



General Assembly

Amendment

February Session, 2026

LCO No. 5762



Offered by:

SEN. LOONEY, 11th Dist.

REP. RITTER, 1st Dist.

SEN. DUFF, 25th Dist.

REP. ROJAS, 9th Dist.

To: Subst. Senate Bill No. 1

File No. 692

Cal. No. 423

"AN ACT CONCERNING AFFORDABILITY."

1 Strike everything after the enacting clause and substitute the
2 following in lieu thereof:

3 "Section 1. (*Effective July 1, 2026*) The amounts appropriated for the
4 fiscal year ending June 30, 2027, in section 1 of public act 25-168,
5 regarding the GENERAL FUND are amended to read as follows:

T1		2026-2027	
T2	LEGISLATIVE		
T3			
T4	LEGISLATIVE MANAGEMENT		
T5	Personal Services	[64,296,079]	<u>64,246,079</u>
T6	Other Expenses	24,954,131	
T7	Equipment	3,295,000	
T8	Flag Restoration	65,000	
T9	Minor Capital Improvements	4,000,000	

T10	Interim Salary/Caucus Offices	591,748	
T11	Connecticut Academy of Science and Engineering	[226,000]	<u>276,000</u>
T12	Old State House	900,000	
T13	Translators	150,000	
T14	Wall of Fame	10,000	
T15	Interstate Conference Fund	529,095	
T16	New England Board of Higher Education	226,488	
T17	AGENCY TOTAL	99,243,541	
T18			
T19	AUDITORS OF PUBLIC ACCOUNTS		
T20	Personal Services	16,701,328	
T21	Other Expenses	[451,727]	<u>951,727</u>
T22	AGENCY TOTAL	[17,153,055]	<u>17,653,055</u>
T23			
T24	COMMISSION ON WOMEN, CHILDREN, SENIORS, EQUITY AND OPPORTUNITY		
T25	Personal Services	1,227,933	
T26	Other Expenses	60,000	
T27	AGENCY TOTAL	1,287,933	
T28			
T29	GENERAL GOVERNMENT		
T30			
T31	GOVERNOR'S OFFICE		
T32	Personal Services	[3,983,704]	<u>3,994,533</u>
T33	Other Expenses	635,401	
T34	National Governors' Association	121,522	
T35	AGENCY TOTAL	[4,740,627]	<u>4,751,456</u>
T36			
T37	SECRETARY OF THE STATE		
T38	Personal Services	[5,402,637]	<u>4,511,688</u>
T39	Other Expenses	[3,517,936]	<u>6,227,936</u>
T40	Commercial Recording Division	5,419,159	
T41	Early Voting	1,320,000	
T42	Bridgeport Election Monitor	150,000	
T43	AGENCY TOTAL	[15,809,732]	<u>17,628,783</u>
T44			
T45	LIEUTENANT GOVERNOR'S OFFICE		

T46	Personal Services	[865,598]	<u>874,649</u>
T47	Other Expenses	46,323	
T48	AGENCY TOTAL	[911,921]	<u>920,972</u>
T49			
T50	ELECTIONS ENFORCEMENT COMMISSION		
T51	Elections Enforcement Commission	[4,255,296]	<u>4,280,767</u>
T52			
T53	OFFICE OF STATE ETHICS		
T54	Office of State Ethics	[2,059,779]	<u>2,238,902</u>
T55			
T56	FREEDOM OF INFORMATION COMMISSION		
T57	Freedom of Information Commission	[2,283,813]	<u>2,307,423</u>
T58			
T59	STATE TREASURER		
T60	Personal Services	[3,543,056]	<u>3,552,107</u>
T61	Other Expenses	359,854	
T62	AGENCY TOTAL	[3,902,910]	<u>3,911,961</u>
T63			
T64	STATE COMPTROLLER		
T65	Personal Services	[30,478,063]	<u>30,487,114</u>
T66	Other Expenses	[18,417,000]	<u>18,517,000</u>
T67	<u>Various Grants</u>		<u>250,000</u>
T68	AGENCY TOTAL	[48,895,063]	<u>49,254,114</u>
T69			
T70	DEPARTMENT OF REVENUE SERVICES		
T71	Personal Services	[54,700,984]	<u>54,871,282</u>
T72	Other Expenses	4,617,358	
T73	AGENCY TOTAL	[59,318,342]	<u>59,488,640</u>
T74			
T75	OFFICE OF GOVERNMENTAL ACCOUNTABILITY		
T76	[Other Expenses]	[25,098]	
T77	Child Fatality Review Panel	139,183	
T78	Contracting Standards Board	859,334	
T79	Judicial Review Council	191,511	
T80	Judicial Selection Commission	117,678	
T81	Office of the Child Advocate	1,032,892	

T82	Office of the Victim Advocate	519,674	
T83	Board of Firearms Permit Examiners	148,193	
T84	Office of the Correction Ombuds	[763,692]	<u>1,219,274</u>
T85	[Office of the Educational Ombudsperson]	[180,000]	
T86	AGENCY TOTAL	[3,977,255]	<u>4,227,739</u>
T87			
T88	OFFICE OF POLICY AND MANAGEMENT		
T89	Personal Services	[21,379,691]	<u>22,777,279</u>
T90	Other Expenses	[3,305,422]	<u>2,703,635</u>
T91	Automated Budget System and Data Base Link	20,438	
T92	Justice Assistance Grants	865,967	
T93	Tax Relief For Elderly Renters	25,020,226	
T94	Private Providers	156,000,000	
T95	Reimbursement Property Tax - Disability Exemption	364,713	
T96	Distressed Municipalities	1,500,000	
T97	Property Tax Relief Elderly Freeze Program	[4,000]	<u>2,000</u>
T98	Property Tax Relief for Veterans	[2,708,107]	<u>1,708,107</u>
T99	Municipal Restructuring	300,000	
T100	<u>Various Municipal Grants</u>		<u>22,178,100</u>
T101	<u>America250</u>		<u>250,000</u>
T102	AGENCY TOTAL	[211,468,564]	<u>233,690,465</u>
T103			
T104	DEPARTMENT OF VETERANS' AFFAIRS		
T105	Personal Services	[23,687,289]	<u>23,802,446</u>
T106	Other Expenses	[4,106,113]	<u>5,521,457</u>
T107	SSMF Administration	560,345	
T108	Veterans' Opportunity Pilot	245,047	
T109	Veterans' Rally Point	512,764	
T110	Burial Expenses	6,666	
T111	Headstones	[307,834]	<u>207,834</u>
T112	<u>Various Grants</u>		<u>341,000</u>
T113	AGENCY TOTAL	[29,426,058]	<u>31,197,559</u>
T114			
T115	DEPARTMENT OF ADMINISTRATIVE SERVICES		
T116	Personal Services	100,780,339	
T117	Other Expenses	[31,251,286]	<u>32,331,302</u>

T118	Loss Control Risk Management	88,003	
T119	Employees' Review Board	32,611	
T120	Refunds Of Collections	20,381	
T121	Rents and Moving	4,136,035	
T122	W. C. Administrator	5,562,120	
T123	<u>Claims Commissioner Operations</u>		<u>460,499</u>
T124	State Insurance and Risk Mgmt Operations	21,830,588	
T125	IT Services	[67,732,158]	<u>69,273,016</u>
T126	Firefighters Fund	400,000	
T127	State Properties Review Board	[337,113]	<u>527,113</u>
T128	State Marshal Commission	[365,556]	<u>417,680</u>
T129	[Office of the Claims Commissioner]	[460,499]	
T130	AGENCY TOTAL	[232,996,689]	<u>235,859,687</u>
T131			
T132	ATTORNEY GENERAL		
T133	Personal Services	[40,234,183]	<u>41,093,234</u>
T134	Other Expenses	1,054,810	
T135	AGENCY TOTAL	[41,288,993]	<u>42,148,044</u>
T136			
T137	DIVISION OF CRIMINAL JUSTICE		
T138	Personal Services	58,219,053	
T139	Other Expenses	[5,102,201]	<u>5,002,201</u>
T140	Witness Protection	[200,000]	<u>300,000</u>
T141	Training And Education	147,398	
T142	Expert Witnesses	135,413	
T143	Medicaid Fraud Control	[1,509,942]	<u>1,602,442</u>
T144	Criminal Justice Commission	409	
T145	Cold Case Unit	292,041	
T146	Shooting Taskforce	1,427,286	
T147	AGENCY TOTAL	[67,033,743]	<u>67,126,243</u>
T148			
T149	REGULATION AND PROTECTION		
T150			
T151	DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION		
T152	Personal Services	[180,361,731]	<u>180,561,731</u>
T153	Other Expenses	[34,715,572]	<u>43,032,873</u>
T154	Fleet Purchase	[7,782,053]	<u>8,317,320</u>

T155	Criminal Justice Information System	4,763,320	
T156	CRISIS	[1,800,000]	<u>2,050,000</u>
T157	Law Enforcement Training Partnerships	2,050,000	
T158	Fire Training School - Willimantic	[242,176]	<u>262,176</u>
T159	Maintenance of County Base Fire Radio Network	19,528	
T160	Maintenance of State-Wide Fire Radio Network	12,997	
T161	Police Association of Connecticut	172,353	
T162	Connecticut State Firefighter's Association	[176,625]	<u>306,625</u>
T163	Fire Training School - Torrington	[172,267]	<u>192,267</u>
T164	Fire Training School - New Haven	[108,364]	<u>128,364</u>
T165	Fire Training School - Derby	[50,639]	<u>70,639</u>
T166	Fire Training School - Wolcott	[171,162]	<u>191,162</u>
T167	Fire Training School - Fairfield	[127,501]	<u>147,501</u>
T168	Fire Training School - Hartford	[176,836]	<u>196,836</u>
T169	Fire Training School - Middletown	[70,970]	<u>90,970</u>
T170	Fire Training School - Stamford	[75,541]	<u>95,541</u>
T171	<u>Various Grants</u>		<u>2,858,112</u>
T172	Volunteer Firefighter Training	140,000	
T173	AGENCY TOTAL	[233,189,635]	<u>245,660,315</u>
T174			
T175	MILITARY DEPARTMENT		
T176	Personal Services	[3,305,492]	<u>3,530,455</u>
T177	Other Expenses	2,144,823	
T178	Honor Guards	561,600	
T179	Veteran's Service Bonuses	379,500	
T180	JEEP Program	338,600	
T181	[Governor's Guards]	[330,000]	
T182	<u>Governor's Foot Guards</u>		<u>10,000</u>
T183	<u>Governor's First Horse Guard</u>		<u>160,000</u>
T184	<u>Governor's Second Horse Guard</u>		<u>160,000</u>
T185	AGENCY TOTAL	[7,060,015]	<u>7,284,978</u>
T186			
T187	DEPARTMENT OF CONSUMER PROTECTION		
T188	Personal Services	[16,807,275]	<u>17,656,994</u>
T189	Other Expenses	[757,940]	<u>1,269,330</u>
T190	<u>Funeral Services Compensation</u>		<u>1,000,000</u>

T191	AGENCY TOTAL	[17,565,215]	<u>19,926,324</u>
T192			
T193	LABOR DEPARTMENT		
T194	Personal Services	[17,911,298]	<u>17,892,149</u>
T195	Other Expenses	[4,693,827]	<u>2,014,638</u>
T196	CETC Workforce	606,460	
T197	Workforce Investment Act	[29,938,610]	<u>26,993,197</u>
T198	Job Funnels Projects	712,857	
T199	Connecticut's Youth Employment Program	[10,268,488]	<u>10,493,488</u>
T200	Jobs First Employment Services	13,173,620	
T201	Apprenticeship Program	[604,369]	<u>763,254</u>
T202	Connecticut Career Resource Network	152,112	
T203	STRIVE	88,779	
T204	Opportunities for Long Term Unemployed	5,121,184	
T205	Second Chance Initiative	327,038	
T206	Cradle To Career	[100,000]	<u>150,000</u>
T207	New Haven Jobs Funnel	750,000	
T208	Manufacturing Pipeline Initiative	[4,627,698]	<u>6,627,698</u>
T209	Domestic Workers Education and Training Grant Program	400,000	
T210	<u>Various Grants</u>		<u>5,470,000</u>
T211	AGENCY TOTAL	[89,476,340]	<u>91,736,474</u>
T212			
T213	COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES		
T214	Personal Services	[8,768,241]	<u>9,043,421</u>
T215	Other Expenses	[398,527]	<u>428,719</u>
T216	Martin Luther King, Jr. Commission	5,977	
T217	AGENCY TOTAL	[9,172,745]	<u>9,478,117</u>
T218			
T219	CONSERVATION AND DEVELOPMENT		
T220			
T221	DEPARTMENT OF AGRICULTURE		
T222	Personal Services	[4,713,414]	<u>4,818,414</u>
T223	Other Expenses	[2,373,332]	<u>693,332</u>
T224	Senior Food Vouchers	518,418	
T225	Dairy Farmer - Agriculture Sustainability	1,000,000	
T226	WIC Coupon Program for Fresh Produce	247,938	

T227	<u>Various Grants</u>		<u>1,767,000</u>
T228	AGENCY TOTAL	[8,853,102]	<u>9,045,102</u>
T229			
T230	DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION		
T231	Personal Services	[23,865,954]	<u>24,348,753</u>
T232	Other Expenses	[1,602,261]	<u>1,007,261</u>
T233	Mosquito and Tick Control	284,240	
T234	State Superfund Site Maintenance	399,577	
T235	Laboratory Fees	122,565	
T236	Dam Maintenance	151,902	
T237	Emergency Spill Response	7,657,024	
T238	Solid Waste Management	4,078,312	
T239	Underground Storage Tank	1,085,420	
T240	Clean Air	4,449,309	
T241	Environmental Conservation	4,893,567	
T242	Environmental Quality	7,056,504	
T243	Fish Hatcheries	3,004,540	
T244	U.S. Nuclear Regulatory Commission	278,315	
T245	Interstate Environmental Commission	3,333	
T246	New England Interstate Water Pollution Commission	26,554	
T247	Northeast Interstate Forest Fire Compact	3,082	
T248	Connecticut River Valley Flood Control Commission	30,295	
T249	Thames River Valley Flood Control Commission	45,151	
T250	<u>Various Grants</u>		<u>1,045,000</u>
T251	AGENCY TOTAL	[59,037,905]	<u>59,970,704</u>
T252			
T253	DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT		
T254	Personal Services	[9,842,148]	<u>10,185,290</u>
T255	Other Expenses	611,278	
T256	Spanish-American Merchants Association	442,194	
T257	Office of Military Affairs	181,521	
T258	CCAT-CT Manufacturing Supply Chain	2,585,000	
T259	Capital Region Development Authority	10,845,022	
T260	Manufacturing Growth Initiative	178,133	

T261	Hartford 2000	20,000	
T262	Office of Workforce Strategy	[1,303,046]	<u>2,003,046</u>
T263	Black Business Alliance	442,194	
T264	Hartford Economic Development Corporation	442,194	
T265	CONNSTEP	500,000	
T266	Various Grants	[20,176,930]	<u>30,338,490</u>
T267	[MRDA] <u>Connecticut Municipal Development Authority (CMDA)</u>	[1,300,000]	<u>1,420,000</u>
T268	AdvanceCT	2,000,000	
T269	Futures Inc	85,000	
T270	Forge City Works	[300,000]	<u>600,000</u>
T271	CT Community Empowerment Foundation	100,000	
T272	City Seed	300,000	
T273	AGENCY TOTAL	[51,654,660]	<u>63,279,362</u>
T274			
T275	DEPARTMENT OF HOUSING		
T276	Personal Services	[2,649,343]	<u>3,401,351</u>
T277	Other Expenses	[157,210]	<u>137,210</u>
T278	Elderly Rental Registry and Counselors	1,011,170	
T279	Homeless Youth	3,235,121	
T280	Outreach Services for Norwich	[250,000]	<u>500,000</u>
T281	<u>Rental Assistance Program</u>		<u>94,082,152</u>
T282	Subsidized Assisted Living Demonstration	3,402,000	
T283	Congregate Facilities Operation Costs	12,864,700	
T284	Elderly Congregate Rent Subsidy	2,172,786	
T285	Housing/Homeless Services	[114,398,923]	<u>29,456,771</u>
T286	<u>Various Grants</u>		<u>2,883,000</u>
T287	Project Longevity - Housing	2,491,355	
T288	Housing/Homeless Services - Municipality	692,651	
T289	AGENCY TOTAL	[143,325,259]	<u>156,330,267</u>
T290			
T291	AGRICULTURAL EXPERIMENT STATION		
T292	Personal Services	7,197,533	
T293	Other Expenses	1,081,499	
T294	Mosquito and Tick Disease Prevention	857,623	
T295	Wildlife Disease Prevention	133,357	
T296	AGENCY TOTAL	9,270,012	

T297			
T298	HEALTH		
T299			
T300	DEPARTMENT OF PUBLIC HEALTH		
T301	Personal Services	[40,640,559]	<u>43,329,915</u>
T302	Other Expenses	[8,939,228]	<u>9,235,270</u>
T303	Gun Violence Prevention	[4,404,299]	<u>4,654,299</u>
T304	Lung Cancer Detection and Referrals	479,137	
T305	Pancreatic Cancer Screening	127,161	
T306	[Public Health Response]	[720,931]	
T307	Community Health Services	[2,398,494]	<u>1,898,494</u>
T308	Rape Crisis	616,233	
T309	<u>Various Grants</u>		<u>2,034,000</u>
T310	Local and District Departments of Health	[8,213,916]	<u>8,341,658</u>
T311	School Based Health Clinics	[14,400,721]	<u>15,102,721</u>
T312	AGENCY TOTAL	[80,940,679]	<u>85,818,888</u>
T313			
T314	OFFICE OF HEALTH STRATEGY		
T315	[Personal Services]	[3,370,606]	
T316	[Other Expenses]	[1,170,255]	
T317	[AGENCY TOTAL]	[4,540,861]	
T318			
T319	OFFICE OF THE CHIEF MEDICAL EXAMINER		
T320	Personal Services	9,036,394	
T321	Other Expenses	2,479,935	
T322	Equipment	24,846	
T323	Medicolegal Investigations	22,150	
T324	AGENCY TOTAL	11,563,325	
T325			
T326	DEPARTMENT OF DEVELOPMENTAL SERVICES		
T327	Personal Services	224,654,418	
T328	Other Expenses	21,019,245	
T329	Housing Supports and Services	1,400,000	
T330	Family Support Grants	3,700,840	
T331	Clinical Services	[2,337,724]	<u>2,437,724</u>
T332	Behavioral Services Program	12,857,593	

T333	Supplemental Payments for Medical Services	2,558,132	
T334	ID Partnership Initiatives	2,528,138	
T335	Emergency Placements	5,980,932	
T336	Rent Subsidy Program	5,262,312	
T337	Employment Opportunities and Day Services	407,451,072	
T338	Community Residential Services	938,815,100	
T339	AGENCY TOTAL	[1,628,565,506]	<u>1,628,665,506</u>
T340			
T341	DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES		
T342	Personal Services	257,078,417	
T343	Other Expenses	[37,617,895]	<u>37,636,645</u>
T344	Housing Supports and Services	[29,716,445]	<u>30,716,445</u>
T345	Managed Service System	[77,687,785]	<u>83,962,785</u>
T346	Legal Services	764,660	
T347	Connecticut Mental Health Center	9,229,406	
T348	Professional Services	23,400,697	
T349	Behavioral Health Recovery Services	[26,407,864]	<u>26,694,864</u>
T350	Nursing Home Screening	652,784	
T351	Young Adult Services	95,902,326	
T352	TBI Community Services	9,443,717	
T353	Behavioral Health Medications	[8,170,754]	<u>9,470,754</u>
T354	Medicaid Adult Rehabilitation Option	4,419,683	
T355	Discharge and Diversion Services	[43,157,991]	<u>46,382,991</u>
T356	Home and Community Based Services	[26,723,158]	<u>27,413,158</u>
T357	Nursing Home Contract	1,152,856	
T358	Katie Blair House	17,016	
T359	Forensic Services	[11,544,887]	<u>13,444,887</u>
T360	Grants for Substance Abuse Services	[37,103,118]	<u>42,853,118</u>
T361	Grants for Mental Health Services	77,117,159	
T362	Employment Opportunities	9,873,631	
T363	AGENCY TOTAL	[787,182,249]	<u>807,627,999</u>
T364			
T365	PSYCHIATRIC SECURITY REVIEW BOARD		
T366	Personal Services	367,270	
T367	Other Expenses	24,943	
T368	AGENCY TOTAL	392,213	
T369			

T370	HUMAN SERVICES		
T371			
T372	DEPARTMENT OF SOCIAL SERVICES		
T373	Personal Services	[159,660,660]	<u>160,022,138</u>
T374	Other Expenses	[168,068,200]	<u>168,607,200</u>
T375	Genetic Tests in Paternity Actions	81,906	
T376	HUSKY B Program	[32,760,000]	<u>33,190,000</u>
T377	Substance Use Disorder Waiver Reserve	[18,370,000]	<u>7,265,000</u>
T378	Medicaid	[3,950,330,000]	<u>3,942,934,000</u>
T379	Old Age Assistance	[56,900,000]	<u>62,600,000</u>
T380	Aid To The Blind	[657,800]	<u>960,000</u>
T381	Aid To The Disabled	[56,020,000]	<u>59,300,000</u>
T382	Temporary Family Assistance - TANF	[75,400,000]	<u>54,000,000</u>
T383	Emergency Assistance	1	
T384	Food Stamp Training Expenses	9,341	
T385	DMHAS-Disproportionate Share	108,935,000	
T386	Connecticut Home Care Program	[51,180,000]	<u>56,180,000</u>
T387	Human Resource Development-Hispanic Programs	1,070,348	
T388	Safety Net Services	1,500,145	
T389	Refunds Of Collections	89,965	
T390	Services for Persons With Disabilities	309,661	
T391	Nutrition Assistance	[6,020,994]	<u>3,020,994</u>
T392	State Administered General Assistance	[19,000,000]	<u>15,056,000</u>
T393	Connecticut Children's Medical Center	13,138,737	
T394	Community Services	[10,992,162]	<u>17,284,299</u>
T395	Human Services Infrastructure Community Action Program	[4,274,240]	<u>7,174,240</u>
T396	Teen Pregnancy Prevention	1,394,639	
T397	Domestic Violence Shelters	8,650,381	
T398	[Hospital Supplemental Payments]	[778,300,000]	
T399	[Regional Hospice of Western CT]	[1,000,000]	
T400	Teen Pregnancy Prevention - Municipality	98,281	
T401	AGENCY TOTAL	[5,524,212,461]	<u>4,722,872,276</u>
T402			
T403	DEPARTMENT OF AGING AND DISABILITY SERVICES		
T404	Personal Services	[8,626,272]	<u>9,242,629</u>
T405	Other Expenses	[2,182,575]	<u>1,222,575</u>

T406	Educational Aid for Children - Blind or Visually Impaired	5,036,360	
T407	Employment Opportunities – Blind & Disabled	416,974	
T408	Vocational Rehabilitation - Disabled	[7,895,382]	<u>7,947,786</u>
T409	Supplementary Relief and Services	[97,251]	<u>44,847</u>
T410	Special Training for the Deaf Blind	264,045	
T411	Connecticut Radio Information Service	70,194	
T412	Independent Living Centers	1,025,528	
T413	Programs for Senior Citizens	[5,036,165]	<u>6,296,165</u>
T414	<u>Various Grants</u>		<u>951,825</u>
T415	Elderly Nutrition	[5,141,074]	<u>5,294,406</u>
T416	Communication Advocacy Network	200,000	
T417	AGENCY TOTAL	[35,991,820]	<u>38,013,334</u>
T418			
T419	EDUCATION		
T420			
T421	DEPARTMENT OF EDUCATION		
T422	Personal Services	18,557,641	
T423	Other Expenses	[28,295,963]	<u>3,920,963</u>
T424	Development of Mastery Exams Grades 4, 6, and 8	10,571,192	
T425	Primary Mental Health	[335,288]	<u>314,288</u>
T426	Leadership, Education, Athletics in Partnership (LEAP)	312,211	
T427	Adult Education Action	[169,534]	<u>159,534</u>
T428	Connecticut Writing Project	95,250	
T429	CT Alliance of Boys and Girls Clubs	1,000,000	
T430	Sheff Settlement	18,721,292	
T431	Parent Trust Fund Program	350,000	
T432	Commissioner's Network	[9,869,398]	<u>9,817,398</u>
T433	Local Charter Schools	957,000	
T434	Bridges to Success	27,000	
T435	Talent Development	[2,068,449]	<u>4,068,449</u>
T436	School-Based Diversion Initiative	900,000	
T437	EdSight	[1,140,690]	<u>1,640,690</u>
T438	Sheff Transportation	80,326,212	
T439	Curriculum and Standards	[4,215,782]	<u>6,215,782</u>
T440	Non-Sheff Transportation	14,275,787	

T441	Aspiring Educators Scholarship Program	[6,000,000]	<u>4,000,000</u>
T442	Dual Credit	6,000,000	
T443	Local Food for Local Schools Incentive Program	3,430,000	
T444	Office of Dyslexia	[680,000]	<u>1,180,000</u>
T445	<u>Special Education Initiatives</u>		<u>3,300,000</u>
T446	American School For The Deaf	[12,357,514]	<u>12,757,514</u>
T447	Regional Education Services	[262,500]	<u>254,500</u>
T448	Family Resource Centers	7,000,000	
T449	Charter Schools	[144,122,548]	<u>147,337,541</u>
T450	Child Nutrition State Match	[2,354,000]	<u>2,877,755</u>
T451	Health Foods Initiative	4,151,463	
T452	<u>Various Grants</u>		<u>15,746,000</u>
T453	Rose City Learning	[159,000]	<u>240,185</u>
T454	<u>SERC</u>		<u>1,000,000</u>
T455	<u>Teacher Residency RESC Alliance</u>		<u>750,000</u>
T456	Vocational Agriculture	[26,295,732]	<u>26,132,180</u>
T457	Adult Education	[25,953,382]	<u>25,356,130</u>
T458	Health and Welfare Services Pupils Private Schools	[6,447,702]	<u>3,438,415</u>
T459	Education Equalization Grants	2,456,935,081	
T460	Bilingual Education	3,832,260	
T461	Priority School Districts	30,818,778	
T462	Interdistrict Cooperation	1,537,500	
T463	School Breakfast Program	[2,158,900]	<u>14,158,900</u>
T464	Excess Cost - Student Based	221,119,782	
T465	Open Choice Program	31,472,503	
T466	Magnet Schools	[344,345,603]	<u>339,255,603</u>
T467	After School Program	5,750,695	
T468	Extended School Hours	2,919,883	
T469	School Accountability	3,412,207	
T470	High Dosage Tutoring Grants	[5,000,000]	<u>2,000,000</u>
T471	Special Education and Expansion Development	30,000,000	
T472	High Quality Special Ed Incentives	[9,900,000]	<u>8,900,000</u>
T473	Learner Engagement and Attendance Program	7,000,000	
T474	<u>School Based Behavioral Health Grants</u>		<u>5,000,000</u>
T475	AGENCY TOTAL	[3,593,605,722]	<u>3,601,295,564</u>

T476			
T477	CONNECTICUT TECHNICAL EDUCATION AND CAREER SYSTEM		
T478	Personal Services	[175,558,658]	<u>177,213,906</u>
T479	Other Expenses	[31,957,461]	<u>37,957,461</u>
T480	AGENCY TOTAL	[207,516,119]	<u>215,171,367</u>
T481			
T482	OFFICE OF EARLY CHILDHOOD		
T483	Personal Services	9,926,912	
T484	Other Expenses	[8,294,731]	<u>7,919,731</u>
T485	Birth to Three	[36,093,626]	<u>38,493,626</u>
T486	Evenstart	545,456	
T487	2Gen - TANF	[575,685]	<u>672,390</u>
T488	[Nurturing Families Network]	[14,469,995]	
T489	OEC Parent Cabinet	152,264	
T490	Capitol Child Development Center	263,000	
T491	<u>CT Home Visiting System</u>		<u>14,469,995</u>
T492	Head Start Services	5,833,238	
T493	Care4Kids TANF/CCDF	151,227,096	
T494	Child Care Quality Enhancements	5,954,530	
T495	Early Head Start-Child Care Partnership	1,500,000	
T496	Early Care and Education	201,845,725	
T497	<u>Various Grants</u>		<u>850,000</u>
T498	Smart Start	6,325,000	
T499	AGENCY TOTAL	[443,007,258]	<u>445,978,963</u>
T500			
T501	STATE LIBRARY		
T502	Personal Services	5,419,751	
T503	Other Expenses	[1,460,515]	<u>772,336</u>
T504	State-Wide Digital Library	1,709,210	
T505	Interlibrary Loan Delivery Service	380,136	
T506	Legal/Legislative Library Materials	674,540	
T507	Library for the Blind	100,000	
T508	Support Cooperating Library Service Units	124,402	
T509	<u>Various Grants</u>		<u>960,000</u>
T510	<u>Grants To Public Libraries</u>		<u>225,000</u>
T511	Connecticard Payments	703,638	
T512	AGENCY TOTAL	[10,572,192]	<u>11,069,013</u>

T513			
T514	OFFICE OF HIGHER EDUCATION		
T515	Personal Services	1,855,031	
T516	Other Expenses	[3,142,258]	<u>179,166</u>
T517	Minority Advancement Program	1,674,835	
T518	National Service Act	320,151	
T519	Minority Teacher Incentive Program	570,134	
T520	CT Loan Reimbursement	[6,000,000]	<u>5,000,000</u>
T521	<u>Alternate Route to Certification</u>		<u>300,000</u>
T522	Roberta B. Willis Scholarship Fund	41,288,637	
T523	<u>Various Grants</u>		<u>4,313,092</u>
T524	Health Care Adjunct Grant Program	260,000	
T525	AGENCY TOTAL	[55,111,046]	<u>55,761,046</u>
T526			
T527	UNIVERSITY OF CONNECTICUT		
T528	Operating Expenses	[250,543,874]	<u>250,103,874</u>
T529	Veterinary Diagnostic Laboratory	250,000	
T530	Institute for Municipal and Regional Policy	550,000	
T531	UConn Veterans Program	250,000	
T532	Health Services - Regional Campuses	1,400,000	
T533	Puerto Rican Studies Initiative	500,000	
T534	<u>Student Success Software</u>		<u>800,000</u>
T535	<u>Learn and Earn</u>		<u>175,000</u>
T536	<u>Kirklyn M. Kerr Grant Program</u>		<u>600,000</u>
T537	<u>Various Grants</u>		<u>2,320,000</u>
T538	AGENCY TOTAL	[253,493,874]	<u>256,948,874</u>
T539			
T540	UNIVERSITY OF CONNECTICUT HEALTH CENTER		
T541	Operating Expenses	[136,673,524]	<u>135,508,524</u>
T542	AHEC	429,735	
T543	Neuromodulation Treatment	2,000,000	
T544	<u>Various Grants</u>		<u>1,940,000</u>
T545	<u>Endometriosis Biorepository</u>		<u>1,015,000</u>
T546	<u>Migraine Study</u>		<u>150,000</u>
T547	AGENCY TOTAL	[139,103,259]	<u>141,043,259</u>
T548			
T549	TEACHERS' RETIREMENT BOARD		

T550	Personal Services	2,291,080	
T551	Other Expenses	482,003	
T552	Retirement Contributions - Normal Cost	[299,800,000]	<u>328,073,000</u>
T553	Retirement Contributions - UAL	[1,405,300,000]	<u>1,403,546,000</u>
T554	Retirees Health Service Cost	44,356,000	
T555	Municipal Retiree Health Insurance Costs	8,840,000	
T556	AGENCY TOTAL	[1,761,069,083]	<u>1,787,588,083</u>
T557			
T558	CONNECTICUT STATE COLLEGES AND UNIVERSITIES		
T559	Charter Oak State College	[4,041,029]	<u>3,541,029</u>
T560	Community Tech College System	[241,998,796]	<u>242,918,796</u>
T561	Connecticut State University	[201,697,946]	<u>201,556,926</u>
T562	Board of Regents	519,512	
T563	Developmental Services	10,190,984	
T564	Outcomes-Based Funding Incentive	1,374,425	
T565	O'Neill Chair	315,000	
T566	Debt Free Community College	[34,150,000]	<u>36,450,000</u>
T567	[Expanded PACT] <u>Finish Line Scholars</u>	7,700,000	
T568	Disabilities Study	250,000	
T569	<u>Learn and Earn</u>		<u>175,000</u>
T570	<u>Various Grants</u>		<u>2,600,000</u>
T571	AGENCY TOTAL	[502,237,692]	<u>507,591,672</u>
T572			
T573	CORRECTIONS		
T574			
T575	DEPARTMENT OF CORRECTION		
T576	Personal Services	[470,144,513]	<u>474,490,513</u>
T577	Other Expenses	[89,528,616]	<u>99,828,616</u>
T578	Inmate Medical Services	[150,129,165]	<u>154,554,165</u>
T579	Board of Pardons and Paroles	6,822,490	
T580	STRIDE	80,181	
T581	HITEC	[644,174]	<u>764,174</u>
T582	Aid to Paroled and Discharged Inmates	3,000	
T583	Legal Services To Prisoners	797,000	
T584	Volunteer Services	87,725	
T585	Community Support Services	47,566,468	
T586	Reentry Centers	1,500,000	

T587	AGENCY TOTAL	[767,303,332]	<u>786,494,332</u>
T588			
T589	DEPARTMENT OF CHILDREN AND FAMILIES		
T590	Personal Services	[303,233,500]	<u>304,598,000</u>
T591	Other Expenses	[31,137,956]	<u>34,075,956</u>
T592	Family Support Services	1,064,233	
T593	Differential Response System	9,367,256	
T594	Regional Behavioral Health Consultation	1,838,167	
T595	Community Care Coordination	8,957,944	
T596	Health Assessment and Consultation	1,596,776	
T597	Grants for Psychiatric Clinics for Children	[17,880,105]	<u>18,748,105</u>
T598	Day Treatment Centers for Children	8,219,601	
T599	Child Abuse and Neglect Intervention	9,988,016	
T600	Community Based Prevention Programs	9,657,655	
T601	Family Violence Outreach and Counseling	4,009,230	
T602	Supportive Housing	[21,180,221]	<u>21,680,221</u>
T603	No Nexus Special Education	2,452,640	
T604	Family Preservation Services	7,242,683	
T605	Substance Abuse Treatment	[10,073,982]	<u>11,708,982</u>
T606	Child Welfare Support Services	2,854,163	
T607	Board and Care for Children - Adoption	106,884,511	
T608	Board and Care for Children - Foster	[123,521,818]	<u>125,021,818</u>
T609	Board and Care for Children - Short-term and Residential	[65,628,396]	<u>69,628,396</u>
T610	Individualized Family Supports	[3,871,304]	<u>4,021,304</u>
T611	Community Kidcare	61,011,129	
T612	Covenant to Care	185,911	
T613	<u>Various Grants</u>		<u>575,000</u>
T614	Juvenile Review Boards	6,043,187	
T615	Youth Transition and Success Programs	[1,016,220]	<u>1,266,220</u>
T616	[Love146]	[500,000]	
T617	Youth Service Bureaus	[2,733,240]	<u>2,747,240</u>
T618	Youth Service Bureau Enhancement	1,115,161	
T619	AGENCY TOTAL	[823,265,005]	<u>836,559,505</u>
T620			
T621	JUDICIAL		
T622			

T623	JUDICIAL DEPARTMENT		
T624	Personal Services	[385,678,706]	<u>404,420,575</u>
T625	Other Expenses	[74,997,164]	<u>75,735,354</u>
T626	Forensic Sex Evidence Exams	1,348,010	
T627	Alternative Incarceration Program	[70,000,000]	<u>73,990,000</u>
T628	Justice Education Center, Inc.	516,287	
T629	Juvenile Alternative Incarceration	[35,768,876]	<u>34,518,876</u>
T630	Probate Court	[3,634,932]	<u>455,812</u>
T631	Workers' Compensation Claims	6,042,106	
T632	Victim Security Account	8,792	
T633	Children of Incarcerated Parents	[542,683]	<u>792,683</u>
T634	Legal Aid	4,397,144	
T635	Youth Violence Initiative	5,592,428	
T636	Youth Services Prevention	[8,293,132]	<u>8,033,132</u>
T637	Children's Law Center	[150,000]	<u>200,000</u>
T638	Project Longevity	[4,221,255]	<u>3,471,255</u>
T639	Juvenile Planning	945,000	
T640	Juvenile Justice Outreach Services	27,945,080	
T641	Board and Care for Children - Short-term and Residential	12,953,332	
T642	LGBTQ Justice and Opportunity Network	256,382	
T643	Counsel for Domestic Violence	1,250,000	
T644	Outreach Services for Norwich	675,000	
T645	<u>Various Grants</u>		<u>3,920,024</u>
T646	AGENCY TOTAL	[645,216,309]	<u>667,467,272</u>
T647			
T648	PUBLIC DEFENDER SERVICES COMMISSION		
T649	Personal Services	58,383,519	
T650	Other Expenses	1,589,903	
T651	[Assigned Counsel - Criminal] <u>Assigned Counsel</u>	[41,354,960]	<u>41,008,344</u>
T652	Expert Witnesses	[2,775,604]	<u>3,122,220</u>
T653	Training And Education	119,748	
T654	AGENCY TOTAL	104,223,734	
T655			
T656	NON-FUNCTIONAL		
T657			
T658	DEBT SERVICE - STATE TREASURER		

T659	Debt Service	[2,041,951,996]	<u>2,039,989,119</u>
T660	UConn 2000 - Debt Service	[213,698,862]	<u>233,226,362</u>
T661	CHEFA Day Care Security	4,000,000	
T662	Pension Obligation Bonds - TRB	284,364,458	
T663	Municipal Restructuring	[47,778,925]	<u>47,058,347</u>
T664	AGENCY TOTAL	[2,591,794,241]	<u>2,608,638,286</u>
T665			
T666	STATE COMPTROLLER - MISCELLANEOUS		
T667	Nonfunctional - Change to Accruals	65,278,956	
T668			
T669	STATE COMPTROLLER - FRINGE BENEFITS		
T670	Unemployment Compensation	[4,049,400]	<u>4,047,500</u>
T671	Higher Education Alternative Retirement System	[101,569,100]	<u>50,620,000</u>
T672	Pensions and Retirements - Other Statutory	2,433,850	
T673	Judges and Compensation Commissioners Retirement	[31,587,446]	<u>31,945,712</u>
T674	Insurance - Group Life	9,736,350	
T675	Employers Social Security Tax	[227,326,623]	<u>228,500,654</u>
T676	State Employees Health Service Cost	[708,024,030]	<u>800,787,930</u>
T677	Retired State Employees Health Service Cost	[957,183,800]	<u>996,028,080</u>
T678	Tuition Reimbursement - Training and Travel	150,000	
T679	Other Post Employment Benefits	[65,073,558]	<u>65,541,816</u>
T680	SERS Defined Contribution Match	[27,991,712]	<u>28,163,281</u>
T681	State Employees Retirement Contributions - Normal Cost	[201,080,536]	<u>201,019,273</u>
T682	State Employees Retirement Contributions - UAL	[1,324,870,699]	<u>1,330,298,497</u>
T683	AGENCY TOTAL	[3,661,077,104]	<u>3,749,272,943</u>
T684			
T685	RESERVE FOR SALARY ADJUSTMENTS		
T686	Reserve For Salary Adjustments	186,551,369	
T687			
T688	WORKERS' COMPENSATION CLAIMS - ADMINISTRATIVE SERVICES		
T689	Workers' Compensation Claims	6,509,800	
T690	Workers' Compensation Claims - University of Connecticut	2,271,228	

T691	Claims - University of Connecticut Health Center	3,460,985	
T692	Workers' Compensation Claims - Board of Regents Higher Ed	3,289,276	
T693	Claims - Department of Children and Families	10,036,952	
T694	Workers' Compensation Claims Mental Health & Addiction Serv	18,061,027	
T695	Claim Department of Emergency Services and Public Protection	3,723,135	
T696	Claims - Department of Developmental Services	12,073,417	
T697	Workers' Compensation Claims - Department of Correction	37,722,823	
T698	AGENCY TOTAL	97,148,643	
T699			
T700	TOTAL - GENERAL FUND	[25,455,622,254]	<u>24,968,235,361</u>
T701			
T702	LESS:		
T703			
T704	Unallocated Lapse	-73,710,570	
T705	Unallocated Lapse - Judicial	-5,000,000	
T706	Targeted Savings	-15,000,000	
T707			
T708	NET - GENERAL FUND	[25,361,911,684]	<u>24,874,524,791</u>

6 Sec. 2. (*Effective July 1, 2026*) The amounts appropriated for the fiscal
7 year ending June 30, 2027, in section 2 of public act 25-168, regarding the
8 SPECIAL TRANSPORTATION FUND are amended to read as follows:

T709		2026-2027	
T710	GENERAL GOVERNMENT		
T711			
T712	OFFICE OF POLICY AND MANAGEMENT		
T713	Personal Services	770,498	
T714			
T715	DEPARTMENT OF ADMINISTRATIVE SERVICES		
T716	Personal Services	2,937,990	

T717	State Insurance and Risk Mgmt Operations	[17,467,920]	<u>20,467,920</u>
T718	IT Services	1,619,686	
T719	AGENCY TOTAL	[22,025,596]	<u>25,025,596</u>
T720			
T721	REGULATION AND PROTECTION		
T722			
T723	DEPARTMENT OF MOTOR VEHICLES		
T724	Personal Services	53,959,126	
T725	Other Expenses	[19,778,262]	<u>20,367,072</u>
T726	Equipment	668,756	
T727	DMV Modernization	3,000,000	
T728	Commercial Vehicle Information Systems and Networks Project	324,676	
T729	AGENCY TOTAL	[77,730,820]	<u>78,319,630</u>
T730			
T731	CONSERVATION AND DEVELOPMENT		
T732			
T733	DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION		
T734	Personal Services	3,781,576	
T735	Other Expenses	665,006	
T736	AGENCY TOTAL	4,446,582	
T737			
T738	TRANSPORTATION		
T739			
T740	DEPARTMENT OF TRANSPORTATION		
T741	Personal Services	236,076,271	
T742	Other Expenses	[63,434,586]	<u>63,534,586</u>
T743	Equipment	[1,376,329]	<u>2,176,329</u>
T744	Minor Capital Projects	449,639	
T745	Highway Planning And Research	[3,060,131]	<u>3,905,131</u>
T746	Rail Operations	[318,803,218]	<u>341,466,521</u>
T747	Bus Operations	[301,407,448]	<u>325,065,967</u>
T748	ADA Para-transit Program	[51,982,687]	<u>53,535,914</u>
T749	Non-ADA Dial-A-Ride Program	576,361	
T750	Pay-As-You-Go Transportation Projects	18,054,208	
T751	Transportation Asset Management	3,004,254	
T752	Transportation to Work	[2,370,629]	<u>2,500,629</u>

T753	AGENCY TOTAL	[1,000,595,761]	<u>1,050,345,810</u>
T754			
T755	NON-FUNCTIONAL		
T756			
T757	DEBT SERVICE - STATE TREASURER		
T758	Debt Service	[1,025,610,574]	<u>962,448,294</u>
T759			
T760	STATE COMPTROLLER - MISCELLANEOUS		
T761	Nonfunctional - Change to Accruals	5,337,671	
T762			
T763	STATE COMPTROLLER - FRINGE BENEFITS		
T764	Unemployment Compensation	360,000	
T765	Insurance - Group Life	401,600	
T766	Employers Social Security Tax	21,697,231	
T767	State Employees Health Service Cost	[65,927,200]	<u>80,108,200</u>
T768	Other Post Employment Benefits	4,321,112	
T769	SERS Defined Contribution Match	1,835,222	
T770	State Employees Retirement Contributions - Normal Cost	[23,334,444]	<u>23,327,335</u>
T771	State Employees Retirement Contributions - UAL	[136,192,810]	<u>136,648,679</u>
T772	AGENCY TOTAL	[254,069,619]	<u>268,699,379</u>
T773			
T774	RESERVE FOR SALARY ADJUSTMENTS		
T775	Reserve For Salary Adjustments	19,864,541	
T776			
T777	WORKERS' COMPENSATION CLAIMS - ADMINISTRATIVE SERVICES		
T778	Workers' Compensation Claims	6,723,297	
T779			
T780	TOTAL - SPECIAL TRANSPORTATION FUND	[2,417,174,959]	<u>2,421,981,298</u>
T781			
T782	LESS:		
T783			
T784	Unallocated Lapse	-12,000,000	
T785			

T786	NET - SPECIAL TRANSPORTATION FUND	[2,405,174,959]	<u>2,409,981,298</u>

9 Sec. 3. (*Effective July 1, 2026*) The amounts appropriated for the fiscal
10 year ending June 30, 2027, in section 3 of public act 25-168, regarding the
11 MASHANTUCKET PEQUOT AND MOHEGAN FUND are amended
12 to read as follows:

T787		2026-2027	
T788	GENERAL GOVERNMENT		
T789			
T790	OFFICE OF POLICY AND MANAGEMENT		
T791	Grants To Towns	[52,541,796]	<u>54,141,796</u>
T792			
T793	CONSERVATION AND DEVELOPMENT		
T794			
T795	DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION		
T796	<u>Various Grants</u>		<u>150,000</u>
T797			
T798	TOTAL - MASHANTUCKET PEQUOT AND MOHEGAN FUND	[52,541,796]	<u>54,291,796</u>

13 Sec. 4. (*Effective July 1, 2026*) The amounts appropriated for the fiscal
14 year ending June 30, 2027, in section 4 of public act 25-168, regarding the
15 BANKING FUND are amended to read as follows:

T799		2026-2027	
T800	GENERAL GOVERNMENT		
T801			
T802	DEPARTMENT OF ADMINISTRATIVE SERVICES		
T803	Personal Services	[413,105]	<u>462,372</u>
T804	Fringe Benefits	[307,747]	<u>346,176</u>
T805	IT Services	360,334	
T806	AGENCY TOTAL	[1,081,186]	<u>1,168,882</u>
T807			
T808	REGULATION AND PROTECTION		

T809			
T810	DEPARTMENT OF BANKING		
T811	Personal Services	[15,496,809]	<u>13,667,742</u>
T812	Other Expenses	[1,375,510]	<u>1,345,510</u>
T813	Equipment	44,900	
T814	Fringe Benefits	[12,399,055]	<u>10,438,126</u>
T815	Indirect Overhead	1,404,178	
T816	AGENCY TOTAL	[30,720,452]	<u>26,900,456</u>
T817			
T818	LABOR DEPARTMENT		
T819	Opportunity Industrial Centers	[738,708]	<u>813,708</u>
T820	Customized Services	965,689	
T821	AGENCY TOTAL	[1,704,397]	<u>1,779,397</u>
T822			
T823	CONSERVATION AND DEVELOPMENT		
T824			
T825	DEPARTMENT OF HOUSING		
T826	Fair Housing	670,000	
T827			
T828	EDUCATION		
T829			
T830	OFFICE OF HIGHER EDUCATION		
T831	<u>Personal Services</u>		<u>279,800</u>
T832	<u>Other Expenses</u>		<u>30,000</u>
T833	<u>Fringe Benefits</u>		<u>222,500</u>
T834	<u>AGENCY TOTAL</u>		<u>532,300</u>
T835			
T836	<u>JUDICIAL</u>		
T837			
T838	JUDICIAL DEPARTMENT		
T839	Foreclosure Mediation Program	2,158,656	
T840			
T841	NON-FUNCTIONAL		
T842			
T843	STATE COMPTROLLER - MISCELLANEOUS		
T844	Nonfunctional - Change to Accruals	261,199	
T845			

T846	TOTAL - BANKING FUND	[36,595,890]	<u>33,470,890</u>

16 Sec. 5. (*Effective July 1, 2026*) The amounts appropriated for the fiscal
17 year ending June 30, 2027, in section 5 of public act 25-168, regarding the
18 INSURANCE FUND are amended to read as follows:

T847		2026-2027	
T848	GENERAL GOVERNMENT		
T849			
T850	OFFICE OF POLICY AND MANAGEMENT		
T851	Personal Services	374,039	
T852	Other Expenses	[6,012]	<u>9,253,008</u>
T853	Fringe Benefits	277,130	
T854	AGENCY TOTAL	[657,181]	<u>9,904,177</u>
T855			
T856	DEPARTMENT OF ADMINISTRATIVE SERVICES		
T857	Personal Services	[905,796]	<u>1,006,493</u>
T858	Fringe Benefits	[656,984]	<u>735,528</u>
T859	IT Services	514,136	
T860	AGENCY TOTAL	[2,076,916]	<u>2,256,157</u>
T861			
T862	REGULATION AND PROTECTION		
T863			
T864	INSURANCE DEPARTMENT		
T865	Personal Services	[17,428,950]	<u>17,328,253</u>
T866	Other Expenses	[1,609,489]	<u>1,809,489</u>
T867	Equipment	62,500	
T868	Fringe Benefits	[13,071,712]	<u>13,528,237</u>
T869	Indirect Overhead	[1,594,604]	<u>1,411,492</u>
T870	AGENCY TOTAL	[33,767,255]	<u>34,139,971</u>
T871			
T872	OFFICE OF THE HEALTHCARE ADVOCATE		
T873	Personal Services	[1,947,836]	<u>2,053,260</u>
T874	Other Expenses	292,991	
T875	Equipment	5,000	

