



Senate

General Assembly

File No. 560

February Session, 2026

Substitute Senate Bill No. 295

Senate, April 9, 2026

The Committee on Judiciary reported through SEN. WINFIELD of the 10th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING STATE LAW PROTECTIONS FOR HEALTH CARE PROVIDERS AND PATIENTS RELATED TO THE PROVISION OF A LEGALLY PROTECTED HEALTH CARE ACTIVITY.

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

1 Section 1. Section 52-571m of the 2026 supplement to the general
2 statutes is repealed and the following is substituted in lieu thereof
3 (*Effective October 1, 2026*):

4 (a) As used in this section:

5 (1) "Reproductive health care services" includes all supplies, care and
6 services of a medical, behavioral health, mental health, surgical,
7 psychiatric, therapeutic, diagnostic, preventative, rehabilitative or
8 supportive nature, including counseling or referral services relating to
9 the human reproductive system, including, but not limited to, services
10 relating to pregnancy, pregnancy loss, assisted reproduction,
11 contraception or the termination of a pregnancy;

12 (2) "Gender-affirming health care services" means all supplies, care

13 and services of a medical, behavioral health, mental health, surgical,
14 psychiatric, therapeutic, diagnostic, preventative, rehabilitative or
15 supportive nature, including medication relating to the treatment of
16 gender dysphoria and gender incongruence. "Gender-affirming health
17 care services" does not include "conversion therapy" as defined in
18 section 19a-907; [and]

19 (3) "Person" includes an individual, a partnership, an association, a
20 limited liability company or a corporation; and

21 (4) "Legally protected health care activity" means: (A) The receipt or
22 attempted receipt by any person of reproductive health care services or
23 gender-affirming health care services that are permitted under and
24 provided in accordance with the laws of this state; (B) the provision,
25 attempted provision or insurance coverage of reproductive health care
26 services or gender-affirming health care services that are permitted
27 under and provided in accordance with the laws of this state and
28 provided in accordance with the applicable standard of care by a health
29 care provider licensed under the laws of this state and who is physically
30 present in this state, regardless of whether the patient is located in this
31 state; and (C) any act or omission undertaken to aid or encourage, or
32 attempt to aid or encourage, any person in the receipt or attempted
33 receipt of reproductive health care services or gender-affirming health
34 care services as permitted under and provided in accordance with the
35 laws of this state.

36 (b) When any person has had a foreign judgment entered against
37 such person, in any other state, in any court of the United States or any
38 other jurisdiction based upon the laws of any state, where liability, in
39 whole or in part, is based on the alleged provision, receipt, assistance in
40 receipt or provision, material support for, or any theory of vicarious,
41 joint, several or conspiracy liability derived therefrom, for [reproductive
42 health care services or gender-affirming health care services that are
43 permitted under the laws of this state] any legally protected health care
44 activity, such person may recover damages from any party that brought
45 the action leading to that judgment or has sought to enforce that

46 judgment. Recoverable damages shall include: (1) Just damages created
47 by the action that led to that judgment, including, but not limited to,
48 money damages in the amount of the judgment in that other state and
49 costs, expenses and reasonable attorney's fees spent in defending the
50 action that resulted in the entry of a judgment in another state; and (2)
51 costs, expenses and reasonable attorney's fees incurred in bringing an
52 action under this section as may be allowed by the court.

53 (c) The provisions of this section shall not apply to a judgment
54 entered in another state that is based on: (1) An action founded in tort,
55 contract or statute, and for which a similar claim would exist under the
56 laws of this state, brought by the patient who received the reproductive
57 health care services or gender-affirming health care services upon which
58 the original lawsuit was based or the patient's authorized legal
59 representative, for damages suffered by the patient or damages derived
60 from an individual's loss of consortium of the patient; (2) an action
61 founded in contract, and for which a similar claim would exist under
62 the laws of this state, brought or sought to be enforced by a party with
63 a contractual relationship with the person that is the subject of the
64 judgment entered in another state; or (3) an action where no part of the
65 acts that formed the basis for liability occurred in this state.

66 (d) The term "legally protected health care activity" shall not be
67 construed to impact or alter (1) the standard of care required for medical
68 professionals under the laws of this state, or (2) contractual rights of
69 parties to a contract under the laws of this state.

70 Sec. 2. (NEW) (*Effective October 1, 2026*) Notwithstanding any
71 provision of the laws of this state relating to conflict of law and except
72 as required by federal law, the laws of this state shall govern in any case
73 or controversy heard in the state related to legally protected health care
74 activity as defined in section 52-571m of the general statutes, as
75 amended by this act.

76 Sec. 3. (NEW) (*Effective October 1, 2026*) (a) Except as required by
77 federal law, evidence relating to the involvement of an individual
78 regarding any legally protected health care activity, as defined in section

79 52-571m of the general statutes, as amended by this act, may not be
80 offered as evidence that such individual has engaged in wrongdoing,
81 whether civil, criminal, professional or otherwise, if the evidence is
82 based on or related to the fact that the individual who received services
83 constituting such legally protected health care activity was not
84 physically present in the state when such individual received such
85 services. Nothing in this section shall prevent a party from offering such
86 evidence in any action relating to the provisions of subsection (d) of
87 section 52-571m of the general statutes, as amended by this act, provided
88 the person against whom the evidence is offered is a party to the case or
89 a party in a civil, criminal or administrative action brought by an
90 authorized agency of this state against a licensed health care provider
91 or health care facility pursuant to the laws of this state. Nothing in this
92 section shall be construed to affect any other applicable privilege, right
93 or confidentiality protection as may apply.

94 (b) When any person that is subject to a subpoena relating to the
95 alleged provision, receipt, assistance in receipt or provision, material
96 support for, or any theory of vicarious, joint, several or conspiracy
97 liability derived therefrom, for any legally protected health care activity,
98 as defined in section 52-571m of the general statutes, as amended by this
99 act, in addition to any other reason, theory or argument, such person
100 may move to modify or quash such subpoena pursuant to the rules of
101 court. Nothing in this section shall prevent compliance with a subpoena
102 if the subpoena has been issued in an action relating to the provisions of
103 subsection (d) of section 52-571m of the general statutes, as amended by
104 this act, provided the person against whom the evidence is offered is a
105 party to the case or a party in a civil, criminal or administrative action
106 brought by an authorized agency of this state against a licensed health
107 care provider or health care facility pursuant to the laws of this state.
108 Nothing in this section shall be construed to affect any other applicable
109 privilege, right or confidentiality protection as may apply.

110 Sec. 4. Section 52-146w of the 2026 supplement to the general statutes
111 is repealed and the following is substituted in lieu thereof (*Effective*
112 *October 1, 2026*):

113 (a) Except as provided in sections 52-146d to 52-146k, inclusive,
114 sections 52-146o, 52-146p, 52-146q and 52-146s and subsection (b) of this
115 section, in any civil action or any proceeding preliminary thereto or in
116 any probate, legislative or administrative proceeding, no covered entity
117 or business associate, as defined in 45 CFR 160.103, shall, in response to
118 a subpoena, disclose (1) any communication made to such covered
119 entity or business associate, or any information obtained by such
120 covered entity or business associate from, a patient or the conservator,
121 guardian or other authorized legal representative of a patient relating to
122 [reproductive health care services or gender-affirming health care
123 services] any legally protected health care activity, as defined in section
124 52-571m, as amended by this act, [that are permitted under the laws of
125 this state, or] (2) any information obtained by personal examination of a
126 patient relating to [such services, that are permitted under the laws of
127 this state,] a legally protected health care activity, or (3) any protected
128 health information relating to a legally protected health care activity that
129 is in the designated record set, as defined in 45 CFR 164.501, for such
130 patient unless the patient or that patient's conservator, guardian or other
131 authorized legal representative explicitly consents in writing to such
132 disclosure. A covered entity shall inform the patient or the patient's
133 conservator, guardian or other authorized legal representative of the
134 patient's right to withhold such written consent. A covered entity or
135 business associate that receives a subpoena for patient information
136 related to [reproductive health care services or gender-affirming health
137 care services] any legally protected health care activity subject to the
138 provisions of this section that does not fall under any exemption in
139 subsection (b) of this section and is not accompanied by the written
140 consent of the patient or the conservator, guardian or other authorized
141 legal representative of the patient shall provide a copy of the subpoena
142 to the office of the Attorney General not later than seven days after the
143 date of receipt of the subpoena. The office of the Attorney General shall
144 post notice of the methods by which a covered entity and business
145 associate may send the copy of the subpoena.

