



House of Representatives

General Assembly

File No. 682

February Session, 2026

Substitute House Bill No. 5168

House of Representatives, April 20, 2026

The Committee on Education reported through REP. LEEPER of the 132nd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

AN ACT CONCERNING THE SECURE TRANSMISSION OF SAFETY PLANS OF MINOR PATIENTS TO SCHOOLS BY HEALTH CARE PROVIDERS.

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

1 Section 1. (NEW) (*Effective from passage*) (a) As used in this section:

2 (1) "Designated employee" means a school nurse or nurse practitioner
3 appointed pursuant to section 10-212 of the general statutes, school
4 nurse supervisor, school counselor, school social worker or school
5 psychologist who a local or regional school board of education
6 designates to access safety plans of minor patients transmitted by health
7 care providers to a school district or school's secure messaging system
8 account pursuant to the provisions of this section;

9 (2) "Health care provider" means any person, corporation, limited
10 liability company, facility or institution operated, owned or licensed by
11 this state to provide health care or professional medical services;

12 (3) "Legally authorized representative" means a minor patient's

13 parent, guardian appointed by the Probate Court or a personal
14 representative, as described in 45 CFR 164.502(g);

15 (4) "Safety plan" means a written document created collaboratively
16 between a health care provider and a patient outlining coping strategies,
17 activities and support networks the patient can access to prevent or
18 manage a potential mental health crisis;

19 (5) "School nurse supervisor" means a school nurse or nurse
20 practitioner appointed pursuant to section 10-212 of the general statutes
21 designated by the local or regional board of education as the supervisor,
22 or, if no designation has been made by the board, the lead or
23 coordinating school nurse or nurse practitioner; and

24 (6) "Secure messaging system" means a platform capable of sending
25 and receiving secure messages and may include a platform that
26 complies with the Direct Project specifications published by the federal
27 Office of the National Coordinator for Health Information Technology.

28 (b) On and after April 1, 2027, each health care provider that prepares
29 a safety plan for a minor patient who received inpatient behavioral
30 health care treatment for a period not less than twelve consecutive days
31 shall (1) review such safety plan with the minor patient if the health care
32 provider believes such a review is medically appropriate, and (2)
33 inquire as to whether the minor patient or minor patient's parent or
34 legally authorized representative consents to sharing such safety plan
35 with the minor patient's school. If the minor patient or minor patient's
36 parent or legally authorized representative consents to sharing such
37 safety plan with the minor patient's school, the health care provider
38 shall obtain written consent from (A) the minor patient's parent or
39 legally authorized representative, or (B) if the minor patient is sixteen
40 years of age or older, such minor patient, and transmit such safety plan
41 to the minor patient's school district or school (i) using a secure
42 messaging system, or (ii) in a form and manner that complies with the
43 Health Insurance Portability and Accountability Act of 1996, P.L. 104-
44 191, as amended from time to time, and 45 CFR 160.101 to 45 CFR
45 164.534, inclusive, as amended from time to time.

46 (c) Nothing in this section shall be construed to (1) create a standard
47 of medical care with respect to any minor patient, (2) require a health
48 care provider to create a safety plan, (3) require a health care provider
49 to release information to a parent or legally authorized representative if,
50 pursuant to state or federal law, a minor patient may withhold such
51 information from such minor patient's parent or legally authorized
52 representative, including, but not limited to, information regarding
53 pregnancy, abortion, contraceptives, human immunodeficiency virus or
54 other sexually transmitted disease testing or treatment, mental health
55 treatment or any other area of care that a health care provider has
56 promised a minor patient that the health care provider will keep
57 confidential, or (4) require a health care provider to transmit a safety
58 plan or provide any other information to any person in violation of the
59 provisions of the Health Insurance Portability and Accountability Act of
60 1996, P.L. 104-191, as amended from time to time.

61 (d) The provisions of this section shall not apply unless the State-wide
62 Health Information Exchange provides, pursuant to section 17b-59d of
63 the general statutes, as amended by this act, a secure messaging system
64 organizational account to each school district or school, as determined
65 by each local and regional board of education, for the purposes of
66 receiving minor patient safety plans pursuant to the provisions of this
67 section, and access to such organizational account for designated
68 employees at no cost to such school district, school and designated
69 employee.

70 Sec. 2. (NEW) (*Effective from passage*) (a) On or before January 1, 2027,
71 each local or regional board of education shall ensure that each school
72 district or school, as determined by the board, (1) signs up for an
73 organizational account on a secure messaging system, as defined in
74 section 1 of this act, and (2) provides access to one or more designated
75 employees, as defined in section 1 of this act, one of whom shall be a
76 school nurse supervisor, as defined in section 1 of this act, to such
77 organizational account for the purpose of accessing minor patient safety
78 plans, as defined in section 1 of this act, transmitted by health care
79 providers, pursuant to the provisions of section 1 of this act. A

80 designated employee shall retain minor patient safety plans in a
81 confidential file separate from any cumulative academic or health
82 record, provided information contained in a minor patient safety plan
83 may be used to provide appropriate interventions pursuant to an
84 individualized education program or a plan pursuant to Section 504 of
85 the Rehabilitation Act of 1973.