T876	Fringe Benefits	[1,831,655]	<u>1,718,526</u>
T877	Indirect Overhead	[79,775]	<u>44,424</u>
T878	AGENCY TOTAL	[4,157,257]	<u>4,114,201</u>
T879			
T880	CONSERVATION AND DEVELOPMENT		
T881			
T882	DEPARTMENT OF HOUSING		
T883	Crumbling Foundations	182,977	
T884			
T885	HEALTH		
T886			
T887	DEPARTMENT OF PUBLIC HEALTH		
T888	Needle and Syringe Exchange Program	513,515	
T889	Children's Health Initiatives	3,389,838	
T890	AIDS Services	5,366,231	
T891	Breast and Cervical Cancer Detection and Treatment	2,563,100	
T892	Immunization Services	50,845,097	
T893	X-Ray Screening and Tuberculosis Care	[971,849]	<u>871,849</u>
T894	Venereal Disease Control	203,256	
T895	AGENCY TOTAL	[63,852,886]	<u>63,752,886</u>
T896			
T897	OFFICE OF HEALTH STRATEGY		
T898	[Personal Services]	[1,487,574]	
T899	[Other Expenses]	[10,398,780]	
T900	[Equipment]	[10,000]	
T901	[Fringe Benefits]	[1,406,339]	
T902	[AGENCY TOTAL]	[13,302,693]	
T903			
T904	DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES		
T905	Managed Service System	462,699	
T906			
T907	HUMAN SERVICES		
T908			
T909	OFFICE OF THE BEHAVIORAL HEALTH ADVOCATE		
T910	[Personal Services]	[387,000]	
T911	[Other Expenses]	[65,500]	

T912	[Fringe Benefits]	[401,000]	
T913	[Indirect Overhead]	[22,500]	
T914	[AGENCY TOTAL]	[876,000]	
T915			
T916	<u>OFFICE OF THE BEHAVIORAL HEALTH ADVOCATE</u>		
T917	<u>Personal Services</u>		<u>387,000</u>
T918	<u>Other Expenses</u>		<u>65,500</u>
T919	<u>Fringe Benefits</u>		<u>401,000</u>
T920	<u>Indirect Overhead</u>		<u>22,500</u>
T921	<u>AGENCY TOTAL</u>		<u>876,000</u>
T922			
T923	DEPARTMENT OF AGING AND DISABILITY SERVICES		
T924	Fall Prevention	382,660	
T925			
T926	NON-FUNCTIONAL		
T927			
T928	STATE COMPTROLLER - MISCELLANEOUS		
T929	Nonfunctional - Change to Accruals	391,026	
T930			
T931	TOTAL - INSURANCE FUND	[120,109,550]	<u>116,462,754</u>

19 Sec. 6. (*Effective July 1, 2026*) The amounts appropriated for the fiscal
20 year ending June 30, 2027, in section 6 of public act 25-168, regarding the
21 CONSUMER COUNSEL AND PUBLIC UTILITY CONTROL FUND are
22 amended to read as follows:

T932		2026-2027	
T933	GENERAL GOVERNMENT		
T934			
T935	OFFICE OF POLICY AND MANAGEMENT		
T936	Personal Services	200,396	
T937	Other Expenses	2,000	
T938	Fringe Benefits	196,074	
T939	AGENCY TOTAL	398,470	
T940			

T941	DEPARTMENT OF ADMINISTRATIVE SERVICES		
T942	Personal Services	96,173	
T943	Fringe Benefits	88,135	
T944	AGENCY TOTAL	184,308	
T945			
T946	REGULATION AND PROTECTION		
T947			
T948	OFFICE OF CONSUMER COUNSEL		
T949	Personal Services	[2,288,944]	<u>2,468,944</u>
T950	Other Expenses	461,482	
T951	Equipment	2,200	
T952	Fringe Benefits	[1,724,601]	<u>1,844,601</u>
T953	Indirect Overhead	[157,648]	<u>124,209</u>
T954	AGENCY TOTAL	[4,634,875]	<u>4,901,436</u>
T955			
T956	<u>PUBLIC UTILITIES REGULATORY AUTHORITY</u>		
T957	<u>Personal Services</u>		<u>10,758,487</u>
T958	<u>Other Expenses</u>		<u>335,000</u>
T959	<u>Fringe Benefits</u>		<u>8,316,311</u>
T960	<u>AGENCY TOTAL</u>		<u>19,409,798</u>
T961			
T962	<u>CONSERVATION AND DEVELOPMENT</u>		
T963			
T964	DEPARTMENT OF ENERGY AND ENVIRONMENTAL PROTECTION		
T965	Personal Services	[17,340,038]	<u>6,581,551</u>
T966	Other Expenses	[1,479,367]	<u>1,144,367</u>
T967	Equipment	19,500	
T968	Fringe Benefits	[12,689,262]	<u>5,087,538</u>
T969	Indirect Overhead	[489,330]	<u>354,058</u>
T970	AGENCY TOTAL	[32,017,497]	<u>13,187,014</u>
T971			
T972	NON-FUNCTIONAL		
T973			
T974	STATE COMPTROLLER - MISCELLANEOUS		
T975	Nonfunctional - Change to Accruals	284,112	

T976			
T977	TOTAL - CONSUMER COUNSEL AND PUBLIC UTILITY CONTROL FUND	[37,519,262]	<u>38,365,138</u>

23 Sec. 7. (Effective July 1, 2026) The amounts appropriated for the fiscal
 24 year ending June 30, 2027, in section 7 of public act 25-168, regarding the
 25 WORKERS' COMPENSATION FUND are amended to read as follows:

T978		2026-2027	
T979	GENERAL GOVERNMENT		
T980			
T981	DEPARTMENT OF ADMINISTRATIVE SERVICES		
T982	Personal Services	[663,688]	<u>781,925</u>
T983	Fringe Benefits	[528,600]	<u>620,825</u>
T984	IT Services	199,938	
T985	AGENCY TOTAL	[1,392,226]	<u>1,602,688</u>
T986			
T987	DIVISION OF CRIMINAL JUSTICE		
T988	Personal Services	474,947	
T989	Other Expenses	10,428	
T990	Fringe Benefits	489,396	
T991	AGENCY TOTAL	974,771	
T992			
T993	REGULATION AND PROTECTION		
T994			
T995	LABOR DEPARTMENT		
T996	Occupational Health Clinics	708,113	
T997			
T998	WORKERS' COMPENSATION COMMISSION		
T999	Personal Services	[9,841,921]	<u>9,868,493</u>
T1000	Other Expenses	2,476,091	
T1001	Equipment	1	
T1002	Fringe Benefits	[8,561,814]	<u>8,513,611</u>
T1003	Indirect Overhead	[1,586,205]	<u>1,134,936</u>
T1004	AGENCY TOTAL	[22,466,032]	<u>21,993,132</u>
T1005			

T1006	HUMAN SERVICES		
T1007			
T1008	DEPARTMENT OF AGING AND DISABILITY SERVICES		
T1009	Personal Services	634,783	
T1010	Other Expenses	48,440	
T1011	Rehabilitative Services	595,631	
T1012	Fringe Benefits	467,987	
T1013	AGENCY TOTAL	1,746,841	
T1014			
T1015	NON-FUNCTIONAL		
T1016			
T1017	STATE COMPTROLLER - MISCELLANEOUS		
T1018	Nonfunctional - Change to Accruals	149,142	
T1019			
T1020	TOTAL - WORKERS' COMPENSATION FUND	[27,437,125]	<u>27,174,687</u>

26 Sec. 8. (*Effective July 1, 2026*) The amounts appropriated for the fiscal
27 year ending June 30, 2027, in section 9 of public act 25-168, regarding the
28 TOURISM FUND are amended to read as follows:

T1021		2026-2027	
T1022	CONSERVATION AND DEVELOPMENT		
T1023			
T1024	DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT		
T1025	Statewide Marketing	4,500,000	
T1026	Hartford Urban Arts Grant	[242,371]	<u>440,252</u>
T1027	New Britain Arts Council	39,380	
T1028	Westville Village Renaissance Alliance	145,000	
T1029	Neighborhood Music School	200,540	
T1030	Greater Hartford Community Foundation Travelers Championship	150,000	
T1031	CT Convention & Sports Bureau	500,000	
T1032	Nutmeg Games	40,000	
T1033	Discovery Museum	196,895	

T1034	National Theatre of the Deaf	78,758	
T1035	Connecticut Science Center	[546,626]	<u>746,626</u>
T1036	CT Flagship Producing Theaters Grant	360,000	
T1037	Performing Arts Centers	787,571	
T1038	Performing Theaters Grant	[900,600]	<u>1,044,639</u>
T1039	Arts Commission	1,497,298	
T1040	Art Museum Consortium	887,313	
T1041	Litchfield Jazz Festival	29,000	
T1042	Arte Inc.	[20,735]	<u>70,735</u>
T1043	CT Virtuosi Orchestra	15,250	
T1044	Barnum Museum	50,000	
T1045	Various Grants	[1,090,000]	<u>1,122,000</u>
T1046	Creative Youth Productions	300,000	
T1047	Music Haven	100,000	
T1048	West Hartford Pride	80,000	
T1049	Amistad Center for Arts and Culture	100,000	
T1050	Leffingwell House Museum	50,000	
T1051	<u>CT Main Street Center</u>		<u>350,000</u>
T1052	Norwalk International Cultural Exchange – NICE Festival	50,000	
T1053	Ball & Socket Arts	[300,000]	<u>650,000</u>
T1054	[CT Main Street Center	350,000]	
T1055	Greater Hartford Arts Council	74,079	
T1056	Stepping Stones Museum for Children	80,863	
T1057	Maritime Center Authority	803,705	
T1058	Connecticut Humanities Council	[1,360,000]	<u>2,400,000</u>
T1059	Amistad Committee for the Freedom Trail	36,414	
T1060	New Haven Festival of Arts and Ideas	414,511	
T1061	New Haven Arts Council	77,000	
T1062	Beardsley Zoo	400,000	
T1063	Mystic Aquarium	472,397	
T1064	Northwestern Tourism	400,000	
T1065	Eastern Tourism	400,000	
T1066	Central Tourism	400,000	
T1067	Twain/Stowe Homes	81,196	
T1068	Cultural Alliance of Fairfield	52,000	
T1069	Stamford Downtown Special Services District	50,000	
T1070	AGENCY TOTAL	[18,709,502]	<u>20,723,422</u>

29 Sec. 9. (*Effective July 1, 2026*) The amounts appropriated for the fiscal
 30 year ending June 30, 2027, in section 12 of public act 25-168, regarding
 31 the MUNICIPAL REVENUE SHARING FUND are amended to read as
 32 follows:

T1071		2026-2027	
T1072	GENERAL GOVERNMENT		
T1073			
T1074	OFFICE OF POLICY AND MANAGEMENT		
T1075	Supplemental Revenue Sharing Grants	85,932,470	
T1076	Motor Vehicle Tax Grants	[127,496,890]	<u>111,581,971</u>
T1077	Tiered PILOT	[345,980,314]	<u>354,284,704</u>
T1078	AGENCY TOTAL	[559,409,674]	<u>551,799,145</u>

33 Sec. 10. (*Effective from passage*) Notwithstanding the provisions of
 34 subsection (j) of section 45a-82 of the general statutes, any balance in the
 35 Probate Court Administration Fund on June 30, 2026, shall remain in
 36 said fund and shall not be transferred to the General Fund.

37 Sec. 11. Section 31 of public act 25-168 is repealed and the following
 38 is substituted in lieu thereof (*Effective July 1, 2026*):

39 The sum of \$500,000 of the amount appropriated in section 1 of [this
 40 act] public act 25-168, as amended by this act, to the State Library, for
 41 Other Expenses, for [each of the fiscal years] the fiscal year ending June
 42 30, 2026, and \$500,000 of the amount appropriated in said section to the
 43 State Library, for Various Grants, for the fiscal year ending June 30, 2027,
 44 shall be made available for grants in equal amounts to the following
 45 library-related programs: (1) United Way of Central and Northeastern
 46 Connecticut, for the Dolly Parton Imagination Library; (2) Read to
 47 Grow; and (3) Reach Out and Read.

48 Sec. 12. Section 36 of public act 25-168, as amended by section 179 of
 49 public act 25-174, is repealed and the following is substituted in lieu

50 thereof (*Effective July 1, 2026*):

51 (a) The sum of \$3,000,000 of the amount appropriated in section 1 of
52 [this act] public act 25-168, as amended by this act, to the Department of
53 Education, for [Other Expenses] Various Grants, for the fiscal year
54 ending June 30, 2027, shall be made available in said fiscal year to
55 provide a grant to EastCONN Regional Educational Service Center.

56 (b) The sum of \$900,000 of the amount appropriated in section 1 of
57 [this act] public act 25-168, as amended by this act, to the Department of
58 Education, for [Other Expenses] Various Grants, for the fiscal year
59 ending June 30, 2027, shall be made available in said fiscal year to
60 provide a grant to EdAdvance Regional Educational Service Center.

61 (c) The sum of \$20,000 of the amount appropriated in section 1 of [this
62 act] public act 25-168, as amended by this act, to the Department of
63 Education, for Other Expenses, for [each of] the fiscal [years] year
64 ending June 30, 2026, [and June 30, 2027] and the sum of \$20,000 of the
65 amount appropriated in said section to the Department of Education,
66 for Various Grants, for the fiscal year ending June 30, 2027, shall be made
67 available in [each of] said fiscal years to provide a grant to Norwalk
68 MLK Scholarship Fund.

69 (d) The sum of \$100,000 of the amount appropriated in section 1 of
70 public act 25-168, as amended by this act, to the Department of
71 Education, for Other Expenses, for the fiscal year ending June 30, 2026,
72 and the sum of \$100,000 of such amount appropriated in said section to
73 the Department of Education, for Various Grants, for the fiscal year
74 ending June 30, 2027, shall be made available in said fiscal years for
75 robotics.

76 (e) The sum of \$800,000 of the amount appropriated in section 1 of
77 [this act] public act 25-168, as amended by this act, to the Department of
78 Education, for Other Expenses, for [each of] the fiscal [years] year
79 ending June 30, 2026, and the sum of \$800,000 of the amount
80 appropriated in said section to the Department of Education, for

81 Various Grants, for the fiscal year ending June 30, 2027, shall be made
82 available in [each of] said fiscal years to provide a grant to Brother Carl
83 Institute.

84 (f) The sum of \$150,000 of the amount appropriated in section 1 of
85 [this act] public act 25-168, as amended by this act, to the Department of
86 Education, for Other Expenses, for [each of] the fiscal [years] year
87 ending June 30, 2026, and the sum of \$150,000 of the amount
88 appropriated in said section to the Department of Education, for
89 Various Grants, for the fiscal year ending June 30, 2027, shall be made
90 available in [each of] said fiscal years to provide a grant to Artists
91 Collective.

92 (g) The sum of \$100,000 of the amount appropriated in section 1 of
93 [this act] public act 25-168, as amended by this act, to the Department of
94 Education, for Other Expenses, for [each of] the fiscal [years] year
95 ending June 30, 2026, and the sum of \$100,000 of the amount
96 appropriated in said section to the Department of Education, for
97 Various Grants, for the fiscal year ending June 30, 2027, shall be made
98 available in [each of] said fiscal years to provide a grant to Girls on the
99 Run Greater Connecticut.

100 (h) The sum of \$350,000 of the amount appropriated in section 1 of
101 [this act] public act 25-168, as amended by this act, to the Department of
102 Education, for Other Expenses, for [each of] the fiscal [years] year
103 ending June 30, 2026, and the sum of \$350,000 of the amount
104 appropriated in said section to the Department of Education, for
105 Various Grants, for the fiscal year ending June 30, 2027, shall be made
106 available in [each of] said fiscal years to provide a grant to Big Brothers
107 and Big Sisters of Connecticut for mentoring in the cities of Hartford and
108 New Haven.

109 (i) The sum of \$200,000 of the amount appropriated in section 1 of
110 [this act] public act 25-168, as amended by this act, to the Department of
111 Education, for Other Expenses, for [each of] the fiscal [years] year
112 ending June 30, 2026, and the sum of \$200,000 of the amount

113 appropriated in said section to the Department of Education, for
114 Various Grants, for the fiscal year ending June 30, 2027, shall be made
115 available in [each of] said fiscal years to provide a grant to the town of
116 Middletown for youth programming.

117 (j) The sum of \$100,000 of the amount appropriated in section 1 of
118 [this act] public act 25-168, as amended by this act, to the Department of
119 Education, for Other Expenses, for [each of] the fiscal [years] year
120 ending June 30, 2026, and the sum of \$100,000 of the amount
121 appropriated in said section to the Department of Education, for
122 Various Grants, for the fiscal year ending June 30, 2027, shall be made
123 available in [each of] said fiscal years to provide a grant to the Boys and
124 Girls Club of Lower Naugatuck Valley for operational support.

125 (k) The sum of \$100,000 of the amount appropriated in section 1 of
126 [this act] public act 25-168, as amended by this act, to the Department of
127 Education, for Other Expenses, for [each of] the fiscal [years] year
128 ending June 30, 2026, and the sum of \$100,000 of the amount
129 appropriated in said section to the Department of Education, for
130 Various Grants, for the fiscal year ending June 30, 2027, shall be made
131 available in [each of] said fiscal years to provide a grant to Hartford
132 Knights.

133 (l) The sum of \$15,000 of the amount appropriated in section 1 of [this
134 act] public act 25-168, as amended by this act, to the Department of
135 Education, for Other Expenses, for [each of] the fiscal [years] year
136 ending June 30, 2026, and the sum of \$15,000 of the amount
137 appropriated in said section to the Department of Education, for
138 Various Grants, for the fiscal year ending June 30, 2027, shall be made
139 available in [each of] said fiscal years to provide a grant to Hartford
140 Youth Programming.

141 (m) The sum of \$150,000 of the amount appropriated in section 1 of
142 [this act] public act 25-168, as amended by this act, to the Department of
143 Education, for Other Expenses, for [each of] the fiscal [years] year
144 ending June 30, 2026, and the sum of \$150,000 of the amount

145 appropriated in said section to the Department of Education, for
146 Various Grants, for the fiscal year ending June 30, 2027, shall be made
147 available in [each of] said fiscal years to provide a grant to Active City
148 for youth athletics.

149 (n) The sum of \$100,000 of the amount appropriated in section 1 of
150 [this act] public act 25-168, as amended by this act, to the Department of
151 Education, for Other Expenses, for [each of] the fiscal [years] year
152 ending June 30, 2026, and the sum of \$100,000 of the amount
153 appropriated in said section to the Department of Education, for
154 Various Grants, for the fiscal year ending June 30, 2027, shall be made
155 available in [each of] said fiscal years to provide a grant to Serving All
156 Vessels Equally (SAVE), Inc. in Norwalk.

157 (o) The sum of \$2,000,000 of the amount appropriated in section 1 of
158 [this act] public act 25-168, as amended by this act, to the Department of
159 Education, for Other Expenses, for [each of] the fiscal [years] year
160 ending June 30, 2026, and the sum of \$2,000,000 of the amount
161 appropriated in said section to the Department of Education, for
162 Various Grants, for the fiscal year ending June 30, 2027, shall be made
163 available in [each of] said fiscal years for electrical and computer
164 engineering recruitment and after school K-2 reading tutoring.

165 (p) The sum of \$25,000 of the amount appropriated in section 1 of
166 [this act] public act 25-168, as amended by this act, to the Department of
167 Education, for Other Expenses, for [each of] the fiscal [years] year
168 ending June 30, 2026, and the sum of \$25,000 of the amount
169 appropriated in said section to the Department of Education, for
170 Various Grants, for the fiscal year ending June 30, 2027, shall be made
171 available in [each of] said fiscal years to provide a grant to EdAdvance
172 School Readiness Council.

173 (q) The sum of \$210,000 of the amount appropriated in section 1 of
174 [this act] public act 25-168, as amended by this act, to the Department of
175 Education, for Other Expenses, for [each of] the fiscal [years] year
176 ending June 30, 2026, and the sum of \$210,000 of the amount

177 appropriated in said section to the Department of Education, for
178 Various Grants, for the fiscal year ending June 30, 2027, shall be made
179 available in [each of] said fiscal years to provide a grant to Stamford
180 Public Education Foundation.

181 (r) The sum of \$1,000,000 of the amount appropriated in section 1 of
182 [this act] public act 25-168, as amended by this act, to the Department of
183 Education, for Other Expenses, for [each of] the fiscal [years] year
184 ending June 30, 2026, and the sum of \$1,000,000 of the amount
185 appropriated in said section to the Department of Education, for
186 Various Grants, for the fiscal year ending June 30, 2027, shall be made
187 available in [each of] said fiscal years to provide a grant to Full Circle
188 Youth Empowerment.

189 (s) The sum of \$100,000 of the amount appropriated in section 1 of
190 [this act] public act 25-168, as amended by this act, to the Department of
191 Education, for Other Expenses, for [each of] the fiscal [years] year
192 ending June 30, 2026, and the sum of \$100,000 of the amount
193 appropriated in said section to the Department of Education, for
194 Various Grants, for the fiscal year ending June 30, 2027, shall be made
195 available in [each of] said fiscal years to provide a grant to Bridgeport
196 Youth Lacrosse.

197 (t) The sum of \$200,000 of the amount appropriated in section 1 of
198 [this act] public act 25-168, as amended by this act, to the Department of
199 Education, for Other Expenses, for [each of] the fiscal [years] year
200 ending June 30, 2026, and the sum of \$200,000 of the amount
201 appropriated in said section to the Department of Education, for
202 Various Grants, for the fiscal year ending June 30, 2027, shall be made
203 available in [each of] said fiscal years to provide a grant to New Haven
204 Reads.

205 (u) The sum of \$200,000 of the amount appropriated in section 1 of
206 [this act] public act 25-168, as amended by this act, to the Department of
207 Education, for Other Expenses, for [each of] the fiscal [years] year
208 ending June 30, 2026, and the sum of \$200,000 of the amount

209 appropriated in said section to the Department of Education, for
210 Various Grants, for the fiscal year ending June 30, 2027, shall be made
211 available in [each of] said fiscal years to provide a grant to Thompson
212 Alliance District.

213 (v) The sum of \$150,000 of the amount appropriated in section 1 of
214 [this act] public act 25-168, as amended by this act, to the Department of
215 Education, for Other Expenses, for the fiscal year ending June 30, 2026,
216 and the sum of \$200,000 of [such] the amount appropriated in said
217 section to the Department of Education, for Various Grants, for the fiscal
218 year ending June 30, 2027, shall be made available in said fiscal years to
219 provide a grant to Big Brothers Big Sisters.

220 (w) The sum of \$20,000 of the amount appropriated in section 1 of
221 [this act] public act 25-168, as amended by this act, to the Department of
222 Education, for Other Expenses, for the fiscal [years] year ending June 30,
223 2026, and the sum of \$70,000 of the amount appropriated in said section
224 to the Department of Education, for Various Grants, for the fiscal year
225 ending June 30, 2027, shall be made available in [each of] said fiscal years
226 to provide a grant to Girls on the Run Greater Connecticut.

227 (x) The sum of \$450,000 of the amount appropriated in section 1 of
228 [this act] public act 25-168, as amended by this act, to the Department of
229 Education, for Other Expenses, for the fiscal year ending June 30, 2026,
230 and the sum of \$350,000 of [such] the amount appropriated in said
231 section to the Department of Education, for Various Grants, for the fiscal
232 year ending June 30, 2027, shall be made available in said fiscal years to
233 provide a grant to Effective School Solutions.

234 (y) The sum of \$100,000 of the amount appropriated in section 1 of
235 [this act] public act 25-168, as amended by this act, to the Department of
236 Education, for Other Expenses, for the fiscal year ending June 30, 2026,
237 shall be made available in said fiscal year to provide a grant to Athlife.

238 (z) The sum of \$100,000 of the amount appropriated in section 1 of
239 [this act] public act 25-168, as amended by this act, to the Department of

240 Education, for Other Expenses, for the fiscal [years] year ending June 30,
241 2026, and the sum of \$100,000 of the amount appropriated in said section
242 to the Department of Education, for Various Grants, for the fiscal year
243 ending June 30, 2027, shall be made available in [each of] said fiscal years
244 to provide a grant to the Connecticut Association of Boards of Education
245 for boards of education training.

246 [(AA)] (aa) The sum of \$400,000 of the amount appropriated in
247 section 1 of [this act] public act 25-168, as amended by this act, to the
248 Department of Education, for Other Expenses, for the fiscal year ending
249 June 30, 2026, and the sum of \$200,000 of [such] the amount
250 appropriated in said section to the Department of Education, for
251 Various Grants, for the fiscal year ending June 30, 2027, shall be made
252 available in said fiscal years to provide a grant to the Connecticut
253 Association of Schools/Connecticut Interscholastic Athletic Conference
254 for Curriculum Development.

255 [(BB)] (bb) The sum of \$200,000 of the amount appropriated in section
256 1 of [this act] public act 25-168, as amended by this act, to the
257 Department of Education, for Other Expenses, for the fiscal year ending
258 June 30, 2026, shall be made available in said fiscal year to provide a
259 grant to Free Agent Now.

260 [(CC)] (cc) The sum of \$5,000 of the amount appropriated in section 1
261 of [this act] public act 25-168, as amended by this act, to the Department
262 of Education, for Other Expenses, for the fiscal [years] year ending June
263 30, 2026, [and June 30, 2027,] shall be made available in [each of] said
264 fiscal [years] year to provide a grant to Martin Luther King Scholarship
265 Committee of Greater Middletown.

266 [(DD)] (dd) The sum of \$175,000 of the amount appropriated in
267 section 1 of [this act] public act 25-168, as amended by this act, to the
268 Department of Education, for Other Expenses, for the fiscal [years] year
269 ending June 30, 2026, and the sum of \$175,000 of the amount
270 appropriated in said section to the Department of Education, for
271 Various Grants, for the fiscal year ending June 30, 2027, shall be made

272 available in said fiscal years to provide a grant to VR Sim.

273 [(EE)] (ee) The sum of \$10,000 of the amount appropriated in section
274 1 of [this act] public act 25-168, as amended by this act, to the
275 Department of Education, for Other Expenses, for the fiscal year ending
276 June 30, 2026, shall be made available in said fiscal year to provide a
277 grant to Greenwich YMCA Scholarship Program.

278 [(FF)] (ff) The sum of \$30,000 of the amount appropriated in section 1
279 of [this act] public act 25-168, as amended by this act, to the Department
280 of Education, for Other Expenses, for the fiscal [years] year ending June
281 30, 2026, and the sum of \$30,000 of the amount appropriated in said
282 section to the Department of Education, for Various Grants, for the fiscal
283 year ending June 30, 2027, shall be made available in said fiscal years to
284 provide a grant to the town of Waterford for school lunch debt.

285 [(GG)] (gg) The sum of \$36,000 of the amount appropriated in section
286 1 of [this act] public act 25-168, as amended by this act, to the
287 Department of Education, for Other Expenses, for the fiscal [years] year
288 ending June 30, 2026, and the sum of \$36,000 of the amount
289 appropriated in said section to the Department of Education, for
290 Various Grants, for the fiscal year ending June 30, 2027, shall be made
291 available in [each of] said fiscal years to provide a grant to the town of
292 Montville for school lunch debt.

293 [(HH)] (hh) The sum of \$25,000 of the amount appropriated in section
294 1 of [this act] public act 25-168, as amended by this act, to the
295 Department of Education, for Other Expenses, for the fiscal [years] year
296 ending June 30, 2026, and the sum of \$25,000 of the amount
297 appropriated in said section to the Department of Education, for
298 Various Grants, for the fiscal year ending June 30, 2027, shall be made
299 available in [each of] said fiscal years to provide a grant to Fairfield
300 River-Lab.

301 [(II)] (ii) The sum of \$200,000 of the amount appropriated in section 1
302 of [this act] public act 25-168, as amended by this act, to the Department

303 of Education, for Other Expenses, for the fiscal [years] year ending June
304 30, 2026, and the sum of \$200,000 of the amount appropriated in said
305 section to the Department of Education, for Various Grants, for the fiscal
306 year ending June 30, 2027, shall be made available in [each of] said fiscal
307 years to provide a grant to Bridgeport Caribe Youth Leaders.

308 [(JJ)] (jj) The sum of \$175,000 of the amount appropriated in section 1
309 of [this act] public act 25-168, as amended by this act, to the Department
310 of Education, for Other Expenses, for the fiscal [years] year ending June
311 30, 2026, and the sum of \$175,000 of the amount appropriated in said
312 section to the Department of Education, for Various Grants, for the fiscal
313 year ending June 30, 2027, shall be made available in [each of] said fiscal
314 years to provide a grant to Elevate Bridgeport.

315 [(KK)] (kk) The sum of \$75,000 of the amount appropriated in section
316 1 of [this act] public act 25-168, as amended by this act, to the
317 Department of Education, for Other Expenses, for the fiscal [years] year
318 ending June 30, 2026, and the sum of \$75,000 of the amount
319 appropriated in said section to the Department of Education, for
320 Various Grants, for the fiscal year ending June 30, 2027, shall be made
321 available in [each of] said fiscal years to provide a grant to the
322 [Bridgeport Board of Education] United Way of Coastal Fairfield
323 County for the Bridgeport Public Schools Debate League.

324 [(LL)] (ll) The sum of \$25,000 of the amount appropriated in section 1
325 of [this act] public act 25-168, as amended by this act, to the Department
326 of Education, for Other Expenses, for the fiscal [years] year ending June
327 30, 2026, and the sum of \$25,000 of the amount appropriated in said
328 section to the Department of Education, for Various Grants, for the fiscal
329 year ending June 30, 2027, shall be made available in [each of] said fiscal
330 years to provide a grant to Yellow Mill Scholarship Fund.

331 [(MM)] (mm) The sum of \$1,500,000 of the amount appropriated in
332 section 1 of [this act] public act 25-168, as amended by this act, to the
333 Department of Education, for Other Expenses, for the fiscal [years] year
334 ending June 30, 2026, and the sum of \$1,500,000 of the amount

335 appropriated in said section to the Department of Education, for
336 Various Grants, for the fiscal year ending June 30, 2027, shall be made
337 available in [each of] said fiscal years to provide a grant to Waterbury
338 Promise.

339 [(NN)] (nn) The sum of \$250,000 of the amount appropriated in
340 section 1 of [this act] public act 25-168, as amended by this act, to the
341 Department of Education, for Other Expenses, for the fiscal [years] year
342 ending June 30, 2026, and the sum of \$250,000 of the amount
343 appropriated in said section to the Department of Education, for
344 Various Grants, for the fiscal year ending June 30, 2027, shall be made
345 available in [each of] said fiscal years to provide a grant to Meriden Boys
346 and Girls Club.

347 [(OO)] (oo) The sum of \$10,000 of the amount appropriated in section
348 1 of [this act] public act 25-168, as amended by this act, to the
349 Department of Education, for Other Expenses, for the fiscal [years] year
350 ending June 30, 2026, [and June 30, 2027,] shall be made available in
351 [each of] said fiscal [years] year to provide a grant to Newington Public
352 Schools for diverse library circulation materials.

353 [(PP)] (pp) The sum of \$25,000 of the amount appropriated in section
354 1 of [this act] public act 25-168, as amended by this act, to the
355 Department of Education, for Other Expenses, for the fiscal [years] year
356 ending June 30, 2026, and the sum of \$25,000 of the amount
357 appropriated in said section to the Department of Education, for
358 Various Grants, for the fiscal year ending June 30, 2027, shall be made
359 available in [each of] said fiscal years to provide a grant to Boys and
360 Girls Club of Milford for AI training.

361 [(QQ)] (qq) The sum of \$500,000 of the amount appropriated in
362 section 1 of [this act] public act 25-168, as amended by this act, to the
363 Department of Education, for Other Expenses, for the fiscal [years] year
364 ending June 30, 2026, and the sum of \$500,000 of the amount
365 appropriated in said section to the Department of Education, for
366 Various Grants, for the fiscal year ending June 30, 2027, shall be made

367 available in [each of] said fiscal years to provide a grant to New London
368 Public Schools Pre-K and early childhood, including transitional
369 kindergarten.

370 [(RR)] (~~rr~~) The sum of \$90,000 of the amount appropriated in section
371 1 of [this act] public act 25-168, as amended by this act, to the
372 Department of Education, for Other Expenses, for the fiscal [years] year
373 ending June 30, 2026, and the sum of \$90,000 of the amount
374 appropriated in said section to the Department of Education, for
375 Various Grants, for the fiscal year ending June 30, 2027, shall be made
376 available in [each of] said fiscal years to provide a grant to Stamford
377 Public Education Foundation.

378 [(SS)] (~~ss~~) The sum of \$50,000 of the amount appropriated in section
379 1 of [this act] public act 25-168, as amended by this act, to the
380 Department of Education, for Other Expenses, for the fiscal [years] year
381 ending June 30, 2026, and the sum of \$50,000 of the amount
382 appropriated in said section to the Department of Education, for
383 Various Grants, for the fiscal year ending June 30, 2027, shall be made
384 available in [each of] said fiscal years to provide a grant to Sound
385 Waters, [Summer Camp] \$25,000 of which shall be used for summer
386 camp and \$25,000 of which shall be used for job training.

387 [(TT)] (~~tt~~) The sum of \$250,000 of the amount appropriated in section
388 1 of [this act] public act 25-168, as amended by this act, to the
389 Department of Education, for Other Expenses, for the fiscal [years] year
390 ending June 30, 2026, and the sum of \$250,000 of the amount
391 appropriated in said section to the Department of Education, for
392 Various Grants, for the fiscal year ending June 30, 2027, shall be made
393 available in [each of] said fiscal years to provide a grant to Windham
394 Public Schools.

395 [(UU)] (~~uu~~) The sum of \$750,000 of the amount appropriated in
396 section 1 of [this act] public act 25-168, as amended by this act, to the
397 Department of Education, for Other Expenses, for the fiscal [years] year
398 ending June 30, 2026, and the sum of \$750,000 of the amount

399 appropriated in said section to the Department of Education, for
400 Teacher Residency RESC Alliance, for the fiscal year ending June 30,
401 2027, shall be made available in [each of] said fiscal years for a teacher
402 residency program operated by the RESC Alliance.

403 [(VV)] (vv) The sum of \$500,000 of the amount appropriated in
404 section 1 of [this act] public act 25-168, as amended by this act, to the
405 Department of Education, for Other Expenses, for the fiscal [years] year
406 ending June 30, 2026, and the sum of \$500,000 of the amount
407 appropriated in said section to the Department of Education, for
408 Various Grants, for the fiscal year ending June 30, 2027, shall be made
409 available in [each of] said fiscal years to provide a grant to the State
410 Education Resource Center for disconnected youth programming.

411 (ww) The sum of \$75,000 of the amount appropriated in section 1 of
412 public act 25-168, as amended by this act, to the Department of
413 Education, for Various Grants, for the fiscal year ending June 30, 2027,
414 shall be made available in said fiscal year to provide a grant to DT Cares.

415 (xx) The sum of \$150,000 of the amount appropriated in section 1 of
416 public act 25-168, as amended by this act, to the Department of
417 Education, for Various Grants, for the fiscal year ending June 30, 2027,
418 shall be made available in said fiscal year to provide a grant to African
419 Caribbean American Parents of Children with Disabilities.

420 (yy) The sum of \$200,000 of the amount appropriated in section 1 of
421 public act 25-168, as amended by this act, to the Department of
422 Education, for Various Grants, for the fiscal year ending June 30, 2027,
423 shall be made available in said fiscal year to provide a grant to
424 CIAC/CAS.

425 (zz) The sum of \$100,000 of the amount appropriated in section 1 of
426 public act 25-168, as amended by this act, to the Department of
427 Education, for Various Grants, for the fiscal year ending June 30, 2027,
428 shall be made available in said fiscal year to provide a grant to Athlife.

429 (A) The sum of \$500,000 of the amount appropriated in section 1 of

430 public act 25-168, as amended by this act, to the Department of
431 Education, for Magnet Schools, for the fiscal year ending June 30, 2027,
432 shall be made available in said fiscal year to provide a grant to Goodwin
433 University Magnet Schools.

434 (B) The sum of \$125,000 of the amount appropriated in section 1 of
435 public act 25-168, as amended by this act, to the Department of
436 Education, for Various Grants, for the fiscal year ending June 30, 2027,
437 shall be made available in said fiscal year to provide a grant to Big
438 Brothers Big Sisters.

439 (C) The sum of \$150,000 of the amount appropriated in section 1 of
440 public act 25-168, as amended by this act, to the Department of
441 Education, for Various Grants, for the fiscal year ending June 30, 2027,
442 shall be made available in said fiscal year to provide a grant to CAS.

443 (D) The sum of \$30,000 of the amount appropriated in section 1 of
444 public act 25-168, as amended by this act, to the Department of
445 Education, for Various Grants, for the fiscal year ending June 30, 2027,
446 shall be made available in said fiscal year to provide a grant to Bethel
447 High School All Sports Booster Club.

448 (E) The sum of \$80,000 of the amount appropriated in section 1 of
449 public act 25-168, as amended by this act, to the Department of
450 Education, for Various Grants, for the fiscal year ending June 30, 2027,
451 shall be made available in said fiscal year to provide a grant to Plainville
452 Public Schools.

453 (F) The sum of \$100,000 of the amount appropriated in section 1 of
454 public act 25-168, as amended by this act, to the Department of
455 Education, for Various Grants, for the fiscal year ending June 30, 2027,
456 shall be made available in said fiscal year to provide a grant to
457 Waterford Public Schools.

458 (G) The sum of \$75,000 of the amount appropriated in section 1 of
459 public act 25-168, as amended by this act, to the Department of
460 Education, for Various Grants, for the fiscal year ending June 30, 2027,

461 shall be made available in said fiscal year to provide a grant to Scotland
462 Elementary School Extended School Year Program.

463 (H) The sum of \$75,000 of the amount appropriated in section 1 of
464 public act 25-168, as amended by this act, to the Department of
465 Education, for Various Grants, for the fiscal year ending June 30, 2027,
466 shall be made available in said fiscal year to provide a grant to Parent
467 Leadership Training Institute.

468 (I) The sum of \$80,000 of the amount appropriated in section 1 of
469 public act 25-168, as amended by this act, to the Department of
470 Education, for Various Grants, for the fiscal year ending June 30, 2027,
471 shall be made available in said fiscal year to provide a grant to Rocky
472 Hill Board of Education to enclose library and art spaces at West Hill
473 School.

474 (J) The sum of \$100,000 of the amount appropriated in section 1 of
475 public act 25-168, as amended by this act, to the Department of
476 Education, for Various Grants, for the fiscal year ending June 30, 2027,
477 shall be made available in said fiscal year to provide a grant to
478 Newington Board of Education for Nor'easter Academy.

479 (K) The sum of \$250,000 of the amount appropriated in section 1 of
480 public act 25-168, as amended by this act, to the Department of
481 Education, for Various Grants, for the fiscal year ending June 30, 2027,
482 shall be made available in said fiscal year to provide a grant to
483 Middletown Public Schools for school security.

484 Sec. 13. (*Effective from passage*) Up to \$100,000 of the unexpended
485 balance of funds appropriated in section 1 of public act 25-168, as
486 amended by this act, to the Department of Economic and Community
487 Development, for Other Expenses, for the fiscal year ending June 30,
488 2026, shall not lapse on June 30, 2026, and shall be carried forward and
489 made available during the fiscal year ending June 30, 2027, to provide a
490 grant to CFAL for Digital Inclusion for literacy training.

491 Sec. 14. (*Effective from passage*) Up to \$250,000 of the unexpended

492 balance of funds appropriated in section 1 of public act 25-168, as
493 amended by this act, to the Department of Economic and Community
494 Development, for Other Expenses, for the fiscal year ending June 30,
495 2026, shall not lapse on June 30, 2026, and shall be carried forward and
496 made available during the fiscal year ending June 30, 2027, to provide a
497 grant to RESC Alliance.

498 Sec. 15. (*Effective from passage*) The sum of \$200,000 of the amount
499 appropriated in section 1 of public act 25-168, as amended by this act, to
500 the Department of Education, for Other Expenses, for the fiscal year
501 ending June 30, 2026, and made available to provide a grant to Free
502 Agent Now, shall not lapse on June 30, 2026, and such funds shall be
503 carried forward and made available during the fiscal year ending June
504 30, 2027, for the same purpose.

505 Sec. 16. (*Effective from passage*) The following sums from the amount
506 appropriated in section 1 of public act 25-168, as amended by this act, to
507 the Judicial Department, for Youth Services Prevention, for the fiscal
508 year ending June 30, 2026, shall be made available in said fiscal year as
509 follows:

- 510 (1) \$75,000 to Dominican American Coalition of Connecticut, Inc.;
- 511 (2) \$30,000 to Intempo Organization, Inc.;
- 512 (3) \$200,000 to My Architecture Workshops, Inc.;
- 513 (4) \$50,000 to Second Chance Re-entry Initiative Program (SCRIP);
- 514 and
- 515 (5) \$55,000 to Tri-Town Youth Services.

516 Sec. 17. Section 9 of public act 26-1 is amended to read as follows
517 (*Effective from passage*):

518 The sum of \$1,500,000 of the amount appropriated in section 1 of
519 public act 25-168 to the Department of Social Services, for Other
520 Expenses, for the fiscal year ending June 30, 2026, and the sum of

521 \$1,000,000 of such amount appropriated for the fiscal year ending June
522 20, 2027, shall be made available in said fiscal years for grants [to] in
523 support of school districts in Newington, Wethersfield, Cromwell,
524 Rocky Hill and Middletown for the support or establishment of high
525 acuity, school-based mental health programming. For purposes of this
526 section, (1) "high acuity, school-based mental health programming"
527 means programming offered by a qualified provider that includes (A)
528 clinical care to prevent the need for out-of-district placements for
529 students with intensive behavioral health challenges or return such
530 students from such placements to their home districts, (B) in-person
531 therapeutic services provided in a designated school space by mental
532 health clinicians who have attained at least a master's degree in a related
533 mental health education program, and (C) therapeutic support
534 capabilities, including, but not limited to, regular clinical supervision,
535 quality and risk management data analysis and monitoring and specific
536 interventions meant to reduce chronic student absenteeism; and (2)
537 "qualified provider" means a provider of high acuity, school-based
538 mental health programming that is designated as an outpatient
539 psychiatric clinic for children by the Department of Children and
540 Families and certified or contracted to bill Medicaid or commercial
541 insurance in the state.

542 Sec. 18. (*Effective from passage*) Up to \$500,000 of the amount
543 appropriated in section 1 of public act 25-168 to the Department of
544 Economic and Community Development, for Various Grants, for the
545 fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and
546 shall be carried forward and made available during the fiscal year
547 ending June 30, 2027, for a grant-in-aid to the town of Glastonbury for
548 parks and recreation.

549 Sec. 19. (*Effective from passage*) Up to \$50,000 of the amount
550 appropriated in section 1 of public act 25-168 to the Department of
551 Economic and Community Development, for Various Grants, for the
552 fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and
553 shall be carried forward and made available during the fiscal year

554 ending June 30, 2027, for a grant-in-aid to PARC, Inc. in the town of
555 Plainville.

556 Sec. 20. (*Effective from passage*) Up to \$85,000 of the amount
557 appropriated in section 1 of public act 25-168 to the Department of
558 Economic and Community Development, for Various Grants, for the
559 fiscal year ending June 30, 2026, for projects in the town of Newington,
560 shall not lapse on June 30, 2026, and shall be carried forward and made
561 available during the fiscal year ending June 30, 2027, for such projects as
562 follows: (1) Up to \$15,000 for town pools project planning; (2) up to
563 \$30,000 for fire department planning; (3) up to \$20,000 for animal shelter
564 planning; and (4) up to \$20,000 for Lucy Robbins Welles Library
565 renovation planning.

566 Sec. 21. (*Effective from passage*) Up to \$10,000 of the amount
567 appropriated in section 1 of public act 25-168 to the Department of
568 Economic and Community Development, for Various Grants, to
569 provide a grant-in-aid to A Little Compassion, for the fiscal year ending
570 June 30, 2026, shall not lapse on June 30, 2026, and shall be made
571 available during the fiscal year ending June 30, 2027, to provide a grant-
572 in-aid to Tri-Town Youth Services Bureau.

573 Sec. 22. (*Effective from passage*) Up to \$50,000 of the amount
574 appropriated in section 1 of public act 25-168 to the Department of
575 Economic and Community Development, for Various Grants, for the
576 fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and
577 shall be carried forward and made available during the fiscal year
578 ending June 30, 2027, to provide a grant-in-aid to the Stratford Veterans
579 Museum.

580 Sec. 23. (*Effective from passage*) Up to \$250,000 of the amount
581 appropriated in section 1 of public act 25-168 to the Department of
582 Energy and Environmental Protection, for Other Expenses, for the fiscal
583 year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be
584 carried forward and made available during the fiscal year ending June
585 30, 2027, to provide a grant-in-aid to Sustainable CT.

586 Sec. 24. (*Effective from passage*) Up to \$1,000,000 of the amount
587 appropriated in section 1 of public act 25-168 to the Office of Policy and
588 Management, for Other Expenses, for the fiscal year ending June 30,
589 2026, shall not lapse on June 30, 2026, and shall be carried forward and
590 made available during the fiscal year ending June 30, 2027, to provide a
591 grant-in-aid to the city of Hartford for outdoor recreation.

592 Sec. 25. (*Effective from passage*) Up to \$50,000 of the amount
593 appropriated in section 1 of public act 25-168 to the State Library, for
594 Other Expenses, for the fiscal year ending June 30, 2026, shall not lapse
595 on June 30, 2026, and shall be carried forward and made available
596 during the fiscal year ending June 30, 2027, to provide a grant-in-aid to
597 the town of Middletown for Russell Library.

598 Sec. 26. (*Effective from passage*) Up to \$4,730,000 of the amount
599 appropriated in section 1 of public act 25-168, as amended by this act, to
600 the Department of Energy and Environmental Protection, for Other
601 Expenses, for the fiscal year ending June 30, 2026, shall not lapse on June
602 30, 2026, and shall be carried forward and made available during the
603 fiscal year ending June 30, 2027, to reimburse the city of Hartford for
604 work performed at Batterson Park.

605 Sec. 27. (*Effective from passage*) (a) The sum of \$1,750,000 of the amount
606 appropriated in section 1 of public act 25-168, as amended by this act, to
607 the Judicial Department, for Legal Aid, for the fiscal year ending June
608 30, 2026, and made available for the Right to Counsel program, shall not
609 lapse on June 30, 2026, and such funds shall be carried forward and
610 made available during the fiscal year ending June 30, 2027, for the same
611 purpose.

612 (b) Up to \$2,500,000 of the amount appropriated in section 1 of public
613 act 25-168, as amended by this act, to the Judicial Department, for Legal
614 Aid, for the fiscal year ending June 30, 2027, and made available for the
615 Right to Counsel program, shall not lapse on June 30, 2027, and such
616 funds shall be carried forward and made available during the fiscal year
617 ending June 30, 2028, for the same purpose.

618 Sec. 28. (*Effective from passage*) The unexpended balance of funds
619 appropriated in section 1 of public act 25-168, as amended by this act, to
620 the Office of Early Childhood, for Early Care and Education, for the
621 fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and
622 shall be transferred to the Office of Early Childhood, for Care4Kids
623 TANF/CCDF, and made available during the fiscal year ending June 30,
624 2027, for the family child care provider agreement.

625 Sec. 29. (*Effective from passage*) Up to \$200,000 of the unexpended
626 balance of funds appropriated in section 1 of public act 25-168, as
627 amended by this act, to the Department of Economic and Community
628 Development, for Various Grants, for the fiscal year ending June 30,
629 2026, shall not lapse on June 30, 2026, and shall be carried forward and
630 made available during the fiscal year ending June 30, 2027, for a grant-
631 in-aid to Southend Senior Center in the city of Hartford.

632 Sec. 30. (*Effective from passage*) Up to \$200,000 of the unexpended
633 balance of funds appropriated in section 1 of public act 25-168, as
634 amended by this act, to the Department of Economic and Community
635 Development, for Various Grants, for the fiscal year ending June 30,
636 2026, shall not lapse on June 30, 2026, and shall be carried forward and
637 made available during the fiscal year ending June 30, 2027, for a grant-
638 in-aid to Parkville Senior Center.

639 Sec. 31. (*Effective from passage*) Up to \$200,000 of the unexpended
640 balance of funds appropriated in section 1 of public act 25-168, as
641 amended by this act, to the Department of Economic and Community
642 Development, for Various Grants, for the fiscal year ending June 30,
643 2026, shall not lapse on June 30, 2026, and shall be carried forward and
644 made available during the fiscal year ending June 30, 2027, for a grant-
645 in-aid to Wethersfield Senior Center.

646 Sec. 32. (*Effective from passage*) Up to \$90,000 of the unexpended
647 balance of funds appropriated in section 1 of public act 25-168, as
648 amended by this act, to the Department of Economic and Community
649 Development, for Various Grants, for the fiscal year ending June 30,

2026, shall not lapse on June 30, 2026, and shall be carried forward and made available during the fiscal year ending June 30, 2027, for a grant-in-aid to Hartford Communities That Care for musical instruments and instruction.