146 (b) Written consent of the patient or the patient's conservator,
147 guardian or other authorized legal representative shall not be required

148 for the disclosure of such communication or information (1) pursuant to
149 the laws of this state or the rules of court prescribed by the Judicial
150 Branch, (2) by a covered entity or business associate against whom a
151 claim has been made, or there is a reasonable belief will be made, in such
152 action or proceeding, to the covered entity's or business associate's
153 attorney or professional liability insurer or such insurer's agent for use
154 in the defense of such action or proceeding, (3) to the Commissioner of
155 Public Health for records of a patient of a covered entity in connection
156 with (A) an investigation of a complaint, if such records are related to
157 the complaint, or (B) an investigation, inspection or survey of an
158 institution, as defined in section 19a-490, or (4) if child abuse, abuse of
159 an elderly individual, abuse of an individual who is physically disabled
160 or incompetent or abuse of an individual with intellectual disability in
161 violation of the laws of this state is known or in good faith suspected.

162 (c) Nothing in this section shall be construed to impede the lawful
163 disclosure or sharing of medical records as permitted by state [or
164 federal] law or the rules of [the] court prescribed by the Judicial Branch,
165 except in the case of a subpoena commanding the production, copying
166 or inspection of medical records relating to [reproductive health care
167 services or gender-affirming health care services] any legally protected
168 health care activity, as defined in section 52-571m, as amended by this
169 act.

170 Sec. 5. Subsections (a) and (b) of section 54-82i of the 2026 supplement
171 to the general statutes are repealed and the following is substituted in
172 lieu thereof (*Effective October 1, 2026*):

173 (a) The following words, when used in this section, have the meaning
174 specified, unless the context otherwise indicates: "Witness" means a
175 person whose testimony is desired in any proceeding or investigation
176 by a grand jury or in a criminal action, prosecution or proceeding; "state"
177 includes any territory of the United States and the District of Columbia;
178 [, and] "summons" means a subpoena, order or other notice requiring
179 the appearance of a witness; and "legally protected health care activity"
180 has the same meaning as provided in section 52-571m, as amended by

181 this act.

182 (b) If a judge of a court of record in any state which by its laws has
183 made provision for commanding persons within that state to attend and
184 testify in this state certifies, under the seal of such court, that there is a
185 criminal prosecution pending in such court, or that a grand jury
186 investigation has commenced or is about to commence, that a person
187 being within this state is a material witness in such prosecution or grand
188 jury investigation and that the presence of such witness will be required
189 for a specified number of days, upon presentation of such certificate to
190 any judge of a court of record in the judicial district in which such
191 person is, such judge shall fix a time and place for a hearing and shall
192 make an order directing the witness to appear at such time and place for
193 such hearing. If, at such hearing, the judge determines that the witness
194 is material and necessary, that it will not cause undue hardship to the
195 witness to be compelled to attend and testify in the prosecution or a
196 grand jury investigation in the other state and that the laws of such other
197 state and the laws of any other state through which the witness may be
198 required to pass by ordinary course of travel will give to such witness
199 protection from arrest and from the service of civil or criminal process,
200 the judge shall issue a summons, with a copy of the certificate attached,
201 directing the witness to attend and testify in the court where the
202 prosecution is pending, or where a grand jury investigation has
203 commenced or is about to commence at a time and place specified in the
204 summons, except that no judge shall issue a summons in a case where
205 prosecution is pending, or where a grand jury investigation has
206 commenced or is about to commence for a criminal violation of a law of
207 such other state involving the provision or receipt of or assistance with
208 [reproductive health care services or gender-affirming health care
209 services, as defined in section 52-571m, that are legal] any legally
210 protected health care activity in this state, unless the acts forming the
211 basis of the prosecution or investigation would also constitute an
212 offense in this state. At any such hearing, the certificate shall be prima
213 facie evidence of all the facts stated therein. If such certificate
214 recommends that the witness be taken into immediate custody and
215 delivered to an officer of the requesting state to assure the attendance of

216 the witness in such state, such judge may, in lieu of notification of the
217 hearing, direct that such witness be forthwith brought before such judge
218 for such hearing, and, being satisfied, at such hearing, of the desirability
219 of such custody and delivery, of which desirability such certificate shall
220 be prima facie proof, may, in lieu of issuing a subpoena or summons,
221 order that such witness be forthwith taken into custody and delivered
222 to an officer of the requesting state. If such witness, after being paid or
223 tendered by an authorized person the same amount per mile as
224 provided for state employees pursuant to section 5-141c for each mile
225 by the ordinary traveled route to and from the court where the
226 prosecution is pending and five dollars each day that such witness is
227 required to travel and attend as a witness, fails, without good cause, to
228 attend and testify as directed in the summons, the witness shall be
229 punished in the manner provided for the punishment of any witness
230 who disobeys a summons issued from a court of record in this state.

231 Sec. 6. Section 52-155a of the 2026 supplement to the general statutes
232 is repealed and the following is substituted in lieu thereof (*Effective*
233 *October 1, 2026*):

234 Notwithstanding the provisions of sections 52-155 and 52-657, a
235 judge, justice of the peace, notary public or commissioner of the
236 Superior Court shall not issue a subpoena requested by a commissioner,
237 appointed according to the laws or usages of any other state or
238 government, or by any court of the United States or of any other state or
239 government, when such subpoena relates to [reproductive health care
240 services or gender-affirming health care services] a legally protected
241 health care activity, as defined in section 52-571m, as amended by this
242 act, [that are permitted under the laws of this state,] unless the subpoena
243 relates to: (1) An out-of-state action founded in tort, contract or statute,
244 for which a similar claim would exist under the laws of this state,
245 brought by a patient or the patient's authorized legal representative, for
246 damages suffered by the patient or damages derived from an
247 individual's loss of consortium of the patient; or (2) an out-of-state
248 action founded in contract, and for which a similar claim would exist
249 under the laws of this state, brought or sought to be enforced by a party

250 with a contractual relationship with the person that is the subject of the
251 subpoena requested by a commissioner appointed according to the laws
252 or usages of another state.

253 Sec. 7. Section 54-155a of the 2026 supplement to the general statutes
254 is repealed and the following is substituted in lieu thereof (*Effective*
255 *October 1, 2026*):

256 No public agency, as defined in section 1-200, or employee,
257 appointee, officer or official or any other person acting on behalf of a
258 public agency may provide any information or expend or use time,
259 money, facilities, property, equipment, personnel or other resources in
260 furtherance of any interstate investigation or proceeding seeking to
261 impose civil or criminal liability upon a person or entity for (1) the
262 provision, seeking or receipt of or inquiring about [reproductive health
263 care services or gender-affirming health care services, as defined in
264 section 52-571m, that are legal in this state] any legally protected health
265 care activity as defined in section 52-571m, as amended by this act, or
266 (2) assisting any person or entity providing, seeking, receiving or
267 responding to an inquiry about [reproductive health care services or
268 gender-affirming health care services, as defined in section 52-571m,
269 that are legal in this state] any legally protected health care activity as
270 defined in section 52-571m, as amended by this act. This section shall
271 not apply to any investigation or proceeding where the conduct subject
272 to potential liability under the investigation or proceeding would be
273 subject to liability under the laws of this state if committed in this state.