86 (b) On or before April 1, 2027, each local or regional board of
87 education shall submit each school district or school's secure messaging
88 system address to the Commissioner of Education in a form and manner
89 prescribed by the commissioner. On and after April 1, 2027, if a school
90 district or school's secure messaging system address changes, each local
91 or regional board of education shall, in a form and manner prescribed
92 by the commissioner, submit such new address to the commissioner as
93 soon as practicable but not later than thirty days after acquiring such
94 new address. The commissioner shall compile and maintain a list of each
95 school district or school's secure messaging system address and make
96 such list available to health care providers in the state for the purpose of
97 transmitting minor patient safety plans pursuant to the provisions of
98 section 1 of this act.

99 (c) The provisions of this section shall not apply unless the State-wide
100 Health Information Exchange provides, pursuant to section 17b-59d of
101 the general statutes, as amended by this act, a secure messaging system
102 organizational account to each school district or school, as determined
103 by each local and regional board of education, for the purposes of
104 receiving minor patient safety plans pursuant to the provisions of
105 section 1 of this act, and access to such organizational account for
106 designated employees at no cost to such school district, school and
107 designated employee.

108 Sec. 3. (NEW) (*Effective July 1, 2027*) (a) For the school year
109 commencing July 1, 2027, and each school year thereafter, each local and
110 regional board of education shall provide guidance regarding the
111 requirements of section 1 of this act for all new designated employees,
112 as defined in section 1 of this act. The Department of Education shall

113 develop and make available such guidance and training materials for
114 use by each local and regional board of education. Such materials shall
115 include instruction for using a secure messaging system for the purpose
116 of accessing minor patient safety plans, as defined in section 1 of this
117 act, transmitted by health care providers pursuant to the provisions of
118 section 1 of this act.

119 (b) The provisions of this section shall not apply unless the State-wide
120 Health Information Exchange provides, pursuant to section 17b-59d of
121 the general statutes, as amended by this act, a secure messaging system
122 organizational account to each school district or school, as determined
123 by each local and regional board of education, for the purposes of
124 receiving minor patient safety plans pursuant to the provisions of
125 section 1 of this act, and access to such organizational account for
126 designated employees at no cost to such school district, school and
127 designated employee.

128 Sec. 4. Subsection (b) of section 17b-59d of the general statutes is
129 repealed and the following is substituted in lieu thereof (*Effective from*
130 *passage*):

131 (b) It shall be the goal of the State-wide Health Information Exchange
132 to: (1) Allow real-time, secure access to patient health information and
133 complete medical records across all health care provider settings; (2)
134 provide patients with secure electronic access to their health
135 information in accordance with 45 CFR 171; (3) allow voluntary
136 participation by patients to access their health information at no cost; (4)
137 support care coordination through real-time alerts and timely access to
138 clinical information; (5) reduce costs associated with preventable
139 readmissions, duplicative testing and medical errors; (6) promote the
140 highest level of interoperability; (7) meet all state and federal privacy
141 and security requirements; (8) support public health reporting, quality
142 improvement, academic research and health care delivery and payment
143 reform through data aggregation and analytics; (9) support population
144 health analytics; (10) be standards-based; [and] (11) provide for broad
145 local governance that (A) includes stakeholders, including, but not

146 limited to, representatives of the Department of Social Services,
 147 hospitals, physicians, behavioral health care providers, long-term care
 148 providers, health insurers, employers, patients and academic or medical
 149 research institutions, and (B) is committed to the successful
 150 development and implementation of the State-wide Health Information
 151 Exchange; and (12) provide, within available appropriations, (A) a
 152 secure messaging system organizational account to each school district
 153 or school, as determined by each local and regional board of education,
 154 for the purposes of receiving minor patient safety plans pursuant to the
 155 provisions of section 1 of this act, and (B) access to such organizational
 156 account for designated employees, as defined in section 1 of this act, at
 157 no cost to such school district, school and designated employee.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section
Sec. 2	<i>from passage</i>	New section
Sec. 3	<i>July 1, 2027</i>	New section
Sec. 4	<i>from passage</i>	17b-59d(b)

ED *Joint Favorable Subst.*

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: None

Municipal Impact: None

Explanation

The bill has no fiscal impact. It requires: (1) the Office of Health Strategy to provide, and local and regional boards of education (BOEs) to use, a secure messaging system for safety plans; (2) BOEs to designate at least one employee to have access to the system; and (3) the State Department of Education (SDE) to provide guidance and make training available for designated employees.

OHS currently has a secure messaging system (Connie) and it is anticipated BOEs and SDE can meet the bill's requirements using existing resources.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis**sHB 5168*****AN ACT CONCERNING THE SECURE TRANSMISSION OF SAFETY PLANS OF MINOR PATIENTS TO SCHOOLS BY HEALTH CARE PROVIDERS.*****SUMMARY**

This bill regulates the review and sharing of certain minors' "safety plans" (written documents health care providers and patients create collaboratively, outlining coping strategies, activities, and support networks the patient can access to prevent or manage a potential mental health crisis).