Sec. 33. (*Effective from passage*) Up to \$90,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Economic and Community Development, for Various Grants, for the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be carried forward and made available during the fiscal year ending June 30, 2027, for a grant-in-aid to SAND Elementary School in the city of Hartford for musical instruments and instruction.

Sec. 34. (*Effective from passage*) Up to \$90,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Economic and Community Development, for Various Grants, for the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be carried forward and made available during the fiscal year ending June 30, 2027, for a grant-in-aid to Kennelly School in the city of Hartford for musical instruments and instruction.

Sec. 35. (*Effective from passage*) Up to \$90,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Economic and Community Development, for Various Grants, for the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be carried forward and made available during the fiscal year ending June 30, 2027, for a grant-in-aid to Naylor School in the city of Hartford for musical instruments and instruction.

Sec. 36. (*Effective from passage*) Up to \$250,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Economic and Community Development, for Various Grants, for the fiscal year ending June 30,

2026, shall not lapse on June 30, 2026, and shall be carried forward and made available during the fiscal year ending June 30, 2027, for a grant-in-aid to Wethersfield Early Childhood Collaborative for recruitment ambassadors.

Sec. 37. (*Effective from passage*) Up to \$525,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Economic and Community Development, for Various Grants, for the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be carried forward and made available during the fiscal year ending June 30, 2027, for a grant-in-aid to Clay Arsenal CDC.

Sec. 38. (*Effective from passage*) Up to \$500,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Emergency Services and Public Protection, for Other Expenses, for the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be transferred to the Department of Emergency Services and Public Protection, for Various Grants, and made available, during the fiscal year ending June 30, 2027, for a grant-in-aid to the city of Bridgeport for its police department drone program.

Sec. 39. (*Effective from passage*) Up to \$200,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Economic and Community Development, for Various Grants, for the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be carried forward and made available during the fiscal year ending June 30, 2027, for a grant-in-aid to the Naugatuck American Legion.

Sec. 40. (*Effective from passage*) Up to \$450,000 of the unexpended balance of funds appropriated in section 1 of public act 25-168, as amended by this act, to the Department of Education, for Other Expenses, for the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and shall be transferred to the Department of Education, for

714 Various Grants, and made available during the fiscal year ending June
715 30, 2027, for a grant-in-aid to Effective School Solutions.

716 Sec. 41. (*Effective from passage*) Up to \$1,150,000 of the unexpended
717 balance of funds appropriated in section 1 of public act 25-168, as
718 amended by this act, to the Department of Economic and Community
719 Development, for Various Grants, for the fiscal year ending June 30,
720 2026, shall not lapse on June 30, 2026, and shall be carried forward and
721 made available during the fiscal year ending June 30, 2027, for a grant-
722 in-aid to Working Cities Challenge/Middletown Works.

723 Sec. 42. (*Effective from passage*) Up to \$600,000 of the unexpended
724 balance of funds appropriated in section 1 of public act 25-168, as
725 amended by this act, to the Department of Economic and Community
726 Development, for Various Grants, for the fiscal year ending June 30,
727 2026, shall not lapse on June 30, 2026, and shall be carried forward and
728 made available during the fiscal year ending June 30, 2027, for a grant-
729 in-aid to Milford Founders Walk.

730 Sec. 43. (*Effective from passage*) Up to \$100,000 of the unexpended
731 balance of funds appropriated in section 1 of public act 25-168, as
732 amended by this act, to the Judicial Department, for Youth Services
733 Prevention, for the fiscal year ending June 30, 2026, shall not lapse on
734 June 30, 2026, and shall be transferred to the Department of Economic
735 and Community Development, for Various Grants, and made available
736 during the fiscal year ending June 30, 2027, for a grant-in-aid to My
737 Architecture Workshops.

738 Sec. 44. (*Effective from passage*) Up to \$20,000 of the unexpended
739 balance of funds appropriated in section 1 of public act 25-168, as
740 amended by this act, to the Judicial Department, for Other Expenses, for
741 the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and
742 shall be carried forward and made available during the fiscal year
743 ending June 30, 2027, for a grant-in-aid to Middletown Racial Justice.

744 Sec. 45. (*Effective from passage*) Up to \$1,000,000 of the unexpended

745 balance of funds appropriated in section 1 of public act 25-168, as
746 amended by this act, to the Department of Economic and Community
747 Development, for Various Grants, for the fiscal year ending June 30,
748 2026, shall not lapse on June 30, 2026, and shall be carried forward and
749 made available during the fiscal year ending June 30, 2027, for a grant-
750 in-aid to the town of Manchester for parks and recreation.

751 Sec. 46. (*Effective from passage*) Up to \$250,000 of the unexpended
752 balance of funds appropriated in section 1 of public act 25-168, as
753 amended by this act, to the Department of Economic and Community
754 Development, for Various Grants, for the fiscal year ending June 30,
755 2026, shall not lapse on June 30, 2026, and shall be carried forward and
756 made available during the fiscal year ending June 30, 2027, for a grant-
757 in-aid to the town of Bolton for parks and recreation.

758 Sec. 47. (*Effective from passage*) The sum of \$500,000 appropriated in
759 section 1 of public act 25-168, as amended by this act, to Connecticut
760 State Colleges and Universities, for Charter Oak State College, for the
761 fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and
762 shall be transferred to the Connecticut State Colleges and Universities,
763 for Various Grants, and made available during the fiscal year ending
764 June 30, 2027, for AI Academy.

765 Sec. 48. (*Effective from passage*) Up to \$150,000 of the unexpended
766 balance of funds appropriated in section 1 of public act 25-168, as
767 amended by this act, to the Department of Economic and Community
768 Development, for Various Grants, for the fiscal year ending June 30,
769 2026, shall not lapse on June 30, 2026, and shall be carried forward and
770 made available during the fiscal year ending June 30, 2027, for a grant-
771 in-aid to Middletown Board of Education.

772 Sec. 49. (*Effective from passage*) Up to \$1,500,000 of the unexpended
773 balance of funds appropriated in section 1 of public act 25-168, as
774 amended by this act, to the Department of Social Services, for Other
775 Expenses, for the fiscal year ending June 30, 2026, shall not lapse on June
776 30, 2026, and shall be carried forward and made available during the

777 fiscal year ending June 30, 2027, for a grant-in-aid to Effective School
778 Solutions.

779 Sec. 50. (*Effective from passage*) Up to \$90,000 of the unexpended
780 balance of funds appropriated in section 1 of public act 25-168, as
781 amended by this act, to the Department of Economic and Community
782 Development, for Various Grants, for the fiscal year ending June 30,
783 2026, shall not lapse on June 30, 2026, and shall be carried forward and
784 made available during the fiscal year ending June 30, 2027, for a grant-
785 in-aid to Connecticut AI Alliance for an AI symposium grant.

786 Sec. 51. (*Effective from passage*) Up to \$25,000 of the unexpended
787 balance of funds appropriated in section 1 of public act 25-168, as
788 amended by this act, to the Department of Education, for Other
789 Expenses, for the fiscal year ending June 30, 2026, shall not lapse on June
790 30, 2026, and shall be carried forward and made available during the
791 fiscal year ending June 30, 2027, for a grant-in-aid to Burns Latino
792 Academy for musical instruments and instruction.

793 Sec. 52. (*Effective July 1, 2026*) For the fiscal year ending June 30, 2027,
794 the Secretary of the Office of Policy and Management shall distribute
795 \$250,000 as a regional performance incentive program grant to the
796 Southeastern Connecticut Council of Governments for a pilot program
797 to consolidate public service answering points.

798 Sec. 53. (*Effective July 1, 2026*) For the fiscal year ending June 30, 2027,
799 the Secretary of the Office of Policy and Management shall distribute
800 \$800,000 as a regional performance incentive program grant to the
801 Capitol Region Council of Governments for CTFastrak east expansion.

802 Sec. 54. (*Effective from passage*) In addition to payments due to
803 municipalities and districts under subsection (e) of section 4-66p of the
804 general statutes, for the fiscal year ending June 30, 2027, each
805 municipality listed below shall receive the following supplemental
806 revenue sharing grant from the General Fund:

T1079	Grantee	Grant Amount

T1080		
T1081	Waterbury	3,000,000
T1082	Manchester	800,000
T1083	Vernon	500,000

807 Sec. 55. (*Effective from passage*) Section 9 of substitute house bill 5001
808 of the current session, as amended by House Amendment Schedules "A"
809 and "E", shall take effect July 1, 2027.

810 Sec. 56. Subsection (e) of section 8-169jj of the 2026 supplement to the
811 general statutes is repealed and the following is substituted in lieu
812 thereof (*Effective from passage*):

813 (e) The authority shall have the power to negotiate, and, with the
814 approval of the Secretary of the Office of Policy and Management and
815 the legislative body of the municipality in which a development district
816 is located, or when the legislative body is the town meeting, the board
817 of selectmen, to enter into an agreement with any private developer,
818 owner or lessee of any building or improvement located on land in a
819 development district providing for payments to the authority in lieu of
820 real property taxes. Such an agreement shall [be made a condition of any
821 private right of development within the development district, and shall]
822 include a requirement that such private developer, owner or lessee
823 make good faith efforts to hire, or cause to be hired, available and
824 qualified minority business enterprises, as defined in section 4a-60g, to
825 provide construction services and materials for improvements to be
826 constructed within the development district in an effort to achieve a
827 minority business enterprise utilization goal of ten per cent of the total
828 costs of construction services and materials for such improvements.
829 Such payments to the authority in lieu of real property taxes shall have
830 the same lien and priority, and may be enforced by the authority in the
831 same manner, as provided for municipal real property taxes. Such
832 payments as received by the authority shall be used to carry out the
833 purposes of the authority set forth in subsection (a) of this section.

834 Sec. 57. Subsection (a) of section 8-169ll of the 2026 supplement to the

835 general statutes is repealed and the following is substituted in lieu
836 thereof (*Effective from passage*):

837 (a) (1) Any municipality, except the city of Hartford or the town of
838 East Hartford, may, by certified resolution of the legislative body of the
839 municipality, or by the board of selectmen in a municipality where the
840 legislative body is the town meeting, opt to join the Connecticut
841 Municipal Development Authority as a member municipality, provided
842 such municipality holds a public hearing or otherwise provides for
843 public comment prior to any vote on such certified resolution.

844 (2) Any municipality that opts to join the authority as a member
845 municipality or that is deemed a member municipality pursuant to this
846 subsection shall enter into a memorandum of agreement with the
847 authority [for the establishment of] to establish one or more
848 development districts.

849 Sec. 58. Subsection (b) of section 8-37x of the general statutes is
850 repealed and the following is substituted in lieu thereof (*Effective from*
851 *passage*):

852 (b) The Commissioner of Housing may: (1) Collect and correlate
853 information regarding housing projects of authorities in the state and
854 upon request to furnish the authorities, in matters of common interest,
855 information, advice and the services of expert personnel; (2) study state-
856 wide needs for the elimination of substandard housing to stimulate state
857 and city planning involving housing, and otherwise to study housing
858 needs, both rural and urban, and to formulate proposals for meeting
859 these needs; (3) study methods of encouraging investment of private
860 capital in low rent housing; (4) study the necessity, feasibility and
861 advantage of the use of state credit by way of loan or subsidy to assist
862 the financing of housing projects for persons of low income; [and] (5)
863 accept grants-in-aid of any of said commissioner's powers made
864 pursuant to the provisions of any state or federal law and, for the
865 purpose of complying with the requirements or recommendations of
866 any such law, to prepare such plans and specifications and to make such

867 studies, surveys, reports or recommendations concerning existing or
868 contemplated housing conditions or projects in the state as may be
869 necessary or appropriate; and (6) provide for the planning and
870 construction of a housing project, as defined in section 8-39.

871 Sec. 59. Section 47a-4d of the general statutes is repealed and the
872 following is substituted in lieu thereof (*Effective from passage*):

873 (a) As used in this section, "tenant screening report" means a credit
874 report, a criminal background report, an employment history report, a
875 rental history report or any combination thereof, used by a landlord to
876 determine the suitability of a prospective tenant.

877 (b) No landlord, third party acting on behalf of a landlord, or third
878 party acting on behalf of the state may demand from a prospective
879 tenant any payment, fee or charge for the processing, review or
880 acceptance of any rental application, or demand any other payment, fee
881 or charge before or at the beginning of the tenancy, except a security
882 deposit pursuant to section 47a-21, advance payment for the first
883 month's rent or a deposit for a key or any special equipment, or a fee for
884 a tenant screening report as provided in subsection (c) of this section.
885 No landlord may charge a tenant a move-in or move-out fee.

886 (c) On and after [October 1, 2023] the effective date of this section, a
887 landlord, a third party acting on behalf of a landlord, or a third party
888 acting on behalf of the state may charge a fee not exceeding fifty dollars
889 plus an adjustment reflecting any increase in the consumer price index
890 for urban consumers, as determined by the Commissioner of Housing
891 on an annual basis, for a tenant screening report concerning a
892 prospective tenant.

893 (d) A landlord, a third party acting on behalf of a landlord, or a third
894 party acting on behalf of the state that charges a fee for a tenant
895 screening report concerning a prospective tenant shall provide the
896 prospective tenant with (1) a copy of the tenant screening report or, if
897 the landlord, third party acting on behalf of a landlord, or third party

898 acting on behalf of the state is prohibited from providing such a copy,
899 information concerning such report that would allow such tenant to
900 request a copy of such report from the service provider that produced
901 such report, and (2) a copy of the receipt or invoice from the entity
902 conducting the tenant screening report concerning the prospective
903 tenant.

904 Sec. 60. Subsection (b) of section 12-263s of the 2026 supplement to
905 the general statutes, as amended by section 361 of public act 25-168, is
906 repealed and the following is substituted in lieu thereof (*Effective July 1,*
907 *2026, and applicable to calendar quarters commencing on or after July 1, 2026*):

908 (b) Each taxpayer doing business in this state shall, on or before the
909 last day of January, April, July and October of each year, render to the
910 commissioner a quarterly return, on forms prescribed or furnished by
911 the commissioner and signed by one of the taxpayer's principal officers,
912 stating specifically the name and location of such taxpayer, the amount
913 of its net patient revenue [, nursing facility service revenue, intermediate
914 care facility service revenue] or resident days during the calendar
915 quarter ending on the last day of the preceding month and such other
916 information as the commissioner deems necessary for the proper
917 administration of this section and the state's Medicaid program. The
918 taxes and fees imposed under section 12-263q or 12-263r shall be due
919 and payable on the due date of such return. Each taxpayer shall be
920 required to file such return electronically with the department and to
921 make such payment by electronic funds transfer in the manner provided
922 by chapter 228g, irrespective of whether the taxpayer would have
923 otherwise been required to file such return electronically or to make
924 such payment by electronic funds transfer under the provisions of said
925 chapter.

926 Sec. 61. Sections 359, 363 and 364 of public act 25-168 are repealed.
927 (*Effective from passage*)

928 Sec. 62. (NEW) (*Effective July 1, 2026*) (a) On and after July 1, 2026, the
929 Commissioner of Motor Vehicles shall issue Pizza State commemorative

930 number plates of a design to enhance public awareness of the state's
931 pizza-making tradition and to provide funding to Connecticut
932 Foodshare. The design shall be determined by the commissioner. No use
933 shall be made of such plates except as official registration marker plates.

934 (b) The Commissioner of Motor Vehicles shall charge a fee of sixty-
935 five dollars for Pizza State commemorative number plates, in addition
936 to the regular fee or fees prescribed for the registration of a motor
937 vehicle. The commissioner shall deposit fifteen dollars of such fee into
938 an account controlled by the Department of Motor Vehicles to be used
939 for the cost of producing, issuing, renewing and replacing such number
940 plates, and fifty dollars of such fee into the Pizza State commemorative
941 account established under subsection (d) of this section. Except as
942 provided in subsection (f) of this section, no additional fee shall be
943 charged in connection with the renewal of such number plates. No
944 transfer fee shall be charged for transfer of an existing registration to or
945 from a registration with Pizza State commemorative number plates.
946 Such number plates shall have letters and numbers selected by the
947 Commissioner of Motor Vehicles. The commissioner may establish a
948 higher fee for number plates: (1) That contain the numbers and letters
949 from a previously issued number plate; (2) that contain letters in place
950 of numbers, as authorized by section 14-49 of the general statutes, in
951 addition to the fee or fees prescribed for registration under said section;
952 and (3) that are low number plates issued in accordance with section 14-
953 160 of the general statutes, in addition to the fee or fees prescribed for
954 registration under said section. All fees established and collected
955 pursuant to this section, except moneys designated for administrative
956 costs of the Department of Motor Vehicles, shall be deposited in the
957 Pizza State commemorative account.

958 (c) The Commissioner of Motor Vehicles may adopt regulations, in
959 accordance with the provisions of chapter 54 of the general statutes, to
960 establish standards and procedures for the issuance, renewal and
961 replacement of Pizza State commemorative number plates.

962 (d) There is established an account to be known as the "Pizza State

963 commemorative account", which shall be a separate, nonlapsing
964 account. The account shall contain any moneys required by law to be
965 deposited in the account. Moneys in the account shall be distributed
966 annually by the Department of Motor Vehicles to Connecticut
967 Foodshare. The commissioner may receive private donations to the
968 account and any such receipts shall be deposited in the account.

969 (e) The Commissioner of Motor Vehicles may provide for the
970 reproduction and marking of the Pizza State commemorative number
971 plates image for use on clothing, recreational equipment, posters,
972 mementoes or other products or programs deemed by the commissioner
973 to be suitable as a means of supporting the Pizza State commemorative
974 account. Any moneys received by the commissioner from such
975 marketing shall be deposited in the account.

976 (f) The Commissioner of Motor Vehicles may allow a registrant to
977 make an additional voluntary donation of fifteen dollars at the time of
978 registration renewal for any motor vehicle bearing a Pizza State
979 commemorative number plate. Any such donation shall be deposited in
980 the Pizza State commemorative account.

981 Sec. 63. Subsection (a) of section 29-1r of the general statutes is
982 repealed and the following is substituted in lieu thereof (*Effective from*
983 *passage*):

984 (a) There is established a Department of Emergency Services and
985 Public Protection. Said department shall be the designated emergency
986 management and homeland security agency for the state. The
987 department head shall be the Commissioner of Emergency Services and
988 Public Protection, who shall be appointed by the Governor in
989 accordance with sections 4-5 to 4-8, inclusive, with the powers and
990 duties prescribed in said sections. The commissioner shall be
991 responsible for providing a coordinated, integrated program for the
992 protection of life and property and for state-wide emergency
993 management and homeland security. The commissioner shall appoint
994 not more than [two] three deputy commissioners who shall, under the

995 direction of the commissioner, assist in the administration of the
996 department. The commissioner may do all things necessary to apply for,
997 qualify for and accept any federal funds made available or allotted
998 under any federal act for emergency management or homeland security.

999 Sec. 64. Subsection (d) of section 14-21cc of the 2026 supplement to
1000 the general statutes is repealed and the following is substituted in lieu
1001 thereof (*Effective July 1, 2026*):

1002 (d) The funds in the account shall be distributed [~~quarterly~~] annually
1003 by the Secretary of the Office of Policy and Management to Hispanic-
1004 American Veterans of Connecticut, Inc.

1005 Sec. 65. Subsection (a) of section 4-65a of the general statutes is
1006 repealed and the following is substituted in lieu thereof (*Effective from*
1007 *passage*):

1008 (a) There shall be an Office of Policy and Management which shall be
1009 responsible for all aspects of state staff planning and analysis in the
1010 areas of budgeting, management, planning, [~~energy policy~~
1011 ~~determination and evaluation,~~] intergovernmental policy, criminal and
1012 juvenile justice planning and program evaluation. The department head
1013 shall be the Secretary of the Office of Policy and Management, who shall
1014 be appointed by the Governor in accordance with the provisions of
1015 sections 4-5, 4-6, 4-7 and 4-8, with all the powers and duties therein
1016 prescribed. The Secretary of the Office of Policy and Management shall
1017 be the employer representative (1) in collective bargaining negotiations
1018 concerning changes to the state employees retirement system and health
1019 and welfare benefits, and (2) in all other matters involving collective
1020 bargaining, including negotiation and administration of all collective
1021 bargaining agreements and supplemental understandings between the
1022 state and the state employee unions concerning all executive branch
1023 employees except (A) employees of the Division of Criminal Justice, and
1024 (B) faculty and professional employees of boards of trustees of
1025 constituent units of the state system of higher education. The secretary
1026 may designate a member of the secretary's staff to act as the employer

1027 representative in the secretary's place.

1028 Sec. 66. Subsection (b) of section 7-74 of the general statutes is
1029 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1030 *2026*):

1031 (b) (1) The fee for a certified copy of a certificate of marriage or death
1032 shall be twenty dollars. Such fees shall not be required of the
1033 department.

1034 (2) Any fee received by the Department of Public Health for a
1035 certificate of death shall be deposited in the neglected cemetery account,
1036 established in accordance with section 19a-308b.

1037 (3) On or before October 31, 2026, and quarterly thereafter, the
1038 Commissioner of Public Health shall certify to the Secretary of the Office
1039 of Policy and Management the amount of fees collected in accordance
1040 with subdivision (1) of this subsection during the immediately
1041 preceding calendar quarter and the balance in the neglected cemetery
1042 account, established in accordance with section 19a-308b, as of the last
1043 day of the immediately preceding calendar quarter.

1044 Sec. 67. Section 46a-52 of the general statutes is repealed and the
1045 following is substituted in lieu thereof (*Effective July 1, 2026*):

1046 (a) The commission shall consist of nine persons. On and after
1047 October 1, 2000, such persons shall be appointed with the advice and
1048 consent of both houses of the General Assembly. (1) On or before July
1049 15, 1990, the Governor shall appoint five members of the commission,
1050 three of whom shall serve for terms of five years and two of whom shall
1051 serve for terms of three years. Upon the expiration of such terms, and
1052 thereafter, the Governor shall appoint either two or three members, as
1053 appropriate, to serve for terms of five years. On or before July 14, 1990,
1054 the president pro tempore of the Senate, the minority leader of the
1055 Senate, the speaker of the House of Representatives and the minority
1056 leader of the House of Representatives shall each appoint one member
1057 to serve for a term of three years. Upon the expiration of such terms, and

1058 thereafter, members so appointed shall serve for terms of three years.
1059 (2) If any vacancy occurs, the appointing authority making the initial
1060 appointment shall appoint a person to serve for the remainder of the
1061 unexpired term. The Governor shall select one of the members of the
1062 commission to serve as chairperson for a term of one year. The
1063 commission shall meet at least once during each two-month period and
1064 at such other times as the chairperson deems necessary. Special
1065 meetings shall be held on the request of a majority of the members of
1066 the commission after notice in accordance with the provisions of section
1067 1-225.

1068 (b) Except as provided in section 46a-57, the members of the
1069 commission shall serve without pay, but their reasonable expenses,
1070 including educational training expenses and expenses for necessary
1071 stenographic and clerical help, shall be paid by the state upon approval
1072 of the Commissioner of Administrative Services. Not later than two
1073 months after appointment to the commission, each member of the
1074 commission shall receive a minimum of ten hours of introductory
1075 training prior to voting on any commission matter. Each year following
1076 such introductory training, each member shall receive five hours of
1077 follow-up training. Such introductory and follow-up training shall
1078 consist of instruction on the laws governing discrimination in
1079 employment, housing, public accommodation and credit, affirmative
1080 action and the procedures of the commission. Such training shall be
1081 organized by the managing director of the legal division of the
1082 commission. Any member who fails to complete such training shall not
1083 vote on any commission matter. Any member who fails to comply with
1084 such introductory training requirement within six months of
1085 appointment shall be deemed to have resigned from office. Any member
1086 who fails to attend three consecutive meetings or who fails to attend
1087 fifty per cent of all meetings held during any calendar year shall be
1088 deemed to have resigned from office.

1089 (c) On or before July 15, 1989, the commission shall appoint an
1090 executive director who shall be the chief executive officer of the

1091 Commission on Human Rights and Opportunities to serve for a term
1092 expiring on July 14, 1990. Upon the expiration of such term and
1093 thereafter, the executive director shall be appointed for a term of four
1094 years. The executive director shall be supervised and annually
1095 evaluated by the commission. The executive director shall serve at the
1096 pleasure of the commission but no longer than four years from July
1097 fifteenth in the year of his or her appointment unless reappointed
1098 pursuant to the provisions of this subsection. The executive director
1099 shall receive an annual salary within the salary range of a salary group
1100 established by the Commissioner of Administrative Services for the
1101 position. The executive director (1) shall conduct comprehensive
1102 planning with respect to the functions of the commission; (2) shall
1103 coordinate the activities of the commission; and (3) shall cause the
1104 administrative organization of the commission to be examined with a
1105 view to promoting economy and efficiency. In accordance with
1106 established procedures, the executive director may enter into such
1107 contractual agreements as may be necessary for the discharge of the
1108 director's duties.

1109 (d) The executive director may appoint no more than two deputy
1110 directors with the approval of a majority of the members of the
1111 commission. The deputy directors shall be supervised by the executive
1112 director and shall assist the executive director in the administration of
1113 the commission, the effectuation of its statutory responsibilities and
1114 such other duties as may be assigned by the executive director. Deputy
1115 directors shall serve at the pleasure of the executive director and
1116 without tenure. The executive director may remove a deputy director
1117 with the approval of a majority of the members of the commission.

1118 [(e) The commission shall be within the Labor Department for
1119 administrative purposes only.]

1120 Sec. 68. Subsection (d) of section 1-84 of the 2026 supplement to the
1121 general statutes is repealed and the following is substituted in lieu
1122 thereof (*Effective July 1, 2026*):

1123 (d) No public official or state employee or employee of such public
1124 official or state employee shall agree to accept, or be a member or
1125 employee of a partnership, association, professional corporation or sole
1126 proprietorship which partnership, association, professional corporation
1127 or sole proprietorship agrees to accept any employment, fee or other
1128 thing of value, or portion thereof, for appearing, agreeing to appear, or
1129 taking any other action on behalf of another person before the
1130 Department of Banking, the Office of the Claims Commissioner, the
1131 Health Systems Planning Unit of the [Office of Health Strategy]
1132 Department of Public Health, the Insurance Department, the
1133 Department of Consumer Protection, the Department of Motor Vehicles,
1134 the State Insurance and Risk Management Board, the Department of
1135 Energy and Environmental Protection, the Public Utilities Regulatory
1136 Authority, the Connecticut Siting Council or the Connecticut Real Estate
1137 Commission; provided this shall not prohibit any such person from
1138 making inquiry for information on behalf of another before any of said
1139 commissions or commissioners if no fee or reward is given or promised
1140 in consequence thereof. For the purpose of this subsection, partnerships,
1141 associations, professional corporations or sole proprietorships refer
1142 only to such partnerships, associations, professional corporations or sole
1143 proprietorships which have been formed to carry on the business or
1144 profession directly relating to the employment, appearing, agreeing to
1145 appear or taking of action provided for in this subsection. Nothing in
1146 this subsection shall prohibit any employment, appearing, agreeing to
1147 appear or taking action before any municipal board, commission or
1148 council. Nothing in this subsection shall be construed as applying (1) to
1149 the actions of any teaching or research professional employee of a public
1150 institution of higher education if such actions are not in violation of any
1151 other provision of this chapter, (2) to the actions of any other
1152 professional employee of a public institution of higher education if such
1153 actions are not compensated and are not in violation of any other
1154 provision of this chapter, (3) to any member of a board or commission
1155 who receives no compensation other than per diem payments or
1156 reimbursement for actual or necessary expenses, or both, incurred in the
1157 performance of the member's duties, or (4) to any member or director of

1158 a quasi-public agency. Notwithstanding the provisions of this
1159 subsection to the contrary, a legislator, an officer of the General
1160 Assembly or part-time legislative employee may be or become a
1161 member or employee of a firm, partnership, association or professional
1162 corporation which represents clients for compensation before agencies
1163 listed in this subsection, provided the legislator, officer of the General
1164 Assembly or part-time legislative employee shall take no part in any
1165 matter involving the agency listed in this subsection and shall not
1166 receive compensation from any such matter. Receipt of a previously
1167 established salary, not based on the current or anticipated business of
1168 the firm, partnership, association or professional corporation involving
1169 the agencies listed in this subsection, shall be permitted.

1170 Sec. 69. Subsection (c) of section 1-84b of the general statutes is
1171 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1172 *2026*):

1173 (c) The provisions of this subsection apply to present or former
1174 executive branch public officials or state employees of an agency who
1175 hold or formerly held positions which involve significant decision-
1176 making or supervisory responsibility. Such positions shall be
1177 designated as such by the agency concerned, in consultation with the
1178 Office of State Ethics, except that such provisions shall not apply to
1179 members or former members of the boards or commissions who serve
1180 ex officio, who are required by statute to represent the regulated
1181 industry or who are permitted by statute to have a past or present
1182 affiliation with the regulated industry. On or before November [1, 2021,
1183 and not less than] first annually, [thereafter,] the head of each agency
1184 concerned, or his or her designee, shall submit the designation of all
1185 positions in existence on such date that are subject to the provisions of
1186 this subsection to the office electronically, in a manner prescribed by the
1187 Citizen's Ethics Advisory Board. If an agency creates such a position
1188 after its annual submission under this subsection, the head of such
1189 agency, or his or her designee, shall submit the designation of the newly
1190 created position not later than thirty days after the creation of such

1191 position. As used in this subsection, "agency" means the Health Systems
1192 Planning Unit of the [Office of Health Strategy] Department of Public
1193 Health, the Connecticut Siting Council, the Department of Banking, the
1194 Insurance Department, the Department of Emergency Services and
1195 Public Protection, the office within the Department of Consumer
1196 Protection that carries out the duties and responsibilities of sections 30-
1197 2 to 30-68m, inclusive, the Public Utilities Regulatory Authority,
1198 including the Office of Consumer Counsel, and the Department of
1199 Consumer Protection and the term "employment" means professional
1200 services or other services rendered as an employee or as an independent
1201 contractor.

1202 (1) No public official or state employee in an executive branch
1203 position designated pursuant to the provisions of this subsection shall
1204 negotiate for, seek or accept employment with any business subject to
1205 regulation by his agency.

1206 (2) No former public official or state employee who held such a
1207 position in the executive branch shall, within one year after leaving an
1208 agency, accept employment with a business subject to regulation by that
1209 agency.

1210 (3) No business shall employ a present or former public official or
1211 state employee in violation of this subsection.

1212 Sec. 70. Subsection (b) of section 2-137 of the 2026 supplement to the
1213 general statutes is repealed and the following is substituted in lieu
1214 thereof (*Effective July 1, 2026*):

1215 (b) The committee shall consist of the following members:

1216 (1) The chairpersons and ranking members of the joint standing
1217 committees of the General Assembly having cognizance of matters
1218 relating to public health, human services, children and appropriations
1219 and the budgets of state agencies, or their designees;

1220 (2) Three appointed by the speaker of the House of Representatives,

1221 one of whom shall be a member of the General Assembly and two of
1222 whom shall be providers of behavioral health services for children in the
1223 state;

1224 (3) Three appointed by the president pro tempore of the Senate, one
1225 of whom shall be a member of the General Assembly and two of whom
1226 shall be representatives of private advocacy groups that provide
1227 services for children and families in the state;

1228 (4) (A) Two appointed by the chairperson of the committee selected
1229 by the speaker of the House of Representatives pursuant to subsection
1230 (e) of this section, one of whom shall be a child or youth advocate; (B)
1231 two appointed by the chairperson of the committee selected by the
1232 president pro tempore of the Senate pursuant to subsection (e) of this
1233 section, one of whom shall be a child or youth advocate; and (C) two
1234 jointly appointed by the three chairpersons of the committee, as
1235 described in subsection (e) of this section, who shall be providers of
1236 substance use treatment services to young adults;

1237 (5) Two appointed by the majority leader of the House of
1238 Representatives, who shall be representatives of children's hospitals;

1239 (6) One appointed by the majority leader of the Senate, who shall be
1240 a representative of public school superintendents in the state;

1241 (7) Two appointed by the minority leader of the House of
1242 Representatives, who shall be representatives of families with children
1243 who have been diagnosed with behavioral health disorders;

1244 (8) Two appointed by the minority leader of the Senate, who shall be
1245 providers of behavioral health services;

1246 (9) Two jointly appointed by the chairpersons of the joint standing
1247 committee of the General Assembly having cognizance of matters
1248 relating to appropriations and the budgets of state agencies, each of
1249 whom shall be a representative of one of the two federally recognized
1250 Indian tribes in the state;

1251 (10) The Commissioners of Children and Families, Correction,
1252 Developmental Services, Early Childhood, Education, Insurance,
1253 Mental Health and Addiction Services, Public Health and Social
1254 Services, or their designees;

1255 [(11) The Commissioner of Health Strategy, or the commissioner's
1256 designee;]

1257 [(12)] (11) The Child Advocate, or the Child Advocate's designee;

1258 [(13)] (12) The Healthcare Advocate and the Behavioral Health
1259 Advocate, or their designees;

1260 [(14)] (13) The executive director of the Court Support Services
1261 Division of the Judicial Branch, or the executive director's designee;

1262 [(15)] (14) The executive director of the Commission on Women,
1263 Children, Seniors, Equity and Opportunity, or the executive director's
1264 designee;

1265 [(16)] (15) The Secretary of the Office of Policy and Management, or
1266 the secretary's designee; and

1267 [(17)] (16) One representative from each administrative services
1268 organization under contract with the Department of Social Services to
1269 provide such services for recipients of assistance under the HUSKY
1270 Health program, who shall be ex-officio, nonvoting members.

1271 Sec. 71. Section 4-5 of the general statutes is repealed and the
1272 following is substituted in lieu thereof (*Effective July 1, 2026*):

1273 As used in sections 4-6, 4-7 and 4-8, the term "department head"
1274 means the Secretary of the Office of Policy and Management,
1275 Commissioner of Administrative Services, Commissioner of Revenue
1276 Services, Banking Commissioner, Commissioner of Children and
1277 Families, Commissioner of Consumer Protection, Commissioner of
1278 Correction, Commissioner of Economic and Community Development,
1279 State Board of Education, Commissioner of Emergency Services and

1280 Public Protection, Commissioner of Energy and Environmental
1281 Protection, Commissioner of Agriculture, Commissioner of Public
1282 Health, Insurance Commissioner, Labor Commissioner, Commissioner
1283 of Mental Health and Addiction Services, Commissioner of Social
1284 Services, Commissioner of Developmental Services, Commissioner of
1285 Motor Vehicles, Commissioner of Transportation, Commissioner of
1286 Veterans Affairs, Commissioner of Housing, Commissioner of Aging
1287 and Disability Services, Commissioner of Early Childhood,
1288 [Commissioner of Health Strategy,] executive director of the Office of
1289 Military Affairs, executive director of the Technical Education and
1290 Career System, Chief Workforce Officer and Commissioner of Higher
1291 Education. As used in sections 4-6 and 4-7, "department head" also
1292 means the Commissioner of Education.

1293 Sec. 72. Subsection (b) of section 4-101a of the general statutes is
1294 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1295 *2026*):

1296 (b) Grants, technical assistance or consultation services, or any
1297 combination thereof, provided under this section may be made to assist
1298 a nongovernmental acute care general hospital to develop and
1299 implement a plan to achieve financial stability and assure the delivery
1300 of appropriate health care services in the service area of such hospital,
1301 or to assist a nongovernmental acute care general hospital in
1302 determining strategies, goals and plans to ensure its financial viability
1303 or stability. Any such hospital seeking such grants, technical assistance
1304 or consultation services shall prepare and submit to the Office of Policy
1305 and Management and the Health Systems Planning Unit of the [Office
1306 of Health Strategy] Department of Public Health a plan that includes at
1307 least the following: (1) A statement of the hospital's current projections
1308 of its finances for the current and the next three fiscal years; (2)
1309 identification of the major financial issues which effect the financial
1310 stability of the hospital; (3) the steps proposed to study or improve the
1311 financial status of the hospital and eliminate ongoing operating losses;
1312 (4) plans to study or change the mix of services provided by the hospital,

1313 which may include transition to an alternative licensure category; and
1314 (5) other related elements as determined by the Office of Policy and
1315 Management. Such plan shall clearly identify the amount, value or type
1316 of the grant, technical assistance or consultation services, or
1317 combination thereof, requested. Any grants, technical assistance or
1318 consultation services, or any combination thereof, provided under this
1319 section shall be determined by the Secretary of the Office of Policy and
1320 Management not to jeopardize the federal matching payments under
1321 the medical assistance program and the emergency assistance to
1322 families program as determined by the Health Systems Planning Unit of
1323 the [Office of Health Strategy] Department of Public Health or the
1324 Department of Social Services in consultation with the Office of Policy
1325 and Management.

1326 Sec. 73. Subsection (b) of section 8-37vvv of the 2026 supplement to
1327 the general statutes is repealed and the following is substituted in lieu
1328 thereof (*Effective July 1, 2026*):

1329 (b) The council shall consist of the following regular members:

1330 (1) Two appointed by the president pro tempore of the Senate, one of
1331 whom is an individual who is experiencing or has experienced
1332 homelessness and one of whom is a representative of a continuum of
1333 care organization;

1334 (2) Two appointed by the speaker of the House of Representatives,
1335 one of whom is a representative of an organization that advocates for
1336 victims of domestic violence or domestic violence prevention and one
1337 of whom is a representative of an organization that provides shelters or
1338 housing for individuals experiencing homelessness;

1339 (3) One appointed by the majority leader of the Senate, who is a
1340 representative of a public housing authority;

1341 (4) One appointed by the majority leader of the House of
1342 Representatives, who has expertise in mental health or addiction
1343 treatment;

1344 (5) Two appointed by the minority leader of the Senate, one of whom
1345 is a representative of local government and one of whom is a
1346 representative of a philanthropic organization;

1347 (6) Two appointed by the minority leader of the House of
1348 Representatives, one of whom is a representative of a faith-based
1349 organization and one of whom is a representative of a group that
1350 advocates for housing developers;

1351 (7) Two appointed by the Commissioner of Housing;

1352 (8) The Commissioner of Housing, or the commissioner's designee;

1353 (9) The Commissioner of Aging and Disability Services, or the
1354 commissioner's designee;

1355 (10) The Commissioner of Children and Families, or the
1356 commissioner's designee;

1357 (11) The Commissioner of Correction, or the commissioner's
1358 designee;

1359 (12) The Labor Commissioner, or the commissioner's designee;

1360 (13) The Commissioner of Mental Health and Addiction Services, or
1361 the commissioner's designee;

1362 (14) The Commissioner of Social Services, or the commissioner's
1363 designee;

1364 (15) The Commissioner of Veterans Affairs, or the commissioner's
1365 designee;

1366 (16) The Secretary of the Office of Policy and Management, or the
1367 secretary's designee;

1368 (17) The executive director of the Court Support Services Division of
1369 the Judicial Department, or the executive director's designee;

1370 [(18) The Commissioner of Health Strategy, or the commissioner's
1371 designee;]

1372 [(19)] (18) The chief executive officer of the Connecticut Housing
1373 Finance Authority, or the chief executive officer's designee; and

1374 [(20)] (19) The Long-Term Care Ombudsman.

1375 Sec. 74. Subdivision (8) of subsection (c) of section 10-222tt of the 2026
1376 supplement to the general statutes is repealed and the following is
1377 substituted in lieu thereof (*Effective July 1, 2026*):

1378 (8) The commission, in consultation with the [Office of Health
1379 Strategy,] Office of the Healthcare Advocate and Department of Social
1380 Services, shall conduct a study to determine if certain special education
1381 services can be billed to Medicaid or other private insurance.

1382 Sec. 75. Subsections (b) to (d), inclusive, of section 10-532 of the
1383 general statutes are repealed and the following is substituted in lieu
1384 thereof (*Effective July 1, 2026*):

1385 (b) The Commissioner of Early Childhood, in collaboration with the
1386 Commissioners of Social Services [] and Public Health, [and Health
1387 Strategy,] shall, within available appropriations, develop a state-wide
1388 program to offer universal nurse home visiting services to all families
1389 with newborns residing in the state to support parental health, healthy
1390 child development and strengthen families.

1391 (c) When developing the program, said commissioners shall (1)
1392 consult with insurers that offer health benefit plans in the state,
1393 hospitals, local public health authorities, existing early childhood home
1394 visiting programs, community-based organizations and social service
1395 providers; and (2) maximize the use of available federal funding.

1396 (d) The program shall provide universal nurse home visiting services
1397 that are (1) evidence-based, and (2) designed to improve outcomes in
1398 one or more of the following areas: (A) Child safety; (B) child health and

1399 development; (C) family economic self-sufficiency; (D) maternal and
1400 parental health; (E) positive parenting; (F) reducing child mistreatment;
1401 (G) reducing family violence; (H) parent-infant bonding; and (I) any
1402 other appropriate area established, in writing, by the Commissioners of
1403 Early Childhood, Social Services [J] and Public Health. [and Health
1404 Strategy.]

1405 Sec. 76. Subsection (b) of section 12-34h of the 2026 supplement to the
1406 general statutes is repealed and the following is substituted in lieu
1407 thereof (*Effective July 1, 2026*):

1408 (b) Any pharmaceutical manufacturer or wholesale distributor that
1409 intends to withdraw an identified prescription drug from sale in this
1410 state shall, at least one hundred eighty days before such withdrawal,
1411 send advance written notice to the [Office of Health Strategy]
1412 commissioner disclosing such pharmaceutical manufacturer's or
1413 wholesale distributor's intention.

1414 Sec. 77. Subparagraph (B) of subdivision (1) of subsection (c) of
1415 section 12-263q of the 2026 supplement to the general statutes, as
1416 amended by section 360 of public act 25-168, is repealed and the
1417 following is substituted in lieu thereof (*Effective July 1, 2026*):

1418 (B) For purposes of this subdivision, "financially distressed hospital"
1419 means a hospital that has experienced over the five-year period from
1420 October 1, 2011, through September 30, 2016, an average net loss of more
1421 than five per cent of aggregate revenue. A hospital has an average net
1422 loss of more than five per cent of aggregate revenue if such a loss is
1423 reflected in the applicable years of financial reporting that have been
1424 made available by the Health Systems Planning Unit of the [Office of
1425 Health Strategy] Department of Public Health for such hospital in
1426 accordance with section 19a-670. Upon said commissioner's receipt of a
1427 determination by the Centers for Medicare and Medicaid Services that
1428 a hospital is not exempt, the total audited net revenue from the
1429 provision of outpatient hospital services for fiscal year 2016 shall be
1430 increased by such hospital's audited net revenue from the provision of

1431 outpatient hospital services for fiscal year 2016 and the effective rate of
1432 the tax due under this section shall be adjusted to ensure that the total
1433 amount of such tax to be collected under subsection (a) of this section is
1434 redistributed, commencing with the calendar quarter next succeeding
1435 the date of the determination by the Centers for Medicare and Medicaid
1436 Services.

1437 Sec. 78. Section 17b-59a of the 2026 supplement to the general statutes
1438 is repealed and the following is substituted in lieu thereof (*Effective July*
1439 *1, 2026*):

1440 (a) As used in this section:

1441 (1) "Electronic health information system" means an information
1442 processing system, involving both computer hardware and software
1443 that deals with the storage, retrieval, sharing and use of health care
1444 information, data and knowledge for communication and decision
1445 making, and includes: (A) An electronic health record that provides
1446 access in real time to a patient's complete medical record; (B) a personal
1447 health record through which an individual, and anyone authorized by
1448 such individual, can maintain and manage such individual's health
1449 information; (C) computerized order entry technology that permits a
1450 health care provider to order diagnostic and treatment services,
1451 including prescription drugs electronically; (D) electronic alerts and
1452 reminders to health care providers to improve compliance with best
1453 practices, promote regular screenings and other preventive practices,
1454 and facilitate diagnoses and treatments; (E) error notification
1455 procedures that generate a warning if an order is entered that is likely
1456 to lead to a significant adverse outcome for a patient; and (F) tools to
1457 allow for the collection, analysis and reporting of data on adverse
1458 events, near misses, the quality and efficiency of care, patient
1459 satisfaction and other healthcare-related performance measures.

1460 (2) "Interoperability" means the ability of two or more systems or
1461 components to exchange information and to use the information that
1462 has been exchanged and includes: (A) The capacity to physically connect

1463 to a network for the purpose of exchanging data with other users; and
1464 (B) the capacity of a connected user to access, transmit, receive and
1465 exchange usable information with other users.

1466 (3) "Standard electronic format" means a format using open electronic
1467 standards that: (A) Enable health information technology to be used for
1468 the collection of clinically specific data; (B) promote the interoperability
1469 of health care information across health care settings, including
1470 reporting to local, state and federal agencies; and (C) facilitate clinical
1471 decision support.

1472 (b) The Commissioner of Social Services, in consultation with the
1473 [Commissioner of Health Strategy] Secretary of the Office of Policy and
1474 Management, shall (1) develop, throughout the Departments of
1475 Developmental Services, Public Health, Correction, Children and
1476 Families, Veterans Affairs and Mental Health and Addiction Services,
1477 uniform management information, uniform statistical information,
1478 uniform terminology for similar facilities and uniform electronic health
1479 information technology standards, (2) plan for increased participation
1480 of the private sector in the delivery of human services, and (3) provide
1481 direction and coordination to federally funded programs in the human
1482 services agencies and recommend uniform system improvements and
1483 reallocation of physical resources and designation of a single
1484 responsibility across human services agencies lines to facilitate shared
1485 services and eliminate duplication.

1486 (c) The [Commissioner of Health Strategy] Secretary of the Office of
1487 Policy and Management shall, in consultation with the Commissioner
1488 of Social Services and the State Health Information Technology
1489 Advisory Council, established pursuant to section 17b-59f, implement
1490 and periodically revise the state-wide health information technology
1491 plan established pursuant to this section and shall establish electronic
1492 data standards to facilitate the development of integrated electronic
1493 health information systems for use by health care providers and
1494 institutions that receive state funding. Such electronic data standards
1495 shall: (1) Include provisions relating to security, privacy, data content,

1496 structures and format, vocabulary and transmission protocols; (2) limit
1497 the use and dissemination of an individual's Social Security number and
1498 require the encryption of any Social Security number provided by an
1499 individual; (3) require privacy standards no less stringent than the
1500 "Standards for Privacy of Individually Identifiable Health Information"
1501 established under the Health Insurance Portability and Accountability
1502 Act of 1996, P.L. 104-191, as amended from time to time, and contained
1503 in 45 CFR 160, 164; (4) require that individually identifiable health
1504 information be secure and that access to such information be traceable
1505 by an electronic audit trail; (5) be compatible with any national data
1506 standards in order to allow for interstate interoperability; (6) permit the
1507 collection of health information in a standard electronic format; and (7)
1508 be compatible with the requirements for an electronic health
1509 information system.

1510 (d) The [Commissioner of Health Strategy] Secretary of the Office of
1511 Policy and Management shall, within existing resources and in
1512 consultation with the State Health Information Technology Advisory
1513 Council: (1) Oversee the development and implementation of the State-
1514 wide Health Information Exchange in conformance with section 17b-
1515 59d; (2) coordinate the state's health information technology and health
1516 information exchange efforts to ensure consistent and collaborative
1517 cross-agency planning and implementation; and (3) serve as the state
1518 liaison to, and work collaboratively with, the State-wide Health
1519 Information Exchange established pursuant to section 17b-59d to ensure
1520 consistency between the state-wide health information technology plan
1521 and the State-wide Health Information Exchange and to support the
1522 state's health information technology and exchange goals.

1523 (e) The state-wide health information technology plan, implemented
1524 and periodically revised pursuant to subsection (c) of this section, shall
1525 enhance interoperability to support optimal health outcomes and
1526 include, but not be limited to (1) general standards and protocols for
1527 health information exchange, and (2) national data standards to support
1528 secure data exchange data standards to facilitate the development of a

1529 state-wide, integrated electronic health information system for use by
1530 health care providers and institutions that are licensed by the state. Such
1531 electronic data standards shall (A) include provisions relating to
1532 security, privacy, data content, structures and format, vocabulary and
1533 transmission protocols, (B) be compatible with any national data
1534 standards in order to allow for interstate interoperability, (C) permit the
1535 collection of health information in a standard electronic format, and (D)
1536 be compatible with the requirements for an electronic health
1537 information system.

1538 (f) Not later than February [1, 2017, and annually thereafter] first
1539 annually, the [Commissioner of Health Strategy] Secretary of the Office
1540 of Policy and Management, in consultation with the State Health
1541 Information Technology Advisory Council, shall report in accordance
1542 with the provisions of section 11-4a to the joint standing committees of
1543 the General Assembly having cognizance of matters relating to human
1544 services and public health concerning: (1) The development and
1545 implementation of the state-wide health information technology plan
1546 and data standards, established and implemented by the
1547 [Commissioner of Health Strategy] secretary pursuant to this section; (2)
1548 the establishment of the State-wide Health Information Exchange; and
1549 (3) recommendations for policy, regulatory and legislative changes and
1550 other initiatives to promote the state's health information technology
1551 and exchange goals.