274 Sec. 8. Section 54-162 of the general statutes is repealed and the
275 following is substituted in lieu thereof (*Effective October 1, 2026*):

276 (a) The Governor [of this state] may also surrender, on demand of the
277 executive authority of any other state, any person found in this state
278 who is charged in such other state in the manner provided in section 54-
279 159 with committing an act in this state, or in a third state, intentionally
280 resulting in a crime in the state whose executive authority is making the
281 demand, and the provisions of this chapter not otherwise inconsistent
282 shall apply to such cases, even though the accused was not in that state

283 at the time of the commission of the crime and has not fled therefrom,
284 provided the acts for which extradition is sought would be punishable
285 by the laws of this state, if the consequences claimed to have resulted
286 from those acts in the demanding state had taken effect in this state.

287 (b) Except as required by federal law, the Governor shall not
288 surrender a person charged in another state as a result of engaging in
289 any legally protected health care activity, as defined in section 52-571m,
290 as amended by this act, unless the executive authority of the demanding
291 state alleges in writing that the accused was physically present in the
292 demanding state at the time of the commission of the alleged offense
293 and that thereafter the accused fled from the demanding state.

294 Sec. 9. Section 19a-17e of the 2026 supplement to the general statutes
295 is repealed and the following is substituted in lieu thereof (*Effective*
296 *October 1, 2026*):

297 (a) As used in this section, ["reproductive health care services" and
298 "gender-affirming health care services" have] "legally protected health
299 care activity" has the same [meanings] meaning as provided in section
300 52-571m, as amended by this act.

301 (b) Notwithstanding the provisions of subsection (a) of section 19a-
302 14, the Department of Public Health shall not deny the eligibility of an
303 applicant for a (1) permit, (2) license by examination, endorsement or
304 reciprocity, or (3) reinstatement of a license (A) voided pursuant to the
305 provisions of subsection (f) of section 19a-88, (B) voluntarily
306 surrendered, or (C) by agreement, not renewed or reinstated pursuant
307 to the provisions of subsection (d) of section 19a-17 based on pending
308 disciplinary action, an unresolved complaint, [or] the imposition of
309 disciplinary action or other adverse action against the applicant by a
310 duly authorized professional disciplinary agency of another state, the
311 District of Columbia, [or] a commonwealth, territory or possession of
312 the United States or any other federal entity that is based solely on the
313 alleged provision of, receipt of, assistance in provision or receipt of,
314 material support for, or any theory of vicarious, joint, several or
315 conspiracy liability derived therefrom, [reproductive health care

316 services or gender-affirming health care services that are permitted
317 under the laws of this state and were provided in accordance with the
318 standard of care applicable to such services , regardless of whether the
319 patient receiving such services was a resident of this state] any legally
320 protected health care activity. The provisions of this subsection shall not
321 apply where the underlying conduct of the applicant would constitute
322 the basis of disciplinary action against the applicant under the laws of
323 this state if the applicant had been licensed or permitted in this state and
324 the conduct had occurred in this state.

325 (c) Notwithstanding the provisions of section 19a-17, a board or
326 commission established under title 20 that has jurisdiction over persons
327 licensed, certified or registered under said title who provide
328 [reproductive health care services or gender-affirming health care
329 services] any legally protected health care activity, and the Department
330 of Public Health, with respect to professions under the department's
331 jurisdiction that are not subject to discipline by such a board or
332 commission, shall not impose disciplinary action against a licensed,
333 certified or registered person based on pending disciplinary action or
334 other adverse action, an unresolved complaint or the imposition of
335 disciplinary action against such persons before or by a duly authorized
336 professional disciplinary agency of another state, the District of
337 Columbia, [or] a commonwealth, territory or possession of the United
338 States or any other federal entity that is based solely on the alleged
339 provision of, receipt of, assistance in provision or receipt of, material
340 support for, or any theory of vicarious, joint, several or conspiracy
341 liability derived therefrom, [reproductive health care services or
342 gender-affirming health care services that are permitted under the laws
343 of this state and were provided in accordance with the standard of care
344 applicable to such services, regardless of whether the patient receiving
345 such services was a resident of this state] any legally protected health
346 care activity. The provisions of this subsection shall not apply where the
347 underlying conduct of the licensed, certified or registered person would
348 constitute the basis of disciplinary action against such person under the
349 laws of this state if the conduct had occurred in this state.

350 Sec. 10. Section 19a-567 of the 2026 supplement to the general statutes
351 is repealed and the following is substituted in lieu thereof (*Effective*
352 *October 1, 2026*):

353 (a) As used in this section, (1) "credentialing" means the process of
354 assessing and validating the qualifications of a health care provider
355 applying to be approved to provide treatment, care or services in or for
356 an institution, (2) "health care provider" means a person licensed
357 pursuant to title 20 who provides reproductive health care services or
358 gender-affirming health care services, (3) "institution" has the same
359 meaning as provided in section 19a-490, (4) "privileging" means the
360 process of authorizing a health care provider to provide specific
361 treatment, care or services at an institution, and (5) ["reproductive health
362 care services" and "gender-affirming health care services" have] "legally
363 protected health care activity" has the same [meanings] meaning as
364 provided in section 52-571m, as amended by this act.

365 (b) An institution shall not revoke, suspend, reprimand, penalize,
366 refuse to issue or renew credentials or privileges or take any other
367 adverse action against a health care provider with respect to
368 credentialing or privileging based solely on the alleged provision of,
369 receipt of, assistance in provision or receipt of, material support for, or
370 any theory of vicarious, joint, several or conspiracy liability derived
371 therefrom, [reproductive health care services or gender-affirming health
372 care services that (1) are permitted under the laws of this state, (2) were
373 provided in accordance with the standard of care applicable to such
374 services, and (3) were] any legally protected health care activity
375 provided by the health care provider [(A)] (1) before the date on which
376 the health care provider entered an employment relationship with the
377 institution, or [(B)] (2) outside the scope of the health care provider's
378 employment with the institution, [, regardless of whether the patient
379 receiving such services was a resident of this state.]

380 (c) An institution shall not revoke, suspend, reprimand, penalize,
381 refuse to issue or renew credentials or privileges or take any other
382 adverse action against a health care provider based on pending

383 disciplinary action, an unresolved complaint, [or] the imposition of
384 disciplinary action or other adverse action against the applicant by a
385 duly authorized professional disciplinary agency of another state, the
386 District of Columbia, [or] a commonwealth, territory or possession of
387 the United States or any other federal entity that is based solely on the
388 alleged provision of, receipt of, assistance in provision or receipt of,
389 material support for, or any theory of vicarious, joint, several or
390 conspiracy liability derived therefrom, [reproductive health care
391 services or gender-affirming health care services that (1) are permitted
392 under the laws of this state, (2) were provided in accordance with the
393 standard of care applicable to such services, and (3) were] any legally
394 protected health care activity provided by the health care provider [(A)]
395 (1) before the date on which the health care provider entered an
396 employment relationship with the institution, or [(B)] (2) outside the
397 scope of the health care provider's employment with the institution. [,
398 regardless of whether the patient receiving such services was a resident
399 of this state.]

