



General Assembly

Substitute Bill No. 5375

February Session, 2026



**AN ACT CONCERNING THE RECOMMENDATIONS OF THE
INSURANCE AND REAL ESTATE COMMITTEE WORKING GROUPS.**

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

1 Section 1. (NEW) (*Effective October 1, 2026*) (a) As used in this section:

2 (1) "Nonprofit human services provider" means any nonprofit
3 provider that contracts with the state to provide health and human
4 services that may include, but need not be limited to: (A) Services for
5 persons with a physical disability; (B) services for persons with an
6 intellectual disability or developmental disabilities, including, but not
7 limited to, autism spectrum disorder; and (C) behavioral health services;
8 and

9 (2) "Purchase of service contract" and "state agency" have the same
10 meanings as provided in section 4-70b of the general statutes.

11 (b) No nonprofit human services provider that contracts with the
12 state through a purchase of service contract shall be liable for injury to
13 person or property caused by the negligent acts or omissions of any state
14 official, state employee or third party occurring during the performance
15 of such nonprofit human services provider's contractual obligations
16 pursuant to such purchase of service contract.

17 Sec. 2. (*Effective from passage*) The Insurance Commissioner shall study

18 the feasibility of (1) allowing one or more nonprofit entities to pool such
19 nonprofit entities' liability insurance policies, including general liability
20 insurance and automobile liability insurance, and (2) establishing a
21 captive insurance company or program to insure the risk of such pool.
22 Not later than February 1, 2027, the Insurance Commissioner shall
23 report, in accordance with the provisions of section 11-4a of the general
24 statutes, to the joint standing committee of the General Assembly
25 having cognizance of matters relating to insurance on the findings of
26 such study.

27 Sec. 3. (*Effective from passage*) The Insurance Commissioner shall
28 conduct a study to examine the degree to which (1) third-party litigation
29 funding in litigation involving an insurance claim, (2) settlement tactics
30 in litigation involving an insurance claim, and (3) factors increasing the
31 costs of litigation involving an insurance claim affect the cost of
32 insurance premiums and insurance claim severity. Not later than
33 February 1, 2027, the Insurance Commissioner shall report, in
34 accordance with the provisions of section 11-4a of the general statutes,
35 to the joint standing committees of the General Assembly having
36 cognizance of matters relating to insurance and the judiciary on the
37 findings of such study.

38 Sec. 4. (NEW) (*Effective January 1, 2028*) (a) As used in this section:

39 (1) "Health benefit plan" has the same meaning as provided in section
40 38a-1080 of the general statutes.

41 (2) "Health carrier" has the same meaning as provided in section 38a-
42 1080 of the general statutes.

43 (3) "Pharmacist" has the same meaning as provided in section 38a-
44 479aaa of the general statutes.

45 (4) "Pharmacy benefits manager" has the same meaning as provided
46 in section 38a-479aaa of the general statutes.

47 (5) "Covered clinical service" means any service or procedure that (A)

48 is within the scope of the pharmacist's license under chapter 400j of the
49 general statutes, and (B) is a covered service under the terms of the
50 health benefit plan when performed by any other licensed health care
51 provider.

52 (b) Each health carrier, or third-party administrator or pharmacy
53 benefits manager, as applicable, that provides, administers or manages
54 benefits under a health benefit plan in this state shall ensure that
55 reimbursement processes and provider networks are inclusive of
56 pharmacists for the purpose of reimbursing covered clinical services.

57 (c) A health carrier, third-party administrator or pharmacy benefits
58 manager shall not deny reimbursement solely based on a provider's
59 license type when such service is:

60 (1) Within the scope of the pharmacist's license under chapter 400j of
61 the general statutes; and

62 (2) Otherwise eligible for reimbursement when performed by a
63 physician, physician assistant or advanced practice registered nurse.

64 (d) Nothing in this section shall be construed to:

65 (1) Require coverage of any service not otherwise covered under the
66 health benefit plan; or

67 (2) Prevent a health carrier, third-party administrator or pharmacy
68 benefits manager from establishing reasonable participation,
69 credentialing or contracting standards.

70 (e) The Insurance Commissioner may adopt regulations, in
71 accordance with chapter 54 of the general statutes, to implement the
72 provisions of this section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2026	New section

Sec. 2	<i>from passage</i>	New section
Sec. 3	<i>from passage</i>	New section
Sec. 4	<i>January 1, 2028</i>	New section

INS *Joint Favorable Subst.*