1552 Sec. 79. Subsections (d) to (g), inclusive, of section 17b-59d of the
1553 general statutes are repealed and the following is substituted in lieu
1554 thereof (*Effective July 1, 2026*):

1555 (d) (1) The [Commissioner of Health Strategy, in consultation with
1556 the] Secretary of the Office of Policy and Management, [and] in
1557 consultation with the State Health Information Technology Advisory
1558 Council, established pursuant to section 17b-59f, shall, upon the
1559 approval by the State Bond Commission of bond funds authorized by
1560 the General Assembly for the purposes of establishing a State-wide
1561 Health Information Exchange, develop and issue a request for proposals

1562 for the development, management and operation of the State-wide
1563 Health Information Exchange. Such request shall promote the reuse of
1564 any and all enterprise health information technology assets, such as the
1565 existing Provider Directory, Enterprise Master Person Index, Direct
1566 Secure Messaging Health Information Service provider infrastructure,
1567 analytic capabilities and tools that exist in the state or are in the process
1568 of being deployed. Any enterprise health information exchange
1569 technology assets purchased after June 2, 2016, and prior to the
1570 implementation of the State-wide Health Information Exchange shall be
1571 capable of interoperability with a State-wide Health Information
1572 Exchange.

1573 (2) Such request for proposals may require an eligible organization
1574 responding to the request to: (A) Have not less than three years of
1575 experience operating either a state-wide health information exchange in
1576 any state or a regional exchange serving a population of not less than
1577 one million that (i) enables the exchange of patient health information
1578 among health care providers, patients and other authorized users
1579 without regard to location, source of payment or technology, (ii)
1580 includes, with proper consent, behavioral health and substance abuse
1581 treatment information, (iii) supports transitions of care and care
1582 coordination through real-time health care provider alerts and access to
1583 clinical information, (iv) allows health information to follow each
1584 patient, (v) allows patients to access and manage their health data, and
1585 (vi) has demonstrated success in reducing costs associated with
1586 preventable readmissions, duplicative testing or medical errors; (B) be
1587 committed to, and demonstrate, a high level of transparency in its
1588 governance, decision-making and operations; (C) be capable of
1589 providing consulting to ensure effective governance; (D) be regulated or
1590 administratively overseen by a state government agency; and (E) have
1591 sufficient staff and appropriate expertise and experience to carry out the
1592 administrative, operational and financial responsibilities of the State-
1593 wide Health Information Exchange.

1594 (e) Notwithstanding the provisions of subsection (d) of this section,

1595 if, on or before January 1, 2016, the Commissioner of Social Services, in
1596 consultation with the State Health Information Technology Advisory
1597 Council, established pursuant to section 17b-59f, submits a plan to the
1598 Secretary of the Office of Policy and Management for the establishment
1599 of a State-wide Health Information Exchange consistent with
1600 subsections (a), (b) and (c) of this section, [and such plan is approved by
1601 the secretary, the commissioner] the secretary may implement such plan
1602 and enter into any contracts or agreements to implement such plan.

1603 (f) The [Commissioner of Health Strategy] Secretary of the Office of
1604 Policy and Management shall have administrative authority over the
1605 State-wide Health Information Exchange. The [commissioner] secretary
1606 shall be responsible for designating, and posting on [its] the Office of
1607 Policy and Management's Internet web site, the list of systems,
1608 technologies, entities and programs that shall constitute the State-wide
1609 Health Information Exchange. Systems, technologies, entities, and
1610 programs that have not been so designated shall not be considered part
1611 of said exchange.

1612 (g) The [Commissioner of Health Strategy] Secretary of the Office of
1613 Policy and Management shall adopt regulations in accordance with the
1614 provisions of chapter 54 that set forth requirements necessary to
1615 implement the provisions of this section. The [commissioner] secretary
1616 may implement policies and procedures necessary to administer the
1617 provisions of this section while in the process of adopting such policies
1618 and procedures in regulation form, provided the [commissioner]
1619 secretary holds a public hearing at least thirty days prior to
1620 implementing such policies and procedures and publishes notice of
1621 intention to adopt the regulations on the Office of [Health Strategy's]
1622 Policy and Management's Internet web site and the eRegulations System
1623 not later than twenty days after implementing such policies and
1624 procedures. Policies and procedures implemented pursuant to this
1625 subsection shall be valid until the time such regulations are effective.

1626 Sec. 80. Subsection (f) of section 17b-59e of the 2026 supplement to the
1627 general statutes is repealed and the following is substituted in lieu

1628 thereof (*Effective July 1, 2026*):

1629 (f) The [Commissioner of Health Strategy] Secretary of the Office of
1630 Policy and Management shall adopt regulations in accordance with the
1631 provisions of chapter 54 that set forth requirements necessary to
1632 implement the provisions of this section. The [commissioner] secretary
1633 may implement policies and procedures necessary to administer the
1634 provisions of this section while in the process of adopting such policies
1635 and procedures in regulation form, provided the [commissioner]
1636 secretary holds a public hearing at least thirty days prior to
1637 implementing such policies and procedures and publishes notice of
1638 intention to adopt the regulations on the Office of [Health Strategy's]
1639 Policy and Management's Internet web site and the eRegulations System
1640 not later than twenty days after implementing such policies and
1641 procedures. Policies and procedures implemented pursuant to this
1642 subsection shall be valid until the time such regulations are effective.

1643 Sec. 81. Section 17b-59f of the general statutes is repealed and the
1644 following is substituted in lieu thereof (*Effective July 1, 2026*):

1645 (a) There shall be a State Health Information Technology Advisory
1646 Council to advise the [Commissioner of Health Strategy] Secretary of
1647 the Office of Policy and Management and the health information
1648 technology officer, designated in accordance with section [19a-754a] 4-
1649 66, in developing priorities and policy recommendations for advancing
1650 the state's health information technology and health information
1651 exchange efforts and goals and to advise the [commissioner] secretary
1652 and officer in the development and implementation of the state-wide
1653 health information technology plan and standards and the State-wide
1654 Health Information Exchange, established pursuant to section 17b-59d.
1655 The advisory council shall also advise the [commissioner] secretary and
1656 officer regarding the development of appropriate governance, oversight
1657 and accountability measures to ensure success in achieving the state's
1658 health information technology and exchange goals.

1659 (b) The council shall consist of the following members:

- 1660 (1) One member appointed by the [Commissioner of Health Strategy]
1661 Secretary of the Office of Policy and Management, who shall be an
1662 expert in state health care reform initiatives;
- 1663 (2) The health information technology officer, designated in
1664 accordance with section [19a-754a] 4-66, or the health information
1665 technology officer's designee;
- 1666 (3) The Commissioners of Social Services, Mental Health and
1667 Addiction Services, Children and Families, Correction, Public Health
1668 and Developmental Services, or the commissioners' designees;
- 1669 (4) The Chief Information Officer of the state, or the Chief Information
1670 Officer's designee;
- 1671 (5) The chief executive officer of the Connecticut Health Insurance
1672 Exchange, or the chief executive officer's designee;
- 1673 (6) The chief information officer of The University of Connecticut
1674 Health Center, or the chief information officer's designee;
- 1675 (7) The Healthcare Advocate, or the Healthcare Advocate's designee;
- 1676 (8) The Comptroller, or the Comptroller's designee;
- 1677 (9) The Attorney General, or the Attorney General's designee;
- 1678 (10) Five members appointed by the Governor, one each who shall be
1679 (A) a representative of a health system that includes more than one
1680 hospital, (B) a representative of the health insurance industry, (C) an
1681 expert in health information technology, (D) a health care consumer or
1682 consumer advocate, and (E) a current or former employee or trustee of
1683 a plan established pursuant to subdivision (5) of subsection (c) of 29 USC
1684 186;
- 1685 (11) Three members appointed by the president pro tempore of the
1686 Senate, one each who shall be (A) a representative of a federally
1687 qualified health center, (B) a provider of behavioral health services, and

1688 (C) a physician licensed under chapter 370;

1689 (12) Three members appointed by the speaker of the House of
1690 Representatives, one each who shall be (A) a technology expert who
1691 represents a hospital system, as defined in section 19a-486i, (B) a
1692 provider of home health care services, and (C) a health care consumer
1693 or a health care consumer advocate;

1694 (13) One member appointed by the majority leader of the Senate, who
1695 shall be a representative of an independent community hospital;

1696 (14) One member appointed by the majority leader of the House of
1697 Representatives, who shall be a physician who provides services in a
1698 multispecialty group and who is not employed by a hospital;

1699 (15) One member appointed by the minority leader of the Senate, who
1700 shall be a primary care physician who provides services in a small
1701 independent practice;

1702 (16) One member appointed by the minority leader of the House of
1703 Representatives, who shall be an expert in health care analytics and
1704 quality analysis;

1705 (17) The president pro tempore of the Senate, or the president's
1706 designee;

1707 (18) The speaker of the House of Representatives, or the speaker's
1708 designee;

1709 (19) The minority leader of the Senate, or the minority leader's
1710 designee; and

1711 (20) The minority leader of the House of Representatives, or the
1712 minority leader's designee.

1713 (c) Any member appointed or designated under subdivisions (11) to
1714 (20), inclusive, of subsection (b) of this section may be a member of the
1715 General Assembly.

1716 (d) (1) The health information technology officer, designated in
1717 accordance with section [19a-754a] 4-66, shall serve as a chairperson of
1718 the council. The council shall elect a second chairperson from among its
1719 members, who shall not be a state official. The chairpersons of the
1720 council may establish subcommittees and working groups and may
1721 appoint individuals other than members of the council to serve as
1722 members of the subcommittees or working groups. The terms of the
1723 members shall be coterminous with the terms of the appointing
1724 authority for each member and subject to the provisions of section 4-1a.
1725 If any vacancy occurs on the council, the appointing authority having
1726 the power to make the appointment under the provisions of this section
1727 shall appoint a person in accordance with the provisions of this section.
1728 A majority of the members of the council shall constitute a quorum.
1729 Members of the council shall serve without compensation, but shall be
1730 reimbursed for all reasonable expenses incurred in the performance of
1731 their duties.

1732 (2) The chairpersons of the council may appoint up to four additional
1733 members to the council, who shall serve at the pleasure of the
1734 chairpersons.

1735 (e) (1) The council shall establish a working group to be known as the
1736 All-Payer Claims Database Advisory Group. Said group shall include,
1737 but need not be limited to, (A) the Secretary of the Office of Policy and
1738 Management, the Comptroller, the Commissioners of Public Health,
1739 Social Services and Mental Health and Addiction Services, the Insurance
1740 Commissioner, the Healthcare Advocate and the Chief Information
1741 Officer, or their designees; (B) a representative of the Connecticut State
1742 Medical Society; and (C) representatives of health insurance companies,
1743 health insurance purchasers, hospitals, consumer advocates and health
1744 care providers. The health information technology officer may appoint
1745 additional members to said group.

1746 (2) The All-Payer Claims Database Advisory Group shall develop a
1747 plan to implement a state-wide multipayer data initiative to enhance the
1748 state's use of health care data from multiple sources to increase

1749 efficiency, enhance outcomes and improve the understanding of health
1750 care expenditures in the public and private sectors.

1751 (f) Prior to submitting any application, proposal, planning document
1752 or other request seeking federal grants, matching funds or other federal
1753 support for health information technology or health information
1754 exchange, the [Commissioner of Health Strategy] Secretary of the Office
1755 of Policy and Management or the Commissioner of Social Services shall
1756 present such application, proposal, document or other request to the
1757 council for review and comment.

1758 Sec. 82. Subsections (a) and (b) of section 17b-59g of the general
1759 statutes are repealed and the following is substituted in lieu thereof
1760 (*Effective July 1, 2026*):

1761 (a) The state, acting by and through the Secretary of the Office of
1762 Policy and Management, [in collaboration with the Commissioner of
1763 Health Strategy,] shall establish a program to expedite the development
1764 of the State-wide Health Information Exchange, established under
1765 section 17b-59d, to assist the state, health care providers, insurance
1766 carriers, physicians and all stakeholders in empowering consumers to
1767 make effective health care decisions, promote patient-centered care,
1768 improve the quality, safety and value of health care, reduce waste and
1769 duplication of services, support clinical decision-making, keep
1770 confidential health information secure and make progress toward the
1771 state's public health goals. The purposes of the program shall be to (1)
1772 assist the State-wide Health Information Exchange in establishing and
1773 maintaining itself as a neutral and trusted entity that serves the public
1774 good for the benefit of all Connecticut residents, including, but not
1775 limited to, Connecticut health care consumers and Connecticut health
1776 care providers and carriers, and (2) perform, on behalf of the state, the
1777 role of intermediary between public and private stakeholders and
1778 customers of the State-wide Health Information Exchange. [, and (3)
1779 fulfill the responsibilities of the Office of Health Strategy, as described
1780 in section 19a-754a.]

1781 (b) The [Commissioner of Health Strategy] Secretary of the Office of
1782 Policy and Management, in consultation with the health information
1783 technology officer, designated in accordance with section [19a-754] 4-66,
1784 shall design [, and the Secretary of the Office of Policy and Management,
1785 in collaboration with said commissioner,] and may establish or
1786 incorporate an entity to implement the program established under
1787 subsection (a) of this section. Such entity shall, without limitation, be
1788 owned and governed, in whole or in part, by a party or parties other
1789 than the state and may be organized as a nonprofit entity.

1790 Sec. 83. Section 17b-312 of the general statutes is repealed and the
1791 following is substituted in lieu thereof (*Effective July 1, 2026*):

1792 The Commissioner of Social Services shall seek, in accordance with
1793 the provisions of section 17b-8, [and in consultation with the Insurance
1794 Commissioner and the Office of Health Strategy established under
1795 section 19a-754a,] a waiver under Section 1115 of the Social Security Act,
1796 as amended from time to time, to seek federal funds to support the
1797 Covered Connecticut program established under section 19a-754c.
1798 Upon approval by the Centers for Medicare and Medicaid Services, the
1799 Commissioner of Social Services shall implement the waiver.

1800 Sec. 84. Sec. 23. Subsection (c) of section 17b-337 of the general
1801 statutes is repealed and the following is substituted in lieu thereof
1802 (*Effective July 1, 2026*):

1803 (c) The Long-Term Care Planning Committee shall consist of: (1) The
1804 chairpersons and ranking members of the joint standing committees of
1805 the General Assembly having cognizance of matters relating to human
1806 services, public health, elderly services and long-term care; (2) the
1807 Commissioner of Social Services, or the commissioner's designee; (3)
1808 one member of the Office of Policy and Management appointed by the
1809 Secretary of the Office of Policy and Management; (4) one member from
1810 the Department of Public Health appointed by the Commissioner of
1811 Public Health; (5) one member from the Department of Housing
1812 appointed by the Commissioner of Housing; (6) one member from the

1813 Department of Developmental Services appointed by the Commissioner
1814 of Developmental Services; (7) one member from the Department of
1815 Mental Health and Addiction Services appointed by the Commissioner
1816 of Mental Health and Addiction Services; (8) one member from the
1817 Department of Transportation appointed by the Commissioner of
1818 Transportation; (9) one member from the Department of Children and
1819 Families appointed by the Commissioner of Children and Families; [(10)
1820 one member from the Health Systems Planning Unit of the Office of
1821 Health Strategy appointed by the Commissioner of Health Strategy; and
1822 (11)] and (10) one member from the Department of Aging and Disability
1823 Services appointed by the Commissioner of Aging and Disability
1824 Services. The committee shall convene no later than ninety days after
1825 June 4, 1998. Any vacancy shall be filled by the appointing authority.
1826 The chairperson shall be elected from among the members of the
1827 committee. The committee shall seek the advice and participation of any
1828 person, organization or state or federal agency it deems necessary to
1829 carry out the provisions of this section.

1830 Sec. 85. Subdivision (3) of subsection (f) of section 17b-340 of the 2026
1831 supplement to the general statutes is repealed and the following is
1832 substituted in lieu thereof (*Effective July 1, 2026*):

1833 (3) For the fiscal year ending June 30, 1992, per diem maximum
1834 allowable costs for each cost component shall be as follows: For direct
1835 costs, the maximum shall be equal to one hundred forty per cent of the
1836 median allowable cost of that peer grouping; for indirect costs, the
1837 maximum shall be equal to one hundred thirty per cent of the state-wide
1838 median allowable cost; for fair rent, the amount shall be calculated
1839 utilizing the amount approved by the [Office of Health Care Access]
1840 Health Systems Planning Unit of the Department of Public Health
1841 pursuant to section 19a-638; for capital-related costs, there shall be no
1842 maximum; and for administrative and general costs, the maximum shall
1843 be equal to one hundred twenty-five per cent of the state-wide median
1844 allowable cost. For the fiscal year ending June 30, 1993, per diem
1845 maximum allowable costs for each cost component shall be as follows:

1846 For direct costs, the maximum shall be equal to one hundred forty per
1847 cent of the median allowable cost of that peer grouping; for indirect
1848 costs, the maximum shall be equal to one hundred twenty-five per cent
1849 of the state-wide median allowable cost; for fair rent, the amount shall
1850 be calculated utilizing the amount approved by the [Office of Health
1851 Care Access] Health Systems Planning Unit pursuant to section 19a-638;
1852 for capital-related costs, there shall be no maximum; and for
1853 administrative and general costs the maximum shall be equal to one
1854 hundred fifteen per cent of the state-wide median allowable cost. For
1855 the fiscal year ending June 30, 1994, per diem maximum allowable costs
1856 for each cost component shall be as follows: For direct costs, the
1857 maximum shall be equal to one hundred thirty-five per cent of the
1858 median allowable cost of that peer grouping; for indirect costs, the
1859 maximum shall be equal to one hundred twenty per cent of the state-
1860 wide median allowable cost; for fair rent, the amount shall be calculated
1861 utilizing the amount approved by the [Office of Health Care Access]
1862 Health Systems Planning Unit pursuant to section 19a-638; for capital-
1863 related costs, there shall be no maximum; and for administrative and
1864 general costs the maximum shall be equal to one hundred ten per cent
1865 of the state-wide median allowable cost. For the fiscal year ending June
1866 30, 1995, per diem maximum allowable costs for each cost component
1867 shall be as follows: For direct costs, the maximum shall be equal to one
1868 hundred thirty-five per cent of the median allowable cost of that peer
1869 grouping; for indirect costs, the maximum shall be equal to one hundred
1870 twenty per cent of the state-wide median allowable cost; for fair rent,
1871 the amount shall be calculated utilizing the amount approved by the
1872 [Office of Health Care Access] Health Systems Planning Unit pursuant
1873 to section 19a-638; for capital-related costs, there shall be no maximum;
1874 and for administrative and general costs the maximum shall be equal to
1875 one hundred five per cent of the state-wide median allowable cost. For
1876 the fiscal year ending June 30, 1996, and any succeeding fiscal year,
1877 except for the fiscal years ending June 30, 2000, and June 30, 2001, for
1878 facilities with an interim rate in one or both periods, per diem maximum
1879 allowable costs for each cost component shall be as follows: For direct
1880 costs, the maximum shall be equal to one hundred thirty-five per cent

1881 of the median allowable cost of that peer grouping; for indirect costs, the
1882 maximum shall be equal to one hundred fifteen per cent of the state-
1883 wide median allowable cost; for fair rent, the amount shall be calculated
1884 utilizing the amount approved pursuant to section 19a-638; for capital-
1885 related costs, there shall be no maximum; and for administrative and
1886 general costs the maximum shall be equal to the state-wide median
1887 allowable cost. For the fiscal years ending June 30, 2000, and June 30,
1888 2001, for facilities with an interim rate in one or both periods, per diem
1889 maximum allowable costs for each cost component shall be as follows:
1890 For direct costs, the maximum shall be equal to one hundred forty-five
1891 per cent of the median allowable cost of that peer grouping; for indirect
1892 costs, the maximum shall be equal to one hundred twenty-five per cent
1893 of the state-wide median allowable cost; for fair rent, the amount shall
1894 be calculated utilizing the amount approved pursuant to section 19a-
1895 638; for capital-related costs, there shall be no maximum; and for
1896 administrative and general costs, the maximum shall be equal to the
1897 state-wide median allowable cost and such medians shall be based upon
1898 the same cost year used to set rates for facilities with prospective rates.
1899 Costs in excess of the maximum amounts established under this
1900 subsection shall not be recognized as allowable costs, except that the
1901 Commissioner of Social Services (A) may allow costs in excess of
1902 maximum amounts for any facility with patient days covered by
1903 Medicare, including days requiring coinsurance, in excess of twelve per
1904 cent of annual patient days which also has patient days covered by
1905 Medicaid in excess of fifty per cent of annual patient days; (B) may
1906 establish a pilot program whereby costs in excess of maximum amounts
1907 shall be allowed for beds in a nursing home which has a managed care
1908 program and is affiliated with a hospital licensed under chapter 368v;
1909 and (C) may establish rates whereby allowable costs may exceed such
1910 maximum amounts for beds approved on or after July 1, 1991, which are
1911 restricted to use by patients with acquired immune deficiency syndrome
1912 or traumatic brain injury.

1913 Sec. 86. Section 17b-356 of the general statutes is repealed and the
1914 following is substituted in lieu thereof (*Effective July 1, 2026*):

1915 Any health care facility or institution, as defined in subsection (a) of
1916 section 19a-490, except a nursing home, rest home, residential care home
1917 or residential facility for persons with intellectual disability licensed
1918 pursuant to section 17a-227 and certified to participate in the Title XIX
1919 Medicaid program as an intermediate care facility for individuals with
1920 intellectual disabilities, proposing to expand its services by adding
1921 nursing home beds shall obtain the approval of the Commissioner of
1922 Social Services in accordance with the procedures established pursuant
1923 to sections 17b-352, 17b-353 and 17b-354 for a facility, as defined in
1924 section 17b-352, prior to obtaining the approval of the Health Systems
1925 Planning Unit of the [Office of Health Strategy] Department of Public
1926 Health pursuant to section 19a-639.

1927 Sec. 87. Section 19a-6q of the general statutes is repealed and the
1928 following is substituted in lieu thereof (*Effective July 1, 2026*):

1929 The Commissioner of Public Health, in consultation with the
1930 [Commissioner of Health Strategy and] local and regional health
1931 departments, shall, within available resources, develop a plan that is
1932 consistent with the Department of Public Health's Healthy Connecticut
1933 2020 health improvement plan and the state healthcare innovation plan
1934 developed pursuant to the State Innovation Model Initiative by the
1935 Centers for Medicare and Medicaid Services Innovation Center. The
1936 Commissioner of Public Health shall develop and implement such plan
1937 to: (1) Reduce the incidence of tobacco use, high blood pressure, health
1938 care associated infections, asthma, unintended pregnancy and diabetes;
1939 (2) improve chronic disease care coordination in the state; and (3) reduce
1940 the incidence and effects of chronic disease and improve outcomes for
1941 conditions associated with chronic disease in the state. The
1942 Commissioner of Public Health shall post such plan on the Department
1943 of Public Health's Internet web site.

1944 Sec. 88. Subsection (b) of section 19a-7 of the general statutes is
1945 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1946 *2026*):

1947 (b) For the purposes of establishing a state health plan as required by
1948 subsection (a) of this section and consistent with state and federal law
1949 on patient records, the department is entitled to access hospital
1950 discharge data, emergency room and ambulatory surgery encounter
1951 data, data on home health care agency client encounters and services,
1952 data from community health centers on client encounters and services
1953 and all data collected or compiled by the Health Systems Planning Unit
1954 of the [Office of Health Strategy] Department of Public Health pursuant
1955 to section 19a-613.

1956 Sec. 89. Subsection (l) of section 19a-7h of the general statutes is
1957 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1958 *2026*):

1959 (l) The commissioner shall, in consultation with the [Office of Health
1960 Strategy] Secretary of the Office of Policy and Management, adopt
1961 regulations, in accordance with the provisions of chapter 54, to facilitate
1962 interoperability between the immunization information system and the
1963 State-wide Health Information Exchange established pursuant to
1964 section 17b-59d. The commissioner may implement policies and
1965 procedures necessary to administer the provisions of this section while
1966 in the process of adopting such policies and procedures as regulations,
1967 provided the department posts such policies and procedures on the
1968 eRegulations System prior to adopting them. Policies and procedures
1969 implemented pursuant to this section shall be valid until regulations are
1970 adopted in accordance with the provisions of chapter 54.

1971 Sec. 90. Subsection (a) of section 19a-75a of the general statutes is
1972 repealed and the following is substituted in lieu thereof (*Effective July 1,*
1973 *2026*):

1974 (a) On or before January 1, 2023, the Department of Public Health
1975 shall establish and administer a child and adolescent psychiatrist grant
1976 program. The program shall provide incentive grants to employers of
1977 child and adolescent psychiatrists for recruiting and hiring new child
1978 and adolescent psychiatrists and retaining child and adolescent

1979 psychiatrists who are in their employ. The Commissioner of Public
1980 Health shall establish eligibility requirements, priority categories,
1981 funding limitations and the application process for the grant program.
1982 Such priority categories shall include, but need not be limited to,
1983 nonhospital employers. The commissioner [, in consultation with the
1984 Office of Health Strategy,] shall distribute incentive grant funds
1985 equitably with regard to the type of employer and location of such
1986 employer.

1987 Sec. 91. Section 19a-127k of the general statutes is repealed and the
1988 following is substituted in lieu thereof (*Effective July 1, 2026*):

1989 (a) As used in this section:

1990 (1) "Community benefit partners" means federal, state and municipal
1991 government entities and private sector entities, including, but not
1992 limited to, faith-based organizations, businesses, educational and
1993 academic organizations, health care organizations, health departments,
1994 philanthropic organizations, organizations specializing in housing
1995 justice, planning and land use organizations, public safety
1996 organizations, transportation organizations and tribal organizations,
1997 that, in partnership with hospitals, play an essential role with respect to
1998 the policy, system, program and financing solutions necessary to
1999 achieve community benefit program goals;

2000 (2) "Community benefit program" means any voluntary program or
2001 activity to promote preventive health care, protect health and safety,
2002 improve health equity and reduce health disparities, reduce the cost and
2003 economic burden of poor health and improve the health status for all
2004 populations within the geographic service areas of a hospital, regardless
2005 of whether a member of any such population is a patient of such
2006 hospital;

2007 (3) "Community benefit program reporting" means the community
2008 health needs assessment, implementation strategy and annual report
2009 submitted by a hospital to the Office of [Health Strategy] the Healthcare

2010 Advocate pursuant to the provisions of this section;

2011 (4) "Community health needs assessment" means a written
2012 assessment, as described in 26 CFR 1.501(r)-(3);

2013 (5) "Health disparities" means health differences that are closely
2014 linked with social or economic disadvantages that adversely affect one
2015 or more groups of people who have experienced greater systemic social
2016 or economic obstacles to health or a safe environment based on race or
2017 ethnicity, religion, socioeconomic status, gender, age, mental health,
2018 cognitive, sensory or physical disability, sexual orientation, gender
2019 identity, geographic location or other characteristics historically linked
2020 to discrimination or exclusion;

2021 (6) "Health equity" means that every person has a fair and just
2022 opportunity to be as healthy as possible, which encompasses removing
2023 obstacles to health, such as poverty, racism and the adverse
2024 consequences of poverty and racism, including, but not limited to, a lack
2025 of equitable opportunities, access to good jobs with fair pay, quality
2026 education and housing, safe environments and health care;

2027 (7) "Hospital" means a nonprofit entity licensed as a hospital
2028 pursuant to chapter 368v that is required to annually file Internal
2029 Revenue Service form 990. "Hospital" includes a for-profit entity
2030 licensed as an acute care general hospital;

2031 (8) "Implementation strategy" means a written plan, as described in
2032 26 CFR 1.501(r)-(3), that is adopted by an authorized body of a hospital
2033 and documents how such hospital intends to address the needs
2034 identified in the community health needs assessment; and

2035 (9) "Meaningful participation" means that (A) residents of a hospital's
2036 community, including, but not limited to, residents of such community
2037 that experience the greatest health disparities, have an appropriate
2038 opportunity to participate in such hospital's planning and decisions, (B)
2039 community participation influences a hospital's planning, and (C)
2040 participants receive information from a hospital summarizing how their

2041 input was or was not used by such hospital.

2042 (b) On and after January 1, 2023, each hospital shall submit
2043 community benefit program reporting to the Office of [Health Strategy]
2044 the Healthcare Advocate, or to a designee selected by the
2045 [Commissioner of Health Strategy] Healthcare Advocate, in the form
2046 and manner described in subsections (c) to (e), inclusive, of this section.

2047 (c) Each hospital shall submit its community health needs assessment
2048 to the Office of [Health Strategy] the Healthcare Advocate not later than
2049 thirty days after the date on which such assessment is made available to
2050 the public pursuant to 26 CFR 1.501(r)-(3)(b), provided the
2051 [Commissioner of Health Strategy, or the commissioner's] Healthcare
2052 Advocate, or the Healthcare Advocate's designee, may grant an
2053 extension of time to a hospital for the filing of such assessment. Such
2054 submission shall contain the following:

2055 (1) Consistent with the requirements set forth in 26 CFR 1.501(r)-
2056 (3)(b)(6)(i), and as included in a hospital's federal filing submitted to the
2057 Internal Revenue Service:

2058 (A) A definition of the community served by the hospital and a
2059 description of how the community was determined;

2060 (B) A description of the process and methods used to conduct the
2061 community health needs assessment;

2062 (C) A description of how the hospital solicited and took into account
2063 input received from persons who represent the broad interests of the
2064 community it serves;

2065 (D) A prioritized description of the significant health needs of the
2066 community identified through the community health needs assessment,
2067 and a description of the process and criteria used in identifying certain
2068 health needs as significant and prioritizing those significant health
2069 needs;

2070 (E) A description of the resources potentially available to address the
2071 significant health needs identified through the community health needs
2072 assessment;

2073 (F) An evaluation of the impact of any actions that were taken, since
2074 the hospital finished conducting its immediately preceding community
2075 health needs assessment, to address the significant health needs
2076 identified in the hospital's prior community health needs assessment;
2077 and

2078 (2) Additional documentation of the following:

2079 (A) The names of the individuals responsible for developing the
2080 community health needs assessment;

2081 (B) The demographics of the population within the geographic
2082 service area of the hospital and, to the extent feasible, a detailed
2083 description of the health disparities, health risks, insurance status,
2084 service utilization patterns and health care costs within such geographic
2085 service area;

2086 (C) A description of the health status and health disparities affecting
2087 the population within the geographic service area of the hospital,
2088 including, but not limited to, the health status and health disparities
2089 affecting a representative spectrum of age, racial and ethnic groups,
2090 incomes and medically underserved populations;

2091 (D) A description of the meaningful participation afforded to
2092 community benefit partners and diverse community members in
2093 assessing community health needs, priorities and target populations;

2094 (E) A description of the barriers to achieving or maintaining health
2095 and to accessing health care, including, but not limited to, social,
2096 economic and environmental barriers, lack of access to or availability of
2097 sources of health care coverage and services and a lack of access to and
2098 availability of prevention and health promotion services and support;

2099 (F) Recommendations regarding the role that the state and other
2100 community benefit partners could play in removing the barriers
2101 described in subparagraph (E) of this subdivision and enabling effective
2102 solutions; and

2103 (G) Any additional information, data or disclosures that the hospital
2104 voluntarily chooses to include as may be relevant to its community
2105 benefit program.

2106 (d) Each hospital shall submit its implementation strategy to the
2107 Office of [Health Strategy] the Healthcare Advocate not later than thirty
2108 days after the date on which such implementation strategy is adopted
2109 pursuant to 26 CFR 1.501(r)-(3)(c), provided the [Commissioner of
2110 Health Strategy, or the commissioner's] Healthcare Advocate, or the
2111 Healthcare Advocate's designee, may grant an extension to a hospital
2112 for the filing of such implementation strategy. Such submission shall
2113 contain the following:

2114 (1) Consistent with the requirements set forth in 26 CFR 1.501(r)-
2115 (3)(b)(6)(i), and as included in a hospital's federal filing submitted to the
2116 Internal Revenue Service:

2117 (A) With respect to each significant health need identified through
2118 the community health needs assessment, either (i) a description of how
2119 the hospital plans to address the health need, or (ii) identification of the
2120 health need as one which the hospital does not intend to address;

2121 (B) For significant health needs described in subparagraph (A)(i) of
2122 this subdivision, (i) a description of the actions that the hospital intends
2123 to take to address the health need and the anticipated impact of such
2124 actions, (ii) identification of the resources that the hospital plans to
2125 commit to address the health need, and (iii) a description of any planned
2126 collaboration between the hospital and other facilities or organizations
2127 to address the health need;

2128 (C) For significant health needs identified in subparagraph (A)(ii) of
2129 this subdivision, an explanation of why the hospital does not intend to

2130 address such health need; and

2131 (2) Additional documentation of the following:

2132 (A) The names of the individuals responsible for developing the
2133 implementation strategy;

2134 (B) A description of the meaningful participation afforded to
2135 community benefit partners and diverse community members;

2136 (C) A description of the community health needs and health
2137 disparities that were prioritized in developing the implementation
2138 strategy with consideration given to the most recent version of the state
2139 health plan prepared by the Department of Public Health pursuant to
2140 section 19a-7;

2141 (D) Reference-citing evidence, if available, that shows how the
2142 implementation strategy is intended to address the corresponding
2143 health need or reduction in health disparity;

2144 (E) A description of the planned methods for the ongoing evaluation
2145 of proposed actions and corresponding process or outcome measures
2146 intended for use in assessing progress or impact;

2147 (F) A description of how the hospital solicited commentary on the
2148 implementation strategy from the communities within such hospital's
2149 geographic service area and revisions to such strategy based on such
2150 commentary; and

2151 (G) Any other information that the hospital voluntarily chooses to
2152 include as may be relevant to its implementation strategy, including, but
2153 not limited to, data, disclosures, expected or planned resource outlay,
2154 investments or commitments, including, but not limited to, staff,
2155 financial or in-kind commitments.

2156 (e) On or before October 1, 2023, and annually thereafter, each
2157 hospital shall submit to the Office of [Health Strategy] the Healthcare
2158 Advocate a status report on such hospital's community benefit program,

2159 provided the [Commissioner of Health Strategy, or the commissioner's]
2160 Healthcare Advocate, or the Healthcare Advocate's designee, may grant
2161 an extension to a hospital for the filing of such report. Such report shall
2162 include the following:

2163 (1) A description of major updates regarding community health
2164 needs, priorities and target populations, if any;

2165 (2) A description of progress made regarding the hospital's actions in
2166 support of its implementation strategy;

2167 (3) A description of any major changes to the proposed
2168 implementation strategy and associated hospital actions; and

2169 (4) A description of financial resources and other resources allocated
2170 or expended that supported the actions taken in support of the hospital's
2171 implementation strategy.

2172 (f) Notwithstanding the provisions of section 19a-755a, and to the full
2173 extent permitted by 45 CFR 164.514(e), the Office of [Health Strategy]
2174 Policy and Management shall make data in the all-payer claims
2175 database available to hospitals for use in their community benefit
2176 programs and activities solely for the purposes of (1) preparing the
2177 hospital's community health needs assessment, (2) preparing and
2178 executing the hospital's implementation strategy, and (3) fulfilling
2179 community benefit program reporting, as described in subsections (c) to
2180 (e), inclusive, of this section. Any disclosure made by said office
2181 pursuant to this subsection of information other than health information
2182 shall be made in a manner to protect the confidentiality of such
2183 information as may be required by state or federal law.

2184 (g) A hospital shall not be responsible for limitations in its ability to
2185 fulfill community benefit program reporting requirements, as described
2186 in subsections (c) to (e), inclusive, of this section, if the all-payer claims
2187 database data is not provided to such hospital, as required by subsection
2188 (f) of this section.

2189 (h) [On or before April 1, 2024, and annually thereafter, the
2190 Commissioner of Health Strategy] Not later than April first, annually,
2191 the Healthcare Advocate shall develop a summary and analysis of the
2192 community benefit program reporting submitted by hospitals under
2193 this section during the previous calendar year and post such summary
2194 and analysis on its Internet web site and solicit stakeholder input
2195 through a public comment period. The Office of [Health Strategy] the
2196 Healthcare Advocate shall use such reporting and stakeholder input to:

2197 (1) Identify additional stakeholders that may be engaged to address
2198 identified community health needs, including, but not limited to,
2199 federal, state and municipal entities, nonhospital private sector health
2200 care providers and private sector entities that are not health care
2201 providers, including community-based organizations, insurers and
2202 charitable organizations;

2203 (2) Determine how each identified stakeholder could assist in
2204 addressing identified community health needs or augmenting solutions
2205 or approaches reported in the implementation strategies;

2206 (3) Determine whether to make recommendations to the Department
2207 of Public Health in the development of its state health plan; and

2208 (4) Inform the state-wide health care facilities and services plan
2209 established pursuant to section 19a-634.

2210 (i) Each for-profit entity licensed as an acute care general hospital
2211 shall submit community benefit program reporting consistent with the
2212 reporting schedules of subsections (c) to (e), inclusive, of this section,
2213 and reasonably similar to what would be included on such hospital's
2214 federal filings to the Internal Revenue Service, where applicable.

2215 Sec. 92. Section 19a-486 of the general statutes is repealed and the
2216 following is substituted in lieu thereof (*Effective July 1, 2026*):

2217 For purposes of sections 19a-486 to 19a-486h, inclusive:

2218 (1) "Nonprofit hospital" means a nonprofit entity licensed as a
2219 hospital pursuant to this chapter and any entity affiliated with such a
2220 hospital through governance or membership, including, but not limited
2221 to, a holding company or subsidiary.

2222 (2) "Purchaser" means a person acquiring any assets of a nonprofit
2223 hospital through a transfer.

2224 (3) "Person" means any individual, firm, partnership, corporation,
2225 limited liability company, association or other entity.

2226 (4) "Transfer" means to sell, transfer, lease, exchange, option, convey,
2227 give or otherwise dispose of or transfer control over, including, but not
2228 limited to, transfer by way of merger or joint venture not in the ordinary
2229 course of business.

2230 (5) "Control" has the meaning assigned to it in section 36b-41.

2231 (6) "Commissioner" means the Commissioner of [Health Strategy]
2232 Public Health, or the commissioner's designee.

2233 Sec. 93. Section 19a-486g of the general statutes is repealed and the
2234 following is substituted in lieu thereof (*Effective July 1, 2026*):

2235 The Commissioner of Public Health shall refuse to issue a license to,
2236 or if issued shall suspend or revoke the license of, a hospital if the
2237 commissioner finds, after a hearing and opportunity to be heard, that:

2238 (1) There was a transaction described in section 19a-486a that
2239 occurred without the commissioner's approval, [of the Commissioner of
2240 Health Strategy,] if such approval was required by sections 19a-486 to
2241 19a-486h, inclusive;

2242 (2) There was a transaction described in section 19a-486a without the
2243 approval of the Attorney General, if such approval was required by
2244 sections 19a-486 to 19a-486h, inclusive, and the Attorney General
2245 certifies to the [Commissioner of Health Strategy] commissioner that
2246 such transaction involved a material amount of the nonprofit hospital's

2247 assets or operations or a change in control of operations; or

2248 (3) The hospital is not complying with the terms of an agreement
2249 approved by the Attorney General and [Commissioner of Health
2250 Strategy] commissioner pursuant to sections 19a-486 to 19a-486h,
2251 inclusive.

2252 Sec. 94. Section 19a-486h of the general statutes is repealed and the
2253 following is substituted in lieu thereof (*Effective July 1, 2026*):

2254 Nothing in sections 19a-486 to 19a-486h, inclusive, shall be construed
2255 to limit: (1) The common law or statutory authority of the Attorney
2256 General; (2) the statutory authority of the Commissioner of Public
2257 Health including, but not limited to, licensing [; (3) the statutory
2258 authority of the Commissioner of Health Strategy, including, but not
2259 limited to, certificate of need authority; or (4)] and certificate of need
2260 authority; or (3) the application of the doctrine of cy pres or
2261 approximation.

2262 Sec. 95. Subsections (d) to (i), inclusive, of section 19a-486i of the
2263 general statutes are repealed and the following is substituted in lieu
2264 thereof (*Effective July 1, 2026*):

2265 (d) (1) The written notice required under subsection (c) of this section
2266 shall identify each party to the transaction and describe the material
2267 change as of the date of such notice to the business or corporate structure
2268 of the group practice, including: (A) A description of the nature of the
2269 proposed relationship among the parties to the proposed transaction;
2270 (B) the names and specialties of each physician that is a member of the
2271 group practice that is the subject of the proposed transaction and who
2272 will practice medicine with the resulting group practice, hospital,
2273 hospital system, captive professional entity, medical foundation or
2274 other entity organized by, controlled by, or otherwise affiliated with
2275 such hospital or hospital system following the effective date of the
2276 transaction; (C) the names of the business entities that are to provide
2277 services following the effective date of the transaction; (D) the address

2278 for each location where such services are to be provided; (E) a
2279 description of the services to be provided at each such location; and (F)
2280 the primary service area to be served by each such location.

2281 (2) Not later than thirty days after the effective date of any transaction
2282 described in subsection (c) of this section, the parties to the transaction
2283 shall submit written notice to the Commissioner of [Health Strategy]
2284 Public Health. Such written notice shall include, but need not be limited
2285 to, the same information described in subdivision (1) of this subsection.
2286 The commissioner shall post a link to such notice on the [Office of Health
2287 Strategy's] Department of Public Health's Internet web site.

2288 (e) Not less than thirty days prior to the effective date of any
2289 transaction that results in an affiliation between one hospital or hospital
2290 system and another hospital or hospital system, the parties to the
2291 affiliation shall submit written notice to the Attorney General of such
2292 affiliation. Such written notice shall identify each party to the affiliation
2293 and describe the affiliation as of the date of such notice, including: (1) A
2294 description of the nature of the proposed relationship among the parties
2295 to the affiliation; (2) the names of the business entities that are to provide
2296 services following the effective date of the affiliation; (3) the address for
2297 each location where such services are to be provided; (4) a description
2298 of the services to be provided at each such location; and (5) the primary
2299 service area to be served by each such location.

2300 (f) Written information submitted to the Attorney General pursuant
2301 to subsections (b) to (e), inclusive, of this section shall be maintained and
2302 used by the Attorney General in the same manner as provided in section
2303 35-42.

2304 (g) Not later than January [15, 2018, and] fifteenth annually,
2305 [thereafter,] each hospital and hospital system shall file with the
2306 Attorney General and the Commissioner of [Health Strategy] Public
2307 Health a written report describing the activities of the group practices
2308 owned or affiliated with such hospital or hospital system. Such report
2309 shall include, for each such group practice: (1) A description of the

2310 nature of the relationship between the hospital or hospital system and
2311 the group practice; (2) the names and specialties of each physician
2312 practicing medicine with the group practice; (3) the names of the
2313 business entities that provide services as part of the group practice and
2314 the address for each location where such services are provided; (4) a
2315 description of the services provided at each such location; and (5) the
2316 primary service area served by each such location.

2317 (h) Not later than January [15, 2018, and] fifteenth annually,
2318 [thereafter,] each group practice comprised of thirty or more physicians
2319 that is not the subject of a report filed under subsection (g) of this section
2320 shall file with the Attorney General and the Commissioner of [Health
2321 Strategy] Public Health a written report concerning the group practice.
2322 Such report shall include, for each such group practice: (1) The names
2323 and specialties of each physician practicing medicine with the group
2324 practice; (2) the names of the business entities that provide services as
2325 part of the group practice and the address for each location where such
2326 services are provided; (3) a description of the services provided at each
2327 such location; and (4) the primary service area served by each such
2328 location.

2329 (i) Not later than January [15, 2018, and] fifteenth annually,
2330 [thereafter,] each hospital and hospital system shall file with the
2331 Attorney General and the Commissioner of [Health Strategy] Public
2332 Health a written report describing each affiliation with another hospital
2333 or hospital system. Such report shall include: (1) The name and address
2334 of each party to the affiliation; (2) a description of the nature of the
2335 relationship among the parties to the affiliation; (3) the names of the
2336 business entities that provide services as part of the affiliation and the
2337 address for each location where such services are provided; (4) a
2338 description of the services provided at each such location; and (5) the
2339 primary service area served by each such location.

2340 Sec. 96. Section 19a-486j of the general statutes is repealed and the
2341 following is substituted in lieu thereof (*Effective July 1, 2026*):

2342 (a) On or before October 31, [2024] 2026, and semiannually thereafter,
2343 each hospital, as defined in section 12-263p, shall submit a semiannual
2344 report to the Commissioner of [Health Strategy] Social Services that
2345 identifies, for each of the two prior calendar quarters, (1) the number of
2346 days of cash on hand, or days cash and cash equivalents otherwise
2347 available to the hospital, and (2) the dollar amount of (A) invoices that
2348 are at least ninety days past due in the reporting period, (B) utility bills
2349 that are at least ninety days past due in the reporting period, (C) fees,
2350 taxes or assessments owed to public entities that are at least ninety days
2351 past due in the reporting period, and (D) unpaid employee health
2352 insurance premiums, including unpaid contributions, claims or other
2353 obligations supporting employees under a self-funded insurance plan
2354 or fully insured plan, that are at least ninety days past due in the
2355 reporting period. The commissioner shall develop a uniform template,
2356 including, but not limited to, definitions of terms used in such template,
2357 to be used by hospitals for the purposes of complying with the
2358 provisions of this subsection and post such template on the [Office of
2359 Health Strategy's] Department of Social Services' Internet web site. A
2360 hospital may request an extension of time to comply with the
2361 requirements of this subsection in a form and manner prescribed by the
2362 commissioner. The commissioner may grant such request for good
2363 cause, as determined by the commissioner. Such template shall be based
2364 on generally accepted accounting principles as prescribed by the
2365 Financial Accounting Standards Board.

2366 (b) If a hospital submits a report pursuant to the provisions of
2367 subsection (a) of this section reflecting two consecutive quarters of sixty
2368 days or less of days of cash on hand, or days cash and cash equivalents
2369 otherwise available to the hospital, the commissioner may require the
2370 hospital to provide the [Office of Health Strategy] Department of Social
2371 Services with additional information that the commissioner deems
2372 relevant to understanding the financial health of the hospital.

2373 (c) If a hospital submits a report pursuant to the provisions of
2374 subsection (a) of this section reflecting two consecutive quarters of forty-

2375 five days or less of cash on hand, or days cash and cash equivalents
2376 otherwise available to the hospital, the [Office of Health Strategy]
2377 Department of Social Services shall contact the hospital to offer
2378 assistance.

2379 (d) If a hospital has multiple consecutive quarters of one hundred or
2380 more days of cash on hand, or days cash and cash equivalents otherwise
2381 available to the hospital, the commissioner may waive one of the
2382 hospital's two semiannual reports required pursuant to the provisions
2383 of subsection (a) of this section.

2384 Sec. 97. Subsection (b) of section 19a-490ii of the 2026 supplement to
2385 the general statutes is repealed and the following is substituted in lieu
2386 thereof (*Effective July 1, 2026*):

2387 (b) Not later than March [1, 2025, and] first annually, [thereafter] until
2388 March 1, 2029, each hospital that conducts an analysis pursuant to
2389 subsection (a) of this section shall submit a report, in accordance with
2390 the provisions of section 11-4a, to the joint standing committee of the
2391 General Assembly having cognizance of matters relating to public
2392 health and, not later than March [1, 2026, and] first annually [thereafter]
2393 until March 1, 2029, shall also submit such report to the
2394 [Commissioners] Commissioner of Public Health [and Health Strategy]
2395 and the Healthcare Advocate, regarding its findings and any
2396 recommendations for achieving the goals described in subparagraphs
2397 (A) to (C), inclusive, of subdivision (4) of subsection (a) of this section.

2398 Sec. 98. Subsections (b) and (c) of section 19a-493b of the general
2399 statutes are repealed and the following is substituted in lieu thereof
2400 (*Effective July 1, 2026*):

2401 (b) No entity, individual, firm, partnership, corporation, limited
2402 liability company or association, other than a hospital, shall individually
2403 or jointly establish or operate an outpatient surgical facility in this state
2404 without complying with chapter 368z, except as otherwise provided by
2405 this section, and obtaining a license within the time specified in this

2406 subsection from the Department of Public Health for such facility
2407 pursuant to the provisions of this chapter, unless such entity, individual,
2408 firm, partnership, corporation, limited liability company or association:
2409 (1) Provides to the Health Systems Planning Unit of the [Office of Health
2410 Strategy] Department of Public Health satisfactory evidence that it was
2411 in operation on or before July 1, 2003, or (2) obtained, on or before July
2412 1, 2003, from the Office of Health Care Access, a determination that a
2413 certificate of need is not required. An entity, individual, firm,
2414 partnership, corporation, limited liability company or association
2415 otherwise in compliance with this section may operate an outpatient
2416 surgical facility without a license through March 30, 2007, and shall have
2417 until March 30, 2007, to obtain a license from the Department of Public
2418 Health.