400 (d) The provisions of this section shall not be construed to prevent an
401 institution from taking any of the actions described in subsections (b)
402 and (c) of this section against a health care provider for conduct that (1)
403 does not conform to the standards of care for the provider's profession,
404 (2) is illegal under the laws of this state, or (3) violates policies or rules
405 of the institution that define the scope of services provided by the
406 institution if (A) such conduct occurs within the scope of the health care
407 provider's employment with, or delivery of care at, the institution, and
408 (B) the institution's enforcement of such policies or rules is not otherwise
409 prohibited by law or regulation.

410 Sec. 11. Section 20-579a of the 2026 supplement to the general statutes
411 is repealed and the following is substituted in lieu thereof (*Effective*
412 *October 1, 2026*):

413 (a) As used in this section, ["reproductive health care services" and
414 "gender-affirming health care services" have] "legally protected health
415 care activity" has the same [meanings] meaning as provided in section

416 52-571m, as amended by this act.

417 (b) Notwithstanding any provision of this chapter, the Commissioner
418 of Consumer Protection and the Commission of Pharmacy shall not
419 deny the eligibility of an applicant for a license, permit or registration
420 under this chapter based on pending disciplinary action, an unresolved
421 complaint, [or] the imposition of disciplinary action or other adverse
422 action against the applicant by a duly authorized professional
423 disciplinary agency of another state, the District of Columbia, [or] a
424 commonwealth, territory or possession of the United States or any other
425 federal entity that is based solely on the alleged provision of, receipt of,
426 assistance in provision or receipt of, material support for, or any theory
427 of vicarious, joint, several or conspiracy liability derived therefrom,
428 [reproductive health care services or gender-affirming health care
429 services that are permitted under the laws of this state and were
430 provided in accordance with the standard of care applicable to such
431 services, regardless of whether the patient receiving such services was a
432 resident of this state] any legally protected health care activity. The
433 provisions of this subsection shall not apply where the underlying
434 conduct of the applicant would constitute the basis of disciplinary action
435 against the applicant under the laws of this state if the applicant had
436 been licensed, permitted or registered in this state and the conduct had
437 occurred in this state.

438 (c) Notwithstanding any provision of this chapter, the Commissioner
439 of Consumer Protection and the Commission of Pharmacy shall not
440 impose disciplinary action against any person licensed, permitted or
441 registered pursuant to the provisions of this chapter based on pending
442 disciplinary action, an unresolved complaint, [or] the imposition of
443 disciplinary action or other adverse action against the applicant by a
444 duly authorized professional disciplinary agency of another state, the
445 District of Columbia, [or] a commonwealth, territory or possession of
446 the United States or any other federal entity that is based solely on the
447 alleged provision of, receipt of, assistance in provision or receipt of,
448 material support for, or any theory of vicarious, joint, several or
449 conspiracy liability derived therefrom, [reproductive health care

450 services or gender-affirming health care services that are permitted
451 under the laws of this state and were provided in accordance with the
452 standard of care applicable to such services, regardless of whether the
453 patient receiving such services was a resident of this state] any legally
454 protected health care activity. The provisions of this subsection shall not
455 apply where the underlying conduct of the person licensed, permitted
456 or registered would constitute the basis of disciplinary action against
457 such person under the laws of this state if such person had been
458 licensed, permitted or registered in this state and the conduct had
459 occurred in this state.

460 Sec. 12. Section 54-240 of the general statutes is repealed and the
461 following is substituted in lieu thereof (*Effective October 1, 2026*):

462 As used in this chapter:

463 (1) "Address confidentiality program" or "program" means the
464 program established pursuant to this chapter;

465 (2) "Agency" has the same meaning as "public agency" or "agency", as
466 provided in section 1-200;

467 (3) "Application assistant" means a person authorized by the
468 Secretary of the State to assist applicants in the completion of
469 applications for program participation;

470 (4) "Authorized personnel" means an employee in the office of the
471 Secretary of the State who has been designated by the Secretary of the
472 State, or an employee of an agency who has been designated by the chief
473 executive officer of such agency, to process and have access to records
474 pertaining to a program participant, including, but not limited to, voter
475 registration applications, voting records and marriage records;

476 (5) "Certification card" means a card issued by the Secretary of the
477 State pursuant to section 54-240d;

478 (6) "Confidential address" means a program participant's address or
479 addresses as listed on such participant's application for program

480 participation that are not to be disclosed, including such participant's
481 residential address in this state and work and school addresses in this
482 state, if any;

483 (7) "Family violence" has the same meaning as provided in section
484 46b-38a;

485 (8) "Injury or risk of injury to a child" means any act or conduct that
486 constitutes a violation of section 53-21;

487 (9) "Kidnapping" means any act that constitutes a violation of section
488 53a-92, 53a-92a, 53a-94 or 53a-94a;

489 (10) "Law enforcement agency" means the office of the Attorney
490 General, the office of the Chief State's Attorney, the Division of State
491 Police within the Department of Emergency Services and Public
492 Protection or any municipal police department;

493 (11) "Marriage records" means an application for a marriage license,
494 an issued marriage license, a license certificate or other documents
495 related thereto;

496 (12) "Program address" means the post office box number and
497 fictitious street address assigned to a program participant by the
498 Secretary of the State;

499 (13) "Program participant" or "participant" means any person
500 certified by the Secretary of the State to participate in the address
501 confidentiality program;

502 (14) "Record" has the same meaning as "public records or files" as
503 provided in section 1-200;

504 (15) "Sexual assault" means any act that constitutes a violation of
505 section 53a-70b of the general statutes, revision of 1958, revised to
506 January 1, 2019, or section 53a-70, 53a-70a, 53a-71, 53a-72a, 53a-72b or
507 53a-73a;

508 (16) "Stalking" means any act that constitutes a violation of section

509 53a-181c, 53a-181d or 53a-181e; [and]

510 (17) "Trafficking in persons" means any act that constitutes a violation
511 of section 53a-192a; and

512 (18) "Legally protected health care activity" has the same meaning as
513 provided in section 52-571m, as amended by this act.

514 Sec. 13. Section 54-240a of the general statutes is repealed and the
515 following is substituted in lieu thereof (*Effective October 1, 2026*):

516 (a) There shall be an address confidentiality program established in
517 the office of the Secretary of the State to provide a substitute mailing
518 address for any person who wishes to keep such person's residential
519 address confidential because of safety concerns and (1) has been a victim
520 of (A) family violence, (B) injury or risk of injury to a child, (C)
521 kidnapping, (D) sexual assault, (E) stalking, (F) trafficking in persons, or
522 (G) child abuse or neglect, where such abuse or neglect was
523 substantiated by the Department of Children and Families and was the
524 basis for the issuance of a restraining order under section 46b-15 or civil
525 protection order under section 46b-16a, [or] (2) a termination of parental
526 rights was granted pursuant to section 45a-717 or 46b-129, or (3) such
527 person engaged in the provision, facilitation or promotion of a legally
528 protected health care activity.

529 (b) The Secretary of the State shall adopt regulations, in accordance
530 with the provisions of chapter 54, to carry out the provisions of this
531 chapter. Such regulations may include, but need not be limited to,
532 provisions for applications for participation in the address
533 confidentiality program, certification of program participants,
534 certification cancellation, agency use of program addresses, forwarding
535 of program participants' mail, voting by program participants and
536 recording of vital statistics for program participants.

