behavioral health providers (the United Way of Connecticut 2-1-1 Infoline program, 9-8-8 National Suicide Prevention Lifeline, mobile crisis intervention services and urgent crisis centers, subacute crisis stabilization centers, and hospital emergency departments) and address the following:

- 1. utilization rates and outreach and marketing strategies for these providers,
- 2. common sources of patient referrals to these providers,
- 3. state and other financial resources allocated to these providers, and
- 4. the anticipated future demand for children's behavioral health services.

By January 1, 2027, the behavioral health committee must submit a report to the Children, Human Services, and Public Health committees. The report must include an analysis of (1) data collected for the study and (2) recommendations to improve children's behavioral health

services and meet anticipated future service demand.

Survey and Reporting Requirements (§ 2)

The bill also requires the behavioral health committee, in collaboration with a statewide school-based health center (SBHC) association to develop a survey for SBHCs to obtain information on existing data collection practices and anticipated challenges and opportunities related to SBHCs implementing more comprehensive data collection systems. The committee may contract with a consultant to develop the survey required under the bill.

Additionally, the behavioral health committee must, in collaboration with the health commissioner, develop appropriate reporting requirements for SBHCs to determine and respond to their own needs.

By January 1, 2027, the behavioral health committee must submit a report to the Public Health Committee that includes the survey and reporting requirements.

New Members of the Transforming Children's Behavioral Health Policy and Planning Committee (§ 9)

The bill expands the behavioral health committee's membership by three with (1) two additional members who must be substance use treatment providers to young adults jointly appointed by the committee's three chairpersons and (2) the state behavioral health advocate or the advocate's designee.

EFFECTIVE DATE: Upon passage

§ 3 — CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS PLANNING GRANT

Requires DSS to (1) use Certified Community Behavioral Health Clinics Planning Grant money for purposes related to care coordination, value-based payment models, and resource navigation and (2) report on grant expenditures by January 1, 2027

The bill requires the Department of Social Services (DSS) commissioner, in consultation with the Children and Families (DCF) and Mental Health and Addiction Services commissioners, to use federally-funded Certified Community Behavioral Health Clinics Planning Grant money to develop the following:

- 1. reimbursement for acuity-based care coordination service to improve children's behavioral health outcomes,
- 2. a value-based payment model that gives providers financial incentives when outcomes improve for children in their care and, alternatively, holds them accountable for poor outcomes, and
- 3. a system to help providers and clients navigate behavioral health care resources and requirements.

The bill requires the DSS commissioner to report, by January 1, 2027, to the Children, Human Services, and Public Health committees on grant expenditures and any related behavioral health outcomes improvements.

EFFECTIVE DATE: Upon passage

§ 4 — INTENSIVE IN-HOME CHILD AND ADOLESCENT PSYCHIATRIC SERVICES REVIEW

Requires DSS to review the Yale Child Study Center's IICAPS program and other evidence-based alternatives for children with serious emotional disturbances and report by January 1, 2027; authorizes the Transforming Children's Behavioral Health Policy and Planning Committee to contract with the Yale Child Study Center for reasons related to federal funding

The bill requires the DSS commissioner to consult with the Yale Child Study Center to review the center's intensive in-home child and adolescent psychiatric services (IICAPS) program, which provides services for families with children or adolescents who have serious emotional disturbances and are at risk for hospitalization, and other evidence-based alternatives that focus on delivering positive outcomes for children with behavioral health issues in a sustainable way. In this review, the commissioner must consider the needs and time demands on children and families enrolled in the IICAPS program.

The bill requires the commissioner to report, by January 1, 2027, to the behavioral health committee on the results of the review and recommendations on how the IICAPS model may be used to deliver Medicaid-funded behavioral health care in Connecticut.

The bill allows the behavioral health committee to, within available

appropriations, contract with the Yale Child Study Center to determine what federal funding or reimbursements may be available to further develop the IICAPS model and conduct a quasi-experimental design trial of the center's model to determine if it may qualify federally as an evidence-based treatment program.