2419 (c) Notwithstanding the provisions of this section, no outpatient
2420 surgical facility shall be required to comply with section 19a-631, 19a-
2421 632, 19a-644, 19a-645, 19a-646, 19a-649, 19a-664 to 19a-666, inclusive,
2422 19a-673 to 19a-676, inclusive, 19a-678, 19a-681 or 19a-683. Each
2423 outpatient surgical facility shall continue to be subject to the obligations
2424 and requirements applicable to such facility, including, but not limited
2425 to, any applicable provision of this chapter and those provisions of
2426 chapter 368z not specified in this subsection, except that a request for
2427 permission to undertake a transfer or change of ownership or control
2428 shall not be required pursuant to subsection (a) of section 19a-638 if the
2429 Health Systems Planning Unit of the [Office of Health Strategy]
2430 Department of Public Health determines that the following conditions
2431 are satisfied: (1) Prior to any such transfer or change of ownership or
2432 control, the outpatient surgical facility shall be owned and controlled
2433 exclusively by persons licensed pursuant to section 20-13 or chapter 375,
2434 either directly or through a limited liability company, formed pursuant
2435 to chapter 613, a corporation, formed pursuant to chapters 601 and 602,
2436 or a limited liability partnership, formed pursuant to chapter 614, that
2437 is exclusively owned by persons licensed pursuant to section 20-13 or
2438 chapter 375, or is under the interim control of an estate executor or
2439 conservator pending transfer of an ownership interest or control to a

2440 person licensed under section 20-13 or chapter 375, and (2) after any
2441 such transfer or change of ownership or control, persons licensed
2442 pursuant to section 20-13 or chapter 375, a limited liability company,
2443 formed pursuant to chapter 613, a corporation, formed pursuant to
2444 chapters 601 and 602, or a limited liability partnership, formed pursuant
2445 to chapter 614, that is exclusively owned by persons licensed pursuant
2446 to section 20-13 or chapter 375, shall own and control no less than a sixty
2447 per cent interest in the outpatient surgical facility.

2448 Sec. 99. Subsection (a) of section 19a-507 of the general statutes is
2449 repealed and the following is substituted in lieu thereof (*Effective July 1,*
2450 *2026*):

2451 (a) Notwithstanding the provisions of chapter 368z, New Horizons,
2452 Inc., a nonprofit, nonsectarian organization, or a subsidiary
2453 organization controlled by New Horizons, Inc., is authorized to
2454 construct and operate an independent living facility for severely
2455 physically disabled adults, in the town of Farmington, provided such
2456 facility shall be constructed in accordance with applicable building
2457 codes. The Farmington Housing Authority, or any issuer acting on
2458 behalf of said authority, subject to the provisions of this section, may
2459 issue tax-exempt revenue bonds on a competitive or negotiated basis for
2460 the purpose of providing construction and permanent mortgage
2461 financing for the facility in accordance with Section 103 of the Internal
2462 Revenue Code. Prior to the issuance of such bonds, plans for the
2463 construction of the facility shall be submitted to and approved by the
2464 Health Systems Planning Unit of the [Office of Health Strategy]
2465 Department of Public Health. The unit shall approve or disapprove such
2466 plans within thirty days of receipt thereof. If the plans are disapproved
2467 they may be resubmitted. Failure of the unit to act on the plans within
2468 such thirty-day period shall be deemed approval thereof. The payments
2469 to residents of the facility who are eligible for assistance under the state
2470 supplement program for room and board and necessary services, shall
2471 be determined annually to be effective July first of each year. Such
2472 payments shall be determined on a basis of a reasonable payment for

2473 necessary services, which basis shall take into account as a factor the
2474 costs of providing those services and such other factors as the
2475 commissioner deems reasonable, including anticipated fluctuations in
2476 the cost of providing services. Such payments shall be calculated in
2477 accordance with the manner in which rates are calculated pursuant to
2478 subsection (i) of section 17b-340 and the cost-related reimbursement
2479 system pursuant to said section except that efficiency incentives shall
2480 not be granted. The commissioner may adjust such rates to account for
2481 the availability of personal care services for residents under the
2482 Medicaid program. The commissioner shall, upon submission of a
2483 request, allow actual debt service, comprised of principal and interest,
2484 in excess of property costs allowed pursuant to section 17-313b-5 of the
2485 regulations of Connecticut state agencies, provided such debt service
2486 terms and amounts are reasonable in relation to the useful life and the
2487 base value of the property. The cost basis for such payment shall be
2488 subject to audit, and a recomputation of the rate shall be made based
2489 upon such audit. The facility shall report on a fiscal year ending on the
2490 thirtieth day of September on forms provided by the commissioner. The
2491 required report shall be received by the commissioner no later than
2492 December thirty-first of each year. The Department of Social Services
2493 may use its existing utilization review procedures to monitor utilization
2494 of the facility. If the facility is aggrieved by any decision of the
2495 commissioner, the facility may, within ten days, after written notice
2496 thereof from the commissioner, obtain by written request to the
2497 commissioner, a hearing on all items of aggrievement. If the facility is
2498 aggrieved by the decision of the commissioner after such hearing, the
2499 facility may appeal to the Superior Court in accordance with the
2500 provisions of section 4-183.

2501 Sec. 100. Subsections (d) to (m), inclusive, of section 19a-508c of the
2502 2026 supplement to the general statutes are repealed and the following
2503 is substituted in lieu thereof (*Effective July 1, 2026*):

2504 (d) Each initial billing statement that includes a facility fee shall: (1)
2505 Clearly identify the fee as a facility fee that is billed in addition to, or

2506 separately from, any professional fee billed by the provider; (2) provide
2507 the corresponding Medicare facility fee reimbursement rate for the same
2508 service as a comparison or, if there is no corresponding Medicare facility
2509 fee for such service, (A) the approximate amount Medicare would have
2510 paid the hospital for the facility fee on the billing statement, or (B) the
2511 percentage of the hospital's charges that Medicare would have paid the
2512 hospital for the facility fee; (3) include a statement that the facility fee is
2513 intended to cover the hospital's or health system's operational expenses;
2514 (4) inform the patient that the patient's financial liability may have been
2515 less if the services had been provided at a facility not owned or operated
2516 by the hospital or health system; and (5) include written notice of the
2517 patient's right to request a reduction in the facility fee or any other
2518 portion of the bill and a telephone number that the patient may use to
2519 request such a reduction without regard to whether such patient
2520 qualifies for, or is likely to be granted, any reduction. Not later than
2521 October 15, 2022, and annually thereafter, each hospital, health system
2522 and hospital-based facility shall submit to the Health Systems Planning
2523 Unit of the [Office of Health Strategy] Department of Public Health,
2524 established pursuant to section 19a-612, a sample of a billing statement
2525 issued by such hospital, health system or hospital-based facility that
2526 complies with the provisions of this subsection and [which] represents
2527 the format of billing statements received by patients. Such billing
2528 statement shall not contain patient identifying information.

2529 (e) The written notice described in subsections (b) to (d), inclusive,
2530 and (h) to (j), inclusive, of this section shall be in plain language and in
2531 a form that may be reasonably understood by a patient who does not
2532 possess special knowledge regarding hospital or health system facility
2533 fee charges. On and after October 1, 2022, such notices shall include tag
2534 lines in at least the top fifteen languages spoken in the state indicating
2535 that the notice is available in each of those top fifteen languages. The
2536 fifteen languages shall be either the languages in the list published by
2537 the Department of Health and Human Services in connection with
2538 section 1557 of the Patient Protection and Affordable Care Act, P.L. 111-
2539 148, or, as determined by the hospital or health system, the top fifteen

2540 languages in the geographic area of the hospital-based facility.

2541 (f) (1) For nonemergency care, if a patient's appointment is scheduled
2542 to occur ten or more days after the appointment is made, such written
2543 notice shall be sent to the patient by first class mail, encrypted electronic
2544 mail or a secure patient Internet portal not less than three days after the
2545 appointment is made. If an appointment is scheduled to occur less than
2546 ten days after the appointment is made or if the patient arrives without
2547 an appointment, such notice shall be hand-delivered to the patient when
2548 the patient arrives at the hospital-based facility.

2549 (2) For emergency care, such written notice shall be provided to the
2550 patient as soon as practicable after the patient is stabilized in accordance
2551 with the federal Emergency Medical Treatment and Active Labor Act,
2552 42 USC 1395dd, as amended from time to time, or is determined not to
2553 have an emergency medical condition and before the patient leaves the
2554 hospital-based facility. If the patient is unconscious, under great duress
2555 or for any other reason unable to read the notice and understand and
2556 act on his or her rights, the notice shall be provided to the patient's
2557 representative as soon as practicable.

2558 (g) Subsections (b) to (f), inclusive, and (l) of this section shall not
2559 apply if a patient is insured by Medicare or Medicaid or is receiving
2560 services under a workers' compensation plan established to provide
2561 medical services pursuant to chapter 568.

2562 (h) A hospital-based facility shall prominently display written notice
2563 in locations that are readily accessible to and visible by patients,
2564 including patient waiting or appointment check-in areas, stating: (1)
2565 That the hospital-based facility is part of a hospital or health system, (2)
2566 the name of the hospital or health system, and (3) that if the hospital-
2567 based facility charges a facility fee, the patient may incur a financial
2568 liability greater than the patient would incur if the hospital-based
2569 facility was not hospital-based. On and after October 1, 2022, such
2570 notices shall include tag lines in at least the top fifteen languages spoken
2571 in the state indicating that the notice is available in each of those top

2572 fifteen languages. The fifteen languages shall be either the languages in
2573 the list published by the Department of Health and Human Services in
2574 connection with section 1557 of the Patient Protection and Affordable
2575 Care Act, P.L. 111-148, or, as determined by the hospital or health
2576 system, the top fifteen languages in the geographic area of the hospital-
2577 based facility. Not later than October 1, 2022, and annually thereafter,
2578 each hospital-based facility shall submit a copy of the written notice
2579 required by this subsection to the Health Systems Planning Unit of the
2580 [Office of Health Strategy] Department of Public Health.

2581 (i) A hospital-based facility shall clearly hold itself out to the public
2582 and payers as being hospital-based, including, at a minimum, by stating
2583 the name of the hospital or health system in its signage, marketing
2584 materials, Internet web sites and stationery.

2585 (j) A hospital-based facility shall, when scheduling services for which
2586 a facility fee may be charged, inform the patient (1) that the hospital-
2587 based facility is part of a hospital or health system, (2) of the name of the
2588 hospital or health system, (3) that the hospital or health system may
2589 charge a facility fee in addition to and separate from the professional fee
2590 charged by the provider, and (4) of the telephone number the patient
2591 may call for additional information regarding such patient's potential
2592 financial liability.

2593 (k) (1) If any transaction described in subsection (c) of section 19a-
2594 486i results in the establishment of a hospital-based facility at which
2595 facility fees may be billed, the hospital or health system, that is the
2596 purchaser in such transaction shall, not later than thirty days after such
2597 transaction, provide written notice, by first class mail, of the transaction
2598 to each patient served within the three years preceding the date of the
2599 transaction by the health care facility that has been purchased as part of
2600 such transaction.

2601 (2) Such notice shall include the following information:

2602 (A) A statement that the health care facility is now a hospital-based

2603 facility and is part of a hospital or health system, the health care facility's
2604 full legal and business name and the date of such facility's acquisition
2605 by a hospital or health system;

2606 (B) The name, business address and phone number of the hospital or
2607 health system that is the purchaser of the health care facility;

2608 (C) A statement that the hospital-based facility bills, or is likely to bill,
2609 patients a facility fee that may be in addition to, and separate from, any
2610 professional fee billed by a health care provider at the hospital-based
2611 facility;

2612 (D) (i) A statement that the patient's actual financial liability will
2613 depend on the professional medical services actually provided to the
2614 patient, and (ii) an explanation that the patient may incur financial
2615 liability that is greater than the patient would incur if the hospital-based
2616 facility were not a hospital-based facility;

2617 (E) The estimated amount or range of amounts the hospital-based
2618 facility may bill for a facility fee or an example of the average facility fee
2619 billed at such hospital-based facility for the most common services
2620 provided at such hospital-based facility; and

2621 (F) A statement that, prior to seeking services at such hospital-based
2622 facility, a patient covered by a health insurance policy should contact
2623 the patient's health insurer for additional information regarding the
2624 hospital-based facility fees, including the patient's potential financial
2625 liability, if any, for such fees.

2626 (3) A copy of the written notice provided to patients in accordance
2627 with this subsection shall be filed with the Health Systems Planning
2628 Unit of the [Office of Health Strategy] Department of Public Health,
2629 established under section 19a-612. Said unit shall post a link to such
2630 notice on its Internet web site.

2631 (4) A hospital, health system or hospital-based facility shall not collect
2632 a facility fee for services provided at a hospital-based facility that is

2633 subject to the provisions of this subsection from the date of the
2634 transaction until at least thirty days after the written notice required
2635 pursuant to this subsection is mailed to the patient or a copy of such
2636 notice is filed with the Health Systems Planning Unit of the [Office of
2637 Health Strategy] Department of Public Health, whichever is later. A
2638 violation of this subsection shall be considered an unfair trade practice
2639 pursuant to section 42-110b.

2640 (5) Not later than July [1, 2023, and] first annually, [thereafter,] each
2641 hospital-based facility that was the subject of a transaction, as described
2642 in subsection (c) of section 19a-486i, during the preceding calendar year
2643 shall report to the Health Systems Planning Unit of the [Office of Health
2644 Strategy] Department of Public Health the number of patients served by
2645 such hospital-based facility in the preceding three years.

2646 (l) (1) Notwithstanding the provisions of this section, no hospital,
2647 health system or hospital-based facility shall collect a facility fee for (A)
2648 outpatient health care services that use a current procedural
2649 terminology evaluation and management (CPT E/M) code or
2650 assessment and management (CPT A/M) code and are provided at a
2651 hospital-based facility located off-site from a hospital campus, or (B)
2652 outpatient health care services provided at a hospital-based facility
2653 located off-site from a hospital campus received by a patient who is
2654 uninsured of more than the Medicare rate.

2655 (2) Notwithstanding the provisions of this section, on and after July
2656 1, 2024, no hospital or health system shall collect a facility fee for
2657 outpatient health care services that use a current procedural
2658 terminology evaluation and management (CPT E/M) code or
2659 assessment and management (CPT A/M) code and are provided on the
2660 hospital campus. The provisions of this subdivision shall not apply to
2661 (A) an emergency department located on a hospital campus, or (B)
2662 observation stays on a hospital campus and (CPT E/M) and (CPT A/M)
2663 codes when billed for the following services: (i) Wound care, (ii)
2664 orthopedics, (iii) anticoagulation, (iv) oncology, (v) obstetrics, and (vi)
2665 solid organ transplant.

2666 (3) Notwithstanding the provisions of subdivisions (1) and (2) of this
2667 subsection, in circumstances when an insurance contract that is in effect
2668 on July 1, 2016, provides reimbursement for facility fees prohibited
2669 under the provisions of subdivision (1) of this subsection, and in
2670 circumstances when an insurance contract that is in effect on July 1,
2671 2024, provides reimbursement for facility fees prohibited under the
2672 provisions of subdivision (2) of this subsection, a hospital or health
2673 system may continue to collect reimbursement from the health insurer
2674 for such facility fees until the applicable date of expiration, renewal or
2675 amendment of such contract, whichever such date is the earliest.

2676 (4) The provisions of this subsection shall not apply to a freestanding
2677 emergency department. As used in this subdivision, "freestanding
2678 emergency department" means a freestanding facility that (A) is
2679 structurally separate and distinct from a hospital, (B) provides
2680 emergency care, (C) is a department of a hospital licensed under chapter
2681 368v, and (D) has been issued a certificate of need to operate as a
2682 freestanding emergency department pursuant to chapter 368z.

2683 (5) (A) On and after July 1, 2024, if the Commissioner of [Health
2684 Strategy] Public Health receives information and has a reasonable belief,
2685 after evaluating such information, that any hospital, health system or
2686 hospital-based facility charged facility fees, other than through isolated
2687 clerical or electronic billing errors, in violation of any provision of this
2688 section, or rule or regulation adopted thereunder, such hospital, health
2689 system or hospital-based facility shall be subject to a civil penalty of up
2690 to one thousand dollars. The commissioner may issue a notice of
2691 violation and civil penalty by first class mail or personal service. Such
2692 notice shall include: (i) A reference to the section of the general statutes,
2693 rule or section of the regulations of Connecticut state agencies believed
2694 or alleged to have been violated; (ii) a short and plain language
2695 statement of the matters asserted or charged; (iii) a description of the
2696 activity to cease; (iv) a statement of the amount of the civil penalty or
2697 penalties that may be imposed; (v) a statement concerning the right to a
2698 hearing; and (vi) a statement that such hospital, health system or

2699 hospital-based facility may, not later than ten business days after receipt
2700 of such notice, make a request for a hearing on the matters asserted.

2701 (B) The hospital, health system or hospital-based facility to whom
2702 such notice is provided pursuant to subparagraph (A) of this
2703 subdivision may, not later than ten business days after receipt of such
2704 notice, make written application to the [Office of Health Strategy]
2705 Department of Public Health to request a hearing to demonstrate that
2706 such violation did not occur. The failure to make a timely request for a
2707 hearing shall result in the issuance of a cease and desist order or civil
2708 penalty. All hearings held under this subsection shall be conducted in
2709 accordance with the provisions of chapter 54.

2710 (C) Following any hearing before the [Office of Health Strategy]
2711 Department of Public Health pursuant to this subdivision, if said [office]
2712 department finds, by a preponderance of the evidence, that such
2713 hospital, health system or hospital-based facility violated or is violating
2714 any provision of this subsection, any rule or regulation adopted
2715 thereunder or any order issued by said [office] department, said [office]
2716 department shall issue a final cease and desist order in addition to any
2717 civil penalty said [office] department imposes.

2718 (6) A violation of this subsection shall be considered an unfair trade
2719 practice pursuant to section 42-110b.

2720 (m) (1) Each hospital and health system shall report not later than
2721 October 1, 2023, and thereafter not later than July 1, 2024, and annually
2722 thereafter, to the Commissioner of [Health Strategy] Public Health, on a
2723 form prescribed by the commissioner, concerning facility fees charged
2724 or billed during the preceding calendar year. Such report shall include,
2725 but need not be limited to, (A) the name and address of each facility
2726 owned or operated by the hospital or health system that provides
2727 services for which a facility fee is charged or billed, and an indication as
2728 to whether each facility is located on or outside of the hospital or health
2729 system campus, (B) the number of patient visits at each such facility for
2730 which a facility fee was charged or billed, (C) the number, total amount

2731 and range of allowable facility fees paid at each such facility
2732 disaggregated by payer mix, (D) for each facility, the total amount of
2733 facility fees charged and the total amount of revenue received by the
2734 hospital or health system derived from facility fees, (E) the total amount
2735 of facility fees charged and the total amount of revenue received by the
2736 hospital or health system from all facilities derived from facility fees, (F)
2737 a description of the ten procedures or services that generated the
2738 greatest amount of facility fee gross revenue, disaggregated by current
2739 procedural terminology (CPT) category code for each such procedure or
2740 service and, for each such procedure or service, patient volume and the
2741 total amount of gross and net revenue received by the hospital or health
2742 system derived from facility fees, disaggregated by on-campus and off-
2743 campus, and (G) the top ten procedures or services for which facility
2744 fees are charged based on patient volume and the gross and net revenue
2745 received by the hospital or health system for each such procedure or
2746 service, disaggregated by on-campus and off-campus. For purposes of
2747 this subsection, "facility" means a hospital-based facility that is located
2748 on a hospital campus or outside a hospital campus.

2749 (2) The commissioner shall publish the information reported
2750 pursuant to subdivision (1) of this subsection, or post a link to such
2751 information, on the Internet web site of the [Office of Health Strategy]
2752 Department of Public Health.

2753 Sec. 101. Subsection (c) of section 19a-509b of the general statutes is
2754 repealed and the following is substituted in lieu thereof (*Effective July 1,*
2755 *2026*):

2756 (c) Each hospital that holds or administers one or more hospital bed
2757 funds shall make available in a place and manner allowing individual
2758 members of the public to easily obtain it, a one-page summary in
2759 English and Spanish describing hospital bed funds and how to apply for
2760 them. The summary shall also describe any other policies regarding the
2761 provision of charity care and reduced cost services for the indigent as
2762 reported by the hospital to the Health Systems Planning Unit of the
2763 [Office of Health Strategy] Department of Public Health pursuant to

2764 section 19a-649 and shall clearly distinguish hospital bed funds from
2765 other sources of financial assistance. The summary shall include
2766 notification that the patient is entitled to reapply upon rejection, and
2767 that additional funds may become available on an annual basis. The
2768 summary shall be available in the patient admissions office, emergency
2769 room, social services department and patient accounts or billing office,
2770 and from any collection agent. If during the admission process or during
2771 its review of the financial resources of the patient, the hospital
2772 reasonably believes the patient will have limited funds to pay for any
2773 portion of the patient's hospitalization not covered by insurance, the
2774 hospital shall provide the summary to each such patient.

2775 Sec. 102. Section 19a-612 of the general statutes is repealed and the
2776 following is substituted in lieu thereof (*Effective July 1, 2026*):

2777 [(a)] There is established, within the [Office of Health Strategy,
2778 established under section 19a-754a] Department of Public Health, a unit
2779 to be known as the Health Systems Planning Unit [. The unit, under]
2780 that shall be under the direction of the Commissioner of [Health
2781 Strategy, shall constitute a successor to the former Office of Health Care
2782 Access, in accordance with the provisions of sections 4-38d and 4-39]
2783 Public Health.

2784 [(b) Any order, decision, agreed settlement or regulation of the
2785 former Office of Health Care Access which is in force on July 1, 2018,
2786 shall continue in force and effect as an order or regulation of the Office
2787 of Health Strategy until amended, repealed or superseded pursuant to
2788 law.

2789 (c) If the words "Office of Health Care Access" are used or referred to
2790 in any public or special act of 2009 or in any section of the general
2791 statutes which is amended in 2009, such words shall be deemed to mean
2792 or refer to the Office of Health Care Access division within the
2793 Department of Public Health. If the words "Office of Health Care
2794 Access" are used or referred to in any public or special act of 2018 or in
2795 any section of the general statutes which is amended in 2018, such

2796 words shall be deemed to mean or refer to the Health Systems Planning
2797 Unit within the Office of Health Strategy.]

2798 Sec. 103. Section 19a-612d of the general statutes is repealed and the
2799 following is substituted in lieu thereof (*Effective July 1, 2026*):

2800 [(a)] The Commissioner of [Health Strategy] Public Health shall
2801 oversee the Health Systems Planning Unit and shall exercise
2802 independent decision-making authority over all certificate of need
2803 decisions.

2804 [(b)] Notwithstanding the provisions of subsection (a) of this section,
2805 the Deputy Commissioner of Public Health shall retain independent
2806 decision-making authority over only the certificate of need applications
2807 that are pending before the Office of Health Care Access and have been
2808 deemed completed by said office on or before May 14, 2018. Following
2809 the issuance by the Deputy Commissioner of Public Health of a final
2810 decision on any such certificate of need application, the Commissioner
2811 of Health Strategy shall exercise independent authority on any further
2812 action required on such certificate of need application or the certificate
2813 of need issued pursuant to such application.]

2814 Sec. 104. Subsection (c) of section 19a-613 of the general statutes is
2815 repealed and the following is substituted in lieu thereof (*Effective July 1,*
2816 *2026*):

2817 (c) The Commissioner of [Health Strategy] Public Health, or any
2818 person the commissioner designates, may conduct a hearing and render
2819 a final decision in any case when a hearing is required or authorized
2820 under the provisions of any statute dealing with the Health Systems
2821 Planning Unit.

2822 Sec. 105. Section 19a-614 of the general statutes is repealed and the
2823 following is substituted in lieu thereof (*Effective July 1, 2026*):

2824 The Commissioner of [Health Strategy] Public Health may employ
2825 and pay professional and support staff subject to the provisions of

chapter 67 and contract with and engage consultants and other independent professionals as may be necessary or desirable to carry out the functions of the Health Systems Planning Unit.

Sec. 106. Section 19a-630 of the 2026 supplement to the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2026*):

As used in this chapter, unless the context otherwise requires:

(1) "Affiliate" means a person, entity or organization controlling, controlled by or under common control with another person, entity or organization. Affiliate does not include a medical foundation organized under chapter 594b.

(2) "Applicant" means any person or health care facility that applies for a certificate of need pursuant to section 19a-639a.

(3) "Bed capacity" means the total number of inpatient beds in a facility licensed by the Department of Public Health under sections 19a-490 to 19a-503, inclusive.

(4) "Capital expenditure" means an expenditure that under generally accepted accounting principles consistently applied is not properly chargeable as an expense of operation or maintenance and includes acquisition by purchase, transfer, lease or comparable arrangement, or through donation, if the expenditure would have been considered a capital expenditure had the acquisition been by purchase.

(5) "Certificate of need" means a certificate issued by the unit.

(6) "Days" means calendar days.

(7) "Commissioner" means the Commissioner of [Health Strategy] Public Health.

(8) "Free clinic" means a private, nonprofit community-based organization that provides medical, dental, pharmaceutical or mental

2854 health services at reduced cost or no cost to low-income, uninsured and
2855 underinsured individuals.

2856 (9) "Large group practice" means eight or more full-time equivalent
2857 physicians, legally organized in a partnership, professional corporation,
2858 limited liability company formed to render professional services,
2859 medical foundation, not-for-profit corporation, faculty practice plan or
2860 other similar entity (A) in which each physician who is a member of the
2861 group provides substantially the full range of services that the physician
2862 routinely provides, including, but not limited to, medical care,
2863 consultation, diagnosis or treatment, through the joint use of shared
2864 office space, facilities, equipment or personnel; (B) for which
2865 substantially all of the services of the physicians who are members of
2866 the group are provided through the group and are billed in the name of
2867 the group practice and amounts so received are treated as receipts of the
2868 group; or (C) in which the overhead expenses of, and the income from,
2869 the group are distributed in accordance with methods previously
2870 determined by members of the group. An entity that otherwise meets
2871 the definition of group practice under this section shall be considered a
2872 group practice although its shareholders, partners or owners of the
2873 group practice include single-physician professional corporations,
2874 limited liability companies formed to render professional services or
2875 other entities in which beneficial owners are individual physicians.

2876 (10) "Health care facility" means (A) hospitals licensed by the
2877 Department of Public Health under chapter 368v; (B) specialty hospitals;
2878 (C) freestanding emergency departments; (D) outpatient surgical
2879 facilities, as defined in section 19a-493b and licensed under chapter
2880 368v; (E) a hospital or other facility or institution operated by the state
2881 that provides services that are eligible for reimbursement under Title
2882 XVIII or XIX of the federal Social Security Act, 42 USC 301, as amended;
2883 (F) a central service facility; (G) mental health facilities; (H) substance
2884 abuse treatment facilities; and (I) any other facility requiring certificate
2885 of need review pursuant to subsection (a) of section 19a-638. "Health
2886 care facility" includes any parent company, subsidiary, affiliate or joint

- 2887 venture, or any combination thereof, of any such facility.
- 2888 (11) "Nonhospital based" means located at a site other than the main
2889 campus of the hospital.
- 2890 (12) ["Office" means the Office of Health Strategy] "Department"
2891 means the Department of Public Health.
- 2892 (13) "Person" means any individual, partnership, corporation, limited
2893 liability company, association, governmental subdivision, agency or
2894 public or private organization of any character, but does not include the
2895 agency conducting the proceeding.
- 2896 (14) "Physician" has the same meaning as provided in section 20-13a.
- 2897 (15) "Termination of services" means the cessation of any services for
2898 a combined total of greater than one hundred eighty days within any
2899 consecutive two-year period.
- 2900 (16) "Transfer of ownership" means a transfer that impacts or changes
2901 the governance or controlling body of a health care facility, institution
2902 or large group practice, including, but not limited to, all affiliations,
2903 mergers or any sale or transfer of net assets of a health care facility.
- 2904 (17) "Unit" means the Health Systems Planning Unit.
- 2905 Sec. 107. Subsection (b) of section 19a-631 of the general statutes is
2906 repealed and the following is substituted in lieu thereof (*Effective July 1,*
2907 *2026*):
- 2908 (b) Each hospital shall annually pay to the Commissioner of [Health
2909 Strategy] Public Health, for deposit in the General Fund, an amount
2910 equal to its share of the actual expenditures made by the unit during
2911 each fiscal year including the cost of fringe benefits for unit personnel
2912 as estimated by the Comptroller, the amount of expenses for central
2913 state services attributable to the unit for the fiscal year as estimated by
2914 the Comptroller, plus the expenditures made on behalf of the unit from
2915 the Capital Equipment Purchase Fund pursuant to section 4a-9 for such

2916 year. Payments shall be made by assessment of all hospitals of the costs
2917 calculated and collected in accordance with the provisions of this section
2918 and section 19a-632. If for any reason a hospital ceases operation, any
2919 unpaid assessment for the operations of the unit shall be reapportioned
2920 among the remaining hospitals to be paid in addition to any other
2921 assessment.

2922 Sec. 108. Section 19a-632a of the general statutes is repealed and the
2923 following is substituted in lieu thereof (*Effective July 1, 2026*):

2924 (a) For purposes of this section, "electronic funds transfer" has the
2925 same meaning as provided in section 12-685.

2926 (b) The [Office of Health Strategy] Department of Public Health may
2927 require a hospital to pay an assessment levied pursuant to section 19a-
2928 632 by way of an approved method of electronic funds transfer.

2929 (c) A hospital making an electronic funds transfer pursuant to this
2930 section shall initiate such transfer in a timely fashion to ensure that a
2931 bank account designated by the department is credited by electronic
2932 funds transfer for the amount of the assessment required to be made by
2933 such method on or before the date such assessment is due.

2934 (d) Where an assessment is required to be made by electronic funds
2935 transfer, any payment made by a method other than electronic funds
2936 transfer shall be treated as an assessment not made in a timely manner,
2937 and any payment made by electronic funds transfer, where the bank
2938 account designated by the department is not credited for the amount of
2939 the assessment on or before the date such assessment is due, shall be
2940 treated as an assessment not made in a timely manner. Any assessment
2941 treated under this subsection as an assessment not made in a timely
2942 manner shall be subject to a penalty in accordance with subsection (e) of
2943 this section.

2944 (e) Where any assessment is treated under subsection (d) of this
2945 section as an assessment not made in a timely manner because it is made
2946 by means other than electronic funds transfer, [there shall be imposed]

2947 the department shall impose a penalty equal to ten per cent of the
2948 assessment required to be made by electronic funds transfer. Where any
2949 assessment made by electronic funds transfer is treated under
2950 subsection (d) of this section as an assessment not made in a timely
2951 manner because the bank account designated by the department is not
2952 credited by electronic funds transfer for the amount of the assessment
2953 on or before the date such assessment is due, [there shall be imposed]
2954 the department shall impose a penalty equal to (1) two per cent of the
2955 assessment required to be made by electronic funds transfer, if such
2956 failure to pay by electronic funds transfer is for not more than five days;
2957 (2) five per cent of the assessment required to be made by electronic
2958 funds transfer, if such failure to pay by electronic funds transfer is for
2959 more than five days but not more than fifteen days; or (3) ten per cent of
2960 the assessment required to be made by electronic funds transfer, if such
2961 failure to pay by electronic funds transfer is for more than fifteen days.

2962 (f) The [office] department shall deposit all payments received
2963 pursuant to this section with the State Treasurer. The moneys so
2964 deposited shall be credited to the General Fund and shall be accounted
2965 for as expenses recovered from hospitals.

2966 Sec. 109. Subsection (a) of section 19a-634 of the 2026 supplement to
2967 the general statutes is repealed and the following is substituted in lieu
2968 thereof (*Effective July 1, 2026*):

2969 (a) The Health Systems Planning Unit shall conduct, on a biennial
2970 basis, within available appropriations, a state-wide health care facility
2971 utilization study. Such study may include an assessment of: (1) Current
2972 availability and utilization of acute hospital care, hospital emergency
2973 care, specialty hospital care, outpatient surgical care, primary care and
2974 clinic care; (2) geographic areas and subpopulations that may be
2975 underserved or have reduced access to specific types of health care
2976 services; and (3) other factors that the unit deems pertinent to health care
2977 facility utilization. Not later than June thirtieth of the year in which the
2978 biennial study is conducted, the Commissioner of [Health Strategy]
2979 Public Health shall report, in accordance with section 11-4a, to the

2980 Governor and the joint standing committees of the General Assembly
2981 having cognizance of matters relating to public health and human
2982 services on the findings of the study. Such report may also include the
2983 unit's recommendations for addressing identified gaps in the provision
2984 of health care services and recommendations concerning a lack of access
2985 to health care services.

2986 Sec. 110. Subsections (d) and (e) of section 19a-638 of the general
2987 statutes are repealed and the following is substituted in lieu thereof
2988 (*Effective July 1, 2026*):

2989 (d) The Commissioner of [Health Strategy] Public Health may
2990 implement policies and procedures necessary to administer the
2991 provisions of this section while in the process of adopting such policies
2992 and procedures as regulation, provided the commissioner holds a
2993 public hearing prior to implementing the policies and procedures and
2994 posts notice of intent to adopt regulations on the [office's] department's
2995 Internet web site and the eRegulations System not later than twenty
2996 days after the date of implementation. Policies and procedures
2997 implemented pursuant to this section shall be valid until the time final
2998 regulations are adopted.

2999 (e) On or before June 30, 2026, a mental health facility seeking to
3000 increase licensed bed capacity without applying for a certificate of need,
3001 as permitted pursuant to subdivision (23) of subsection (b) of this
3002 section, shall notify the [Office of Health Strategy] Department of Public
3003 Health, in a form and manner prescribed by the commissioner,
3004 regarding (1) such facility's intent to increase licensed bed capacity, (2)
3005 the address of such facility, and (3) a description of all services that are
3006 being or will be provided at such facility.

3007 Sec. 111. Subdivision (1) of subsection (a) of section 19a-639 of the
3008 2026 supplement to the general statutes is repealed and the following is
3009 substituted in lieu thereof (*Effective July 1, 2026*):

3010 (1) Whether the proposed project is consistent with any applicable

3011 policies and standards adopted in regulations by the [Office of Health
3012 Strategy] Department of Public Health;

3013 Sec. 112. Subsection (a) of section 19a-639a of the general statutes is
3014 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3015 *2026*):

3016 (a) An application for a certificate of need shall be filed with the unit
3017 in accordance with the provisions of this section and any regulations
3018 adopted by the [Office of Health Strategy] Department of Public Health.
3019 The application shall address the guidelines and principles set forth in
3020 (1) subsection (a) of section 19a-639, and (2) regulations adopted by the
3021 department. The applicant shall include with the application a
3022 nonrefundable application fee based on the cost of the project. The
3023 amount of the fee shall be as follows: (A) One thousand dollars for a
3024 project that will cost not greater than fifty thousand dollars; (B) two
3025 thousand dollars for a project that will cost greater than fifty thousand
3026 dollars but not greater than one hundred thousand dollars; (C) three
3027 thousand dollars for a project that will cost greater than one hundred
3028 thousand dollars but not greater than five hundred thousand dollars;
3029 (D) four thousand dollars for a project that will cost greater than five
3030 hundred thousand dollars but not greater than one million dollars; (E)
3031 five thousand dollars for a project that will cost greater than one million
3032 dollars but not greater than five million dollars; (F) eight thousand
3033 dollars for a project that will cost greater than five million dollars but
3034 not greater than ten million dollars; and (G) ten thousand dollars for a
3035 project that will cost greater than ten million dollars.

3036 Sec. 113. Subsection (h) of section 19a-639a of the general statutes is
3037 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3038 *2026*):

3039 (h) The Commissioner of [Health Strategy] Public Health may
3040 implement policies and procedures necessary to administer the
3041 provisions of this section while in the process of adopting such policies
3042 and procedures as regulation, provided the commissioner holds a

3043 public hearing prior to implementing the policies and procedures and
3044 posts notice of intent to adopt regulations on the [office's] Department
3045 of Public Health's Internet web site and the eRegulations System not
3046 later than twenty days after the date of implementation. Policies and
3047 procedures implemented pursuant to this section shall be valid until the
3048 time final regulations are adopted.

3049 Sec. 114. Subsection (e) of section 19a-639b of the general statutes is
3050 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3051 *2026*):

3052 (e) The Commissioner of [Health Strategy] Public Health may
3053 implement policies and procedures necessary to administer the
3054 provisions of this section while in the process of adopting such policies
3055 and procedures as regulation, provided the commissioner holds a
3056 public hearing prior to implementing the policies and procedures and
3057 posts notice of intent to adopt regulations on the [office's] Department
3058 of Public Health's Internet web site and the eRegulations System not
3059 later than twenty days after the date of implementation. Policies and
3060 procedures implemented pursuant to this section shall be valid until the
3061 time final regulations are adopted.

3062 Sec. 115. Subsection (b) of section 19a-639c of the general statutes is
3063 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3064 *2026*):

3065 (b) The Commissioner of [Health Strategy] Public Health may
3066 implement policies and procedures necessary to administer the
3067 provisions of this section while in the process of adopting such policies
3068 and procedures as regulation, provided the commissioner holds a
3069 public hearing prior to implementing the policies and procedures and
3070 posts notice of intent to adopt regulations on the [office's] Department
3071 of Public Health's Internet web site and the eRegulations System not
3072 later than twenty days after the date of implementation. Policies and
3073 procedures implemented pursuant to this section shall be valid until the
3074 time final regulations are adopted.

3075 Sec. 116. Subsection (d) of section 19a-639e of the general statutes is
3076 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3077 *2026*):

3078 (d) The Commissioner of [Health Strategy] Public Health may
3079 implement policies and procedures necessary to administer the
3080 provisions of this section while in the process of adopting such policies
3081 and procedures as regulation, provided the commissioner holds a
3082 public hearing prior to implementing the policies and procedures and
3083 posts notice of intent to adopt regulations on the [office's] Department
3084 of Public Health's Internet web site and the eRegulations System not
3085 later than twenty days after the date of implementation. Policies and
3086 procedures implemented pursuant to this section shall be valid until the
3087 time final regulations are adopted.

3088 Sec. 117. Subsection (a) of section 19a-639f of the general statutes is
3089 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3090 *2026*):

3091 (a) The Health Systems Planning Unit of the [Office of Health
3092 Strategy] Department of Public Health shall conduct a cost and market
3093 impact review in each case where (1) an application for a certificate of
3094 need filed pursuant to section 19a-638 involves the transfer of
3095 ownership of a hospital, as defined in section 19a-639, and (2) the
3096 purchaser is a hospital, as defined in section 19a-490, whether located
3097 within or outside the state, that had net patient revenue for fiscal year
3098 2013 in an amount greater than one billion five hundred million dollars,
3099 or a hospital system, as defined in section 19a-486i, whether located
3100 within or outside the state, that had net patient revenue for fiscal year
3101 2013 in an amount greater than one billion five hundred million dollars
3102 or any person that is organized or operated for profit.

3103 Sec. 118. Subsection (l) of section 19a-639f of the general statutes is
3104 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3105 *2026*):

3106 (l) The Commissioner of [Health Strategy] Public Health shall adopt
3107 regulations, in accordance with the provisions of chapter 54, concerning
3108 cost and market impact reviews and to administer the provisions of this
3109 section. Such regulations shall include definitions of the following
3110 terms: "Dispersed service area", "health status adjusted total medical
3111 expense", "major service category", "relative prices", "total health care
3112 spending" and "health care services". The commissioner may implement
3113 policies and procedures necessary to administer the provisions of this
3114 section while in the process of adopting such policies and procedures in
3115 regulation form, provided the commissioner publishes notice of
3116 intention to adopt the regulations on the [office's] Department of Public
3117 Health's Internet web site and the eRegulations System not later than
3118 twenty days after implementing such policies and procedures. Policies
3119 and procedures implemented pursuant to this subsection shall be valid
3120 until the time such regulations are effective.

3121 Sec. 119. Subsections (a) and (b) of section 19a-639g of the 2026
3122 supplement to the general statutes are repealed and the following is
3123 substituted in lieu thereof (*Effective July 1, 2026*):

3124 (a) Notwithstanding any provision of sections 19a-630 to 19a-639f,
3125 inclusive, any transacting parties involved in any transfer of ownership,
3126 as defined in section 19a-630, of a hospital requiring a certificate of need
3127 pursuant to section 19a-638 in which (1) the hospital subject to the
3128 transfer of ownership has filed for bankruptcy protection in any court
3129 of competent jurisdiction, and (2) a potential purchaser for such hospital
3130 has been or is required to be approved by a bankruptcy court, may, at
3131 the discretion of the Commissioner of [Health Strategy] Public Health,
3132 apply for an emergency certificate of need through the emergency
3133 certificate of need application process described in this section. An
3134 emergency certificate of need issued by the Health Systems Planning
3135 Unit of the [Office of Health Strategy] Department of Public Health
3136 pursuant to the provisions of this section and any conditions imposed
3137 on such issuance shall apply to the applicant applying for the
3138 emergency certificate of need, the hospital subject to the transfer of

3139 ownership and any subsidiary or group practice that would otherwise
3140 require a certificate of need pursuant to the provisions of section 19a-
3141 638 and that is also subject to the transfer of ownership as part of the
3142 bankruptcy proceeding. The availability of the emergency certificate of
3143 need application process described in this section shall not affect any
3144 existing certificate of need issued pursuant to the provisions of sections
3145 19a-630 to 19a-639f, inclusive.

3146 (b) (1) The unit shall develop an emergency certificate of need
3147 application, which shall identify any data required to be submitted with
3148 such application that the unit deems necessary to analyze the effects of
3149 a hospital's transfer of ownership on health care costs, quality and access
3150 in the affected market. If a potential purchaser of a hospital, described
3151 in subsection (a) of this section, is a for-profit entity, the unit's
3152 emergency certificate of need application may require additional
3153 information or data intended to ensure that the ongoing operation of the
3154 hospital after the transfer of ownership will be maintained in the public
3155 interest. The commissioner shall post any emergency certificate of need
3156 application developed pursuant to the provisions of this subdivision on
3157 the [Office of Health Strategy's] Department of Public Health's Internet
3158 web site and may modify any data required to be submitted with an
3159 emergency certificate of need application, provided the commissioner
3160 posts any such modification to the [office's] department's Internet web
3161 site not later than fifteen days before such a modification becomes
3162 effective.

3163 (2) An applicant seeking an emergency certificate of need shall
3164 submit an emergency certificate of need application to the unit in a form
3165 and manner prescribed by the commissioner.

3166 (3) An emergency certificate of need application shall be deemed
3167 complete on the date the unit determines that an applicant has
3168 submitted a complete application, including data required by the unit
3169 pursuant to subdivision (1) of this subsection. The unit shall determine
3170 whether an application is complete not later than three business days
3171 after an applicant submits an application. If, after making such a

3172 determination, the unit deems an application incomplete, the unit shall,
3173 not more than three business days after deeming such application
3174 incomplete, notify the applicant that such application is incomplete and
3175 identify any application or data elements that were not adequately
3176 addressed by the applicant. The unit shall not review such an
3177 application until the applicant submits any such application or data
3178 elements to the unit.

3179 (4) The unit may hold a public hearing on an emergency certificate of
3180 need application, provided (A) the unit holds such public hearing not
3181 later than thirty days after such application is deemed complete, and (B)
3182 the unit notifies the applicant of such public hearing not less than five
3183 days before the date of the public hearing. Any such public hearing or
3184 any other proceeding related to the emergency certificate of need
3185 application process described in this section shall not be considered a
3186 contested case pursuant to the provisions of chapter 54. Members of the
3187 public may submit public comments at any time during the emergency
3188 certificate of need application process and may request the unit to
3189 exercise its discretion to hold a public hearing pursuant to the
3190 provisions of this subdivision.

3191 (5) When evaluating an emergency certificate of need application, the
3192 unit may consult any person and consider any relevant information,
3193 provided, unless prohibited by federal or state law, the unit includes
3194 any opinion or information gathered from consulting any such person
3195 and any such relevant information considered in the record relating to
3196 the emergency certificate of need application and cites any such opinion
3197 or information and any such relevant information considered in its final
3198 decision on the emergency certificate of need application. The unit may
3199 contract with one or more third-party consultants, at the expense of the
3200 applicant, to analyze (A) the anticipated effect of the hospital's transfer
3201 of ownership on access, cost and quality of health care in the affected
3202 community, and (B) any other issue arising from the application review
3203 process. The aggregate cost of any such third-party consultations shall
3204 not exceed two hundred thousand dollars. Any reports or analyses

3205 generated by any such third-party consultant that the unit considers in
3206 issuing its final decision on an emergency certificate of need application
3207 shall, unless otherwise prohibited by federal or state law, be included in
3208 the record relating to the emergency certificate of need application. The
3209 provisions of chapter 57 and sections 4-212 to 4-219, inclusive, and 4e-
3210 19 shall not apply to any retainer agreement executed pursuant to this
3211 subsection.

3212 Sec. 120. Section 19a-643 of the general statutes is repealed and the
3213 following is substituted in lieu thereof (*Effective July 1, 2026*):

3214 (a) The [Office of Health Strategy] Department of Public Health shall
3215 adopt regulations, in accordance with the provisions of chapter 54, to
3216 carry out the provisions of sections 19a-630 to 19a-639e, inclusive, and
3217 sections 19a-644 and 19a-645 concerning the submission of data by
3218 health care facilities and institutions, including data on dealings
3219 between health care facilities and institutions and their affiliates, and,
3220 with regard to requests or proposals pursuant to sections 19a-638 to 19a-
3221 639e, inclusive, by state health care facilities and institutions, the
3222 ongoing inspections by the unit of operating budgets that have been
3223 approved by the health care facilities and institutions, standard
3224 reporting forms and standard accounting procedures to be utilized by
3225 health care facilities and institutions and the transferability of line items
3226 in the approved operating budgets of the health care facilities and
3227 institutions, except that any health care facility or institution may
3228 transfer any amounts among items in its operating budget. All such
3229 transfers shall be reported to the unit not later than thirty days after the
3230 transfer or transfers.

3231 (b) The [Office of Health Strategy] Department of Public Health may
3232 adopt such regulations, in accordance with the provisions of chapter 54,
3233 as are necessary to implement this chapter.

3234 Sec. 121. Subsections (a) and (b) of section 19a-644 of the general
3235 statutes are repealed and the following is substituted in lieu thereof
3236 (*Effective July 1, 2026*):

3237 (a) On or before February twenty-eighth annually, for the fiscal year
3238 ending on September thirtieth of the immediately preceding year, each
3239 short-term acute care general or children's hospital shall report to the
3240 unit with respect to its operations in such fiscal year, in such form as the
3241 unit may by regulation require. Such report shall include: (1) Salaries
3242 and fringe benefits for the ten highest paid hospital and health system
3243 employees; (2) the name of each joint venture, partnership, subsidiary
3244 and corporation related to the hospital; (3) the salaries paid to hospital
3245 and health system employees by each such joint venture, partnership,
3246 subsidiary and related corporation and by the hospital to the employees
3247 of related corporations; and (4) information and data prescribed by the
3248 [Office of Health Strategy] Department of Public Health concerning
3249 charges for trauma activation fees. For purposes of this subsection,
3250 "health system" has the same meaning as provided in section 33-182aa.

3251 (b) The [Office of Health Strategy] Commissioner of Public Health
3252 shall adopt regulations in accordance with chapter 54 to provide for the
3253 collection of data and information in addition to the annual report
3254 required in subsection (a) of this section. Such regulations shall provide
3255 for the submission of information about the operations of the following
3256 entities: Persons or parent corporations that own or control the health
3257 care facility, institution or provider; corporations, including limited
3258 liability corporations, in which the health care facility, institution,
3259 provider, its parent, any type of affiliate or any combination thereof,
3260 owns more than an aggregate of fifty per cent of the stock or, in the case
3261 of nonstock corporations, is the sole member; and any partnerships in
3262 which the person, health care facility, institution, provider, its parent or
3263 an affiliate or any combination thereof, or any combination of health
3264 care providers or related persons, owns a greater than fifty per cent
3265 interest. For purposes of this subsection, "affiliate" means any person
3266 that directly or indirectly through one or more intermediaries, controls
3267 or is controlled by or is under common control with any health care
3268 facility, institution, provider or person that is regulated in any way
3269 under this chapter. A person is deemed controlled by another person if
3270 the other person, or one of that other person's affiliates, officers, agents

3271 or management employees, acts as a general partner or manager of the
3272 person in question.

3273 Sec. 122. Section 19a-645 of the general statutes is repealed and the
3274 following is substituted in lieu thereof (*Effective July 1, 2026*):

3275 A nonprofit hospital, licensed by the Department of Public Health,
3276 [which] that provides lodging, care and treatment to members of the
3277 public, and [which] that wishes to enlarge its public facilities by adding
3278 contiguous land and buildings thereon, if any, the title to which it
3279 cannot otherwise acquire, may prefer a complaint for the right to take
3280 such land to the superior court for the judicial district in which such land
3281 is located, provided such hospital shall have received the approval of
3282 the Health Systems Planning Unit of the [Office of Health Strategy]
3283 Department of Public Health in accordance with the provisions of this
3284 chapter. Said court shall appoint a committee of three disinterested
3285 persons, who, after examining the premises and hearing the parties,
3286 shall report to the court as to the necessity and propriety of such
3287 enlargement and as to the quantity, boundaries and value of the land
3288 and buildings thereon, if any, [which] that they deem proper to be taken
3289 for such purpose and the damages resulting from such taking. If such
3290 committee reports that such enlargement is necessary and proper and
3291 the court accepts such report, the decision of said court thereon shall
3292 have the effect of a judgment and execution may be issued thereon
3293 accordingly, in favor of the person to whom damages may be assessed,
3294 for the amount thereof; and, on payment thereof, the title to the land and
3295 buildings thereon, if any, for such purpose shall be vested in the
3296 complainant, but such land and buildings thereon, if any, shall not be
3297 taken until such damages are paid to such owner or deposited with said
3298 court, for such owner's use, [within] not later than thirty days after such
3299 report is accepted. If such application is denied, the owner of the land
3300 shall recover costs of the applicant, to be taxed by said court, which may
3301 issue execution therefor. Land so taken shall be held by such hospital
3302 and used only for the public purpose stated in its complaint to the
3303 superior court. No land dedicated or otherwise reserved as open space

3304 or park land or for other recreational purposes and no land belonging
3305 to any town, city or borough shall be taken under the provisions of this
3306 section.