537 Sec. 14. Section 54-240b of the general statutes is repealed and the
538 following is substituted in lieu thereof (*Effective October 1, 2026*):

539 (a) An adult person, a guardian or conservator of the person acting

540 on behalf of an adult person, or a parent or guardian acting on behalf of
541 a minor may apply to the Secretary of the State for participation in the
542 address confidentiality program because of safety concerns and to have
543 the Secretary of the State designate a program address to serve as the
544 address of the adult person or of the minor because (1) the adult person
545 or the minor has been a victim of (A) family violence, (B) injury or risk
546 of injury to a child, (C) kidnapping, (D) sexual assault, (E) stalking, (F)
547 trafficking in persons, or (G) child abuse or neglect, where such abuse
548 or neglect was substantiated by the Department of Children and
549 Families and was the basis for the issuance of a restraining order under
550 section 46b-15 or civil protection order under section 46b-16a, or (2) the
551 safety concerns of the adult person or minor relate to another person
552 whose parental rights were terminated in a proceeding conducted
553 pursuant to section 45a-717 or 46b-129. Each application for program
554 participation shall be completed with the assistance of an application
555 assistant.

556 (b) A person engaged in the provision, facilitation or promotion of a
557 legally protected health care activity may apply to the Secretary of the
558 State for participation in the address confidentiality program because of
559 safety concerns and to have the Secretary of the State designate a
560 program address to serve as the address of the person. For such
561 applications, no assistance of an application assistant shall be required.

562 [(b)] (c) The Secretary of the State shall make available a list of entities
563 that employ application assistants to assist applicants in applying for
564 participation in the address confidentiality program, provided no entity
565 shall be included on such list unless the entity has received sufficient
566 funds from federal or state sources as reimbursement for the reasonable
567 costs of implementing the provisions of this chapter.

568 Sec. 15. (NEW) (*Effective October 1, 2026*) The Secretary of the State
569 shall certify an applicant as a program participant if the application is
570 filed in the manner and on the application form prescribed by the
571 Secretary of the State and includes:

572 (1) Documentation that the person is to commence employment or is

573 currently employed at or volunteering at an entity providing,
574 facilitating or promoting a legally protected health care activity as
575 defined in section 52-571m of the general statutes, as amended by this
576 act;

577 (2) A statement made under penalty of false statement, as provided
578 in section 53a-157b of the general statutes, that (A) the applicant is a
579 person engaged in the provision, facilitation or promotion of a legally
580 protected health care activity, (B) the entity providing, facilitating or
581 promoting a legally protected health care activity where the person is
582 employed or volunteers has been the target of threats, harassment or
583 acts of violence related to the provision, facilitation or promotion of a
584 legally protected health care activity within one year of the date of the
585 application, and (C) the applicant fears for such applicant's safety;

586 (3) A designation of the Secretary of the State as the agent of the
587 applicant for service of process and for receipt of first class mail;

588 (4) The residential address in this state, the work and school
589 addresses in this state, if any, and the phone number or numbers, if
590 available, that are to remain confidential, but which may be used by the
591 Secretary of the State or authorized personnel to contact the applicant;
592 and

593 (5) The preparation date and the applicant's signature.

594 Sec. 16. Section 19a-509c of the general statutes is repealed and the
595 following is substituted in lieu thereof (*Effective October 1, 2026*):

596 (a) In a facility licensed pursuant to this chapter, a physician assistant,
597 advanced practice registered nurse, registered nurse or licensed
598 practical nurse may, except with respect to an order for schedule II
599 controlled substances, reduce to writing the oral or written order of a
600 prescribing practitioner, as defined in section 20-571, and transmit the
601 order to a pharmacy licensed under sections 20-570 to 20-625, inclusive.
602 Such transmitted order shall contain the name of the prescribing
603 practitioner and shall be treated as a written prescription for purposes

604 of sections 20-570 to 20-625, inclusive.

605 (b) Notwithstanding the provisions of subsection (a) of this section,
606 to the extent permitted under federal law, at the prescribing
607 practitioner's request, the written or electronic prescription for drugs
608 related to a legally protected health care activity, as defined in section
609 52-571m, as amended by this act, shall include the name and address of
610 the prescribing and dispensing health care practice or facility, instead of
611 the name and signature of the prescribing practitioner.

612 Sec. 17. Section 20-614 of the general statutes is repealed and the
613 following is substituted in lieu thereof (*Effective October 1, 2026*):

614 (a) A prescription shall be transmitted in either an oral, written or
615 electronic manner to a pharmacy.

616 (b) Whenever a pharmacy, or an institutional pharmacy in a hospital
617 dispensing a drug or device for outpatient use or dispensing a drug or
618 device that is prescribed for an employee of the hospital or for the
619 employee's spouse or dependent children, receives an oral or
620 electronically-transmitted prescription, except for a controlled drug, as
621 defined in section 21a-240, a record of such prescription shall be
622 maintained in writing or electronically. The pharmacist or pharmacy
623 intern shall, not later than the end of the business day when the
624 prescription was received, record the prescription on a prescription
625 form or in an electronic record including: (1) The name and address of
626 the prescribing practitioner; (2) the date of the prescription; (3) the name,
627 dosage form, strength, where applicable, and the amount of the drug
628 prescribed; (4) the name and address of the patient or, for veterinary
629 prescriptions, the name and address of the owner and the species of the
630 animal; (5) the directions for use; (6) any required cautionary
631 statements; and (7) the number of times the prescription may be refilled,
632 including the use of refill terms "PRN" and "ad lib" in lieu of a specific
633 number of authorized refills.

634 (c) A written prescription shall bear: (1) The written signature of the
635 prescribing practitioner or shall comply with the requirements of

636 section 19a-509c, as amended by this act; (2) the address of the
637 practitioner; (3) the date of the prescription; (4) the name, dosage form,
638 strength, where applicable, and amount of the drug prescribed; (5) the
639 name and address of the patient or, for veterinary prescriptions, the
640 name and address of the owner and the species of the animal; (6) the
641 directions for use; (7) any required cautionary statements; and (8) the
642 number of times the prescription may be refilled, including the use of
643 refill terms "PRN" and "ad lib" in lieu of a specific number of authorized
644 refills. No written prescription form for a schedule II substance may
645 contain an order for any other legend drug or device.

646 (d) Prior to or simultaneous with the dispensing of a drug, from a
647 pharmacy licensed pursuant to this chapter, a pharmacist or other
648 employee of the pharmacy shall, whenever practicable, offer for the
649 pharmacist to discuss the drug to be dispensed and to counsel the
650 patient on the usage of the drug, except when the person obtaining the
651 prescription is other than the person named on the prescription form or
652 electronic record or the pharmacist determines it is appropriate to make
653 such offer in writing. Any such written offer shall include an offer to
654 communicate with the patient either in person at the pharmacy or by
655 telephone.

656 (e) Nothing in this section shall be construed to require a pharmacist
657 to provide counseling to a patient who refuses such counseling. The
658 pharmacist shall keep a record of such counseling, any refusal by or
659 inability of the patient to accept counseling or a refusal by the patient to
660 provide information regarding such counseling. Records kept pursuant
661 to this subsection shall be maintained for the same length of time as
662 prescription records are maintained pursuant to section 20-615.

663 (f) (1) As used in this subsection, "electronic data intermediary"
664 means an entity that provides the infrastructure that connects the
665 computer systems or other electronic devices utilized by prescribing
666 practitioners with those used by pharmacies in order to facilitate the
667 secure transmission of electronic prescription orders, refill
668 authorization requests, communications and other patient care

669 information between such entities.