EFFECTIVE DATE: Upon passage

§§ 5 & 6 — INCREASED AGE FOR INSURANCE COVERAGE FOR AUTISM THERAPIES AND SERVICES

Raises the age, from under 21 to under 26, that applies to required coverage for behavioral therapy for people with autism spectrum disorder under private insurance plans

Under current law, insurance companies must cover behavioral therapy, including applied behavior analysis (ABA), cognitive behavioral therapy, and other empirically supported effective treatments, provided by certain licensed professionals to children under age 21 who are diagnosed with autism spectrum disorder. The bill extends this requirement to people under age 26.

By law, ABA is the design, implementation, and evaluation of environmental modifications using behavioral stimuli and consequences, including using direct observation, measurement, and functional analysis of the relationship between the environment and behavior, to produce socially significant improvement in human behavior (CGS §§ 20-185i & 38a-488b).

EFFECTIVE DATE: January 1, 2027

§ 7 — URGENT CRISIS CENTERS

Requires the Transforming Children's Behavioral Health Policy and Planning Committee to convene a working group to review private health insurance coverage for children's treatment at urgent crisis centers and report to various entities by October 1, 2026, on results and recommendations

The bill requires the Transforming Children's Behavioral Health Policy and Planning Committee, in consultation with the behavioral health advocate and DCF and insurance commissioners, to convene a working group to (1) review private health insurance coverage for children's treatment at urgent crisis centers, (2) identify potential barriers to commercial insurance coverage and reimbursement, and (3)

make recommendations to address any barriers. The behavioral health committee must report, by October 1, 2026, on the working group's findings and recommendations to the Appropriations, Children, and Human Services committees and the Office of Policy and Management secretary. An urgent crisis center is one that DCF certifies to treat children's urgent mental or behavioral health needs.

EFFECTIVE DATE: Upon passage

§ 8 — ABA ADVISORY COMMITTEE

Establishes an advisory committee to make recommendations on a statutory and regulatory framework for providers to deliver ABA services to children, and requires it to report to various entities by January 1, 2027

The bill establishes a 27-member advisory committee to advise the Council on Medical Assistance Program Oversight (MAPOC; see *Background — Council on Medical Assistance Program Oversight (MAPOC)*) on a statutory and regulatory framework for providers, including those enrolled in Medicaid, to deliver ABA services to children. Under the bill, the advisory committee must review the following:

- 1. current legislative and regulatory oversight of ABA services;
- 2. potential statutory and regulatory frameworks to oversee ABA services, including the need for any regulatory structure to include expertise in providing childcare and ABA services to children with autism;
- whether employees of an entity providing ABA services to children should be mandated reporters of suspected child abuse or neglect;
- 4. whether employees of ABA services providers should submit to comprehensive background checks;
- 5. a rate-setting structure to ensure Medicaid reimbursement rates adequate to provide prompt access to ABA services for children and families; and
- 6. whether an entity providing ABA services to children should

give notice to patients about how to make complaints to the Department of Public Health (DPH) about a licensed professional's conduct.

The bill requires the advisory committee to report on its review and recommendations to MAPOC, the governor, and the Children, Human Services, and Public Health committees by January 1, 2027. The committee terminates on this date or when it submits its report, whichever is later.

EFFECTIVE DATE: Upon passage

Members

Under the bill, advisory committee members include the chairpersons and ranking members of the Children, Human Services, and Public Health committees or their designees. Members also include the following eight state officials or their designees: the early childhood, DPH, DSS, DCF, developmental services, and education commissioners; Child Advocate; and Office of Policy and Management secretary. The Autism Spectrum Disorder Advisory Council chairpersons must select a representative to serve as an advisory committee member. An additional six members are appointed as follows:

- 1. one member jointly appointed by the Public Health Committee chairs who must represent an entity providing ABA services to children,
- 2. one member jointly appointed by the Public Health Committee ranking members who must be a parent of a child with autism,
- 3. one member jointly appointed by the Human Services Committee chairs who must represent an advocacy organization for children with autism,
- 4. one member jointly appointed by the Human Services Committee ranking members who must be a parent of a child with autism,

- 5. one member jointly appointed by the Committee on Children chairs who must be a board-certified behavior analyst providing services to children, and
- 6. one member jointly appointed by the Committee on Children ranking members who must be a psychiatrist with expertise in delivering services to children with autism.