3307 Sec. 123. Subdivision (1) of subsection (a) of section 19a-646 of the
3308 general statutes is repealed and the following is substituted in lieu
3309 thereof (*Effective July 1, 2026*):

3310 (1) "Unit" means the Health Systems Planning Unit within the [Office
3311 of Health Strategy] Department of Public Health, established under
3312 section 19a-612;

3313 Sec. 124. Subsections (a) to (d), inclusive, of section 19a-653 of the
3314 general statutes are repealed and the following is substituted in lieu
3315 thereof (*Effective July 1, 2026*):

3316 (a) Any person or health care facility or institution that is required to
3317 file a certificate of need for any of the activities described in section 19a-
3318 638, and any person or health care facility or institution that is required
3319 to file data or information under any public or special act or under this
3320 chapter or sections 19a-486 to 19a-486h, inclusive, or any regulation
3321 adopted or order issued under this chapter or said sections, and
3322 negligently fails to seek certificate of need approval for any of the
3323 activities described in section 19a-638, or to so file within prescribed
3324 time periods, and any person or health care facility or institution that
3325 has agreed to fully resolve a certificate of need application through
3326 settlement and negligently fails to comply with any term or condition
3327 enumerated in the settlement agreement, shall be subject to a civil
3328 penalty of up to one thousand dollars a day for each day such person or
3329 health care facility or institution conducts any of the described activities
3330 without certificate of need approval as required by section 19a-638, for
3331 each day such information is missing, incomplete or inaccurate or for
3332 each day any condition of a settlement agreement is not met. Any civil
3333 penalty authorized by this section shall be imposed by the [Office of
3334 Health Strategy] Department of Public Health in accordance with
3335 subsections (b) to (e), inclusive, of this section.

3336 (b) If the [Office of Health Strategy] Department of Public Health has
3337 reason to believe that a violation has occurred for which a civil penalty
3338 is authorized by subsection (a) of this section or subsection (e) of section
3339 19a-632, [it] the department shall notify the person or health care facility
3340 or institution by first-class mail or personal service. The notice shall
3341 include: (1) A reference to the sections of the statute, regulation or
3342 settlement agreement involved; (2) a short and plain statement of the
3343 matters asserted or charged; (3) a statement of the amount of the civil
3344 penalty or penalties to be imposed; (4) the initial date of the imposition
3345 of the penalty; and (5) a statement of the party's right to a hearing.

3346 (c) The person or health care facility or institution to whom the notice
3347 is addressed shall have fifteen business days [from] after the date of
3348 mailing of the notice to make written application to the unit to (1)
3349 request a hearing to contest the imposition of the penalty, (2) request an
3350 extension of time to file the required data, or (3) comply with
3351 enumerated conditions of an agreed settlement. A failure to make a
3352 timely request for a hearing or an extension of time to file the required
3353 data or a denial of a request for an extension of time shall result in a final
3354 order for the imposition of the penalty. All hearings under this section
3355 shall be conducted pursuant to sections 4-176e to 4-184, inclusive. The
3356 [Office of Health Strategy] Department of Public Health may grant an
3357 extension of time for filing the required data or mitigate or waive the
3358 penalty upon such terms and conditions as, in its discretion, it deems
3359 proper or necessary upon consideration of any extenuating factors or
3360 circumstances.

3361 (d) A final order of the [Office of Health Strategy] Department of
3362 Public Health assessing a civil penalty shall be subject to appeal as set
3363 forth in section 4-183 after a hearing before the unit pursuant to
3364 subsection (c) of this section, except that any such appeal shall be taken
3365 to the superior court for the judicial district of New Britain. Such final
3366 order shall not be subject to appeal under any other provision of the
3367 general statutes. No challenge to any such final order shall be allowed
3368 as to any issue [which] that could have been raised by an appeal of an

3369 earlier order, denial or other final decision by the [office] department.

3370 Sec. 125. Subsections (b) to (g), inclusive, of section 19a-654 of the
3371 general statutes are repealed and the following is substituted in lieu
3372 thereof (*Effective July 1, 2026*):

3373 (b) Each short-term acute care general or children's hospital shall
3374 submit patient-identifiable inpatient discharge data and emergency
3375 department data to the [Health Systems Planning Unit of the Office of
3376 Health Strategy to fulfill the responsibilities of the unit] Department of
3377 Public Health (1) to assist the department in fulfilling its responsibilities
3378 under chapter 368z, and (2) for the purposes set forth in section 19a-25
3379 and the regulations promulgated thereunder. Such data shall include
3380 data taken from patient medical record abstracts and bills. The [unit]
3381 department shall specify the timing and format of such submissions.
3382 Data submitted pursuant to this section may be submitted through a
3383 contractual arrangement with an intermediary and such contractual
3384 arrangement shall [(1)] (A) comply with the provisions of the Health
3385 Insurance Portability and Accountability Act of 1996 P.L. 104-191
3386 (HIPAA), and [(2)] (B) ensure that such submission of data is timely and
3387 accurate. The [unit] department may conduct an audit of the data
3388 submitted through such intermediary in order to verify its accuracy.

3389 (c) An outpatient surgical facility, as defined in section 19a-493b, a
3390 short-term acute care general or children's hospital, or a facility that
3391 provides outpatient surgical services as part of the outpatient surgery
3392 department of a short-term acute care hospital shall submit to the [unit]
3393 department the data identified in subsection (c) of section 19a-634. The
3394 [unit] department shall convene a working group consisting of
3395 representatives of outpatient surgical facilities, hospitals and other
3396 individuals necessary to develop recommendations that address current
3397 obstacles to, and proposed requirements for, patient-identifiable data
3398 reporting in the outpatient setting. [On or before February 1, 2012, the]
3399 The working group shall report, in accordance with the provisions of
3400 section 11-4a, on its findings and recommendations to the joint standing
3401 committees of the General Assembly having cognizance of matters

3402 relating to public health and insurance and real estate [. Additional
3403 reporting of] regarding such outpatient data as the [unit] department
3404 deems necessary. [shall begin not later than July 1, 2015. On or before
3405 July 1, 2018, and annually thereafter,] Not later than July first annually,
3406 the Connecticut Association of Ambulatory Surgery Centers shall
3407 provide a progress report to the [Office of Health Strategy] Department
3408 of Public Health, until such time as all ambulatory surgery centers are
3409 in full compliance with the implementation of systems that allow for the
3410 reporting of outpatient data as required by the [commissioner]
3411 Commissioner of Public Health. Until such additional reporting
3412 requirements take effect on July 1, 2015, the department may work with
3413 the Connecticut Association of Ambulatory Surgery Centers and the
3414 Connecticut Hospital Association on specific data reporting initiatives
3415 provided that no penalties shall be assessed under this chapter or any
3416 other provision of law with respect to the failure to submit such data.

3417 (d) Except as provided in this subsection and section 19a-25, and the
3418 regulations promulgated thereunder, patient-identifiable data received
3419 by the [unit] department shall be kept confidential by the department
3420 and shall not be considered public records or files subject to disclosure
3421 under the Freedom of Information Act, as defined in section 1-200. The
3422 [unit] department may release de-identified patient data or aggregate
3423 patient data to the public in a manner consistent with the provisions of
3424 45 CFR 164.514. [Any de-identified patient data released by the unit
3425 shall exclude provider, physician and payer organization names or
3426 codes and shall be kept confidential by the recipient. The unit] The
3427 department may release patient-identifiable data (1) for [medical and
3428 scientific research as provided for in section 19a-25-3 of the regulations
3429 of Connecticut state agencies, and (2) to (A) a state agency for the
3430 purpose of improving health care service delivery, (B)] the purposes set
3431 forth in and pursuant to section 19a-25 and the regulations promulgated
3432 thereunder, and (2) to (A) a federal agency or the office of the Attorney
3433 General for the purpose of investigating hospital mergers and
3434 acquisitions, [(C)] (B) another state's health data collection agency with
3435 which the [unit] department has entered into a reciprocal data-sharing

3436 agreement for the purpose of certificate of need review or evaluation of
3437 health care services, upon receipt of a request from such agency,
3438 provided, prior to the release of such patient-identifiable data, such
3439 agency enters into a written agreement with the [unit] department
3440 pursuant to which such agency agrees to protect the confidentiality of
3441 such patient-identifiable data and not to use such patient-identifiable
3442 data as a basis for any decision concerning a patient, or [(D)] (C) a
3443 consultant or independent professional contracted by the [Office of
3444 Health Strategy] Department of Public Health pursuant to section 19a-
3445 614 to carry out the functions of the [unit] department, including
3446 collecting, managing or organizing such patient-identifiable data. [No]
3447 Except as provided under section 19a-25 and the regulations
3448 promulgated thereunder, no individual or entity receiving patient-
3449 identifiable data may release such data in any manner that may result
3450 in an individual patient, physician, provider or payer being identified.
3451 The [unit] department shall impose a reasonable, cost-based fee for any
3452 patient data provided to a nongovernmental entity.

3453 (e) Not later than October 1, 2018, the [Health Systems Planning Unit]
3454 department shall enter into a memorandum of understanding with the
3455 Comptroller that shall permit the Comptroller to access the data set forth
3456 in subsections (b) and (c) of this section, provided the Comptroller
3457 agrees, in writing, to keep individual patient and provider data
3458 identified by proper name or personal identification code and submitted
3459 pursuant to this section confidential.

3460 (f) The Commissioner of [Health Strategy] Public Health shall adopt
3461 regulations, in accordance with the provisions of chapter 54, to carry out
3462 the provisions of this section.

3463 (g) The duties assigned to the [Office of Health Strategy] Department
3464 of Public Health under the provisions of this section shall be
3465 implemented within available appropriations.

3466 Sec. 126. Subdivision (1) of section 19a-659 of the general statutes is
3467 repealed and the following is substituted in lieu thereof (*Effective July 1,*

3468 2026):

3469 (1) "Unit" means the Health Systems Planning Unit within the [Office
3470 of Health Strategy] Department of Public Health, established under
3471 section 19a-612;

3472 Sec. 127. Section 19a-673a of the general statutes is repealed and the
3473 following is substituted in lieu thereof (*Effective July 1, 2026*):

3474 The Commissioner of [Health Strategy] Public Health shall adopt
3475 regulations, in accordance with chapter 54, to establish uniform debt
3476 collection standards for hospitals.

3477 Sec. 128. Subsection (c) of section 19a-681 of the general statutes is
3478 repealed and the following is substituted in lieu thereof (*Effective July 1,*
3479 *2026*):

3480 (c) Upon the request of the [Office of Health Strategy, established
3481 under section 19a-754a] Department of Public Health, or a patient, a
3482 hospital shall provide to the [office] department or the patient a detailed
3483 patient bill. If the billing detail by line item on a detailed patient bill does
3484 not agree with the detailed schedule of charges on file with the unit for
3485 the date of service specified on the bill, the hospital shall be subject to a
3486 civil penalty of five hundred dollars per occurrence payable to the state
3487 not later than fourteen days after the date of notification. The penalty
3488 shall be imposed in accordance with section 19a-653. The unit may issue
3489 an order requiring such hospital, not later than fourteen days after the
3490 date of notification of an overcharge to a patient, to adjust the bill to be
3491 consistent with the detailed schedule of charges on file with the unit for
3492 the date of service specified on the detailed patient bill.

3493 Sec. 129. Subsections (b) to (f), inclusive, of section 19a-754b of the
3494 general statutes are repealed and the following is substituted in lieu
3495 thereof (*Effective July 1, 2026*):

3496 (b) [Beginning on] On and after January 1, 2020, each sponsor shall
3497 submit to the [Office of Health Strategy, established in section 19a-754a]

3498 Department of Public Health, in a form and manner specified by the
3499 [office] department, written notice informing the [office] department
3500 that such sponsor has filed with the federal Food and Drug
3501 Administration:

3502 (1) A new drug application or biologics license application for a
3503 pipeline drug, not later than sixty days after such sponsor receives an
3504 action date from the federal Food and Drug Administration regarding
3505 such application; or

3506 (2) A biologics license application for a biosimilar drug, not later than
3507 sixty days after such sponsor's receipt of an action date from the federal
3508 Food and Drug Administration regarding such application.

3509 (c) (1) Beginning on January 1, 2020, the Commissioner of [Health
3510 Strategy] Public Health may conduct a study, with the assistance of the
3511 Comptroller and not more frequently than once annually, of each
3512 pharmaceutical manufacturer of a pipeline drug that, in the opinion of
3513 the commissioner in consultation with the Comptroller and the
3514 Commissioner of Social Services, may have a significant impact on state
3515 expenditures for outpatient prescription drugs. The [office] Department
3516 of Public Health may work with the Comptroller to utilize existing state
3517 resources and contracts, or contract with a third party, including, but
3518 not limited to, an accounting firm, to conduct such study.

3519 (2) Each pharmaceutical manufacturer that is the subject of a study
3520 conducted pursuant to subdivision (1) of this subsection shall submit to
3521 the [office] Department of Public Health, or any contractor engaged by
3522 the [office] department or the Comptroller to perform such study, the
3523 following information for the pipeline drug that is the subject of such
3524 study:

3525 (A) The primary disease, condition or therapeutic area studied in
3526 connection with such drug, and whether such drug is therapeutically
3527 indicated for such disease, condition or therapeutic area;

3528 (B) Each route of administration studied for such drug;

3529 (C) Clinical trial comparators, if applicable, for such drug;

3530 (D) The estimated year of market entry for such drug;

3531 (E) Whether the federal Food and Drug Administration has
3532 designated such drug as an orphan drug, a fast track product or a
3533 breakthrough therapy; and

3534 (F) Whether the federal Food and Drug Administration has
3535 designated such drug for accelerated approval and, if such drug
3536 contains a new molecular entity, for priority review.

3537 (d) (1) [On or before] Not later than March [1, 2020, and] first
3538 annually, [thereafter,] the Commissioner of [Health Strategy] Public
3539 Health, in consultation with the Comptroller [.] and the Commissioner
3540 of Social Services, [and Commissioner of Public Health,] shall prepare a
3541 list of not more than ten outpatient prescription drugs that the
3542 Commissioner of [Health Strategy] Public Health, in the commissioner's
3543 discretion, determines are (A) provided at substantial cost to the state,
3544 considering the net cost of such drugs, or (B) critical to public health.
3545 The list shall include outpatient prescription drugs from different
3546 therapeutic classes of outpatient prescription drugs and not less than
3547 one generic outpatient prescription drug.

3548 (2) Prior to publishing the annual list pursuant to subdivision (1) of
3549 this subsection, the [commissioner] Commissioner of Public Health
3550 shall prepare a preliminary list that includes outpatient prescription
3551 drugs that the commissioner plans to include on such annual list. The
3552 commissioner shall make such preliminary list available for public
3553 comment for not less than thirty days. During the public comment
3554 period, any manufacturer of an outpatient prescription drug included
3555 on the preliminary list may produce documentation, as permitted by
3556 federal law, to the commissioner to establish that the wholesale
3557 acquisition cost of such drug, less all rebates paid to the state for such
3558 outpatient prescription drug during the immediately preceding
3559 calendar year, does not exceed the limits established in subdivision (3)

3560 of this subsection. If such documentation establishes, to the satisfaction
3561 of the commissioner, that the wholesale acquisition cost of the drug, less
3562 all rebates paid to the state for such drug during the immediately
3563 preceding calendar year, does not exceed the limits established in
3564 subdivision (3) of this subsection, the commissioner shall, not later than
3565 fifteen days after the closing of the public comment period, remove such
3566 drug from the preliminary list before publishing the annual list
3567 pursuant to subdivision (1) of this subsection.

3568 (3) The [commissioner] Commissioner of Public Health shall not list
3569 any outpatient prescription drugs under subdivision (1) or (2) of this
3570 subsection unless the wholesale acquisition cost of such outpatient
3571 prescription drug (A) increased by not less than sixteen per cent
3572 cumulatively during the immediately preceding two calendar years,
3573 and (B) was not less than forty dollars for a course of treatment.

3574 (4) (A) The pharmaceutical manufacturer of an outpatient
3575 prescription drug included on a list prepared by the [commissioner]
3576 Commissioner of Public Health pursuant to subdivision (1) of this
3577 subsection shall provide to the [office] Department of Public Health, in
3578 a form and manner specified by the commissioner, (i) a written,
3579 narrative description, suitable for public release, of all factors that
3580 caused the increase in the wholesale acquisition cost of the listed
3581 outpatient prescription drug, and (ii) aggregate, company-level research
3582 and development costs and such other capital expenditures that the
3583 commissioner, in the commissioner's discretion, deems relevant for the
3584 most recent year for which final audited data are available.

3585 (B) The quality and types of information and data that a
3586 pharmaceutical manufacturer submits to the [office] department under
3587 this subdivision shall be consistent with the quality and types of
3588 information and data that the pharmaceutical manufacturer includes in
3589 (i) such pharmaceutical manufacturer's annual consolidated report on
3590 Securities and Exchange Commission Form 10-K, or (ii) any other public
3591 disclosure.

3592 (5) The [office] Department of Public Health shall establish a
3593 standardized form for reporting information and data pursuant to this
3594 subsection after consulting with pharmaceutical manufacturers. The
3595 form shall be designed to minimize the administrative burden and cost
3596 of reporting on the [office] department and pharmaceutical
3597 manufacturers.

3598 (e) The [office] Department of Public Health may impose a penalty of
3599 not more than seven thousand five hundred dollars on a pharmaceutical
3600 manufacturer or sponsor for each violation of this section by the
3601 pharmaceutical manufacturer or sponsor.

3602 (f) The [office] Department of Public Health may adopt regulations,
3603 in accordance with the provisions of chapter 54, to carry out the
3604 purposes of this section.

3605 Sec. 130. Subsections (a) to (c), inclusive, of section 19a-754c of the
3606 general statutes are repealed and the following is substituted in lieu
3607 thereof (*Effective July 1, 2026*):

3608 (a) For the purposes of this section:

3609 (1) "Affordable Care Act" has the same meaning as provided in
3610 section 38a-1080;

3611 (2) "Covered Connecticut program" means the program established
3612 under subsection (b) of this section;

3613 (3) "Exchange" has the same meaning as provided in section 38a-1080;

3614 (4) "Health carrier" has the same meaning as provided in section 38a-
3615 1080;

3616 (5) "Individual market" has the same meaning as provided in 42 USC
3617 18024(a), as amended from time to time; and

3618 [(6) "Office of Health Strategy" means the Office of Health Strategy
3619 established under section 19a-754a; and]

3620 [(7)] (6) "Silver level" has the same meaning as provided in 42 USC
3621 18022(d), as amended from time to time.

3622 (b) There is established within the Department of Social Services the
3623 Covered Connecticut program for the purpose of reducing the state's
3624 uninsured rate. The Commissioner of Social Services shall administer
3625 said program in consultation with the [Office of Health Strategy,]
3626 Insurance Commissioner and exchange, and, as part of said program,
3627 the Department of Social Services shall:

3628 (1) Provide premium and cost-sharing subsidies that are sufficient to
3629 ensure fully subsidized coverage:

3630 (A) On and after July 1, 2021, for parents and needy caretaker
3631 relatives, and their tax dependents not older than twenty-six years of
3632 age, who (i) are eligible for premium and cost-sharing subsidies for a
3633 qualified health plan, (ii) are ineligible for Medicaid because their
3634 income exceeds the Medicaid income limits under chapter 319v, (iii)
3635 have household income up to one hundred seventy-five per cent of the
3636 federal poverty level, (iv) are receiving coverage under a qualified
3637 health plan offered through the exchange in the individual market at a
3638 silver level of coverage, and (v) are utilizing the full amount of
3639 applicable premium subsidies for such plan;

3640 (B) On and after July 1, 2021, for the following additional family
3641 members of parents and caretaker relatives receiving coverage under
3642 such qualified health plan, provided the requirements of subparagraph
3643 (A) of subdivision (1) of this subsection are met: (i) A child over twenty-
3644 six years of age who is permanently and totally disabled, as defined by
3645 the Internal Revenue Service pursuant to 26 USC 152, or (ii) a child who
3646 is over the age of twenty-six and is incapable of self-sustaining
3647 employment by reason of mental or physical handicap and is chiefly
3648 dependent upon the parent or caretaker relative for support and
3649 maintenance, as described in sections 38a-489 and 38a-512a, or (iii) a
3650 child or stepchild receiving coverage under such qualified health plan
3651 as described in sections 38a-497 and 38a-512b;

3652 (C) On and after July 1, 2022, for all parents, needy caretaker relatives
3653 and low-income adults who (i) are at least nineteen but not more than
3654 sixty-four years of age, (ii) are eligible for premium and cost-sharing
3655 subsidies for a qualified health plan, (iii) are ineligible for Medicaid
3656 because their income exceeds the Medicaid income limits under chapter
3657 319v, (iv) have household income up to one hundred seventy-five per
3658 cent of the federal poverty level, (v) are receiving coverage under a
3659 qualified health plan offered through the exchange in the individual
3660 market at a silver level of coverage, and (vi) are utilizing the full amount
3661 of applicable premium subsidies for such plan; and

3662 (D) On and after July 1, 2022, for the following additional family
3663 members of parents, caretaker relatives, and adults receiving coverage
3664 under such qualified health plan, provided the requirements of
3665 subparagraph (C) of subdivision (1) of this subsection are met: (i) A
3666 child over twenty-six years of age who is permanently and totally
3667 disabled, as defined by the Internal Revenue Service pursuant to 26 USC
3668 152, or (ii) a child who is over the age of twenty-six and is incapable of
3669 self-sustaining employment by reason of mental or physical handicap
3670 and is chiefly dependent upon the parent or caretaker relative for
3671 support and maintenance, as described in sections 38a-489 and 38a-512a,
3672 or (iii) a child or stepchild, as described in sections 38a-497 and 38a-512b.

3673 (2) Not earlier than July 1, 2022, provide dental and nonemergency
3674 medical transportation services, as provided under chapter 319v, to all
3675 eligible individuals described in subdivision (1) of this subsection;

3676 (3) Establish procedures to, on a quarterly basis, pay in
3677 reimbursement to each health carrier offering the qualified health plan
3678 described in subparagraph (A) or (B) of subdivision (1) of this
3679 subsection, as applicable, the premium and cost-sharing subsidies
3680 required under subdivision (1) of this subsection to ensure fully
3681 subsidized coverage; and

3682 (4) Consult with the [Office of Health Strategy and] Insurance
3683 Commissioner for the purposes set forth in section 17b-312.

3684 (c) (1) The [Office of Health Strategy] Department of Social Services
3685 may, subject to the approval required under subdivision (3) of this
3686 subsection, seek a waiver pursuant to Section 1332 of the Affordable
3687 Care Act, as amended from time to time, to advance the purpose of the
3688 Covered Connecticut program. The [Office of Health Strategy]
3689 department shall implement such waiver if the federal government
3690 issues such waiver.

3691 (2) The [Office of Health Strategy] Commissioner of Social Services
3692 shall submit a report, in accordance with section 11-4a, to the joint
3693 standing committees of the General Assembly having cognizance of
3694 matters relating to appropriations, human services and insurance
3695 containing any proposed waiver described in subdivision (1) of this
3696 subsection before seeking such waiver from the federal government.

3697 (3) Not later than thirty days after the [Office of Health Strategy]
3698 Commissioner of Social Services submits a report under subdivision (2)
3699 of this subsection, the joint standing committees of the General
3700 Assembly having cognizance of matters relating to appropriations,
3701 human services and insurance shall convene a joint public hearing on
3702 the proposed waiver contained in the report submitted pursuant to
3703 subdivision (2) of this subsection, separately vote to approve or reject
3704 such proposed waiver and advise the [Office of Health Strategy]
3705 commissioner of their approval or rejection of such proposed waiver. If
3706 any committee takes no action on such proposed waiver within the
3707 thirty-day period, the proposed waiver shall be deemed rejected.

3708 Sec. 131. Section 19a-754d of the general statutes is repealed and the
3709 following is substituted in lieu thereof (*Effective July 1, 2026*):

3710 (a) [On and after January 1, 2022, any] Any state agency, board or
3711 commission that directly, or by contract with another entity, collects
3712 demographic data concerning the ancestry or ethnic origin, ethnicity,
3713 race or primary language of residents of the state in the context of health
3714 care or for the provision or receipt of health care services or for any
3715 public health purpose shall:

3716 (1) Collect such data in a manner that allows for aggregation and
3717 disaggregation of data;

3718 (2) Expand race and ethnicity categories to include subgroup
3719 identities as specified by the [Community and Clinical Integration
3720 Program of the Office of Health Strategy] Office of Policy and
3721 Management and follow the hierarchical mapping to align with United
3722 States Office of Management and Budget standards;

3723 (3) Provide the option to individuals of selecting one or more ethnic
3724 or racial designations and include an "other" designation with the ability
3725 to write in identities not represented by other codes;

3726 (4) Provide the option to individuals to refuse to identify with any
3727 ethnic or racial designations;

3728 (5) Collect primary language data employing language codes set by
3729 the International Organization for Standardization; and

3730 (6) Ensure, in cases where data concerning an individual's ethnic
3731 origin, ethnicity or race is reported to any other state agency, board or
3732 commission, that such data is neither tabulated nor reported without all
3733 of the following information: (A) The number or percentage of
3734 individuals who identify with each ethnic or racial designation as their
3735 sole ethnic or racial designation and not in combination with any other
3736 ethnic or racial designation; (B) the number or percentage of individuals
3737 who identify with each ethnic or racial designation, whether as their sole
3738 ethnic or racial designation or in combination with other ethnic or racial
3739 designations; (C) the number or percentage of individuals who identify
3740 with multiple ethnic or racial designations; and (D) the number or
3741 percentage of individuals who do not identify or refuse to identify with
3742 any ethnic or racial designations.

3743 (b) Each health care provider with an electronic health record system
3744 capable of connecting to and participating in the State-wide Health
3745 Information Exchange as specified in section 17b-59e shall, collect and
3746 include in its electronic health record system self-reported patient

3747 demographic data including, but not limited to, race, ethnicity, primary
3748 language, insurance status and disability status based upon the
3749 implementation plan developed [under subsection (c) of this section] in
3750 consultation with consumer advocates, health equity experts, state
3751 agencies and health care providers for the changes required by this
3752 section. Race and ethnicity data shall adhere to standard categories as
3753 determined in subsection (a) of this section.

3754 [(c) Not later than August 1, 2021, the Office of Health Strategy shall
3755 consult with consumer advocates, health equity experts, state agencies
3756 and health care providers, to create an implementation plan for the
3757 changes required by this section.]

3758 [(d)] (c) The Office of [Health Strategy] Policy and Management shall
3759 (1) review (A) demographic changes in race and ethnicity, as
3760 determined by the U.S. Census Bureau, and (B) health data collected by
3761 the state, and (2) reevaluate the standard race and ethnicity categories
3762 from time to time, in consultation with health care providers, consumers
3763 and the joint standing committee of the General Assembly having
3764 cognizance of matters relating to public health.

3765 Sec. 132. Section 19a-754f of the general statutes is repealed and the
3766 following is substituted in lieu thereof (*Effective July 1, 2026*):

3767 For the purposes of this section and sections 19a-754g to 19a-754k,
3768 inclusive:

3769 (1) "Drug manufacturer" means the manufacturer of a drug that is:
3770 (A) Included in the information and data submitted by a health carrier
3771 pursuant to section 38a-479qqq, (B) studied or listed pursuant to
3772 subsection (c) or (d) of section 19a-754b, or (C) in a therapeutic class of
3773 drugs that the [Commissioner of Health Strategy] Secretary of the Office
3774 of Policy and Management determines, through public or private
3775 reports, has had a substantial impact on prescription drug expenditures,
3776 net of rebates, as a percentage of total health care expenditures;

3777 [(2) "Commissioner" means the Commissioner of Health Strategy;]

3778 [(3)] (2) "Health care cost growth benchmark" means the annual
3779 benchmark established pursuant to section 19a-754g;

3780 [(4)] (3) "Health care quality benchmark" means an annual
3781 benchmark established pursuant to section 19a-754g;

3782 [(5)] (4) "Health care provider" has the same meaning as provided in
3783 subdivision (1) of subsection (a) of section 19a-17b;

3784 [(6)] (5) "Net cost of private health insurance" means the difference
3785 between premiums earned and benefits incurred, and includes insurers'
3786 costs of paying bills, advertising, sales commissions, and other
3787 administrative costs, net additions or subtractions from reserves, rate
3788 credits and dividends, premium taxes and profits or losses;

3789 [(7)] (6) "Office" means the Office of [Health Strategy established
3790 under section 19a-754a] Policy and Management;

3791 [(8)] (7) "Other entity" means a drug manufacturer, pharmacy
3792 benefits manager or other health care provider that is not considered a
3793 provider entity;

3794 [(9)] (8) "Payer" means a payer, including Medicaid, Medicare and
3795 governmental and nongovernment health plans, and includes any
3796 organization acting as payer that is a subsidiary, affiliate or business
3797 owned or controlled by a payer that, during a given calendar year, pays
3798 health care providers for health care services or pharmacies or provider
3799 entities for prescription drugs designated by the [Commissioner of
3800 Health Strategy] Secretary of the Office of Policy and Management;

3801 [(10)] (9) "Performance year" means the most recent calendar year for
3802 which data were submitted for the applicable health care cost growth
3803 benchmark, primary care spending target or health care quality
3804 benchmark;

3805 [(11)] (10) "Pharmacy benefits manager" has the same meaning as
3806 provided in subdivision (10) of section 38a-479ooo;

3807 [(12)] (11) "Primary care spending target" means the annual target
3808 established pursuant to section 19a-754g;

3809 [(13)] (12) "Provider entity" means an organized group of clinicians
3810 that come together for the purposes of contracting, or are an established
3811 billing unit that, at a minimum, includes primary care providers, and
3812 that collectively, during any given calendar year, has enough attributed
3813 lives to participate in total cost of care contracts, even if they are not
3814 engaged in a total cost of care contract;

3815 [(14)] (13) "Potential gross state product" means a forecasted measure
3816 of the economy that equals the sum of the (A) expected growth in
3817 national labor force productivity, (B) expected growth in the state's labor
3818 force, and (C) expected national inflation, minus the expected state
3819 population growth;

3820 (14) "Secretary" means the Secretary of the Office of Policy and
3821 Management;

3822 (15) "Total health care expenditures" means the sum of all health care
3823 expenditures in this state from public and private sources for a given
3824 calendar year, including: (A) All claims-based spending paid to
3825 providers, net of pharmacy rebates, (B) all patient cost-sharing amounts,
3826 and (C) the net cost of private health insurance; and

3827 (16) "Total medical expense" means the total cost of care for the
3828 patient population of a payer or provider entity for a given calendar
3829 year, where cost is calculated for such year as the sum of (A) all claims-
3830 based spending paid to providers by public and private payers, and net
3831 of pharmacy rebates, (B) all nonclaims payments for such year,
3832 including, but not limited to, incentive payments and care coordination
3833 payments, and (C) all patient cost-sharing amounts expressed on a per
3834 capita basis for the patient population of a payer or provider entity in
3835 this state.

3836 Sec. 133. Section 19a-754g of the 2026 supplement to the general
3837 statutes is repealed and the following is substituted in lieu thereof

3838 (Effective July 1, 2026):

3839 [(a) Not later than July 1, 2022, the commissioner shall publish (1) the
3840 health care cost growth benchmarks and annual primary care spending
3841 targets as a percentage of total medical expenses for the calendar years
3842 2021 to 2025, inclusive, and (2) the annual health care quality
3843 benchmarks for the calendar years 2022 to 2025, inclusive, on the office's
3844 Internet web site.]

3845 [(b)] (a) (1) (A) Not later than July 1, 2025, and every five years
3846 thereafter, the [commissioner] secretary shall develop and adopt annual
3847 health care cost growth benchmarks and annual primary care spending
3848 targets for the succeeding five calendar years for provider entities and
3849 payers.

3850 (B) In developing the health care cost growth benchmarks and
3851 primary care spending targets pursuant to this subdivision, the
3852 [commissioner] secretary shall consider (i) any historical and forecasted
3853 changes in median income for individuals in the state and the growth
3854 rate of potential gross state product, (ii) the rate of inflation, and (iii) the
3855 most recent report prepared by the [commissioner] secretary pursuant
3856 to subsection (b) of section 19a-754h.

3857 (C) (i) The [commissioner] secretary shall hold at least one
3858 informational public hearing prior to adopting the health care cost
3859 growth benchmarks and primary care spending targets for each
3860 succeeding five-year period described in this subdivision. The
3861 [commissioner] secretary may hold informational public hearings
3862 concerning any annual health care cost growth benchmark and primary
3863 care spending target set pursuant to [subsection (a) of this section or]
3864 this subdivision. [(1) of subsection (b) of this section.] Such
3865 informational public hearings shall be held at a time and place
3866 designated by the [commissioner] secretary in a notice prominently
3867 posted by the [commissioner] secretary on the office's Internet web site
3868 and in a form and manner prescribed by the [commissioner] secretary.
3869 The [commissioner] secretary shall make available on the office's

3870 Internet web site a summary of any such informational public hearing
3871 and include the [commissioner's] secretary's recommendations, if any,
3872 to modify or not to modify any such annual benchmark or target.

3873 (ii) If the [commissioner] secretary determines, after any
3874 informational public hearing held pursuant to this subparagraph, that a
3875 modification to any health care cost growth benchmark or annual
3876 primary care spending target is, in the [commissioner's] secretary's
3877 discretion, reasonably warranted, the [commissioner] secretary may
3878 modify such benchmark or target.

3879 (iii) The [commissioner] secretary shall annually (I) review the
3880 current and projected rate of inflation, and (II) include on the office's
3881 Internet web site the [commissioner's] secretary's findings of such
3882 review, including the reasons for making or not making a modification
3883 to any applicable health care cost growth benchmark. If the
3884 [commissioner] secretary determines that the rate of inflation requires
3885 modification of any health care cost growth benchmark adopted under
3886 this section, the [commissioner] secretary may modify such benchmark.
3887 In such event, the [commissioner] secretary shall not be required to hold
3888 an informational public hearing concerning such modified health care
3889 cost growth benchmark.

3890 (D) The [commissioner] secretary shall post each adopted health care
3891 cost growth benchmark and annual primary care spending target on the
3892 office's Internet web site.

3893 (E) Notwithstanding the provisions of subparagraphs (A) to (D),
3894 inclusive, of this subdivision, if the average annual health care cost
3895 growth benchmark for a succeeding five-year period described in this
3896 subdivision differs from the average annual health care cost growth
3897 benchmark for the five-year period preceding such succeeding five-year
3898 period by more than one-half of one per cent, the [commissioner]
3899 secretary shall submit the annual health care cost growth benchmarks
3900 developed for such succeeding five-year period to the joint standing
3901 committee of the General Assembly having cognizance of matters

3902 relating to insurance for the committee's review and approval. The
3903 committee shall be deemed to have approved such annual health care
3904 cost growth benchmarks for such succeeding five-year period, except
3905 upon a vote to reject such benchmarks by the majority of committee
3906 members at a meeting of such committee called for the purpose of
3907 reviewing such benchmarks and held not later than thirty days after the
3908 [commissioner] secretary submitted such benchmarks to such
3909 committee. If the committee votes to reject such benchmarks, the
3910 [commissioner] secretary may submit to the committee modified annual
3911 health care cost growth benchmarks for such succeeding five-year
3912 period for the committee's review and approval in accordance with the
3913 provisions of this subparagraph. The [commissioner] secretary shall not
3914 be required to hold an informational public hearing concerning such
3915 modified benchmarks. Until the joint standing committee of the General
3916 Assembly having cognizance of matters relating to insurance approves
3917 annual health care cost growth benchmarks for the succeeding five-year
3918 period, such benchmarks shall be deemed to be equal to the average
3919 annual health care cost growth benchmark for the preceding five-year
3920 period.

3921 (2) (A) Not later than July 1, 2025, and every five years thereafter, the
3922 [commissioner] secretary shall develop and adopt annual health care
3923 quality benchmarks for the succeeding five calendar years for provider
3924 entities and payers.

3925 (B) In developing annual health care quality benchmarks pursuant to
3926 this subdivision, the [commissioner] secretary shall consider (i) quality
3927 measures endorsed by nationally recognized organizations, including,
3928 but not limited to, the National Quality Forum, the National Committee
3929 for Quality Assurance, the Centers for Medicare and Medicaid Services,
3930 the National Centers for Disease Control and Prevention, the Joint
3931 Commission and expert organizations that develop health equity
3932 measures, and (ii) measures that: (I) Concern health outcomes,
3933 overutilization, underutilization and patient safety, (II) meet standards
3934 of patient-centeredness and ensure consideration of differences in

3935 preferences and clinical characteristics within patient subpopulations,
3936 and (III) concern community health or population health.

3937 (C) (i) The [commissioner] secretary shall hold at least one
3938 informational public hearing prior to adopting the health care quality
3939 benchmarks for each succeeding five-year period described in this
3940 subdivision. The [commissioner] secretary may hold informational
3941 public hearings concerning the quality measures the [commissioner]
3942 secretary proposes to adopt as health care quality benchmarks. Such
3943 informational public hearings shall be held at a time and place
3944 designated by the [commissioner] secretary in a notice prominently
3945 posted by the [commissioner] secretary on the office's Internet web site
3946 and in a form and manner prescribed by the [commissioner] secretary.
3947 The [commissioner] secretary shall make available on the office's
3948 Internet web site a summary of any such informational public hearing
3949 and include the recommendations, if any, to modify or not modify any
3950 such health care quality benchmark.

3951 (ii) If the [commissioner] secretary determines, after any
3952 informational public hearing held pursuant to this subparagraph, that
3953 modifications to any health care quality benchmarks are, in the
3954 [commissioner's] secretary's discretion, reasonably warranted, the
3955 [commissioner] secretary may modify such quality benchmarks. The
3956 [commissioner] secretary shall not be required to hold an additional
3957 informational public hearing concerning such modified quality
3958 benchmarks.

3959 (D) The [commissioner] secretary shall post each adopted health care
3960 quality benchmark on the office's Internet web site.

3961 [(c)] (b) The [commissioner] secretary may enter into such contractual
3962 agreements as may be necessary to carry out the purposes of this section,
3963 including, but not limited to, contractual agreements with actuarial,
3964 economic and other experts and consultants.

3965 Sec. 134. Section 19a-754h of the general statutes is repealed and the

3966 following is substituted in lieu thereof (*Effective July 1, 2026*):

3967 (a) Not later than August [15, 2022, and] fifteenth annually,
3968 [thereafter,] each payer shall report to the [commissioner] secretary, in
3969 a form and manner prescribed by the [commissioner] secretary, for the
3970 preceding or prior years, if the [commissioner] secretary so requests
3971 based on material changes to data previously submitted, aggregated
3972 data, including aggregated self-funded data as applicable, necessary for
3973 the [commissioner] secretary to calculate total health care expenditures,
3974 primary care spending as a percentage of total medical expenses and net
3975 cost of private health insurance. Each payer shall also disclose, as
3976 requested by the [commissioner] secretary, payer data required for
3977 adjusting total medical expense calculations to reflect changes in the
3978 patient population.

3979 (b) Not later than March [31, 2023, and] thirty-first annually,
3980 [thereafter, the commissioner] the secretary shall prepare and post on
3981 the office's Internet web site, a report concerning the total health care
3982 expenditures utilizing the total aggregate medical expenses reported by
3983 payers pursuant to subsection (a) of this section, including, but not
3984 limited to, a breakdown of such population-adjusted total medical
3985 expenses by payer and provider entities. The report may include, but
3986 [shall] need not be limited to, information regarding the following:

3987 (1) Trends in major service category spending;

3988 (2) Primary care spending as a percentage of total medical expenses;

3989 (3) The net cost of private health insurance by payer by market
3990 segment, including individual, small group, large group, self-insured,
3991 student and Medicare Advantage markets; and

3992 (4) Any other factors the [commissioner] secretary deems relevant to
3993 providing context on such data, which shall include, but not be limited
3994 to, the following factors: (A) The impact of the rate of inflation and rate
3995 of medical inflation; (B) impacts, if any, on access to care; and (C)
3996 responses to public health crises or similar emergencies.

3997 (c) The [commissioner] secretary shall annually submit a request to
3998 the federal Centers for Medicare and Medicaid Services for the
3999 unadjusted total medical expenses of Connecticut residents.

4000 (d) Not later than August [15, 2023, and] fifteenth annually,
4001 [thereafter,] each payer or provider entity shall report to the
4002 [commissioner] secretary, in a form and manner prescribed by the
4003 [commissioner] secretary, for the preceding year, and for prior years if
4004 the [commissioner] secretary so requests based on material changes to
4005 data previously submitted, on the health care quality benchmarks
4006 adopted pursuant to section 19a-754g.

4007 (e) Not later than March [31, 2024, and] thirty-first annually,
4008 [thereafter, the commissioner] the secretary shall prepare and post on
4009 the office's Internet web site, a report concerning health care quality
4010 benchmarks reported by payers and provider entities pursuant to
4011 subsection (d) of this section.

4012 (f) The commissioner may enter into such contractual agreements as
4013 may be necessary to carry out the purposes of this section, including,
4014 but not limited to, contractual agreements with actuarial, economic and
4015 other experts and consultants.

4016 Sec. 135. Section 19a-754i of the general statutes is repealed and the
4017 following is substituted in lieu thereof (*Effective July 1, 2026*):

4018 (a) (1) For each calendar year, beginning on January 1, 2023, the
4019 [commissioner] secretary shall, if the payer or provider entity subject to
4020 the cost growth benchmark or primary care spending target [so]
4021 requests [,] a meeting, the secretary shall meet with such payer or
4022 provider entity to review and validate the total medical expenses data
4023 collected pursuant to section 19a-754h for such payer or provider entity.
4024 The [commissioner] secretary shall review information provided by the
4025 payer or provider entity and, if deemed necessary, amend findings for
4026 such payer or provider prior to the identification of payer or provider
4027 entities that exceeded the health care cost growth benchmark or failed

4028 to meet the primary care spending target for the performance year as set
4029 forth in section 19a-754h. The [commissioner] secretary shall identify,
4030 not later than May first of such calendar year, each payer or provider
4031 entity that exceeded the health care cost growth benchmark or failed to
4032 meet the primary care spending target for the performance year.

4033 (2) For each calendar year beginning on or after January 1, 2024, the
4034 [commissioner] secretary shall, if the payer or provider entity subject to
4035 the health care quality benchmarks for the performance year [so]
4036 requests [.] a meeting, the secretary shall meet with such payer or
4037 provider entity to review and validate the quality data collected
4038 pursuant to section 19a-754h for such payer or provider entity. The
4039 [commissioner] secretary shall review information provided by the
4040 payer or provider entity and, if deemed necessary, amend findings for
4041 such payer or provider prior to the identification of payer or provider
4042 entities that exceeded the health care quality benchmark as set forth in
4043 section 19a-754h. The [commissioner] secretary shall identify, not later
4044 than May first of such calendar year, each payer or provider entity that
4045 exceeded the health care quality benchmark for the performance year.

4046 (3) Not later than thirty days after the [commissioner] secretary
4047 identifies each payer or provider entity pursuant to subdivisions (1) and
4048 (2) of this subsection, the [commissioner] secretary shall send a notice to
4049 each such payer or provider entity. Such notice shall be in a form and
4050 manner prescribed by the [commissioner] secretary, and shall disclose
4051 to each such payer or provider entity:

4052 (A) That the [commissioner] secretary has identified such payer or
4053 provider entity pursuant to subdivision (1) or (2) of this subsection; and

4054 (B) The factual basis for the [commissioner's] secretary's
4055 identification of such payer or provider entity pursuant to subdivision
4056 (1) or (2) of this subsection.

4057 (b) (1) For each calendar year beginning on and after January 1, 2023,
4058 if the [commissioner] secretary determines that the annual percentage

4059 change in total health care expenditures for the performance year
4060 exceeded the health care cost growth benchmark for such year, the
4061 [commissioner] secretary shall identify, not later than May first of such
4062 calendar year, any other entity that significantly contributed to
4063 exceeding such benchmark. Each identification shall be based on:

4064 (A) The report prepared by the [commissioner] secretary pursuant to
4065 subsection (b) of section 19a-754h for such calendar year;

4066 (B) The report filed pursuant to section 38a-479ppp for such calendar
4067 year;

4068 (C) The information and data reported to the office pursuant to
4069 subsection (d) of section 19a-754b for such calendar year;

4070 (D) Information obtained from the all-payer claims database
4071 established under section 19a-755a; and

4072 (E) Any other information that the [commissioner] secretary, in the
4073 [commissioner's] secretary's discretion, deems relevant for the purposes
4074 of this section.

4075 (2) The [commissioner] secretary shall account for costs, net of rebates
4076 and discounts, when identifying other entities pursuant to this section.

4077 Sec. 136. Section 19a-754j of the general statutes is repealed and the
4078 following is substituted in lieu thereof (*Effective July 1, 2026*):

4079 (a) (1) Not later than June [30, 2023, and] thirtieth annually,
4080 [thereafter, the commissioner] the secretary shall hold an informational
4081 public hearing to compare the growth in total health care expenditures
4082 in the performance year to the health care cost growth benchmark
4083 established pursuant to section 19a-754g for such year. Such hearing
4084 shall involve an examination of:

4085 (A) The report most recently prepared by the [commissioner]
4086 secretary pursuant to subsection (b) of section 19a-754h;

4087 (B) The expenditures of provider entities and payers, including, but
4088 not limited to, health care cost trends, primary care spending as a
4089 percentage of total medical expenses and the factors contributing to
4090 such costs and expenditures; and

4091 (C) Any other matters that the [commissioner] secretary, in the
4092 [commissioner's] secretary's discretion, deems relevant for the purposes
4093 of this section.

4094 (2) The [commissioner] secretary may require any payer or provider
4095 entity that, for the performance year, is found to be a significant
4096 contributor to health care cost growth in the state or has failed to meet
4097 the primary care spending target, to participate in such hearing. Each
4098 such payer or provider entity that is required to participate in such
4099 hearing shall provide testimony on issues identified by the
4100 [commissioner] secretary and provide additional information on actions
4101 taken to reduce such payer's or entity's contribution to future state-wide
4102 health care costs and expenditures or to increase such payer's or
4103 provider entity's primary care spending as a percentage of total medical
4104 expenses.

4105 (3) The [commissioner] secretary may require that any other entity
4106 that is found to be a significant contributor to health care cost growth in
4107 this state during the performance year participate in such hearing. Any
4108 other entity that is required to participate in such hearing shall provide
4109 testimony on issues identified by the [commissioner] secretary and
4110 provide additional information on actions taken to reduce such other
4111 entity's contribution to future state-wide health care costs. If such other
4112 entity is a drug manufacturer, and the [commissioner] secretary requires
4113 that such drug manufacturer participate in such hearing with respect to
4114 a specific drug or class of drugs, such hearing may, to the extent
4115 possible, include representatives from at least one brand-name
4116 manufacturer, one generic manufacturer and one innovator company
4117 that is less than ten years old.

4118 (4) Not later than October [15, 2023, and] fifteenth annually,

4119 [thereafter, the commissioner] the secretary shall prepare and submit a
4120 report, in accordance with section 11-4a, to the joint standing
4121 committees of the General Assembly having cognizance of matters
4122 relating to insurance and public health. Such report shall be based on
4123 the [commissioner's] secretary's analysis of the information submitted
4124 during the most recent informational public hearing conducted
4125 pursuant to this subsection and any other information that the
4126 [commissioner] secretary, in the [commissioner's] secretary's discretion,
4127 deems relevant for the purposes of this section, and shall:

4128 (A) Describe health care spending trends in this state, including, but
4129 not limited to, trends in primary care spending as a percentage of total
4130 medical expense, and the factors underlying such trends;

4131 (B) Include the findings from the report prepared pursuant to
4132 subsection (b) of section 19a-754h;

4133 (C) Describe a plan for monitoring any unintended adverse
4134 consequences resulting from the adoption of cost growth benchmarks
4135 and primary care spending targets and the results of any findings from
4136 the implementation of such plan; and

4137 (D) Disclose the [commissioner's] secretary's recommendations, if
4138 any, concerning strategies to increase the efficiency of the state's health
4139 care system, including, but not limited to, any recommended legislation
4140 concerning the state's health care system.