670 (2) An electronic data intermediary may transfer electronically
671 transmitted data between a prescribing practitioner licensed and
672 authorized to prescribe and a pharmacy of the patient's choice, licensed
673 pursuant to this chapter or licensed under the laws of any other state or
674 territory of the United States. Electronic data intermediaries shall not
675 alter the transmitted data except as necessary for technical processing
676 purposes. Electronic data intermediaries may archive copies of only that
677 electronic data related to such transmissions necessary to provide for
678 proper auditing and security of such transmissions. Such data shall only
679 be maintained for the period necessary for auditing purposes. Electronic
680 data intermediaries shall maintain patient privacy and confidentiality of
681 all archived information as required by state and federal law.

682 (3) No electronic data intermediary shall operate without the
683 approval of the Commissioner of Consumer Protection. An electronic
684 data intermediary seeking approval shall apply to the Commission of
685 Pharmacy in the manner prescribed by the commissioner. The
686 commissioner, with the advice and assistance of the commission, shall
687 adopt regulations, in accordance with the provisions of chapter 54, to
688 establish criteria for the approval of electronic data intermediaries, to
689 ensure that (A) procedures to be used for the transmission and retention
690 of prescription data by an intermediary, and (B) mechanisms to be used
691 by an intermediary to safeguard the confidentiality of such data, are
692 consistent with the provisions and purposes of this section.

693 (g) Notwithstanding the provisions of subsections (a) to (c), inclusive,
694 of this section, to the extent permitted under federal law, at the
695 prescribing practitioner's request, the written or electronic prescription
696 for drugs related to a legally protected health care activity, as defined in
697 section 52-571m, as amended by this act, shall include the name and
698 address of the prescribing and dispensing health care practice or facility,
699 instead of the name and signature of the prescribing practitioner.

700 Sec. 18. Section 20-617 of the general statutes is repealed and the
701 following is substituted in lieu thereof (*Effective October 1, 2026*):

702 (a) Each pharmacist shall include on the label of each prescription
703 container: (1) The quantity of prescribed drug placed in such container,
704 in addition to any other information required by law, and (2) a
705 prominently printed expiration date based on the manufacturer's
706 recommended conditions of use and storage that can be read and
707 understood by the ordinary individual. The expiration date required
708 pursuant to subdivision (2) of this subsection shall be no later than the
709 expiration date determined by the manufacturer.

710 (b) In addition to the information required to be included on the label
711 of each prescription container pursuant to subsections (a) and (c) of this
712 section, each pharmacist shall include on the label of each prescription
713 container or on the receipt or other similar packaging in which the
714 prescription is contained for a drug sold only by generic name, as
715 defined in section 20-14a, and not by brand name, as defined in said
716 section: (1) The name of the manufacturer of the generic drug placed in
717 the container, and (2) the Internet web site address and toll-free
718 telephone number for the United States Food and Drug
719 Administration's safety information and adverse event reporting
720 program (MedWatch).

721 (c) In addition to the information required to be included on the label
722 of each prescription container pursuant to subsections (a) and (b) of this
723 section, if a pharmacist substitutes a generic name drug for a brand
724 name drug, such pharmacist shall include on the label of the
725 prescription container: (1) The name of the generic drug placed in the
726 container, and (2) the brand name of the drug that the generic drug was
727 substituted for.

728 (d) Notwithstanding the provisions of this section, to the extent
729 permitted under federal law, at the prescribing practitioner's written,
730 electronic or verbal request to the dispensing pharmacy, the dispensed
731 label of each prescription drug that is not a controlled substance and
732 relates to a legally protected health care activity, as defined in section
733 52-571m, as amended by this act, shall include the name and address of
734 the prescribing and dispensing health care practice or facility, instead of

735 the name and signature of the prescribing practitioner.

736 Sec. 19. (NEW) (Effective October 1, 2026) (a) Notwithstanding any
737 provision of the general statutes, a law of another state authorizing a
738 child to be removed from the child's parent or guardian based on the
739 parent or guardian allowing the child to receive or seek a legally
740 protected health care activity, as defined in section 52-571m of the
741 general statutes, as amended by this act, shall not be enforced or applied
742 in a case pending in a court in this state.

743 (b) No court in this state shall admit or consider a finding of abuse
744 based on the parent or guardian allowing the child to receive or seek a
745 legally protected health care activity, as defined in section 52-571m of
746 the general statutes, as amended by this act, as evidence in any
747 proceeding with respect to that parent or guardian or any child of the
748 parent or guardian, unless such conduct would constitute abuse under
749 the laws of this state as if the conduct occurred in this state.

750 (c) The provisions of this section shall not be construed to alter any
751 requirement related to the mandated reporting of child abuse or neglect
752 as prescribed in chapter 319a of the general statutes.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2026	52-571m
Sec. 2	October 1, 2026	New section
Sec. 3	October 1, 2026	New section
Sec. 4	October 1, 2026	52-146w
Sec. 5	October 1, 2026	54-82i(a) and (b)
Sec. 6	October 1, 2026	52-155a
Sec. 7	October 1, 2026	54-155a
Sec. 8	October 1, 2026	54-162
Sec. 9	October 1, 2026	19a-17e
Sec. 10	October 1, 2026	19a-567
Sec. 11	October 1, 2026	20-579a
Sec. 12	October 1, 2026	54-240
Sec. 13	October 1, 2026	54-240a
Sec. 14	October 1, 2026	54-240b

Sec. 15	<i>October 1, 2026</i>	New section
Sec. 16	<i>October 1, 2026</i>	19a-509c
Sec. 17	<i>October 1, 2026</i>	20-614
Sec. 18	<i>October 1, 2026</i>	20-617
Sec. 19	<i>October 1, 2026</i>	New section

Statement of Legislative Commissioners:

In Section 1(b), "permitted under the laws of this state" was included in the existing brackets for internal consistency and consistency with the defined term "legally protected health care activity"; in Section 9(c), "or other adverse action" was added for internal consistency and in Section 14(a) and (b), "because of safety concerns" was added after "address confidentiality program" for internal consistency.

JUD *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, which makes various changes related to reproductive and gender-affirming health care services and expands protections for providers or patients, results in no fiscal impact to the state or municipalities. All impacted agencies have the resources and capacity to meet the bill's requirements.

The Out Years

State Impact: None

Municipal Impact: None

OLR Bill Analysis**sSB 295*****AN ACT CONCERNING STATE LAW PROTECTIONS FOR HEALTH CARE PROVIDERS AND PATIENTS RELATED TO THE PROVISION OF A LEGALLY PROTECTED HEALTH CARE ACTIVITY.***

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SUMMARY

Replaces various statutory references to reproductive health care services and gender-affirming health care services with the umbrella term “legally protected health care activity”; broadens the definition of “reproductive health care services” that is part of this new term

Specifies the scope of a law allowing for lawsuits to recover certain costs due to out-of-state judgments relating to reproductive or gender-affirming health care services

Generally requires Connecticut law to govern in any case in the state related to a legally protected health care activity

Generally (1) prohibits evidence of involvement in a legally protected health care activity from being offered to prove someone’s wrongdoing if it relates to the person receiving the services being out of state at the time and (2) allows someone subject to a subpoena related to a legally protected health care activity to move to modify or squash it under court rules

Specifies that the existing prohibition on sharing patient information (relating to reproductive or gender-affirming health care services) in certain proceedings applies to subpoena responses; adds protected health information in “designated record sets” under HIPAA to that prohibition; expands allowable disclosures to DPH without patient consent

Limits the circumstances in which the governor can extradite someone when the other state’s charges relate to a legally protected health care activity

Generally prohibits DPH and DCP from taking certain actions based on a federal entity’s adverse actions related to a legally protected health care activity

Generally prohibits institutional health care employers from taking certain actions based on a federal entity's adverse actions related to a legally protected health care activity

Expands the state's address confidentiality program by allowing, under certain conditions, participation by people engaged in providing, facilitating, or promoting a legally protected health care activity

Upon a prescribing practitioner's request and to the extent allowed by federal law, requires prescriptions for drugs related to a legally protected health care activity to include the health care facility's name rather than the prescriber's

Places limits on courts in relation to child custody or abuse matters due to parents or guardians allowing their child to receive or seek a legally protected health care activity

SUMMARY

This bill makes various changes related to reproductive and gender-affirming health care services, such as (1) replacing various statutory references to these terms with the umbrella term "legally protected health care activity" and (2) expanding existing protections, and adding new ones, for providers or patients. The bill also makes various minor, technical, and conforming changes. A section-by-section analysis follows.