The bill requires appointing authorities to make their initial appointments within 30 days after the bill's passage and fill any vacancies. Appointed members may be legislators.

Leadership and Meetings

Under the bill, the advisory committee must hold its first meeting within 60 days after the bill's passage and choose a chairperson from among its members.

The bill requires the Joint Committee on Legislative Management's administrative staff to provide administrative support to the advisory committee and its chairperson.

Background — Council on Medical Assistance Program Oversight (MAPOC)

The law charges this council with monitoring and advising DSS on various aspects of the Medicaid program (CGS § 17b-28). MAPOC includes legislators, consumers, advocates, health care providers, administrative service organization representatives, and state agency personnel. It generally meets monthly and has subcommittees that meet separately.

§ 10 — STANDARD SELF-EMPLOYMENT EXPENSE DEDUCTION

Establishes a standard deduction for TFA applicants with income from self-employment

The Temporary Family Assistance (TFA) program gives cash assistance to children and families with income below certain limits. The Department of Social Services (DSS) uses household income to calculate TFA eligibility and benefit amounts. The bill creates a standard deduction for DSS to use when calculating earnings from self-employment. Specifically, the bill requires the DSS commissioner to

apply a standard income deduction equal to 51% of the total monthly income from self-employment, so long as the family verifies at least one allowable expense directly related to their self-employment earnings. Alternatively, the bill allows families to instead deduct all allowable monthly expenses directly related to self-employment earnings if verified expenses exceed the standard deduction amount.

EFFECTIVE DATE: Upon passage

Background — TFA and Supplemental Nutrition Assistance Program (SNAP)

TFA is funded by the federal Temporary Assistance for Needy Families (TANF) block grant. Federal regulations allow states to use the same standard deduction the state uses for its TANF-funded program to calculate self-employment income for SNAP (7 C.F.R. § 273.11(b)(3)(iv)).

§ 11 — FIREFIGHTERS CANCER RELIEF TELEPHONE FEE DELAY AND OPT OUT REMOVAL

Delays the first five-cent telephone service fee to fund the firefighters cancer relief fund and removes a subscriber's ability to opt-out of paying the fee

PA 25-168, § 407, beginning January 1, 2026, requires each telephone service provider (including cell phone and Internet phone service providers, but not for certain prepaid cell phone service) to charge each subscriber a new five cents per month fee, per service line, unless the subscriber opts out, to be deposited into the firefighters cancer relief account.

The bill (1) delays the first charge by one year to January 1, 2027, and (2) removes the opt-out. It also requires service providers to give subscribers written notice of the fee by November 1, 2026, instead of at least 60 days before the first fee is assessed as currently required.

By law, the firefighters cancer relief account provides wage replacement benefits for eligible paid and volunteer firefighters diagnosed with cancer.

EFFECTIVE DATE: Upon passage

§ 12 — DETENTION ON COURTHOUSE GROUNDS

Sets parameters for detaining, arresting, or taking a person into custody on courthouse grounds based on a civil offense

The bill sets parameters for detaining, arresting, or otherwise taking a person into custody on courthouse grounds based on a civil offense. The requirements do not apply to judicial marshals.

Under the bill, a "courthouse" includes the interior of a facility or property in which a Connecticut court operates. A courthouse's grounds include (1) the courthouse; (2) any garage or parking lot owned by or under contract with the judicial branch to serve the courthouse; and (3) any walkway or sidewalk on the courthouse grounds, next to the grounds, or connecting it with the garage or parking lot.

EFFECTIVE DATE: Upon passage

Courthouse Grounds Detention Requirements

Under the bill, to take a person into custody on courthouse grounds based on a civil offense, a state, local, or federal law enforcement representative must (1) be operating in his or her official capacity and (2) have first notified a judicial marshal in the courthouse in which the detention, arrest, or taking into custody will occur. The representative must also give the marshal documentation showing that the person to be detained, arrested, or taken into custody is (1) the subject of a judicial warrant or (2) exempt from the state's civil detainer law protections (i.e. because of a criminal conviction or possible match in a terrorist database) (see *Background — Civil Detainer Law Exemptions*).

