

# Public Health Committee JOINT FAVORABLE REPORT

**Bill No:** SB-239 / [Bill Status](#) / [Public Hearing Testimony](#)

**Title:** AN ACT CONCERNING NUTRITION AND FOOD-BASED INTERVENTIONS  
FOR PATIENTS WITH DIABETES AND CONGESTIVE HEART FAILURE.

**Vote Date:** 3/2/2026

**Vote Action:** Joint Favorable Substitute

**PH Date:** 2/23/2026

**File No.:**

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## **SPONSORS OF BILL:**

Public Health Committee

## **REASONS FOR BILL:**

This bill promotes the benefits of nutritional assessments, when performing community needs assessments, by requiring hospitals to prioritize these assessments on community members with diabetes and congestive heart failure.

## **SUBSTITUTE LANGUAGE (IF APPLICABLE):**

The Substitute language changes “prioritize” to “include” on line 7 of the bill to provide flexibility on recommendations for hospitals.

## **RESPONSE FROM ADMINISTRATION/AGENCY:**

There was no testimony from the Administration or State Agency

## **NATURE AND SOURCES OF SUPPORT:**

### **Dr. Robert Brody, CT Naturopathic Physicians Association**

This bill represents an important step forward in recognizing the critical role that nutrition plays in preventing and managing chronic disease. Conditions such as diabetes and congestive heart failure are strongly influenced by dietary patterns and lifestyle factors. This bill also reflects an important recognition that addressing chronic disease requires interdisciplinary collaboration and a broader view of healthcare delivery.

**Elizabeth Caldwell, Graduate Student, Yale School of Public Health**

This bill aligns hospital community benefit obligations with one of the most powerful, evidence-based tools available to reduce preventable hospitalizations and improve chronic disease outcomes: medically tailored nutrition. I have sat with patients whose diabetes or heart failure was initially stabilized through medication, only for the prognosis to worsen weeks later. Oftentimes, these patients found themselves choosing between nutritious groceries and low-sodium foods or prescriptions and rent. The research base supporting medically tailored meals (MTMs) is robust and favors medically tailored nutritional assessments.

**Allison Kallberg, CT AND public Policy Coordinator**

Diabetes imposes a substantial clinical and economic burden on Connecticut. Congestive heart failure also represents a significant strain on Connecticut's health care system. Both diabetes and congestive heart failure are preventable and manageable conditions in which nutrition plays a central role. The emphasis on medically tailored meals is an important component of the bill as food-based interventions are increasingly supported by emerging evidence.

**NATURE AND SOURCES OF OPPOSITION:**

**Connecticut Children's Hospital**

While supporting the intent of the bill, we have concerns with the underlying bill including its applicability to pediatrics. Although medically tailored and food-based interventions can be effective health promotion strategies, community health needs assessment implementation plans should be reflective of needs directly identified by community members through the assessment process. Additionally, we believe the focus of this bill on both diabetes and congestive heart failure may not be especially informative or relevant for a health system focused exclusively on children.

**Reported by: Dave Rackliffe, Asst. Clerk**

**Date: 3/5/2026**