Starting April 1, 2027, the bill requires each health care provider that prepares a safety plan for a minor patient who received at least 12 consecutive days of inpatient behavioral health care treatment to (1) review it with the minor, if medically appropriate, and (2) ask whether the minor or the minor's parent or legally authorized representative consents to sharing the safety plan with the minor's school. If this consent is given, the provider must (1) get written consent from the minor's parent or legally authorized representative (or the minor if they are at least age 16) and (2) send the plan to the minor's school or school district using a secure messaging system or in a way that complies with the federal Health Insurance Portability and Accountability Act (HIPAA).

Relatedly, the bill also requires:

1. school districts and schools to sign up for an organizational account on a secure messaging system and give at least one designated employee (for example, a school nurse, social worker, or psychologist) access to the account;
2. local and regional education boards (school boards) to give the

State Department of Education (SDE) commissioner each school's and school district's secure messaging system address to make available to health care providers; and

3. school boards to give new designated employees SDE-developed guidance on how to use the secure messaging system.

Additionally, the bill makes it a goal of the Statewide Health Information Exchange ("Connie") to give, within available appropriations, schools and school districts a secure messaging system organizational account that designated employees may access to receive these safety plans. The bill expressly provides that its requirements do not apply unless Connie provides these accounts at no cost to schools, school districts, and their designated employees.

EFFECTIVE DATE: Upon passage, except that the provision on guidance for new designated employees takes effect July 1, 2027.

SCHOOL SAFETY PLANS

Provider Requirements

The bill specifies that its provisions do not create a standard of medical care for minor patients or require a health care provider to do the following:

1. create a safety plan;
2. release information to a minor patient's parent or legally authorized representative if state or federal law allows the minor to withhold the information (for example, when it is about pregnancy, abortion, contraception, HIV, mental health treatment, or any other area of care that the provider promised to keep confidential); or
3. transmit a safety plan or provide any other information to someone in violation of HIPAA.

Secure Messaging Systems

The bill requires school boards, by January 1, 2027, to ensure that each

school district or school, as determined by the board, (1) signs up for an organizational account on a “secure messaging system” (for example, one that complies with the federal Office of the National Coordinator for Health Information Technology’s Direct Project specifications, see BACKGROUND) and (2) gives at least one designated employee (see below) access to the organizational account to access the safety plans.

Correspondingly, the bill makes it a goal of Connie to give, within available appropriations, (1) a secure messaging system organizational account to each board-determined school district and school to receive these safety plans and (2) designated employees access to the accounts. The bill’s requirements do not apply unless Connie provides these accounts at no cost to schools, school districts, and their designated employees.

Designated Employees

Under the bill, a “designated employee” is a school nurse or nurse practitioner, school nurse supervisor, school counselor, school social worker, or school psychologist the school board designates to access the safety plans.

The bill requires at least one designated employee to be a school nurse supervisor. Designated employees must keep the safety plans in a confidential file separate from any cumulative academic or health record, so long as safety plan information may be used for appropriate interventions under a minor’s individualized education program (IEP) or 504 plan (see BACKGROUND).

SDE List of Secure Messaging System Addresses

The bill requires school boards to give the SDE commissioner each school district’s and school’s secure messaging system address by April 1, 2027. After this date, the education boards must also give the commissioner any address changes within 30 days after receiving them.

The bill requires the SDE commissioner to create and maintain a list of these secure messaging system addresses and make it available to the state’s health care providers so they can send the safety plans.

Guidance for New Designated Employees

Starting with the 2027-2028 school year, each school board must provide guidance about the safety plans to new designated employees. More specifically, SDE must develop guidance and related training materials for the school boards to use that include instruction on using a secure messaging system to access safety plans sent by health care providers under the bill.

BACKGROUND***Direct Project Standards***

The Direct Project is part of the Nationwide Health Information Network and specifies technical standards and services for health care providers to securely send authenticated, encrypted health information directly to trusted recipients online.

IEP and 504 Plans

An IEP is a written statement detailing a student's academic achievement level, goals for future achievement, and specialized educational services needed to reach the goals. Federal law requires school boards to develop IEPs for students eligible to receive special education and related services (Individuals with Disabilities Education Act, 20 U.S.C. § 1400 et seq.). Section 504 of the federal Rehabilitation Act of 1973 protects students with mental or physical disabilities from discrimination in public schools (29 U.S.C. § 794). Students who receive school accommodations under this law have them memorialized in a written plan, commonly known as a "504 plan."

Legislative History

The House referred the bill (File 37) to the Education Committee, which reported a substitute that adds provisions specifying that the bill's requirements do not apply unless Connie provides secure messaging system organizational accounts at no cost to schools, school districts, and their designated employees.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 22 Nay 9 (03/02/2026)

Education Committee

Joint Favorable Substitute

Yea 41 Nay 2 (04/06/2026)