Under the bill, the judicial marshal who receives the documentation must promptly review it according to policies and procedures approved by the Office of the Chief Court Administrator. The law enforcement representative may then only detain, arrest, or take the person into custody if the judicial marshal determines, by reviewing the documents, that he or she is the subject of the judicial warrant or exempt from the state's civil detainer protections.

The bill specifies that its provisions do not otherwise prohibit a law enforcement representative from detaining, arresting, or otherwise taking someone into custody due to a civil offense if the representative follows requirements under the bill and existing civil detainer laws.

Penalties

Under the bill, violating the detention, arrest, or custody restrictions may be considered contempt of court, which is punishable under existing law by a fine of up to \$100, up to six months in jail, or both.

The bill also allows anyone aggrieved by a violation to bring a civil action in Superior Court for equitable relief or damages, which may be tried before a jury. But it immunizes from this suit the judicial branch and its officers or employees for their actions or inactions when acting lawfully in their official capacity. The bill allows the court to award the prevailing party its reasonable attorney's fees and costs.

Background — Civil Detainer Law Exemptions

Among other things, the state's civil immigration detainer law generally prohibits law enforcement officers and certain other individuals from (1) arresting or detaining someone under a civil immigration detainer or (2) giving a federal immigration authority access to interview someone in law enforcement agency custody (CGS § 54-192h).

But this protection does not apply to those convicted of a class A or B felony or identified as a possible match in the federal Terrorist Screening Database or similar database. It also does not apply to people convicted of any of the following 13 crimes, regardless of the felony classification involved:

- injury or risk of injury to, or impairing morals of, children (CGS § 53-21);
- 2. 2nd degree manslaughter with a firearm (CGS § 53a-56a);
- 3. 1st degree strangulation or suffocation (CGS § 53a-64aa);
- 4. 2nd or 3rd degree sexual assault or 3rd degree sexual assault with a firearm (CGS §§ 53a-71, 53a-72a & 53a-72b);

- 5. enticing a minor (CGS § 53a-90a);
- 6. 2nd degree burglary with a firearm (CGS § 53a-102a);
- 7. 2nd or 3rd degree possessing child sexual abuse material (CGS §\$ 53a-196e & 53a-196f);
- 8. commercial sexual exploitation of a minor (CGS § 53a-196i);
- 9. 1st degree violation of conditions of release (CGS § 53a-222); or
- 10. criminal violation of a protective order (CGS § 53a-223).

§ 13 — LAW ENFORCEMENT FACIAL COVERINGS AT COURTHOUSES

Generally prohibits people enforcing state or federal laws on state courthouse grounds from wearing facial coverings

The bill generally prohibits anyone enforcing this state's, another state's, or federal laws on state courthouse grounds (i.e. courthouse, garage, parking lot owned by or under contract with the judicial branch, and associated walkways or sidewalks) from wearing a mask or other covering that obscures the person's face. A mask or covering is allowed if it is medically necessary, and a judicial authority authorized it beforehand.

EFFECTIVE DATE: Upon passage

§ 14 — PUBLIC AGENCY DISCLOSURE OF PERSONAL INFORMATION

Generally prohibits a public agency from disclosing a person's nonpublic home, work, school, or agency appointment information; requires the attorney general to give public agencies guidance on how to comply

The bill generally prohibits public agencies, including their employees, appointees, officers, officials, or others acting on their behalf, from giving out a person's nonpublic home, work, school, agency appointment information to any other person or entity that is not a public agency or an agency's associated actor (see *Background – Public Agency*).

Under the bill, the disclosure prohibition covers the person's (1)

home address; (2) workplace and hours of work; (3) school and school hours; and (4) date, time, or place of a hearing, proceeding, or appointment with a public agency.

Disclosure is permitted, however, under the following circumstances:

- 1. the information is needed for a criminal investigation, unless the state's civil immigration detainer law prohibits its disclosure;
- 2. the public agency customarily makes the information publicly available such as for occupational or business license verification, voter registration, or research data;
- 3. the person, or their parent or guardian if they are a minor or not legally competent to consent, gives written authorization for it;
- 4. state or federal law requires it (e.g., for higher education student and exchange visitor visa sponsorship requirements or to comply with a judicial warrant or court order);
- 5. state or federal law on personal health information (e.g., HIPAA and its associated regulations) allows it, and the (a) recipient of the information is a covered entity (i.e. health care provider, plan, or clearinghouse) or the entity's business associate and (b) information is still covered by HIPAA's privacy and security protections; and
- 6. state law allows it, and the information is protected by privacy regulations, data use agreements, or other rules prohibiting disclosure to unauthorized parties.