4141 (b) (1) Not later than June [30, 2024, and] thirtieth annually,
4142 [thereafter, the commissioner] the secretary shall hold an informational
4143 public hearing to compare the performance of payers and provider
4144 entities in the performance year to the quality benchmarks established
4145 for such year pursuant to section 19a-754g. Such hearing shall include
4146 an examination of:

4147 (A) The report most recently prepared by the [commissioner]
4148 secretary pursuant to subsection (e) of section 19a-754h; and

4149 (B) Any other matters that the [commissioner] secretary, in the
4150 [commissioner's] secretary's discretion, deems relevant for the purposes
4151 of this section.

4152 (2) The [commissioner] secretary may require any payer or provider
4153 entity that failed to meet any health care quality benchmarks in this state
4154 during the performance year to participate in such hearing. Each such
4155 payer or provider entity that is required to participate in such hearing
4156 shall provide testimony on issues identified by the [commissioner]
4157 secretary and provide additional information on actions taken to
4158 improve such payer's or provider entity's quality benchmark
4159 performance.

4160 (3) Not later than October [15, 2024, and] fifteenth annually,
4161 [thereafter, the commissioner] the secretary shall prepare and submit a
4162 report, in accordance with section 11-4a, to the joint standing
4163 committees of the General Assembly having cognizance of matters
4164 relating to insurance and public health. Such report shall be based on
4165 the [commissioner's] secretary's analysis of the information submitted
4166 during the most recent informational public hearing conducted
4167 pursuant to this subsection and any other information that the
4168 [commissioner] secretary, in the [commissioner's] secretary's discretion,
4169 deems relevant for the purposes of this section, and shall:

4170 (A) Describe health care quality trends in this state and the factors
4171 underlying such trends;

4172 (B) Include the findings from the report prepared pursuant to
4173 subsection (e) of section 19a-754h; and

4174 (C) Disclose the [commissioner's] secretary's recommendations, if
4175 any, concerning strategies to improve the quality of the state's health
4176 care system, including, but not limited to, any recommended legislation
4177 concerning the state's health care system.

4178 Sec. 137. Section 19a-754k of the general statutes is repealed and the
4179 following is substituted in lieu thereof (*Effective July 1, 2026*):

4180 The [Commissioner of Health Strategy] Secretary of the Office of
4181 Policy and Management may adopt regulations, in accordance with
4182 chapter 54, to implement the provisions of [section 19a-754a and]
4183 sections 19a-754f to 19a-754j, inclusive.

4184 Sec. 138. Section 19a-755a of the general statutes is repealed and the
4185 following is substituted in lieu thereof (*Effective July 1, 2026*):

4186 (a) As used in this section:

4187 (1) "All-payer claims database" means a database that receives and
4188 stores data from a reporting entity relating to medical insurance claims,
4189 dental insurance claims, pharmacy claims and other insurance claims
4190 information from enrollment and eligibility files.

4191 (2) (A) "Reporting entity" means:

4192 (i) An insurer, as described in section 38a-1, licensed to do health
4193 insurance business in this state;

4194 (ii) A health care center, as defined in section 38a-175;

4195 (iii) An insurer or health care center that provides coverage under
4196 Part C or Part D of Title XVIII of the Social Security Act, as amended
4197 from time to time, to residents of this state;

4198 (iv) A third-party administrator, as defined in section 38a-720;

4199 (v) A pharmacy benefits manager, as defined in section 38a-479aaa;

4200 (vi) A hospital service corporation, as defined in section 38a-199;

4201 (vii) A nonprofit medical service corporation, as defined in section
4202 38a-214;

4203 (viii) A fraternal benefit society, as described in section 38a-595, that
4204 transacts health insurance business in this state;

4205 (ix) A dental plan organization, as defined in section 38a-577;

4206 (x) A preferred provider network, as defined in section 38a-479aa;
4207 and

4208 (xi) Any other person that administers health care claims and
4209 payments pursuant to a contract or agreement or is required by statute
4210 to administer such claims and payments.

4211 (B) "Reporting entity" does not include an employee welfare benefit
4212 plan, as defined in the federal Employee Retirement Income Security
4213 Act of 1974, as amended from time to time, that is also a trust established
4214 pursuant to collective bargaining subject to the federal Labor
4215 Management Relations Act.

4216 (3) "Medicaid data" means the Medicaid provider registry, health
4217 claims data and Medicaid recipient data maintained by the Department
4218 of Social Services.

4219 (4) "CHIP data" means the provider registry, health claims data and
4220 recipient data maintained by the Department of Social Services to
4221 administer the Children's Health Insurance Program.

4222 (b) (1) There is established an all-payer claims database program. The
4223 Office of [Health Strategy] Policy and Management shall: (A) Oversee
4224 the planning, implementation and administration of the all-payer claims
4225 database program for the purpose of collecting, assessing and reporting
4226 health care information relating to safety, quality, cost-effectiveness,
4227 access and efficiency for all levels of health care; (B) ensure that data
4228 received is securely collected, compiled and stored in accordance with
4229 state and federal law; (C) conduct audits of data submitted by reporting
4230 entities in order to verify its accuracy; and (D) in consultation with the
4231 Health Information Technology Advisory Council established under
4232 section 17b-59f, maintain written procedures for the administration of
4233 such all-payer claims database. Any such written procedures shall
4234 include (i) reporting requirements for reporting entities, and (ii)
4235 requirements for providing notice to a reporting entity regarding any
4236 alleged failure on the part of such reporting entity to comply with such

4237 reporting requirements.

4238 (2) The [Commissioner of Health Strategy] Secretary of the Office of
4239 Policy and Management shall seek funding from the federal
4240 government, other public sources and other private sources to cover
4241 costs associated with the planning, implementation and administration
4242 of the all-payer claims database program.

4243 (3) (A) Upon the adoption of reporting requirements as set forth in
4244 subdivision (1) of this subsection, a reporting entity shall report health
4245 care information for inclusion in the all-payer claims database in a form
4246 and manner prescribed by the [Commissioner of Health Strategy]
4247 Secretary of the Office of Policy and Management. The [commissioner]
4248 secretary may, after notice and hearing, impose a civil penalty on any
4249 reporting entity that fails to report health care information as prescribed.
4250 Such civil penalty shall not exceed one thousand dollars per day for each
4251 day of violation and shall not be imposed as a cost for the purpose of
4252 rate determination or reimbursement by a third-party payer.

4253 (B) The [Commissioner of Health Strategy] Secretary of the Office of
4254 Policy and Management may provide the name of any reporting entity
4255 on which such penalty has been imposed to the Insurance
4256 Commissioner. After consultation with the [Commissioner of Health
4257 Strategy] secretary, the Insurance Commissioner may request the
4258 Attorney General to bring an action in the superior court for the judicial
4259 district of Hartford to recover any penalty imposed pursuant to
4260 subparagraph (A) of this subdivision.

4261 (4) The Commissioner of Social Services shall submit Medicaid and
4262 CHIP data to the [Commissioner of Health Strategy] Secretary of the
4263 Office of Policy and Management for inclusion in the all-payer claims
4264 database only for purposes related to administration of the State
4265 Medicaid and CHIP Plans, in accordance with 42 CFR 431.301 to 42 CFR
4266 431.306, inclusive.

4267 (5) The [Commissioner of Health Strategy] Secretary of the Office of

4268 Policy and Management shall: (A) Utilize data in the all-payer claims
4269 database to provide health care consumers in the state with information
4270 concerning the cost and quality of health care services for the purpose
4271 of allowing such consumers to make economically sound and medically
4272 appropriate health care decisions; and (B) make data in the all-payer
4273 claims database available to any state agency, insurer, employer, health
4274 care provider, consumer of health care services or researcher for the
4275 purpose of allowing such person or entity to review such data as it
4276 relates to health care utilization, costs or quality of health care services.
4277 If health information, as defined in 45 CFR 160.103, as amended from
4278 time to time, is permitted to be disclosed under the Health Insurance
4279 Portability and Accountability Act of 1996, P.L. 104-191, as amended
4280 from time to time, or regulations adopted thereunder, any disclosure
4281 thereof made pursuant to this subdivision shall have identifiers
4282 removed, as set forth in 45 CFR 164.514, as amended from time to time.
4283 Any disclosure made pursuant to this subdivision of information other
4284 than health information shall be made in a manner to protect the
4285 confidentiality of such other information as required by state and
4286 federal law. The [Commissioner of Health Strategy] secretary may set a
4287 fee to be charged to each person or entity requesting access to data
4288 stored in the all-payer claims database.

4289 (6) The [Commissioner of Health Strategy] Secretary of the Office of
4290 Policy and Management may (A) in consultation with the All-Payer
4291 Claims Database Advisory Group set forth in section 17b-59f, enter into
4292 a contract with a person or entity to plan, implement or administer the
4293 all-payer claims database program, (B) enter into a contract or take any
4294 action that is necessary to obtain data that is the same data required to
4295 be submitted by reporting entities under Medicare Part A or Part B, (C)
4296 enter into a contract for the collection, management or analysis of data
4297 received from reporting entities, and (D) in accordance with subdivision
4298 (4) of this subsection, enter into a contract or take any action that is
4299 necessary to obtain Medicaid and CHIP data. Any such contract for the
4300 collection, management or analysis of such data shall expressly prohibit
4301 the disclosure of such data for purposes other than the purposes

4302 described in this subsection.

4303 (c) Unless otherwise specified, nothing in this section and no action
4304 taken by the [Commissioner of Health Strategy] Secretary of the Office
4305 of Policy and Management pursuant to this section or section 19a-755b
4306 shall be construed to preempt, supersede or affect the authority of the
4307 Insurance Commissioner to regulate the business of insurance in the
4308 state.

4309 Sec. 139. Section 19a-755b of the general statutes is repealed and the
4310 following is substituted in lieu thereof (*Effective July 1, 2026*):

4311 (a) For purposes of this section and sections 19a-904a, 19a-904b and
4312 38a-477d to 38a-477f, inclusive:

4313 (1) "Allowed amount" means the maximum reimbursement dollar
4314 amount that an insured's health insurance policy allows for a specific
4315 procedure or service;

4316 (2) "Consumer health information Internet web site" means an
4317 Internet web site developed and operated by the Office of [Health
4318 Strategy] Policy and Management to assist consumers in making
4319 informed decisions concerning their health care and informed choices
4320 among health care providers;

4321 (3) "Episode of care" means all health care services related to the
4322 treatment of a condition or a service category for such treatment and,
4323 for acute conditions, includes health care services and treatment
4324 provided from the onset of the condition to its resolution or a service
4325 category for such treatment and, for chronic conditions, includes health
4326 care services and treatment provided over a given period of time or a
4327 service category for such treatment;

4328 [(4) "Commissioner" means the Commissioner of Health Strategy;]

4329 [(5)] (4) "Health care provider" means any individual, corporation,
4330 facility or institution licensed by this state to provide health care

4331 services;

4332 [(6)] (5) "Health carrier" means any insurer, health care center,
4333 hospital service corporation, medical service corporation, fraternal
4334 benefit society or other entity delivering, issuing for delivery, renewing,
4335 amending or continuing any individual or group health insurance
4336 policy in this state providing coverage of the type specified in
4337 subdivisions (1), (2), (4), (11) and (12) of section 38a-469;

4338 [(7)] (6) "Hospital" has the same meaning as provided in section 19a-
4339 490;

4340 [(8)] (7) "Out-of-pocket costs" means costs that are not reimbursed by
4341 a health insurance policy and includes deductibles, coinsurance and
4342 copayments for covered services and other costs to the consumer
4343 associated with a procedure or service;

4344 [(9)] (8) "Outpatient surgical facility" has the same meaning as
4345 provided in section 19a-493b; [and]

4346 [(10)] (9) "Public or private third party" means the state, the federal
4347 government, employers, a health carrier, third-party administrator, as
4348 defined in section 38a-720, or managed care organization; and

4349 (10) "Secretary" means the Secretary of the Office of Policy and
4350 Management.

4351 (b) (1) Within available resources, the consumer health information
4352 Internet web site shall: (A) Contain information comparing the quality,
4353 price and cost of health care services, including, to the extent practicable,
4354 (i) comparative price and cost information for the health care services
4355 and procedures reported pursuant to subsection (c) of this section
4356 categorized by payer or listed by health care provider, (ii) links to
4357 Internet web sites and consumer tools where consumers may obtain
4358 comparative cost and quality information, including The Joint
4359 Commission and Medicare hospital compare tool, (iii) definitions of
4360 common health insurance and medical terms so consumers may

4361 compare health coverage and understand the terms of their coverage,
4362 and (iv) factors consumers should consider when choosing an insurance
4363 product or provider group, including provider network, premium, cost
4364 sharing, covered services and tier information; (B) be designed to assist
4365 consumers and institutional purchasers in making informed decisions
4366 regarding their health care and informed choices among health care
4367 providers and, to the extent practicable, provide reference pricing for
4368 services paid by various health carriers to health care providers; (C)
4369 present information in language and a format that is understandable to
4370 the average consumer; and (D) be publicized to the general public. All
4371 information outlined in this section shall be posted on an Internet web
4372 site established, or to be established, by the [Commissioner of Health
4373 Strategy] secretary in a manner and time frame as may be
4374 organizationally and financially reasonable in [his or her] the secretary's
4375 sole discretion.

4376 (2) Information collected, stored and published by the Office of
4377 [Health Strategy] Policy and Management pursuant to this section is
4378 subject to the federal Health Insurance Portability and Accountability
4379 Act of 1996, P.L. 104-191, as amended from time to time.

4380 (3) The [Commissioner of Health Strategy] secretary may consider
4381 adding quality measures to the consumer health information Internet
4382 web site.

4383 (c) Not later than January [1, 2018, and] first annually, [thereafter, the
4384 Commissioner of Health Strategy] the secretary shall, to the extent the
4385 information is available, make available to the public on the consumer
4386 health information Internet web site a list of: (1) The fifty most
4387 frequently occurring inpatient services or procedures in the state; (2) the
4388 fifty most frequently provided outpatient services or procedures in the
4389 state; (3) the twenty-five most frequent surgical services or procedures
4390 in the state; (4) the twenty-five most frequent imaging services or
4391 procedures in the state; and (5) the twenty-five most frequently used
4392 pharmaceutical products and medical devices in the state. Such lists
4393 may (A) be expanded to include additional admissions and procedures,

4394 (B) be based upon those services and procedures that are most
4395 commonly performed by volume or that represent the greatest
4396 percentage of related health care expenditures, or (C) be designed to
4397 include those services and procedures most likely to result in out-of-
4398 pocket costs to consumers or include bundled episodes of care.

4399 (d) Not later than January [1, 2018, and] first annually, [thereafter,] to
4400 the extent practicable, the [Commissioner of Health Strategy] secretary
4401 shall issue a report, in a form and manner prescribed by the
4402 [commissioner] secretary, that includes the (1) billed and allowed
4403 amounts paid to health care providers in each health carrier's network
4404 for each service and procedure included pursuant to subsection (c) of
4405 this section, and (2) out-of-pocket costs for each such service and
4406 procedure.

4407 (e) (1) [On and after January 1, 2018, each] Each hospital shall, at the
4408 time of scheduling a service or procedure for nonemergency care that is
4409 included in the report prepared by the [Commissioner of Health
4410 Strategy] secretary pursuant to subsection (d) of this section, regardless
4411 of the location or setting where such services are delivered, notify the
4412 patient of the patient's right to make a request for cost and quality
4413 information. Upon the request of a patient for a diagnosis or procedure
4414 included in such report, the hospital shall, not later than three business
4415 days after scheduling such service or procedure, provide written notice,
4416 electronically or by mail, to the patient who is the subject of the service
4417 or procedure concerning: (A) If the patient is uninsured, the amount to
4418 be charged for the service or procedure if all charges are paid in full
4419 without a public or private third party paying any portion of the
4420 charges, including the amount of any facility fee, or, if the hospital is not
4421 able to provide a specific amount due to an inability to predict the
4422 specific treatment or diagnostic code, the estimated maximum allowed
4423 amount or charge for the service or procedure, including the amount of
4424 any facility fee; (B) the corresponding Medicare reimbursement amount
4425 or, if there is no corresponding Medicare reimbursement amount for
4426 such diagnosis or procedure, (i) the approximate amount Medicare

4427 would have paid the hospital for the services on the billing statement,
4428 or (ii) the percentage of the hospital's charges that Medicare would have
4429 paid the hospital for the services; (C) if the patient is insured, the
4430 allowed amount, the toll-free telephone number and the Internet web
4431 site address of the patient's health carrier where the patient can obtain
4432 information concerning charges and out-of-pocket costs; (D) The Joint
4433 Commission's composite accountability rating and the Medicare
4434 hospital compare star rating for the hospital, as applicable; and (E) the
4435 Internet web site addresses for The Joint Commission and the Medicare
4436 hospital compare tool where the patient may obtain information
4437 concerning the hospital.

4438 (2) If the patient is insured and the hospital is out-of-network under
4439 the patient's health insurance policy, such written notice shall include a
4440 statement that the service or procedure will likely be deemed out-of-
4441 network and that any out-of-network applicable rates under such policy
4442 may apply.

4443 Sec. 140. Subsection (b) of section 19a-911 of the general statutes is
4444 repealed and the following is substituted in lieu thereof (*Effective July 1,*
4445 *2026*):

4446 (b) The Council on Protecting Women's Health shall be comprised of
4447 (1) the following ex-officio voting members: (A) The Commissioner of
4448 Public Health, or the commissioner's designee; (B) the Commissioner of
4449 Mental Health and Addiction Services, or the commissioner's designee;
4450 (C) the Insurance Commissioner, or the commissioner's designee; (D)
4451 [the Commissioner of Health Strategy, or the commissioner's designee;
4452 (E)] the Healthcare Advocate, or the Healthcare Advocate's designee;
4453 and [(F)] (E) the Secretary of the Office of Policy and Management, or
4454 the secretary's designee; and (2) fourteen public members, three of
4455 whom shall be appointed by the president pro tempore of the Senate,
4456 three of whom shall be appointed by the speaker of the House of
4457 Representatives, two of whom shall be appointed by the majority leader
4458 of the Senate, two of whom shall be appointed by the majority leader of
4459 the House of Representatives, two of whom shall be appointed by the

4460 minority leader of the Senate and two of whom shall be appointed by
4461 the minority leader of the House of Representatives, and all of whom
4462 shall be knowledgeable on issues relative to women's health care in the
4463 state. The membership of the council shall fairly and adequately
4464 represent women who have had issues accessing quality health care in
4465 the state.

4466 Sec. 141. Subsections (b) and (c) of section 20-195ttt of the 2026
4467 supplement to the general statutes are repealed and the following is
4468 substituted in lieu thereof (*Effective July 1, 2026*):

4469 (b) There is established within the [Office of Health Strategy]
4470 Department of Public Health a Community Health Worker Advisory
4471 Body. Said body shall (1) advise [said office and the Department of
4472 Public Health] the department on matters relating to the educational
4473 and certification requirements for training programs for community
4474 health workers, including the minimum number of hours and
4475 internship requirements for certification of community health workers,
4476 (2) conduct a continuous review of such educational and certification
4477 programs, and (3) provide the department with a list of approved
4478 educational and certification programs for community health workers.

4479 (c) The Commissioner of [Health Strategy] Public Health, or the
4480 commissioner's designee, shall act as the chair of the Community Health
4481 Worker Advisory Body and shall appoint the following members to said
4482 body:

4483 (1) Six members who are actively practicing as community health
4484 workers in the state;

4485 (2) A member of the Community Health Workers Association of
4486 Connecticut or any successor or comparable professional organization
4487 that represents community health workers in the state;

4488 (3) A representative of a community-based community health worker
4489 training organization;

- 4490 (4) A representative of the Connecticut State Community College;
- 4491 (5) An employer of community health workers;
- 4492 (6) A representative of a health care organization that employs
4493 community health workers; and
- 4494 (7) A health care provider who works directly with community health
4495 workers. [; and]
- 4496 [(8) The Commissioner of Public Health, or the commissioner's
4497 designee.]
- 4498 Sec. 142. Subsection (b) of section 28-33 of the 2026 supplement to the
4499 general statutes is repealed and the following is substituted in lieu
4500 thereof (*Effective July 1, 2026*):
- 4501 (b) The task force shall consist of the following members:
- 4502 (1) Two appointed by the speaker of the House of Representatives,
4503 one of whom has expertise in prescription drug supply chains and one
4504 of whom has expertise in federal law concerning prescription drug
4505 shortages;
- 4506 (2) Two appointed by the president pro tempore of the Senate, one of
4507 whom represents hospitals and one of whom represents health care
4508 providers who treat patients with rare diseases;
- 4509 (3) One appointed by the majority leader of the House of
4510 Representatives, who represents one of the two federally recognized
4511 Indian tribes in the state;
- 4512 (4) One appointed by the majority leader of the Senate, who
4513 represents one of the two federally recognized Indian tribes in the state;
- 4514 (5) One appointed by the minority leader of the House of
4515 Representatives, who represents health insurance companies;

4516 (6) One appointed by the minority leader of the Senate, who is a
4517 representative of the Connecticut Health Insurance Exchange;

4518 [(7) The Commissioner of Health Strategy, or the commissioner's
4519 designee;]

4520 [(8)] (7) The Commissioner of Consumer Protection, or the
4521 commissioner's designee;

4522 [(9)] (8) The Commissioner of Social Services, or the commissioner's
4523 designee;

4524 [(10)] (9) The Commissioner of Public Health, or the commissioner's
4525 designee;

4526 [(11)] (10) The chief executive officer of The University of Connecticut
4527 Health Center, or the chief executive officer's designee;

4528 [(12)] (11) The Insurance Commissioner, or the commissioner's
4529 designee;

4530 [(13)] (12) The Commissioner of Economic and Community
4531 Development, or the commissioner's designee; and

4532 [(14)] (13) Any other members as deemed necessary by the
4533 chairpersons of the task force.

4534 Sec. 143. Subsections (e) to (g), inclusive, of section 33-182bb of the
4535 general statutes are repealed and the following is substituted in lieu
4536 thereof (*Effective July 1, 2026*):

4537 (e) Any medical foundation organized on or after July 1, 2009, shall
4538 file a copy of its certificate of incorporation and any amendments to its
4539 certificate of incorporation with the Health Systems Planning Unit of the
4540 [Office of Health Strategy] Department of Public Health not later than
4541 ten business days after the medical foundation files such certificate of
4542 incorporation or amendment with the Secretary of the State pursuant to
4543 chapter 602.

4544 (f) Any medical group clinic corporation formed under chapter 594
4545 of the general statutes, revision of 1958, revised to 1995, which amends
4546 its certificate of incorporation pursuant to subsection (a) of section 33-
4547 182cc, shall file with the Health Systems Planning Unit of the [Office of
4548 Health Strategy] Department of Public Health a copy of its certificate of
4549 incorporation and any amendments to its certificate of incorporation,
4550 including any amendment to its certificate of incorporation that
4551 complies with the requirements of subsection (a) of section 33-182cc, not
4552 later than ten business days after the medical foundation files its
4553 certificate of incorporation or any amendments to its certificate of
4554 incorporation with the Secretary of the State.

4555 (g) Any medical foundation, regardless of when organized, shall file
4556 notice with the Health Systems Planning Unit of the [Office of Health
4557 Strategy] Department of Public Health and the Secretary of the State of
4558 its liquidation, termination, dissolution or cessation of operations not
4559 later than ten business days after a vote by its board of directors or
4560 members to take such action. A medical foundation shall, annually,
4561 provide the office with (1) a statement of its mission, (2) the name and
4562 address of the organizing members, (3) the name and specialty of each
4563 physician employed by or acting as an agent of the medical foundation,
4564 (4) the location or locations where each such physician practices, (5) a
4565 description of the services provided at each such location, (6) a
4566 description of any significant change in its services during the preceding
4567 year, (7) a copy of the medical foundation's governing documents and
4568 bylaws, (8) the name and employer of each member of the board of
4569 directors, and (9) other financial information as reported on the medical
4570 foundation's most recently filed Internal Revenue Service return of
4571 organization exempt from income tax form, or any replacement form
4572 adopted by the Internal Revenue Service, or, if such medical foundation
4573 is not required to file such form, information substantially similar to that
4574 required by such form. The Health Systems Planning Unit shall make
4575 such forms and information available to members of the public and
4576 accessible on said unit's Internet web site.

4577 Sec. 144. Subdivisions (2) and (3) of subsection (a) of section 38a-47 of
4578 the general statutes are repealed and the following is substituted in lieu
4579 thereof (*Effective July 1, 2026*):

4580 (2) The amount appropriated to the Office of [Health Strategy] Policy
4581 and Management from the Insurance Fund for the fiscal year, [including
4582 the cost of fringe benefits for office personnel as estimated by the
4583 Comptroller,] which shall be reduced by the amount of federal
4584 reimbursement received for allowable Medicaid administrative
4585 expenses;

4586 (3) The expenditures made on behalf of the department and said
4587 offices from the Capital Equipment Purchase Fund pursuant to section
4588 4a-9 for such year, but excluding such estimated expenditures made on
4589 behalf of the Health Systems Planning Unit of the [Office of Health
4590 Strategy] Department of Public Health; and

4591 Sec. 145. Subsections (b) to (f), inclusive, of section 38a-48 of the
4592 general statutes are repealed and the following is substituted in lieu
4593 thereof (*Effective July 1, 2026*):

4594 (b) On or before July thirty-first, annually, the Insurance
4595 Commissioner shall render to each domestic insurance company or
4596 other domestic entity liable for payment under section 38a-47:

4597 (1) A statement that includes (A) the amount appropriated to the
4598 Insurance Department, the Office of the Healthcare Advocate and the
4599 Office of [Health Strategy] Policy and Management from the Insurance
4600 Fund established under section 38a-52a for the fiscal year beginning July
4601 first of the same year, (B) the cost of fringe benefits for department and
4602 office personnel for such year, as estimated by the Comptroller, (C) the
4603 estimated expenditures on behalf of the department and the offices from
4604 the Capital Equipment Purchase Fund pursuant to section 4a-9 for such
4605 year, not including such estimated expenditures made on behalf of the
4606 Health Systems Planning Unit of the [Office of Health Strategy]
4607 Department of Public Health, and (D) the amount appropriated to the

4608 Department of Aging and Disability Services for the fall prevention
4609 program established in section 17a-859 from the Insurance Fund for the
4610 fiscal year;

4611 (2) A statement of the total amount of taxes reported in the annual
4612 statement rendered to the Insurance Commissioner pursuant to
4613 subsection (a) of this section; and

4614 (3) The proposed assessment against that company or entity,
4615 calculated in accordance with the provisions of subsection (c) of this
4616 section, provided for the purposes of this calculation the amount
4617 appropriated to the Insurance Department, the Office of the Healthcare
4618 Advocate and the Office of [Health Strategy] Policy and Management
4619 from the Insurance Fund plus the cost of fringe benefits for department
4620 and office personnel and the estimated expenditures on behalf of the
4621 department and said offices from the Capital Equipment Purchase Fund
4622 pursuant to section 4a-9, not including such expenditures made on
4623 behalf of the Health Systems Planning Unit of the [Office of Health
4624 Strategy] Department of Public Health shall be deemed to be the actual
4625 expenditures of the department and said offices, and the amount
4626 appropriated to the Department of Aging and Disability Services from
4627 the Insurance Fund for the fiscal year for the fall prevention program
4628 established in section 17a-859 shall be deemed to be the actual
4629 expenditures for the program.

4630 (c) (1) The proposed assessments for each domestic insurance
4631 company or other domestic entity shall be calculated by (A) allocating
4632 twenty per cent of the amount to be paid under section 38a-47 among
4633 the domestic entities organized under sections 38a-199 to 38a-209,
4634 inclusive, and 38a-214 to 38a-225, inclusive, in proportion to their
4635 respective shares of the total amount of taxes reported in the annual
4636 statement rendered to the Insurance Commissioner pursuant to
4637 subsection (a) of this section, and (B) allocating eighty per cent of the
4638 amount to be paid under section 38a-47 among all domestic insurance
4639 companies and domestic entities other than those organized under
4640 sections 38a-199 to 38a-209, inclusive, and 38a-214 to 38a-225, inclusive,

4641 in proportion to their respective shares of the total amount of taxes
4642 reported in the annual statement rendered to the Insurance
4643 Commissioner pursuant to subsection (a) of this section, provided if
4644 there are no domestic entities organized under sections 38a-199 to 38a-
4645 209, inclusive, and 38a-214 to 38a-225, inclusive, at the time of
4646 assessment, one hundred per cent of the amount to be paid under
4647 section 38a-47 shall be allocated among such domestic insurance
4648 companies and domestic entities.

4649 (2) When the amount any such company or entity is assessed
4650 pursuant to this section exceeds twenty-five per cent of the actual
4651 expenditures of the Insurance Department, the Office of the Healthcare
4652 Advocate and the Office of [Health Strategy] Policy and Management
4653 from the Insurance Fund, such excess amount shall not be paid by such
4654 company or entity but rather shall be assessed against and paid by all
4655 other such companies and entities in proportion to their respective
4656 shares of the total amount of taxes reported in the annual statement
4657 rendered to the Insurance Commissioner pursuant to subsection (a) of
4658 this section, except that for purposes of any assessment made to fund
4659 payments to the Department of Public Health to purchase vaccines, such
4660 company or entity shall be responsible for its share of the costs,
4661 notwithstanding whether its assessment exceeds twenty-five per cent of
4662 the actual expenditures of the Insurance Department, the Office of the
4663 Healthcare Advocate and the Office of [Health Strategy] Policy and
4664 Management from the Insurance Fund. The provisions of this
4665 subdivision shall not be applicable to any corporation that has
4666 converted to a domestic mutual insurance company pursuant to section
4667 38a-155 upon the effective date of any public act that amends said
4668 section to modify or remove any restriction on the business such a
4669 company may engage in, for purposes of any assessment due from such
4670 company on and after such effective date.

4671 (d) Each annual payment determined under section 38a-47 and each
4672 annual assessment determined under this section shall be calculated
4673 based on the total amount of taxes reported in the annual statement

4674 rendered to the Insurance Commissioner pursuant to subsection (a) of
4675 this section.

4676 (e) On or before September first, annually, for each fiscal year, the
4677 Insurance Commissioner, after receiving any objections to the proposed
4678 assessments and making such adjustments as in the commissioner's
4679 opinion may be indicated, shall assess each such domestic insurance
4680 company or other domestic entity an amount equal to its proposed
4681 assessment as so adjusted. Each domestic insurance company or other
4682 domestic entity shall pay to the Insurance Commissioner (1) on or before
4683 June thirtieth, annually, an estimated payment against its assessment for
4684 the following year equal to twenty-five per cent of its assessment for the
4685 fiscal year ending such June thirtieth, (2) on or before September
4686 thirtieth, annually, twenty-five per cent of its assessment adjusted to
4687 reflect any credit or amount due from the preceding fiscal year as
4688 determined by the commissioner under subsection (f) of this section,
4689 and (3) on or before the following December thirty-first and March
4690 thirty-first, annually, each domestic insurance company or other
4691 domestic entity shall pay to the Insurance Commissioner the remaining
4692 fifty per cent of its proposed assessment to the department in two equal
4693 installments.

4694 (f) If the actual expenditures for the fall prevention program
4695 established in section 17a-859 are less than the amount allocated, the
4696 Commissioner of Aging and Disability Services shall notify the
4697 Insurance Commissioner. Immediately following the close of the fiscal
4698 year, the Insurance Commissioner shall recalculate the proposed
4699 assessment for each domestic insurance company or other domestic
4700 entity in accordance with subsection (c) of this section using the actual
4701 expenditures made during the fiscal year by the Insurance Department,
4702 the Office of the Healthcare Advocate and the Office of [Health Strategy]
4703 Policy and Management from the Insurance Fund, the actual
4704 expenditures made on behalf of the department and said offices from
4705 the Capital Equipment Purchase Fund pursuant to section 4a-9, not
4706 including such expenditures made on behalf of the Health Systems

4707 Planning Unit of the [Office of Health Strategy] Department of Public
4708 Health, and the actual expenditures for the fall prevention program. On
4709 or before July thirty-first, annually, the Insurance Commissioner shall
4710 render to each such domestic insurance company and other domestic
4711 entity a statement showing the difference between their respective
4712 recalculated assessments and the amount they have previously paid. On
4713 or before August thirty-first, the Insurance Commissioner, after
4714 receiving any objections to such statements, shall make such
4715 adjustments that in the commissioner's opinion may be indicated, and
4716 shall render an adjusted assessment, if any, to the affected companies.
4717 Any such domestic insurance company or other domestic entity may
4718 pay to the Insurance Commissioner the entire assessment required
4719 under this subsection in one payment when the first installment of such
4720 assessment is due.

4721 Sec. 146. Subsection (a) of section 38a-477e of the general statutes is
4722 repealed and the following is substituted in lieu thereof (*Effective July 1,*
4723 *2026*):

4724 (a) [On and after January 1, 2017, each] Each health carrier, as defined
4725 in section 19a-755b, shall maintain an Internet web site and toll-free
4726 telephone number that enables consumers to request and obtain: (1)
4727 Information on in-network costs for inpatient admissions, health care
4728 procedures and services, including (A) the allowed amount for, at a
4729 minimum, admissions and procedures reported to the [Commissioner
4730 of Health Strategy] Secretary of the Office of Policy and Management
4731 pursuant to section 19a-755b for each health care provider in the state;
4732 (B) the estimated out-of-pocket costs that a consumer would be
4733 responsible for paying for any such admission or procedure that is
4734 medically necessary, including any facility fee, coinsurance, copayment,
4735 deductible or other out-of-pocket expense; and (C) data or other
4736 information concerning (i) quality measures for the health care
4737 provider, (ii) patient satisfaction, to the extent such information is
4738 available, (iii) a directory of participating providers, as defined in
4739 section 38a-472f, in accordance with the provisions of section 38a-477h;

4740 and (2) information on out-of-network costs for inpatient admissions,
4741 health care procedures and services.

4742 Sec. 147. Subdivision (2) of subsection (c) of section 38a-477ee of the
4743 2026 supplement to the general statutes is repealed and the following is
4744 substituted in lieu thereof (*Effective July 1, 2026*):

4745 (2) The Attorney General [] and Healthcare Advocate. [and
4746 Commissioner of Health Strategy.]

4747 Sec. 148. Subdivisions (13) to (17), inclusive, of subsection (c) of
4748 section 38a-1083 of the general statutes are repealed and the following
4749 is substituted in lieu thereof (*Effective July 1, 2026*):

4750 (13) Make and enter into any contract or agreement necessary or
4751 incidental to the performance of its duties and execution of its powers,
4752 including, but not limited to, an agreement with the Office of [Health
4753 Strategy] Policy and Management to use funds collected under this
4754 section for the operation of the all-payer claims database established
4755 under section 19a-755a and to receive data from such database. The
4756 contracts entered into by the exchange shall not be subject to the
4757 approval of any other state department, office or agency, provided
4758 copies of all contracts of the exchange shall be maintained by the
4759 exchange as public records, subject to the proprietary rights of any party
4760 to the contract, except any agreement with the Office of [Health
4761 Strategy] Policy and Management shall be subject to approval by said
4762 office [and the Office of Policy and Management] and no portion of such
4763 agreement shall be considered proprietary;

4764 (14) To the extent permitted under its contract with other persons,
4765 consent to any termination, modification, forgiveness or other change of
4766 any term of any contractual right, payment, royalty, contract or
4767 agreement of any kind to which the exchange is a party;

4768 (15) Award grants to trained and certified individuals and
4769 institutions that will assist individuals, families and small employers
4770 and their employees in enrolling in appropriate coverage through the

4771 exchange. Applications for grants from the exchange shall be made on
4772 a form prescribed by the board;

4773 (16) Limit the number of plans offered, and use selective criteria in
4774 determining which plans to offer, through the exchange, provided
4775 individuals and employers have an adequate number and selection of
4776 choices;

4777 (17) Evaluate [jointly with the Health Care Cabinet established
4778 pursuant to section 19a-725] the feasibility of implementing a basic
4779 health program option as set forth in Section 1331 of the Affordable Care
4780 Act;

4781 Sec. 149. Subdivision (26) of section 38a-1084 of the general statutes is
4782 repealed and the following is substituted in lieu thereof (*Effective July 1,*
4783 *2026*):

4784 (26) Consult with the Commissioner of Social Services, Insurance
4785 Commissioner and Office of [Health Strategy, established under section
4786 19a-754a] Policy and Management for the purposes set forth in section
4787 19a-754c;

4788 Sec. 150. Subsection (d) of section 3-123ddd of the general statutes is
4789 repealed and the following is substituted in lieu thereof (*Effective July 1,*
4790 *2026*):

4791 (d) Nothing in sections 3-123aaa to 3-123hhh, inclusive, 19a-654, [19a-
4792 725,] 19a-755a, 38a-513f or 38a-513g shall diminish any right to retiree
4793 health insurance pursuant to a collective bargaining agreement or any
4794 other provision of the general statutes.

4795 Sec. 151. Subsection (b) of section 3-123hhh of the general statutes is
4796 repealed and the following is substituted in lieu thereof (*Effective July 1,*
4797 *2026*):

4798 (b) Nothing in this section or sections 3-123aaa to 3-123ggg, inclusive,
4799 19a-654, [19a-725,] 19a-755a, 38a-513f or 38a-513g shall modify the state

4800 employee plan in any way without the written consent of the State
4801 Employees Bargaining Agent Coalition and the Secretary of the Office
4802 of Policy and Management.

4803 Sec. 152. (NEW) (*Effective July 1, 2026*) (a) The Department of Public
4804 Health shall constitute a successor agency, in accordance with the
4805 provisions of sections 4-38d, 4-38e and 4-39 of the general statutes, to the
4806 Office of Health Strategy with respect to all functions, powers and
4807 duties of the Office of Health Strategy concerning (1) the Health Systems
4808 Planning Unit established pursuant to section 19a-612 of the general
4809 statutes, and (2) the certificate of need process set forth in sections 19a-
4810 638 to 19a-641, inclusive, of the general statutes. Any order, decision,
4811 agreed settlement or regulation of the former Office of Health Strategy
4812 concerning any of the functions described in subdivisions (1) and (2) of
4813 this subsection that is in force on July 1, 2026, shall continue in force and
4814 effect as an order, decision, agreed settlement or regulation of the
4815 Department of Public Health until amended, repealed or superseded
4816 pursuant to law. Where any order, decision, agreed settlement or
4817 regulation of said department and said former office conflict, the
4818 Commissioner of Public Health may implement policies and procedures
4819 consistent with the provisions of chapters 368v and 368z of the general
4820 statutes while in the process of adopting the policies or procedures in
4821 regulation form, provided the commissioner shall publish notice of
4822 intention to adopt regulations on the Department of Public Health's
4823 Internet web site and the eRegulations System not later than twenty
4824 days after implementation of such policies and procedures. Any such
4825 policies or procedures shall be valid until such regulations are adopted.

4826 (b) If the words "Office of Health Strategy" or "Commissioner of
4827 Health Strategy" are used or referred to in any public or special act of
4828 2026, or in any section of the general statutes that is amended in 2026
4829 that concerns said office's or commissioner's functions with regard to (1)
4830 the Health Systems Planning Unit established pursuant to section 19a-
4831 612 of the general statutes, or (2) the certificate of need process set forth
4832 in sections 19a-638 to 19a-641, inclusive, of the general statutes, such

4833 words shall be deemed to mean or refer to the Department of Public
4834 Health or the Commissioner of Public Health, respectively.

4835 Sec. 153. (NEW) (*Effective July 1, 2026*) (a) The Office of Policy and
4836 Management shall constitute a successor agency, in accordance with the
4837 provisions of sections 4-38d, 4-38e and 4-39 of the general statutes, to the
4838 Office of Health Strategy with respect to all functions, powers and
4839 duties of the Office of Health Strategy concerning (1) the State-wide
4840 Health Information Exchange, established pursuant to section 17b-59d
4841 of the general statutes, (2) the all-payer claims database program,
4842 established pursuant to section 19a-755a of the general statutes, (3) the
4843 development, publication and modification of health care cost growth
4844 benchmarks and health care quality benchmarks required pursuant to
4845 sections 19a-754f to 19a-754k, inclusive, of the general statutes, and (4)
4846 contracts and memoranda of understanding or agreement related to
4847 funding from the American Rescue Plan Act of 2021. Any order,
4848 decision, agreed settlement or regulation of the former Office of Health
4849 Strategy concerning any of the functions described in subdivisions (1)
4850 to (3), inclusive, of this subsection that is in force on July 1, 2026, shall
4851 continue in force and effect as an order, decision, agreed settlement or
4852 regulation of the Office of Policy and Management until amended,
4853 repealed or superseded pursuant to law. Where any order, decision,
4854 agreed settlement or regulation of said offices conflict, the Secretary of
4855 the Office of Policy and Management may implement policies and
4856 procedures consistent with the provisions of part III of chapter 319o and
4857 chapter 368ee of the general statutes while in the process of adopting the
4858 policies or procedures in regulation form, provided the secretary shall
4859 publish notice of intention to adopt regulations on the Office of Policy
4860 and Management's Internet web site and the eRegulations System not
4861 later than twenty days after implementation of such policies and
4862 procedures. Any such policy or procedure shall be valid until such
4863 regulations are adopted.

4864 (b) If the words "Office of Health Strategy" or "Commissioner of
4865 Health Strategy" are used or referred to in any public or special act of

4866 2026, or in any section of the general statutes that is amended in 2026
4867 that concerns said office's or commissioner's functions with regard to (1)
4868 the State-wide Health Information Exchange, established pursuant to
4869 section 17b-59d of the general statutes, (2) the all-payer claims database
4870 program, established pursuant to section 19a-755a of the general
4871 statutes, or (3) the development, publication and modification of health
4872 care cost growth benchmarks and health care quality benchmarks
4873 required pursuant to sections 19a-754f to 19a-754k, inclusive, of the
4874 general statutes, such words shall be deemed to mean or refer to the
4875 Office of Policy and Management or the Secretary of the Office of Policy
4876 and Management, respectively.

4877 Sec. 154. (NEW) (*Effective July 1, 2026*) (a) The Department of Social
4878 Services shall constitute a successor agency, in accordance with the
4879 provisions of sections 4-38d, 4-38e and 4-39 of the general statutes, to the
4880 Office of Health Strategy with respect to all functions, powers and
4881 duties of the Office of Health Strategy concerning hospital financial
4882 health reporting by hospitals pursuant to section 19a-486j of the general
4883 statutes. Any order, decision, agreed settlement or regulation of the
4884 former Office of Health Strategy concerning such functions that is in
4885 force on July 1, 2026, shall continue in force and effect as an order,
4886 decision, agreed settlement or regulation of the Department of Social
4887 Services until amended, repealed or superseded pursuant to law. Where
4888 any order, decision, agreed settlement or regulation of said offices
4889 conflict, the Commissioner of Social Services may implement policies
4890 and procedures consistent with the provisions of part III of chapter 319o
4891 and chapter 368ee of the general statutes while in the process of
4892 adopting the policies or procedures in regulation form, provided the
4893 commissioner shall publish notice of intention to adopt regulations on
4894 the Department of Social Services' Internet web site and the
4895 eRegulations System not later than twenty days after implementation of
4896 such policies and procedures. Any such policy or procedure shall be
4897 valid until such regulations are adopted.

4898 (b) If the words "Office of Health Strategy" or "Commissioner of

4899 Health Strategy" are used or referred to in any public or special act of
4900 2026, or in any section of the general statutes that is amended in 2026
4901 that concerns said office's or commissioner's functions with regard to
4902 hospital financial health reporting by hospitals pursuant to section 19a-
4903 486j of the general statutes, such terms shall be deemed to mean or refer
4904 to the Department of Social Services or the Commissioner of Social
4905 Services, respectively.

4906 Sec. 155. (NEW) (*Effective July 1, 2026*) (a) The Office of the Healthcare
4907 Advocate shall constitute a successor agency, in accordance with the
4908 provisions of sections 4-38d, 4-38e and 4-39 of the general statutes, to the
4909 Office of Health Strategy with respect to all functions, powers and
4910 duties of the Office of Health Strategy concerning community benefit
4911 program reporting by hospitals pursuant to section 19a-127k of the
4912 general statutes. Any order, decision, agreed settlement or regulation of
4913 the former Office of Health Strategy concerning such functions that is in
4914 force on July 1, 2026, shall continue in force and effect as an order,
4915 decision, agreed settlement or regulation of the Office of the Healthcare
4916 Advocate until amended, repealed or superseded pursuant to law.
4917 Where any order, decision, agreed settlement or regulation of said
4918 offices conflict, the Office of the Healthcare Advocate may implement
4919 policies and procedures consistent with the provisions of part III of
4920 chapter 319o and chapter 368ee of the general statutes while in the
4921 process of adopting the policies or procedures in regulation form,
4922 provided the Healthcare Advocate shall publish notice of intention to
4923 adopt regulations on the Office of the Healthcare Advocate's Internet
4924 web site and the eRegulations System not later than twenty days after
4925 implementation of such policies and procedures. Any such policy or
4926 procedure shall be valid until such regulations are adopted.

4927 (b) If the words "Office of Health Strategy" or "Commissioner of
4928 Health Strategy" are used or referred to in any public or special act of
4929 2026, or in any section of the general statutes that is amended in 2026
4930 that concerns said office's or commissioner's functions with regard to
4931 community benefit program reporting by hospitals pursuant to section

4932 19a-127k of the general statutes, such terms shall be deemed to mean or
4933 refer to the Office of the Healthcare Advocate or the Healthcare
4934 Advocate, respectively.

4935 Sec. 156. Section 19a-2a of the 2026 supplement to the general statutes
4936 is repealed and the following is substituted in lieu thereof (*Effective July*
4937 *1, 2026*):

4938 The Commissioner of Public Health shall employ the most efficient
4939 and practical means for the prevention and suppression of disease and
4940 shall administer all laws under the jurisdiction of the Department of
4941 Public Health and the Public Health Code. The commissioner shall have
4942 responsibility for the overall operation and administration of the
4943 Department of Public Health. The commissioner shall have the power
4944 and duty to: (1) Administer, coordinate and direct the operation of the
4945 department; (2) adopt and enforce regulations, in accordance with
4946 chapter 54, as are necessary to carry out the purposes of the department
4947 as established by statute; (3) establish rules for the internal operation
4948 and administration of the department; (4) establish and develop
4949 programs and administer services to achieve the purposes of the
4950 department as established by statute; (5) enter into a contract, including,
4951 but not limited to, a contract with another state, for facilities, services
4952 and programs to implement the purposes of the department as
4953 established by statute; (6) designate a deputy commissioner or other
4954 employee of the department to sign any license, certificate or permit
4955 issued by said department; (7) conduct a hearing, issue subpoenas,
4956 administer oaths, compel testimony and render a final decision in any
4957 case when a hearing is required or authorized under the provisions of
4958 any statute dealing with the Department of Public Health; (8) with the
4959 health authorities of this and other states, secure information and data
4960 concerning the prevention and control of epidemics and conditions
4961 affecting or endangering the public health, and compile such
4962 information and statistics and shall disseminate among health
4963 authorities and the people of the state such information as may be of
4964 value to them; (9) annually issue a list of reportable diseases, emergency

4965 illnesses and health conditions and a list of reportable laboratory
4966 findings and amend such lists as the commissioner deems necessary and
4967 distribute such lists as well as any necessary forms to each licensed
4968 physician, licensed physician assistant, licensed advanced practice
4969 registered nurse and clinical laboratory in this state. The commissioner
4970 shall prepare printed forms for reports and returns, with such
4971 instructions as may be necessary, for the use of directors of health,
4972 boards of health and registrars of vital statistics; [and] (10) specify
4973 uniform methods of keeping statistical information by public and
4974 private agencies, organizations and individuals, including a client
4975 identifier system, and collect and make available relevant statistical
4976 information, including the number of persons treated, frequency of
4977 admission and readmission, and frequency and duration of treatment.
4978 The client identifier system shall be subject to the confidentiality
4979 requirements set forth in section 17a-688 and regulations adopted
4980 thereunder; and (11) direct and oversee the Health Systems Planning
4981 Unit, established under section 19a-612 and all of its duties and
4982 responsibilities concerning the certificate of need process as set forth in
4983 chapter 368z. The commissioner may designate any person to perform
4984 any of the duties listed in subdivision (7) of this section. The
4985 commissioner shall have authority over directors of health and may, for
4986 cause, remove any such director; but any person claiming to be
4987 aggrieved by such removal may appeal to the Superior Court which
4988 may affirm or reverse the action of the commissioner as the public
4989 interest requires. The commissioner shall assist and advise local
4990 directors of health and district directors of health in the performance of
4991 their duties, and may require the enforcement of any law, regulation or
4992 ordinance relating to public health. In the event the commissioner
4993 reasonably suspects impropriety on the part of a local director of health
4994 or district director of health, or employee of such director, in the
4995 performance of his or her duties, the commissioner shall provide
4996 notification and any evidence of such impropriety to the appropriate
4997 governing authority of the municipal health authority, established
4998 pursuant to section 19a-200, or the district department of health,
4999 established pursuant to section 19a-244, for purposes of reviewing and

5000 assessing a director's or an employee's compliance with such duties.
5001 Such governing authority shall provide a written report of its findings
5002 from the review and assessment to the commissioner not later than
5003 ninety days after such review and assessment. When requested by local
5004 directors of health or district directors of health, the commissioner shall
5005 consult with them and investigate and advise concerning any condition
5006 affecting public health within their jurisdiction. The commissioner shall
5007 investigate nuisances and conditions affecting, or that he or she has
5008 reason to suspect may affect, the security of life and health in any
5009 locality and, for that purpose, the commissioner, or any person
5010 authorized by the commissioner, may enter and examine any ground,
5011 vehicle, apartment, building or place, and any person designated by the
5012 commissioner shall have the authority conferred by law upon
5013 constables. Whenever the commissioner determines that any provision
5014 of the general statutes or regulation of the Public Health Code is not
5015 being enforced effectively by a local health department or health district,
5016 he or she shall forthwith take such measures, including the performance
5017 of any act required of the local health department or health district, to
5018 ensure enforcement of such statute or regulation and shall inform the
5019 local health department or health district of such measures. In
5020 September of each year the commissioner shall certify to the Secretary
5021 of the Office of Policy and Management the population of each
5022 municipality. The commissioner may solicit and accept for use any gift
5023 of money or property made by will or otherwise, and any grant of or
5024 contract for money, services or property from the federal government,
5025 the state, any political subdivision thereof, any other state or any private
5026 source, and do all things necessary to cooperate with the federal
5027 government or any of its agencies in making an application for any grant
5028 or contract. The commissioner may enter into any contracts or
5029 agreements, in accordance with any established procedures, as may be
5030 necessary for the distribution or use of such money, services or property
5031 in accordance with any requirements to fulfill any conditions of a gift,
5032 grant or contract. The commissioner may establish state-wide and
5033 regional advisory councils. For purposes of this section, "employee of
5034 such director" means an employee of, a consultant employed or retained

5035 by or an independent contractor retained by a local director of health, a
5036 district director of health, a local health department or a health district.