EFFECTIVE DATE: October 1, 2026

§§ 1, 4-7 & 9-11 — LEGALLY PROTECTED HEALTH CARE ACTIVITY

Replaces various statutory references to reproductive health care services and gender-affirming health care services with the umbrella term "legally protected health care activity"; broadens the definition of "reproductive health care services" that is part of this new term

The bill replaces various statutory references to reproductive health care services and gender-affirming health care services with the term "legally protected health care activity." Under the bill, this activity is any of the following, as long as the services are allowed under and provided in line with Connecticut law:

1. any person's receipt or attempted receipt of reproductive or gender-affirming health care services;
2. the provision, attempted provision, or insurance coverage of these services that are provided under the applicable standard of care by a Connecticut-licensed health care provider who is physically present in the state, regardless of where the patient is located; and
3. any act or omission done to aid or encourage, or attempt to aid or encourage, anyone in the receipt or attempted receipt of reproductive or gender-affirming health care services.

The bill broadens the definition of "reproductive health care services" that is part of the new umbrella term. Under current law, these services are all medical, surgical, counseling, or referral services relating to the human reproductive system, including relating to pregnancy, assisted reproduction, contraception, or pregnancy termination. The bill broadens the service types to include supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature relating to the human reproductive system. It also specifies that this includes services related to pregnancy loss.

By law, unchanged by the bill, "gender-affirming health care services" means all supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, including medications, that treat gender dysphoria and gender incongruence. It does not include any practice or treatment administered to someone under age 18 to change the person's sexual orientation or gender identity, including efforts to change gender expression or to eliminate or reduce sexual or romantic attraction or feelings towards people of the same gender ("conversion therapy").

Standard of Care and Contractual Rights Unaffected

The bill specifies that the term "legally protected health care activity"

does not impact or change the standard of care for medical professionals or contractual rights of contracting parties under state law.

Substitution of Terminology

The following table briefly describes the laws in which the bill substitutes legally protected health care activity for reproductive and gender-affirming health care services.

Existing Laws with Substituted Terminology Under the Bill

Sec.	Brief Summary
1	Generally allows for civil lawsuits to be brought by people against whom there was an out-of-state judgment based on allegedly providing or receiving, helping another person to provide or receive, or providing material support for this activity, to recover certain costs.
4	Generally prohibits health care providers, payors, or information processors (or their business associates) from disclosing protected information relating to this activity in a proceeding without the patient’s (or authorized representative’s) written consent.
5 & 6	Generally prohibits court officers from issuing summonses for out-of-state criminal cases or subpoenas for out-of-state civil actions or proceedings relating to this activity.
7	Generally prohibits public agencies, or people acting on their behalf, from giving information or using resources to support an interstate investigation or proceeding seeking to impose criminal or civil liability relating to this activity.
9 & 11	Generally protects health care providers from being disciplined or adversely affected by Connecticut licensing agencies due to other jurisdictions’ disciplinary actions against them due to involvement with this activity.
10	Generally protects health care providers from being disciplined or adversely affected by institutional employers due to their involvement with this activity, if that involvement occurred before they started to work for the institution or outside the scope of their employment with the institution.

The bill makes other changes to some of these laws (see below).

§ 1 — CIVIL ACTIONS RELATED TO OUT-OF-STATE JUDGMENTS

Specifies the scope of a law allowing for lawsuits to recover certain costs due to out-of-state judgments relating to reproductive or gender-affirming health care services

Existing law allows for a lawsuit to be brought by someone against

whom there was an out-of-state judgment based on allegedly providing or receiving, helping another person to provide or receive, or providing material support for reproductive or gender-affirming health care services (now “legally protected health care activity” under the bill). The bill specifies that this law applies to judgments from other states, federal courts, or any other jurisdiction based on another state’s laws.

Under existing law, the lawsuit allows these individuals to recover certain costs they incurred defending the out-of-state action and bringing an action under this law. Among other limitations, this cause of action is unavailable if no part of the acts that formed the basis for liability occurred in Connecticut.

§ 2 — CONNECTICUT LAW AS GOVERNING LAW

Generally requires Connecticut law to govern in any case in the state related to a legally protected health care activity

Except as required by federal law, the bill provides that Connecticut law must govern in any in-state case related to a legally protected health care activity. This applies despite any contrary Connecticut law provisions on conflict of laws.

§ 3 — LIMITATION ON EVIDENCE AND SUBPOENAS

Generally (1) prohibits evidence of involvement in a legally protected health care activity from being offered to prove someone’s wrongdoing if it relates to the person receiving the services being out of state at the time and (2) allows someone subject to a subpoena related to a legally protected health care activity to move to modify or squash it under court rules

Under the bill, except as required by federal law, evidence of someone’s involvement in legally protected health care activity generally cannot be offered as evidence to prove the individual’s wrongdoing if it relates to the fact that the person receiving the services was in another state at the time. This applies in a civil, criminal, professional, or other context.

The bill also generally allows someone subject to a subpoena related to a legally protected health care activity to move to modify or squash it under court rules, in addition to any other reason, theory, or argument. This applies to subpoenas related to allegedly providing or receiving, helping someone to provide or receive, or giving material support for

the activity, and those for related vicarious, joint, several, or conspiracy liability.

These provisions do not prevent a party from offering this evidence, or prevent compliance with a subpoena, in cases relating to the medical standard of care or parties' contractual rights under state law, if the evidence is offered against a party to the case. This includes private lawsuits or cases brought by a state agency (in a civil, criminal, or administrative context) against a licensed health care provider or health care facility under state law.

These provisions on evidence and subpoenas do not affect any other applicable privilege, right, or confidentiality protection.

§ 4 — LIMITS ON SHARING INFORMATION WITHOUT CONSENT

Specifies that the existing prohibition on sharing patient information (relating to reproductive or gender-affirming health care services) in certain proceedings applies to subpoena responses; adds protected health information in "designated record sets" under HIPAA to that prohibition; expands allowable disclosures to DPH without patient consent

Existing law prohibits, with certain exceptions, covered entities under the Health Insurance Portability and Accountability Act (HIPAA) (generally, health care providers, plans or payors, and clearinghouses) and their business associates from disclosing specified information about reproductive and gender-affirming health care services (now "legally protected health care activity") without written consent from the patient or patient's authorized legal representative. This prohibition applies to disclosure in a civil lawsuit (or a preliminary proceeding), or a probate, legislative, or administrative proceeding. The bill further specifies that the prohibition only applies to subpoena responses in these proceedings.

The bill adds to the generally prohibited disclosures any protected health information relating to a legally protected health care activity that is in a "designated record set" for a patient. Under HIPAA regulations, these are records kept by or for a covered entity for certain purposes, such as a provider's medical or billing records or records used in whole or part to make decisions about individuals.

