



# House of Representatives

General Assembly

**File No. 542**

February Session, 2026

Substitute House Bill No. 5516

*House of Representatives, April 9, 2026*

The Committee on Public Health reported through REP. MCCARTHY VAHEY of the 133rd Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

## **AN ACT CONCERNING REPRODUCTIVE AND GENDER-AFFIRMING HEALTH CARE SERVICES.**

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

1 Section 1. (NEW) (*Effective July 1, 2026*) As used in this section and  
2 section 2 of this act:

3 (1) "Gender-affirming health care services" means all medical care  
4 relating to the treatment of (A) gender dysphoria, as set forth in the most  
5 recent edition of the American Psychiatric Association's "Diagnostic and  
6 Statistical Manual of Mental Disorders", and (B) gender incongruence,  
7 as defined in the most recent revision of the "International Statistical  
8 Classification of Diseases and Related Health Problems";

9 (2) "Health care entity" means an entity that supervises, controls,  
10 grants privileges to, directs the practice of or directly, or indirectly,  
11 restricts the practice of a health care provider;

12 (3) "Health care provider" means a person who (A) provides health  
13 care services, (B) is licensed, certified or registered pursuant to title 20  
14 of the general statutes, and (C) is employed by or acting on behalf of a  
15 health care entity;

16 (4) "Medically accurate and appropriate information and counseling"  
17 means information and counseling that is (A) supported by the weight  
18 of current scientific evidence, (B) derived from research using accepted  
19 scientific methods, (C) consistent with generally recognized scientific  
20 theory, (D) published in peer-reviewed journals, as appropriate, and (E)  
21 recognized as accurate, complete, objective and in accordance with the  
22 accepted standard of care by professional organizations and agencies  
23 with expertise in the relevant field; and

24 (5) "Reproductive health care services" means all medical, surgical,  
25 counseling or referral services relating to the human reproductive  
26 system, including, but not limited to, services relating to sexual health,  
27 pregnancy, contraception or the termination of a pregnancy.

28 Sec. 2. (NEW) (*Effective July 1, 2026*) (a) Except as provided in  
29 subsection (b) of this section, if a health care provider is acting in good  
30 faith, within the health care provider's scope of practice, education,  
31 training and experience, including the health care provider's specialty  
32 areas of practice and board certification, and within the accepted  
33 standard of care, a health care entity shall not limit the health care  
34 provider's provision of the following with regard to reproductive health  
35 care services and gender-affirming health care services:

36 (1) Comprehensive medically accurate and appropriate information  
37 and counseling that conforms to the accepted standard of care to an  
38 individual patient regarding that patient's health status, including, but  
39 not limited to, diagnosis, prognosis, recommended treatment, treatment  
40 alternatives and any potential risks to the patient's health or life; and

41 (2) Comprehensive medically accurate and appropriate information  
42 and counseling about available and relevant services and resources in  
43 the community and how to access such services and resources to obtain  
44 health care of the patient's choosing.

45 (b) Nothing in subsection (a) of this section shall be construed to  
46 prohibit a health care entity that employs a health care provider from  
47 (1) performing relevant peer review of the health care provider, (2)

48 requiring the health care provider to provide the full range of  
49 information to patients about available, legal options for care, as  
50 determined by the health care entity, including, but not limited to,  
51 vaccinations, or (3) requiring such health care provider to:

52 (A) Comply with preferred provider network or utilization review  
53 requirements of any program or entity authorized by state or federal  
54 law to provide insurance coverage for health care services to an enrollee,  
55 including, but not limited to, the conditions of participation for hospitals  
56 developed by the Centers for Medicare and Medicaid Services; or

57 (B) Meet established health care quality and patient safety guidelines  
58 or rules.

59 (c) A health care entity shall not discharge, demote, suspend,  
60 discipline or take any other adverse action against a health care provider  
61 solely because the health care provider has provided information or  
62 counseling as described in subsection (a) of this section. The provisions  
63 of this subsection shall not apply to a health care provider who fails to  
64 comply with the instruction of a health care entity to provide patients  
65 with the full range of information about available, legal options for care,  
66 as determined by the health care entity, including, but not limited to,  
67 vaccinations.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2026	New section
Sec. 2	July 1, 2026	New section

**PH** 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.*

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**OFA Fiscal Note****State Impact:** None**Municipal Impact:** None**Explanation**

The bill prohibits health care entities, under certain conditions, from limiting a health care provider's ability to give patients comprehensive information and counseling about reproductive or gender-affirming health care services, resulting in no fiscal impact to the state or municipalities.

**OLR Bill Analysis**

**sHB 5516**

***AN ACT CONCERNING REPRODUCTIVE AND GENDER-AFFIRMING HEALTH CARE SERVICES.***

**SUMMARY**

This bill generally prohibits health care entities from:

1. limiting their health care providers' ability to give patients comprehensive, medically accurate and appropriate information and counseling about reproductive or gender-affirming health care services, or about related community resources, or
2. taking adverse action against their providers (such as firing or demoting them) solely for giving this information or counseling.

For these prohibitions to apply, the providers must be acting (1) in good faith; (2) within their professional scope of practice, education, training, and experience (including their specialty and board certification); and (3) within the accepted standard of care.

Under the bill, health care entities may still perform relevant peer reviews of their health care providers or require them to:

1. give patients the full range of information on available legal options for care as the entity determines, including vaccinations (and the entity can fire or discipline the provider for failing to comply with instructions to give this information);
2. comply with preferred provider network or utilization review requirements for insurance purposes; or
3. meet established health care quality and patient safety guidelines or rules.

EFFECTIVE DATE: July 1, 2026

**LIMITS ON HEALTH CARE ENTITIES**

Subject to the conditions noted above, the bill prohibits health care entities from limiting health care providers’ ability to give comprehensive, medically accurate and appropriate information (generally, supported by current scientific evidence, published in peer-reviewed journals, and recognized as accurate, complete, and objective by experts) to patients about:

1. their health status related to reproductive or gender-affirming health care, including diagnosis, prognosis, treatment recommendations and alternatives, and any potential risk to their life or health, and
2. related available and relevant community services and resources and how to access them to obtain the care they choose.

Under the bill, subject to the conditions noted above, health care entities must not fire, demote, suspend, discipline, or take other adverse action against providers solely for giving this information or counseling.

The bill applies to state-credentialed health care providers who are employed by, or acting on behalf of, a health care entity.

**BACKGROUND**

***Related Bill***

sSB 295, favorably reported by the Judiciary Committee, makes several changes related to reproductive or gender-affirming care, including classifying it under certain conditions as “legally protected health care activity” and making conforming changes to several laws (including to restrictions on health care institutions from disciplining providers for involvement in this care (1) before starting to work for the institution or (2) outside the scope of employment with the institution).

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute			
Yea	22	Nay	10
			(03/23/2026)