Additionally, if the state's Freedom of Information law requires the information's disclosure, it must occur.

Under the bill, the state attorney general must, in consultation with the state's Chief Data Officer, give public agencies guidance on how to comply with these provisions.

The bill allows the state attorney general to bring an action against a

violator in Hartford Superior Court for an injunction, declaratory judgment, or mandamus. (A mandamus is a court order to compel a public official or agency to perform a specific duty.) But it does not allow him to assert a claim against a state agency, or a state officer or employee acting in his or her official capacity, for actions or failures to act, unless existing law's indemnification for state officers and employees does not apply (e.g., there was reckless or malicious conduct).

EFFECTIVE DATE: Upon passage

Background — Public Agency

A "public agency" includes any:

- 1. state or town agency;
- 2. executive, administrative, or legislative office of the state and its political subdivisions;
- department, institution, bureau, board, commission, authority, or official of the state, city, town, borough, municipal corporation, school district, regional district, or other district or political subdivisions (including any of their committees);
- 4. judicial office or official and any of their committees and bodies, but only with respect to their administrative functions;
- 5. person to the extent deemed to be the functional equivalent of a public agency under law; and
- 6. municipally designated agency that prepares and implements economic development plans (such as an economic development commission or redevelopment agency) (CGS § 1-200).

§ 15 — REDISTRICTING DATA

Requires various entities to give the secretary of the state all information she finds necessary to implement a new redistricting plan; requires the secretary of the state to update CVRS accordingly; requires registrars and the secretary to notify each other about errors they find and update CVRS as applicable; requires registrars to notify voters if their polling place changed due to a corrected error

Under the bill, when a redistricting plan is adopted or established as

authorized under the state constitution, the applicable redistricting entity (i.e. the General Assembly, the reapportionment commission, or the state Supreme Court; see *Background — Redistricting Authority*) must give the secretary of the state all map, statistical, and voting district information she finds necessary to effectively implement the redistricting plan.

Upon receiving this information, the secretary must (1) update the state-wide centralized voter registration system (CVRS) to reflect the plan's new congressional, senatorial, and assembly district lines and (2) send registrars of voters the information they need to update CVRS to reflect the voting district lines in their municipalities.

If the secretary of the state identifies a redistricting plan's implementation error in a municipality, the act requires her to notify the applicable registrars about the error. Similarly, if a registrar identifies such an error, he or she must notify the secretary.

For errors concerning congressional, senatorial, or assembly district lines, the act requires the secretary to update CVRS to correct it. For errors in voting district lines within a municipality, the municipality's registrars of voters must immediately update CVRS to correct the error and submit written certification to the secretary when it has been done.

Additionally, the act requires registrars of voters to send written notification to each voter whose polling place has changed due to correcting an error. As under existing law, any changes to voting district boundaries made within ninety days before an election or primary are not applicable to that election or primary (CGS § 9-169).

EFFECTIVE DATE: Upon passage

Background — Redistricting Authority

The Connecticut Constitution establishes the state's redistricting process. Generally, the process requires (1) a bipartisan legislative committee to prepare the Plan of Redistricting for state Senate, state House, and Congressional districts, and (2) the General Assembly to approve it by September 15 of the year following the decennial census.

If the General Assembly does not timely approve the plan, a ninemember Reapportionment Commission, consisting of legislatordesignated members and one state elector, is formed to do the job and has until November 30 to do so (i.e. approve by a vote of at least five members).

If the commission fails to meet the November 30 deadline, the Connecticut Supreme Court has the authority to make the commission complete its task or the court can draw the district boundaries itself by the following February 15. In these cases, the Plan of Redistricting has the full force of law when the commission or the court, as applicable, submits it to the secretary of the state and the secretary publishes it (Conn. Const. Art. III., § 6).