The bill expands an exemption to the prohibitions under the bill and existing law, by allowing disclosures to the Department of Public Health (DPH) in connection with an investigation, inspection, or survey of a DPH-licensed institution. (The law already exempts disclosures to DPH in connection with the investigation of a complaint.) It also specifies that the existing exemption in cases of known or suspected abuse (such as child or elder abuse) applies when that abuse is illegal under state law.

§ 8 — GOVERNOR’S EXTRADITION AUTHORITY

Limits the circumstances in which the governor can extradite someone when the other state’s charges relate to a legally protected health care activity

Except as required by federal law, the bill limits the governor’s discretion to extradite individuals charged in another state due to engaging in a legally protected health care activity. Specifically, he may do so only if the demanding state’s executive authority alleges in writing that the individual was physically in that state at the time of the alleged offense and then fled from that state.

Existing law limits the governor’s discretion to extradite individuals accused of performing acts in Connecticut that result in crimes in another state. He may only do so if the acts would also be punishable under Connecticut law had their consequences, as claimed by the demanding state, taken effect in this state.

§§ 9 & 11 — LIMITS ON STATE DISCIPLINARY ACTIONS

Generally prohibits DPH and DCP from taking certain actions based on a federal entity’s adverse actions related to a legally protected health care activity

Existing law generally prohibits, as applicable, DPH, DPH professional licensing boards and commissions, the Department of Consumer Protection (DCP), and the Commission of Pharmacy from denying a credential or disciplining a credentialed health care provider or person (for example, a pharmacist) due to disciplinary actions in other U.S. jurisdictions solely based on the provider’s or person’s alleged participation in reproductive or gender-affirming health care services (now “legally protected health care activity”). These prohibitions generally restrict what actions they can take based on pending disciplinary actions, unresolved complaints, or disciplinary

actions by professional disciplinary agencies in other states; the District of Columbia; or U.S. commonwealths, territories, or possessions.

The bill extends these restrictions to actions based on a federal agency's pending disciplinary action, unresolved complaint, or disciplinary action. It also specifies that these restrictions apply to actions based on other jurisdictions' other adverse actions, not just pending disciplinary actions, unresolved complaints, or disciplinary actions.

As under existing law, these restrictions do not apply if the providers' or persons' underlying conduct, had it occurred in Connecticut, would be subject to discipline under state law.

§ 10 — LIMITATIONS ON HEALTH CARE EMPLOYER ACTIONS

Generally prohibits institutional health care employers from taking certain actions based on a federal entity's adverse actions related to a legally protected health care activity

Existing law generally prohibits DPH-licensed health care institutions from revoking, suspending, or refusing to issue or renew credentials or privileges; issuing a reprimand; penalizing; or taking any other adverse action related to credentialing or privileging (1) based solely on a health care provider's alleged participation in reproductive or gender-affirming health care services ("legally protected health care activity" under the bill) or (2) due to pending disciplinary actions, unresolved complaints, or disciplinary actions by professional disciplinary agencies in other U.S. jurisdictions based solely on this alleged participation. For the prohibition to apply, the provider's involvement in this activity must have happened before starting to work for the institution or outside the scope of his or her employment with the institution.

The bill extends this prohibition to actions that are based on (1) federal agencies' actions or (2) any of these jurisdictions' other adverse actions, not just their pending disciplinary actions, unresolved complaints, or disciplinary actions.

As under existing law, these restrictions do not apply if the provider's

underlying conduct (1) violates the standard of care for their profession, (2) is illegal under Connecticut law, or (3) occurs within the scope of employment and violates the institution's (legally valid) policies or rules.

§§ 12-15 — ADDRESS CONFIDENTIALITY PROGRAM

Expands the state's address confidentiality program by allowing, under certain conditions, participation by people engaged in providing, facilitating, or promoting a legally protected health care activity

By law, the address confidentiality program, administered by the secretary of the state (SOTS), allows certain people (such as victims of specified crimes) to receive a substitute mailing address to keep their residential address confidential due to safety concerns (see BACKGROUND).

The bill expands the program by allowing participation, under certain conditions, by people engaged in providing, facilitating, or promoting a legally protected health care activity. Unlike for other program applicants, the bill does not require an application assistant's help for these people when applying.

Under the bill, SOTS must certify an application from one of these applicants if it is filed on the prescribed form and includes the following:

1. documentation that the person is set to start working, or is currently working or volunteering, at an entity that provides, facilitates, or promotes a legally protected health care activity, and
2. a statement made under penalty of false statement that the applicant (a) is engaged in providing, facilitating, or promoting such an activity, (b) the employing entity has been the target of threats, harassment, or violence within the past year relating to its involvement in this activity, and (c) the applicant fears for his or her safety.

The application must also include other information required of all program applicants, such as the addresses and phone numbers to

remain confidential.

§§ 16-18 — PRESCRIPTION IDENTIFIERS

Upon a prescribing practitioner's request and to the extent allowed by federal law, requires prescriptions for drugs related to a legally protected health care activity to include the health care facility's name rather than the prescriber's

Under the bill, upon a prescribing practitioner's request, a written or electronic prescription for drugs related to a legally protected health care activity must include the prescribing and dispensing health care practice's or facility's name and address rather than the prescriber's name and signature. For labels of prescription drugs dispensed at pharmacies, the bill specifies that this applies (1) whether the practitioner's request was written, electronic, or verbal and (2) to drugs that are not controlled substances.

These provisions apply only to the extent allowed by federal law.

§ 19 — CHILD CUSTODY OR PROTECTION

Places limits on courts in relation to child custody or abuse matters due to parents or guardians allowing their child to receive or seek a legally protected health care activity

The bill prohibits Connecticut courts from enforcing or applying in a pending case another state's law that would authorize a child's removal due to the child's parent or guardian allowing the child to receive or seek a legally protected health care activity.

It also prohibits Connecticut courts from admitting or considering as evidence an abuse finding against a parent or guardian due to their allowing the child to receive or seek a legally protected health care activity, unless the parent's or guardian's conduct would be considered abuse under Connecticut law if it occurred here. This applies to cases involving the parent or guardian or any of their children.

These provisions do not change any state requirements relating to mandated reporting of child abuse or neglect.

BACKGROUND

Address Confidentiality Program

By law, once an applicant to the address confidentiality program is

certified by SOTS, he or she receives a substitute address. SOTS, as the participant's legal agent, receives any mail and service of process sent to that substitute address and forwards it to the participant's confidential address free of charge.

Participants may generally have (1) their street address omitted from voter registries, (2) correspondence from state or municipal agencies sent to their substitute address, and (3) their marriage records kept confidential. Participants may renew their certification every four years. SOTS may cancel a participant's certification under certain circumstances, but the participants may reapply at any time (CGS § 54-240 et seq. and Conn. Agencies Regs. § 54-240a-1 et seq.).

Related Bills

sHB 5516, reported favorably by the Public Health Committee, generally prohibits health care entities from (1) limiting their health care providers' ability to give patients medically accurate information and counseling about reproductive or gender-affirming health care services or (2) taking adverse action against their providers solely for giving this information or counseling.

sHB 5555, reported favorably by the Government Administration and Elections Committee, expands the state's address confidentiality program by allowing, under certain conditions, participation by people engaged in providing, facilitating, or promoting a legally protected health care activity.

sSB 227, §§ 2-5 (File 216), reported favorably by the General Law Committee, (1) expands current prohibitions on DCP and the Commission on Pharmacy taking certain actions based on other jurisdictions' actions related to reproductive and gender-affirming health care and (2) generally requires a prescription order for a drug related to reproductive or gender-affirming health care, at the prescriber's request, to include the practice's or facility's name rather than the prescriber's name.

COMMITTEE ACTION

Judiciary Committee

Joint Favorable Substitute

Yea 30 Nay 11 (03/23/2026)