5037 Sec. 157. Section 4-66 of the general statutes is repealed and the
5038 following is substituted in lieu thereof (*Effective July 1, 2026*):

5039 The Secretary of the Office of Policy and Management shall have the
5040 following functions and powers:

5041 (1) To keep on file information concerning the state's general
5042 accounts;

5043 (2) To furnish all accounting statements relating to the financial
5044 condition of the state as a whole, to the condition and operation of state
5045 funds, to appropriations, to reserves and to costs of operations;

5046 (3) To furnish such statements as and when they are required for
5047 administrative purposes and, at the end of each fiscal period, to prepare
5048 and publish such financial statements and data as will convey to the
5049 General Assembly the essential facts as to the financial condition, the
5050 revenues and expenditures and the costs of operations of the state
5051 government;

5052 (4) To furnish to the State Comptroller on or before the twentieth day
5053 of each month cumulative monthly statements of revenues and
5054 expenditures to the end of the last-completed month together with (A)
5055 a statement of estimated revenue by source to the end of the fiscal year,
5056 at least in the same detail as appears in the budget act, and (B) a
5057 statement of appropriation requirements of the state's General Fund to
5058 the end of the fiscal year itemized as far as practicable for each budgeted
5059 agency, including estimates of lapsing appropriations, unallocated
5060 lapsing balances and unallocated appropriation requirements;

5061 (5) To transmit to the Office of Fiscal Analysis a copy of monthly
5062 position data and monthly bond project run;

5063 (6) To inquire into the operation of, and make or recommend

5064 improvement in, the methods employed in the preparation of the
5065 budget and the procedure followed in determining whether the funds
5066 expended by the departments, boards, commissions and institutions
5067 supported in whole or in part by the state are wisely, judiciously and
5068 economically expended and to submit such findings and
5069 recommendations to the General Assembly at each regular session,
5070 together with drafts of proposed legislation, if any;

5071 (7) To examine each department, state college, state hospital, state-
5072 aided hospital, reformatory and prison and each other institution or
5073 other agency supported in whole or in part by the state, except public
5074 schools, for the purpose of determining the effectiveness of its policies,
5075 management, internal organization and operating procedures and the
5076 character, amount, quality and cost of the service rendered by each such
5077 department, institution or agency;

5078 (8) To recommend, and to assist any such department, institution or
5079 agency to effect, improvements in organization, management methods
5080 and procedures and to report its findings and recommendations and
5081 submit drafts of proposed legislation, if any, to the General Assembly at
5082 each regular session;

5083 (9) To consider and devise ways and means whereby comprehensive
5084 plans and designs to meet the needs of the several departments and
5085 institutions with respect to physical plant and equipment and whereby
5086 financial plans and programs for the capital expenditures involved may
5087 be made in advance and to make or assist in making such plans;

5088 (10) To devise and prescribe the form of operating reports that shall
5089 be periodically required from the several departments, boards,
5090 commissions, institutions and agencies supported in whole or in part by
5091 the state;

5092 (11) To require the several departments, boards, commissions,
5093 institutions and agencies to make such reports for such periods as said
5094 secretary may determine; [and]

5095 (12) To verify the correctness of, and to analyze, all such reports and
5096 to take such action as may be deemed necessary to remedy
5097 unsatisfactory conditions disclosed by such reports;

5098 (13) To (A) coordinate the state's health information technology
5099 initiatives, (B) seek funding for and oversee the planning,
5100 implementation and development of policies and procedures for the
5101 administration of the all-payer claims database program established
5102 under section 19a-775a, (C) establish and maintain a consumer health
5103 information Internet web site under section 19a-755b, and (D) designate
5104 an unclassified individual from the office to perform the duties of a
5105 health information technology officer as set forth in sections 17b-59f and
5106 17b-59g; and

5107 (14) To (A) set an annual health care cost growth benchmark and
5108 primary care spending target pursuant to section 19a-754g, (B) develop
5109 and adopt health care quality benchmarks pursuant to section 19a-754g,
5110 (C) develop strategies, in consultation with stakeholders, to meet such
5111 benchmarks and targets developed pursuant to section 19a-754g, (D)
5112 enhance the transparency of provider entities, as defined in subdivision
5113 (13) of section 19a-754f, (E) monitor the development of accountable care
5114 organizations and patient-centered medical homes in the state, and (F)
5115 monitor the adoption of alternative payment methodologies in the state.

5116 Sec. 158. Subsection (a) of section 17b-3 of the general statutes is
5117 repealed and the following is substituted in lieu thereof (*Effective July 1,*
5118 *2026*):

5119 (a) The Commissioner of Social Services shall administer all law
5120 under the jurisdiction of the Department of Social Services. The
5121 commissioner shall have the power and duty to do the following: (1)
5122 Administer, coordinate and direct the operation of the department; (2)
5123 adopt and enforce such regulations, in accordance with chapter 54, as
5124 are necessary to implement the purposes of the department as
5125 established by statute; (3) establish rules for the internal operation and
5126 administration of the department; (4) establish and develop programs

5127 and administer services to achieve the purposes of the department as
5128 established by statute; (5) enter into a contract, including, but not limited
5129 to, up to five contracts with other states, for facilities, services and
5130 programs to implement the purposes of the department as established
5131 by statute; (6) process applications and requests for services promptly;
5132 (7) with the approval of the Comptroller and in accordance with such
5133 procedures as may be specified by the Comptroller, make payments to
5134 providers of services for individuals who are eligible for benefits from
5135 the department as appropriate; (8) make no duplicate awards for items
5136 of assistance once granted, except for replacement of lost or stolen
5137 checks on which payment has been stopped; (9) promote economic self-
5138 sufficiency where appropriate in the department's programs, policies,
5139 practices and staff interactions with recipients; (10) act as advocate for
5140 the need of more comprehensive and coordinated programs for persons
5141 served by the department; (11) plan services and programs for persons
5142 served by the department; (12) coordinate outreach activities by public
5143 and private agencies assisting persons served by the department; (13)
5144 consult and cooperate with area and private planning agencies; (14)
5145 advise and inform municipal officials and officials of social service
5146 agencies about social service programs and collect and disseminate
5147 information pertaining thereto, including information about federal,
5148 state, municipal and private assistance programs and services; (15)
5149 encourage and facilitate effective communication and coordination
5150 among federal, state, municipal and private agencies; (16) inquire into
5151 the utilization of state and federal government resources which offer
5152 solutions to problems of the delivery of social services; (17) conduct,
5153 encourage and maintain research and studies relating to social services
5154 development; (18) prepare, review and encourage model
5155 comprehensive social service programs; (19) maintain an inventory of
5156 data and information and act as a clearing house and referral agency for
5157 information on state and federal programs and services; [and] (20)
5158 conduct, encourage and maintain research and studies and advise
5159 municipal officials and officials of social service agencies about forms of
5160 intergovernmental cooperation and coordination between public and
5161 private agencies designed to advance social service programs; (21)

5162 develop an annual summary and analysis of community benefit
5163 reporting by hospitals pursuant to section 19a-127k; and (22) receive
5164 reports from each hospital regarding its financial health pursuant to
5165 section 19a-486j. The commissioner may require notice of the
5166 submission of all applications by municipalities, any agency thereof,
5167 and social service agencies, for federal and state financial assistance to
5168 carry out social services. The commissioner shall establish state-wide
5169 and regional advisory councils.

5170 Sec. 159. Section 38a-477jj of the general statutes is repealed and the
5171 following is substituted in lieu thereof (*Effective July 1, 2026*):

5172 (a) For the purposes of this section:

5173 (1) "Affordable Care Act" has the same meaning as provided in
5174 section 38a-1080;

5175 (2) "Exchange" has the same meaning as provided in section 38a-1080;

5176 (3) "Health benefit plan" has the same meaning as provided in section
5177 38a-1080, except that such term shall not include a grandfathered health
5178 plan as such term is used in the Affordable Care Act;

5179 (4) "Health carrier" has the same meaning as provided in section 38a-
5180 1080;

5181 (5) "Office of Health Strategy" means the Office of Health Strategy
5182 established under section 19a-754a; and

5183 (6) "Qualified health plan" has the same meaning as provided in
5184 section 38a-1080.

5185 (b) Notwithstanding any provision of the general statutes and except
5186 as provided in subsection (c) of this section, no health carrier offering a
5187 health benefit plan in this state on or after January 1, 2022, that includes
5188 a pharmacy benefit and uses a drug formulary or list of covered drugs
5189 may:

5190 (1) Remove a prescription drug from the drug formulary or list of
5191 covered drugs during a plan year; or

5192 (2) Move a prescription drug from a cost-sharing tier that imposes a
5193 lesser coinsurance, copayment or deductible for the prescription drug to
5194 a cost-sharing tier that imposes a greater coinsurance, copayment or
5195 deductible for the prescription drug during a plan year, unless the
5196 prescription drug is subject to an in-network coinsurance, copayment or
5197 deductible that is not greater than forty dollars per prescription per
5198 month in any tier.

5199 (c) A health carrier offering a health benefit plan in this state on or
5200 after January 1, 2022, that includes a pharmacy benefit and uses a drug
5201 formulary or list of covered drugs may:

5202 (1) Remove a prescription drug from the drug formulary or list of
5203 covered drugs, upon at least ninety days' advance notice to a covered
5204 person and the covered person's treating physician, if:

5205 (A) The federal Food and Drug Administration issues an
5206 announcement, guidance, notice, warning or statement concerning the
5207 prescription drug that calls into question the clinical safety of the
5208 prescription drug, unless the covered person's treating physician states,
5209 in writing, that the prescription drug remains medically necessary
5210 despite such announcement, guidance, notice, warning or statement; or

5211 (B) The prescription drug is approved by the federal Food and Drug
5212 Administration for use without a prescription; and

5213 (2) Move a brand-name prescription drug from a cost-sharing tier
5214 that imposes a lesser coinsurance, copayment or deductible for the
5215 brand-name prescription drug to a cost-sharing tier that imposes a
5216 greater coinsurance, copayment or deductible for the brand-name
5217 prescription drug if the health carrier adds to the drug formulary or list
5218 of covered drugs a generic prescription drug that is:

5219 (A) Approved by the federal Food and Drug Administration for use

5220 as an alternative to such brand-name prescription drug; and

5221 (B) In a cost-sharing tier that imposes a coinsurance, copayment or
5222 deductible for the generic prescription drug that is lesser than the
5223 coinsurance, copayment or deductible that is imposed for such brand-
5224 name prescription drug.

5225 (d) Nothing in this section shall prevent or prohibit a health carrier
5226 from adding a prescription drug to a formulary or list of covered drugs
5227 at any time.

5228 [(e) (1) The Office of Health Strategy shall, at least annually, conduct
5229 a study to determine the impact that the requirements established in
5230 subsections (a) to (d), inclusive, of this section have on the cost of health
5231 benefit plans offered, delivered, issued for delivery, renewed, amended
5232 or continued in this state and qualified health plans offered and sold
5233 through the exchange.

5234 (2) Not later than January 31, 2023, and annually thereafter, the Office
5235 of Health Strategy shall submit a report, in accordance with the
5236 provisions of section 11-4a, to the commissioner and the joint standing
5237 committee of the General Assembly having cognizance of matters
5238 relating to insurance. Such report shall disclose the results of the study
5239 conducted pursuant to subdivision (1) of this subsection for the
5240 preceding year.]

5241 Sec. 160. Sections 19a-754a and 19a-754e of the 2026 supplement to
5242 the general statutes are repealed. (*Effective July 1, 2026*)

5243 Sec. 161. Sections 19a-725 and 20-195sss of the general statutes are
5244 repealed. (*Effective July 1, 2026*)

5245 Sec. 162. Section 501 of substitute house bill 5043 of the current
5246 session, as amended by House Amendment Schedule "A", is repealed
5247 and the following is substituted in lieu thereof (*Effective October 1, 2026*):

5248 (a) Any individual may, at any time, deliver or surrender any firearm,

5249 as defined in section 53a-3 of the general statutes, as amended by [this
5250 act] substitute house bill 5043 of the current session, as amended by
5251 House Amendment Schedule "A", or ammunition in the possession of
5252 such individual to the Commissioner of Emergency Services and Public
5253 Protection for a period of not less than fourteen days, provided a local
5254 police department may accept such firearm or ammunition on behalf of
5255 said commissioner. The commissioner or local police department shall
5256 exercise due care in the receipt and holding of such firearm or
5257 ammunition.

5258 (b) An individual who delivers or surrenders a firearm or
5259 ammunition to the Commissioner of Emergency Services and Public
5260 Protection or a local police department may request the return of such
5261 firearm or ammunition on or after the fifteenth day after the date of such
5262 delivery or surrender, but not later than [two years] one year after such
5263 date. Such request shall include a completed and signed form
5264 promulgated pursuant to subsection (b) of section 502 of [this act]
5265 substitute house bill 5043 of the current session, as amended by House
5266 Amendment Schedule "A".

5267 (c) Not later than five days after receiving a request pursuant to
5268 subsection (b) of this section, the commissioner or a local police
5269 department shall review the request and make available for retrieval
5270 any firearm or ammunition to such individual, provided the
5271 commissioner or local police department confirms that such individual
5272 (1) submitted the signed form required pursuant to subsection (b) of this
5273 section, (2) is not otherwise disqualified from possessing such firearm
5274 or ammunition, and (3) was legally entitled to possess such firearm or
5275 ammunition at the time of delivery or surrender to the commissioner or
5276 a local police department. If such firearm or ammunition has not been
5277 collected by the individual at the end of the [two-year] one-year period
5278 immediately following the date of delivery or surrender of such firearm
5279 or ammunition, the commissioner or a local police department, as
5280 applicable, shall cause such firearm or ammunition to be destroyed. Not
5281 later than ninety days prior to such destruction, the commissioner or

5282 local police department, as applicable, shall notify, in writing, the
5283 individual who delivered or surrendered the firearm or ammunition of
5284 the date of such destruction.

5285 Sec. 163. Section 502 of substitute house bill 5043 of the current
5286 session, as amended by House Amendment Schedule "A", is repealed
5287 and the following is substituted in lieu thereof (*Effective from passage*):

5288 (a) Not later than thirty days after the effective date of this section,
5289 the Commissioner of Emergency Services and Public Protection shall,
5290 within available appropriations, provide written notification of the
5291 provisions of section 501 of [this act] substitute house bill 5043 of the
5292 current session, as amended by House Amendment Schedule "A", by
5293 posting the notification on the Department of Emergency Services and
5294 Public Protection's Internet web site. Such notification shall include
5295 directions concerning how an individual who delivers or surrenders
5296 any firearm, as defined in section 53a-3 of the general statutes, as
5297 amended by [this act] substitute house bill 5043 of the current session,
5298 as amended by House Amendment Schedule "A", or ammunition in the
5299 possession of such individual to the Commissioner of Emergency
5300 Services and Public Protection for a period of not less than fourteen
5301 days, may on or after the fifteenth day after the date of such delivery or
5302 surrender, but not later than [two years] one year after such date,
5303 request the return of such firearm or ammunition, and which
5304 requirements the individual must satisfy in order to have such firearm
5305 or ammunition returned to such person. Such notice shall also provide
5306 that such firearm or ammunition shall be destroyed if not collected by
5307 the individual before the end of the [two-year] one-year period
5308 immediately following the date of delivery or surrender of a firearm or
5309 ammunition.

5310 (b) On or before October 1, [2027] 2026, the Commissioner of
5311 Emergency Services and Public Protection shall promulgate and make
5312 available on the Department of Emergency Services and Public
5313 Protection's Internet web site a form to be signed by any individual who
5314 is seeking the return of a firearm or ammunition pursuant to section 501

5315 of [this act] substitute house bill 5043 of the current session, as amended
5316 by House Amendment Schedule "A".

5317 Sec. 164. Section 32-664 of the general statutes is amended by adding
5318 subsection (m) as follows (*Effective July 1, 2026*):

5319 (m) Whenever an environmental use restriction, as defined in section
5320 22a-133n, is required by section 22a-133k or 22a-134tt or by the
5321 regulations that implement such sections, or any authorization or
5322 approval issued pursuant thereto, on land within the Adriaen's Landing
5323 site, such requirement may be satisfied by complying with the
5324 provisions of subdivision (1) this subsection.

5325 (1) Soil and groundwater impacted by releases of pollution may be
5326 managed in place provided:

5327 (A) Each owner of a parcel within the Adriaen's Landing site on or
5328 under which such soil or groundwater is located records an affidavit of
5329 facts on the land records of the city of Hartford. Such affidavit shall
5330 include statements indicating that (i) there is polluted soil, groundwater
5331 or both on or under the parcel, and (ii) that any person who disturbs
5332 such soil or groundwater for any purpose shall return the soil to the
5333 approximate location and depth from which it was removed or properly
5334 dispose of such soil or groundwater in accordance with all relevant state
5335 and federal laws;

5336 (B) A notice is sent by such owner to all governmental authorities and
5337 public service companies, as defined in section 16-1, that are reasonably
5338 expected to own, use or maintain electric, natural gas, sewer, steam or
5339 other utility infrastructure located on, over or under the portion of the
5340 Adriaen's Landing site where such soil or groundwater will be managed
5341 in place pursuant to this subdivision. Such notice shall include a copy of
5342 the affidavit of facts recorded pursuant to this subdivision; and

5343 (C) If the soil or groundwater on the site is isolated from direct
5344 exposure by a membrane, layer or other barrier, the presence of such
5345 barrier shall be identified in the affidavit of facts recorded pursuant to

5346 this subdivision, and such membrane, layer or other barrier shall not be
5347 removed, breached or otherwise damaged without such person first
5348 receiving prior approval from the Capital Region Development
5349 Authority, which approval shall not be unreasonably withheld. Any
5350 membrane, layer or other barrier that is removed, breached or otherwise
5351 damaged by such person shall be repaired or replaced by such person,
5352 as soon as reasonably practicable, provided measures to mitigate the
5353 risk of direct exposure to, or the migration of, pollution shall be
5354 implemented by such person until the repair or replacement of such
5355 membrane, layer or other barrier is completed.

5356 (2) The Capital Region Development Authority shall prepare, in
5357 consultation with the Commissioner of Energy and Environmental
5358 Protection, a protocol to be used by any person disturbing soil or
5359 groundwater on or under the Adriaen's Landing site that is managed
5360 pursuant to this subsection. Such protocol shall set forth a process for
5361 the provision of notice of any such disturbance and best management
5362 practices for properly managing such soil or groundwater. The
5363 authority shall post such protocol on its Internet website. Such protocol
5364 shall be identified in the affidavit of facts recorded pursuant to
5365 subdivision (1) of this subsection.

5366 (3) The Capital Region Development Authority shall perform, or
5367 cause to be performed, an annual inspection of any portion of the
5368 Adrien's Landing site where soil or groundwater is managed pursuant
5369 to this subsection by a licensed environmental professional, as defined
5370 in section 22a-133v. Such inspection shall include a physical inspection
5371 to determine compliance with any approvals or authorizations issued
5372 pursuant to section 22a-133k or 22a-134tt and the regulations that
5373 implement such sections and a review of records to verify compliance
5374 with any recordkeeping or monitoring required by such approvals or
5375 authorizations. If such annual inspection identifies conditions contrary
5376 to those conditions required by any approval or authorization, the
5377 authority shall notify the Commissioner of Energy and Environmental
5378 Protection and provide a proposed schedule for correcting such

5379 condition.

5380 (4) Nothing in this subsection shall be construed to prohibit any
5381 person from exercising any existing right to dig, excavate or disturb soil
5382 in the Adrien's Landing site provided such person performs such
5383 activity in a manner that protects human health and the environment
5384 and is consistent with the provisions of this subsection. The failure to
5385 perform any activity in a manner that is consistent with the provisions
5386 of this subsection may result in the creation of a condition reasonably
5387 expected to pollute the waters of the state.

5388 Sec. 165. Section 17a-714a of the general statutes is repealed and the
5389 following is substituted in lieu thereof (*Effective from passage*):

5390 (a) For purposes of this section, (1) "opioid antagonist" means
5391 naloxone hydrochloride or any other similarly acting and equally safe
5392 drug approved by the federal Food and Drug Administration for the
5393 treatment of drug overdose, and (2) "person" has the same meaning as
5394 provided in section 21a-240.

5395 (b) A licensed health care professional who is permitted by law to
5396 prescribe an opioid antagonist may prescribe or dispense an opioid
5397 antagonist to any individual to treat or prevent a drug overdose without
5398 being liable for damages in a civil action or subject to criminal
5399 prosecution for prescribing or dispensing such opioid antagonist or for
5400 any subsequent use of such opioid antagonist. A licensed health care
5401 professional who prescribes or dispenses an opioid antagonist in
5402 accordance with the provisions of this subsection shall be deemed not
5403 to have violated the standard of care for such licensed health care
5404 professional.

5405 (c) A licensed health care professional may administer an opioid
5406 antagonist to any person to treat or prevent an opioid-related drug
5407 overdose. Such licensed health care professional who administers an
5408 opioid antagonist in accordance with the provisions of this subsection
5409 shall not be liable for damages in a civil action or subject to criminal

5410 prosecution for administration of such opioid antagonist and shall not
5411 be deemed to have violated the standard of care for such licensed health
5412 care professional.

5413 (d) (1) Any person may provide a nonlegend opioid antagonist to any
5414 person for the purposes of treating or preventing an opioid-related drug
5415 overdose. Any person that distributes such a nonlegend opioid
5416 antagonist in accordance with the provisions of this subsection shall not
5417 be liable for payments or damages in a claim or civil action or subject to
5418 criminal prosecution for such distribution or use of such nonlegend
5419 opioid antagonist.

5420 (2) Any person who solely distributes a nonlegend opioid antagonist
5421 to the public, without compensation or consideration, shall not be
5422 required to obtain a permit pursuant to the provisions of section 20-624.

5423 ~~[(d)]~~ (e) Any person who in good faith believes that another person is
5424 experiencing an opioid-related drug overdose may, if acting with
5425 reasonable care, administer an opioid antagonist to such other person.
5426 Any person, other than a licensed health care professional acting in the
5427 ordinary course of such person's employment, who administers an
5428 opioid antagonist in accordance with this subsection shall not be liable
5429 for damages in a civil action or subject to criminal prosecution with
5430 respect to the administration of such opioid antagonist.

5431 ~~[(e)]~~ (f) Not later than October 1, 2017, each municipality shall amend
5432 its local emergency medical services plan, as described in section 19a-
5433 181b, to ensure that at least one emergency medical services provider,
5434 as defined in the regulations of Connecticut state agencies pertaining to
5435 emergency medical services, who is likely to be the first person to arrive
5436 on the scene of a medical emergency in the municipality, including, but
5437 not limited to, emergency medical services personnel, as defined in
5438 section 20-206jj, or a resident state trooper, is equipped with an opioid
5439 antagonist and such person has received training, approved by the
5440 Commissioner of Public Health, in the administration of an opioid
5441 antagonist.

5442 Sec. 166. Section 15-120h of the general statutes is repealed and the
5443 following is substituted in lieu thereof (*Effective July 1, 2026*):

5444 As used in sections 15-120g to 15-120o, inclusive, the following terms
5445 [shall] have the following meanings:

5446 (1) "Airport project" means any acquisition, disposition, demolition,
5447 remediation, construction, renovation, repair, replacement, expansion,
5448 environmental remediation or other development of real property or
5449 improvements that is related to an airport facility or access to an airport
5450 facility, including (A) the acquisition of off-airport land required by a
5451 permitting agency, (B) for purposes of a runway, a taxilane, a hanger, a
5452 depot, an apron, a mezzanine, baggage handling, administration,
5453 maintenance, storage, utilities or parking, (C) furniture, fixtures,
5454 equipment, communication, navigation, safety infrastructure and
5455 systems and other personal property which is reasonably necessary to
5456 acquire in connection with such development, and (D) associated
5457 interest, reserve fund deposits and other financing costs and charges
5458 necessary or incident to the development, financing, completion and
5459 placement in operation of any airport project, owned in its entirety by
5460 the authority, or suitable for use by the authority, in accordance with the
5461 purposes of the authority;

5462 [(1)] (2) "Authority" means the Tweed-New Haven Airport
5463 Authority, as created under section 15-120i;

5464 (3) "Bonds" means bonds of the authority issued under the provisions
5465 of this chapter, including refunding bonds, which may be secured by
5466 mortgages or the full faith and credit of the authority, the full faith and
5467 credit of a participating corporation or any other lawfully pledged
5468 security of the authority or a participating corporation, which may
5469 include, but need not be limited to, the revenues from the airport or a
5470 financing project.

5471 (4) "Cost" in relation to an airport project or any portion of an airport
5472 project financed under the provision of this chapter, includes all or any

5473 part of the cost of (A) construction and acquisition of all lands,
5474 structures, real or personal property, rights, rights-of-way, franchises,
5475 easements, permits, licenses and other interests of any kind which may
5476 be owned, held, possessed, transferred, assigned or otherwise acquired
5477 or used for an airport project, including the acquisition of off-airport
5478 land; (B) demolishing, renovation, expanding or removing any
5479 buildings or other structures on acquired land, including the cost of
5480 acquiring land upon which such buildings or structures may be moved;
5481 (C) environmental remediation; (D) all machinery, equipment, repairs
5482 or improvements to other public or private property or infrastructure
5483 that is necessary for, incident to or a condition for, the construction,
5484 placement or use of airport infrastructure; (E) the payment of offset,
5485 impact or compensatory fees or payments for the use of, modifications
5486 to or disruption of, public or private properties, adverse impact upon
5487 the environment or the health, safety or welfare of the general public,
5488 finance charges, interest prior to, during and for a period after,
5489 completion of construction, working capital, reserves for principal and
5490 interest, extensions, enlargements, additions, replacements, renovations
5491 and improvements; (F) engineering, financial and legal services,
5492 designs, plans, studies, surveys, inspections, testing, regulatory
5493 compliance and certifications, estimates of cost and of revenues, project
5494 management, administrative expense, expenses necessary to determine
5495 the feasibility or practicability of constructing the airport project; and
5496 (G) other expenses necessary or incident to the construction, financing
5497 or operation of the airport project;

5498 (5) "Federally guaranteed security" means any security, investment
5499 or evidence of indebtedness which is either directly or indirectly insured
5500 or guaranteed, in whole or in part, concerning the payment of principal
5501 and interest by the United States or any agency or instrumentality
5502 thereof;

5503 (6)"Financing project" means the leasing, licensing, operation of an
5504 airport project and any other activity or property for which the authority
5505 is authorized to issue bonds or provide financing under the provisions

5506 of this chapter;

5507 (7) "Participating corporation" means any corporation, partnership,
5508 limited liability company, limited liability partnership, limited
5509 partnership, nonprofit organization, specially chartered corporation or
5510 similar type of legal business entity, quasi-public authority or
5511 governmental entity;

5512 ~~[(2)]~~ (8) "Procedure" means each statement, by the authority, of
5513 general applicability, without regard to its designation, that implements
5514 or prescribes law or policy or describes the organization or procedure of
5515 the authority, ~~[. The term]~~ including, but not limited to, bylaws.
5516 "Procedure" includes the amendment or repeal of a prior regulation, but
5517 does not include, unless otherwise provided by any provision of the
5518 general statutes, (A) statements concerning only the internal
5519 management of the authority and not affecting procedures available to
5520 the public, and (B) intra-authority memoranda;

5521 ~~[(3)]~~ (9) "Proposed procedure" means a proposal by the authority
5522 under the provisions of section 15-120k for a new procedure or for a
5523 change in, addition to or repeal of an existing procedure.

5524 Sec. 167. (NEW) (*Effective July 1, 2026*) (a) Notwithstanding any
5525 provision of the general statutes, upon certification by the Secretary of
5526 the Office of Policy and Management to the Treasurer that a passenger
5527 terminal facility located on the side of the Tweed-New Haven Airport
5528 that is adjacent to the town of East Haven and designed to support
5529 scheduled and charter commercial airline flights, including no fewer
5530 than two thousand one hundred parking spaces, has opened and is
5531 operational, and annually thereafter until such passenger terminal
5532 facility ceases to operate, the Treasurer shall make the following
5533 payments in lieu of taxes on behalf of the state:

5534 (1) Four million four hundred thousand dollars to the town of East
5535 Haven; and

5536 (2) Two million nine hundred thousand dollars to the city of New

5537 Haven.

5538 (b) The payments made pursuant to subsection (a) of this section shall
5539 be in addition to any state grant in lieu of taxes otherwise payable to the
5540 town of East Haven or the city of New Haven pursuant to any provision
5541 of the general statutes.

5542 Sec. 168. Section 15-120i of the general statutes is repealed and the
5543 following is substituted in lieu thereof (*Effective July 1, 2026*):

5544 (a) There is created a body politic and corporate to be known as the
5545 "Tweed-New Haven Airport Authority". Said authority shall be a public
5546 instrumentality and political subdivision of this state and the exercise
5547 by the authority of the powers conferred by sections 15-120g to 15-120o,
5548 inclusive, shall be deemed and held to be the performance of an essential
5549 public and governmental function. The Tweed-New Haven Airport
5550 Authority shall not be construed to be a department, institution or
5551 agency of the state.

5552 (b) (1) The authority shall be governed by a board of directors
5553 consisting of fifteen members, each member serving not more than two
5554 consecutive four-year terms. The terms of the members shall be
5555 staggered so that not more than four members' terms shall expire at the
5556 same time.

5557 (2) Until thirty days after the issuance of a building permit in
5558 accordance with subdivision (3) of this subsection, the membership of
5559 the board shall be appointed as follows: Eight members of the board
5560 shall be appointed by the mayor of New Haven and five members shall
5561 be appointed by the mayor of East Haven, at least six of whom shall be
5562 residents of New Haven or East Haven. Two members of the board shall
5563 be appointed by the South Central Regional Council of Governments,
5564 each of whom shall be a resident of any of the following towns or cities:
5565 Bethany, Branford, Guilford, Hamden, Madison, Milford, North
5566 Branford, North Haven, Orange, Wallingford, West Haven or
5567 Woodbridge. [The board of directors shall elect a chairperson from

5568 among its members and shall annually elect one of its members as vice-
5569 chairperson and shall elect other members as officers, and establish
5570 bylaws as necessary for the operation of the authority. Members of the
5571 board of directors shall receive no compensation for the performance of
5572 their duties. No member of the board shall have any financial interest in
5573 Tweed-New Haven Airport or any of its tenants or concessions.]

5574 (3) Thirty days after the issuance by the local building official and fire
5575 marshal of a building permit to construct a passenger terminal facility
5576 located on the side of the Tweed-New Haven Airport that is adjacent to
5577 the town of East Haven and designed to support scheduled and charter
5578 commercial airline flights, including no fewer than two thousand one
5579 hundred parking spaces, the membership of the board shall be
5580 appointed as follows: Eight members of the board shall be appointed by
5581 the mayor of New Haven and seven members shall be appointed by the
5582 mayor of East Haven, at least six of whom shall be residents of New
5583 Haven or East Haven. Any member appointed by the South Central
5584 Regional Council of Governments pursuant to subdivision (2) of this
5585 subsection and serving at the time of the issuance of such permit shall
5586 continue to serve until such time as the initial appointment of the two
5587 additional members appointed by the mayor of East Haven under this
5588 subdivision.

5589 [(c)] (4) The [thirteen] fifteen members of the board of directors
5590 appointed by the mayors of New Haven and East Haven shall be special
5591 directors vested with additional powers set forth in the bylaws of the
5592 Tweed-New Haven Airport Authority.

5593 (c) The board of directors shall elect a chairperson from among its
5594 members and shall annually elect one of its members as vice-
5595 chairperson and shall elect other members as officers, and establish
5596 bylaws as necessary for the operation of the authority. Members of the
5597 board of directors shall receive no compensation for the performance of
5598 their duties. No member of the board shall have any financial interest in
5599 Tweed-New Haven Airport or any of its tenants or concessions.

5600 (d) The powers of the authority shall be vested in and exercised by
5601 the board. Eight members of the board shall constitute a quorum and
5602 the affirmative vote of a majority of the members present at a meeting
5603 of the board shall be sufficient for any action taken by the board, except
5604 as provided in subsection (e) of this section and sections 15-120j and 15-
5605 120k. No vacancy in the membership of the board shall impair the right
5606 of a quorum to exercise all the rights and perform all the duties of the
5607 board. Any action taken by the board may be authorized by resolution
5608 at any regular or special meeting and shall take effect immediately
5609 unless otherwise provided in the resolution. Notice of any meeting,
5610 whether special or regular, shall be given orally, not less than forty-eight
5611 hours prior to the meeting. The board may delegate to three or more of
5612 its members, or its officers, agents and employees, such board powers
5613 and duties as it may deem proper.

5614 (e) Notwithstanding any other provision of the general statutes, upon
5615 the issuance of a building permit to construct a passenger terminal
5616 facility located on the side of the Tweed-New Haven Airport that is
5617 adjacent to the town of East Haven and designed to support scheduled
5618 and charter commercial airline flights, including no fewer than two
5619 thousand one hundred parking spaces, the following actions shall
5620 require the affirmative vote of at least ten members of the board, unless
5621 such actions are required to comply with applicable federal law,
5622 including mandatory conditions of grants of the Federal Aviation
5623 Administration, the airport operating certificate, safety or security
5624 directives or any action necessary to maintain safe airport operations:

5625 (1) Any extension of Runway 2-20 of the airport exceeding six
5626 thousand six hundred thirty-five linear feet;

5627 (2) Construction of any new facility, or the structural conversion of
5628 any existing airport facility, for the purpose of providing or enabling
5629 freight and cargo services;

5630 (3) Any expansion project that increases the operational capacity,
5631 passenger capacity, gate or landing position capacity or increases use of

5632 airport facilities within the town of East Haven, excluding any project
5633 that is part of, and consistent with, the terminal expansion project
5634 approved by the authority prior to such permit issuance, including all
5635 associated supporting infrastructure necessary to complete such
5636 terminal expansion project;

5637 (4) Any addition, material modification or closing of any airport
5638 entrances or exits;

5639 (5) Any lease agreement or renewal of a lease agreement pertaining
5640 to general aviation services, including the addition of any fixed base
5641 operations;

5642 (6) Any amendment to provisions of a lease or other agreement or
5643 renewal of a lease or other agreement, for private operation or
5644 management of the airport that would impact (A) cargo or freight
5645 operations, the construction of a facility or modification of existing
5646 facilities to accommodate such operations, (B) community benefits,
5647 including, but not limited to, mitigation payments paid by the private
5648 operator, (C) operation of parking at the West Terminal and access to
5649 such terminal, and (D) the acquisition of additional property; and

5650 (7) The repeal or reduction of noise mitigation or abatement measures
5651 previously approved by the board.

5652 [(e)] (f) The authority shall have perpetual succession and shall adopt
5653 procedures for the conduct of its affairs in accordance with section 15-
5654 120k. Such succession shall continue as long as the authority shall have
5655 obligations outstanding and until the existence of the authority is
5656 terminated by law at which time the rights and properties of the
5657 authority shall pass to and be vested in the city of New Haven.

5658 Sec. 169. Section 15-120j of the general statutes is repealed and the
5659 following is substituted in lieu thereof (*Effective July 1, 2026*):

5660 (a) The authority shall maintain and improve Tweed-New Haven
5661 Airport as an important economic development asset for the south

5662 central Connecticut region which is comprised of the towns and cities of
5663 Bethany, Branford, East Haven, Guilford, Hamden, Madison, Milford,
5664 New Haven, North Branford, North Haven, Orange, Wallingford, West
5665 Haven and Woodbridge. The authority shall have the following powers
5666 and duties and may exercise such powers in its own name:

5667 (1) To manage, maintain, supervise and operate Tweed-New Haven
5668 Airport;

5669 (2) ~~[do]~~ To do all things necessary to maintain working relationships
5670 with the state, municipalities and persons, and conduct the business of
5671 a regional airport, in accordance with applicable statutes and
5672 regulations;

5673 (3) ~~[to]~~ To charge reasonable fees for the services it performs and
5674 modify, reduce or increase such fees, provided fees shall apply
5675 uniformly to all airport users;

5676 (4) ~~[to]~~ To enter into contracts, leases and agreements for goods and
5677 equipment and for services with airlines, concessions, counsel,
5678 engineers, architects, private consultants and advisors;

5679 (5) ~~[to]~~ To contract for the construction, reconstruction, enlargement
5680 or alteration of airport projects with private persons and firms in
5681 accordance with such terms and conditions as the authority shall
5682 determine;

5683 (6) ~~[to]~~ To make plans and studies in conjunction with the Federal
5684 Aviation Administration or other state or federal agencies;

5685 (7) ~~[to]~~ To apply for and receive grant funds for airport purposes;

5686 (8) ~~[to]~~ To plan and enter into contracts with municipalities, the state,
5687 businesses and other entities to finance the operations and debt of the
5688 airport, including compensation to the host municipalities of New
5689 Haven and East Haven for the use of the land occupied by the airport;

5690 (9) ~~[to]~~ To borrow funds for airport purposes for such consideration

- 5691 and upon such terms as the authority may determine to be reasonable;
- 5692 (10) ~~[to]~~ To employ a staff necessary to carry out its functions and
- 5693 purposes and fix the duties, compensation and benefits of such staff;
- 5694 (11) ~~[to]~~ To issue and sell bonds and to use the proceeds of such bonds
- 5695 for capital improvements to the airport and to provide for the financing
- 5696 of financing projects, and to fund or refund such projects;
- 5697 (12) ~~[to]~~ To acquire, lease and sell property ~~[by purchase or lease]~~ for
- 5698 airport purposes, subject to applicable requirements of federal law and
- 5699 regulation;
- 5700 (13) To own, operate, lease, assign, pledge, sell or dispose of personal
- 5701 property of any kind for airport purposes, including, but not limited to,
- 5702 securities, rights and privileges in contract or at law, insurance, security
- 5703 and trade fixtures;
- 5704 (14) To fix, revise from time to time, charge and collect rates, rents,
- 5705 fees and charges for the use of and services furnished or to be furnished
- 5706 by a financing project or a portion of a financing project and to enter into
- 5707 a contract with any person, public or private, concerning such project;
- 5708 (15) To make loans to any participating corporation for purposes of
- 5709 providing financing for a financing project in accordance with any
- 5710 agreement between the authority and such corporation;
- 5711 (16) To acquire and agree to acquire any federally guaranteed
- 5712 security and pledge or use such security in a manner that the authority
- 5713 determines in its best interest to secure or as a source of repayment on
- 5714 any of its bonds, notes or other obligation or to agree to make a loan to
- 5715 a participating corporation for purposes of acquiring any federally
- 5716 guaranteed security;
- 5717 (17) To enter into any contract or series of contracts that the authority
- 5718 deems to be necessary or appropriate concerning the bonds, notes or
- 5719 other obligations of the authority;

5720 [(13) to] (18) To prepare and issue budgets, reports, procedures,
5721 audits and such other materials as may be necessary and desirable to its
5722 purposes; [and]

5723 (19) To accept from any public agency, as defined in section 1-200,
5724 insurance, loans or grants for purposes of a financing project or any
5725 portion of such project and to receive loans, grants or other assistance,
5726 including money, property or services, from any source provided any
5727 such assistance is used only for the purposes which such assistance is
5728 granted;

5729 (20) To invest any funds not needed for immediate use or
5730 disbursement, in reserve funds, federally guaranteed securities or in the
5731 state, including the Short Term Investment Fund created under section
5732 3-27a, Medium-Term Investment Fund created under section 3-28a or
5733 other securities, obligations or investments described in a trust
5734 agreement or resolution providing for the issuance of bond funds;

5735 (21) To charge and equitably apportion administrative costs and
5736 expenses incurred by the authority in the exercise of the powers and
5737 duties of the authority among participating corporations; and

5738 [(14) to] (22) To exercise all other powers granted to such an authority
5739 by law.

5740 (b) The authority shall have full control of the operation and
5741 management of the airport, including land, buildings and easements by
5742 means of a lease to the authority by the city of New Haven and the town
5743 of East Haven.

5744 [(c) Notwithstanding the provisions of subsections (a) and (b) of this
5745 section, Runway 2-20 of the airport shall not exceed the existing paved
5746 runway length of five thousand six hundred linear feet.]

5747 (c) The authority may undertake a financing project for two or more
5748 participating corporations jointly and may structure such financing as a
5749 single project or as related components thereof. In such cases, all

5750 provisions of this section and sections 15-120h to 15-120o, inclusive,
5751 shall apply to and for the benefit of the authority and such participating
5752 corporations.

5753 Sec. 170. Section 15-120l of the general statutes is repealed and the
5754 following is substituted in lieu thereof (*Effective July 1, 2026*):

5755 (a) The board of directors of the authority is authorized from time to
5756 time to issue its bonds, notes and other obligations in such principal
5757 amounts as in the opinion of the board shall be necessary to provide
5758 sufficient funds for carrying out the purposes set forth in sections 15-
5759 120g to 15-120o, inclusive, including the payment, funding or refunding
5760 of the principal of, or interest or redemption premiums on, any bonds,
5761 notes and other obligations issued by it whether the bonds, notes or
5762 other obligations or interest to be funded or refunded have or have not
5763 become due, the establishment of reserves to secure such bonds, notes
5764 and other obligations and all other expenditures of the authority
5765 incident to and necessary or convenient to carry out the purposes set
5766 forth in said sections. In anticipation of the sale of such bonds, the
5767 authority may issue negotiable bond anticipation notes and may renew
5768 the same from time to time. Such notes shall be paid from any revenues
5769 of the authority or other moneys available to the authority and not
5770 otherwise pledged, or from the proceeds of the sale of the bonds of the
5771 authority in anticipation of which they were issued. Such notes and any
5772 resolution authorizing such notes may contain any provisions,
5773 conditions or limitations that a resolution authorizing bonds may
5774 contain.

5775 (b) Except as otherwise expressly provided in sections 15-120g to 15-
5776 120o, inclusive, or by the board, every issue of bonds, notes or other
5777 obligations, shall be a general obligation of the authority payable out of
5778 any moneys or revenues of the authority subject only to any agreements
5779 with the holders of particular bonds, notes or other obligations pledging
5780 any particular moneys or revenues, which may be subject to any
5781 applicable agreements with a participating corporation for any bonds
5782 issued on behalf of a participating corporation. Any such bonds, notes

5783 or other obligations may be additionally secured by any grant or
5784 contributions from any department, agency or instrumentality of the
5785 United States or person or a pledge of any moneys, income or revenues
5786 of the authority from any source whatsoever. Bonds issued by the
5787 authority under the provisions of this chapter are securities (1) in which
5788 all public officers and public bodies of the state and the political
5789 subdivisions of the state, insurance companies, state banks and trust
5790 companies, national banking associations, savings banks, savings and
5791 loan associations, investment companies, executors, administrators,
5792 trustees and other fiduciaries may properly and legally invest funds,
5793 and (2) which may properly and legally be deposited with and received
5794 by any state or municipal officer, state agency or political subdivision of
5795 the state for any purpose for which the deposit of bonds or obligations
5796 of the state is authorized by law.

5797 (c) Any provision of any law to the contrary notwithstanding, any
5798 bonds, notes or other obligations issued by the authority pursuant to
5799 sections 15-120g to 15-120o, inclusive, shall be fully negotiable within
5800 the meaning and for all purposes of title 42a. Any such bonds, notes or
5801 other obligations shall be legal investments for all trust companies,
5802 banks, investment companies, savings banks, building and loan
5803 associations, executors, administrators, guardians, conservators,
5804 trustees and other fiduciaries and pension, profit-sharing and
5805 retirement funds.

5806 (d) Bonds, notes or other obligations of the authority shall be
5807 authorized by resolution of the board of directors of the authority and
5808 may be issued in one or more series and shall bear such date or dates,
5809 mature at such time or times, in the case of any such bond or note, or
5810 any renewal thereof, not exceeding the term of years as the board shall
5811 determine from the date of the original issue of such bond or notes, [and,
5812 in the case of bonds, not exceeding thirty years from the date thereof,]
5813 bear interest at such rate or rates, be in such denomination or
5814 denominations, be in such form, either coupon or registered, carry such
5815 conversion or registration privileges, have such rank or priority, be

5816 executed in such manner, be payable [from such sources in such
5817 medium of payment] in any lawful money of the United States at such
5818 place or places within or without this state, and be subject to such terms
5819 of redemption, with or without premium, as such resolution or
5820 resolutions may provide.

5821 (e) Bonds, notes or other obligations of the authority may be sold at
5822 public or private sale at such price or prices as the [board] authority shall
5823 determine. The board may by resolution delegate to the chairperson or
5824 vice-chairperson of the board, the executive director or another officer
5825 of the authority the power to fix the date of sale of bonds, to receive bids
5826 or proposals, to award and sell bonds and to take all other necessary
5827 actions to sell and deliver bonds. The exercise of such delegated powers
5828 shall be subject to the approval of the board in accordance with the
5829 provisions of subsection (d) of section 15-120i. The authority may issue
5830 interim receipts or certificates while preparing the definitive bonds and
5831 shall exchange such receipts or certificates for the definitive bonds.

5832 (f) Bonds, notes or other obligations of the authority may be refunded
5833 and renewed from time to time as may be determined by resolution of
5834 the board, provided any such refunding or renewal shall be in
5835 conformity with any rights of the holders thereof.

5836 (g) Bonds, notes or other obligations of the authority issued under the
5837 provisions of sections 15-120g to 15-120o, inclusive, shall not be deemed
5838 to constitute a debt or liability of the state or of any political subdivision
5839 thereof other than the authority or a pledge of the faith and credit of the
5840 state or of any such political subdivision other than the authority, and
5841 shall not constitute bonds or notes issued or guaranteed by the state
5842 within the meaning of section 3-21, but shall be payable solely from the
5843 funds herein provided therefor. All such bonds, notes or other
5844 obligations shall contain on the face thereof a statement to the effect that
5845 neither the state of Connecticut nor any political subdivision thereof
5846 other than the authority shall be obligated to pay the same or the interest
5847 thereof except from revenues or other funds of the authority and that
5848 neither the faith and credit nor the taxing power of the state of

5849 Connecticut or of any political subdivision thereof other than the
5850 authority is pledged to the payment of the principal of or the interest on
5851 such bonds, notes or other obligations. The authority may issue revenue
5852 bonds for the benefit of a participating corporation in accordance with
5853 the provisions of sections 15-120g to 15-120o, inclusive, provided there
5854 is an agreement with the holder of such bonds that in no event shall the
5855 authority be liable for the repayment of such revenue bonds from any
5856 revenue or assets of the authority other than any assets pledged for such
5857 bonds, regardless of whether such assets shall revert to the authority.

5858 (h) Any resolution authorizing the issuance of bonds, notes or other
5859 obligations may contain provisions, except as expressly limited in
5860 sections 15-120g to 15-120o, inclusive, and except as otherwise limited
5861 by existing agreements with the holders of bonds, notes or other
5862 obligations, that shall be a part of the contract with the holders thereof,
5863 as to the following:

5864 (1) The pledging of the full faith and credit of the authority, the full
5865 faith and credit of any participating corporation, all or any part of the
5866 [moneys received by the authority] revenues of a financing project or
5867 any revenue-producing contract made by the authority with any
5868 participating corporation, any federally guaranteed security and
5869 moneys received therefrom purchased with bond proceeds or all or any
5870 part of any other property, revenues, funds or legally available moneys
5871 to secure the payment of the principal of and interest on any bonds,
5872 notes or other obligations or of any issue thereof;

5873 (2) [the] The pledging of all or part of the assets of the authority to
5874 secure the payment of the principal and interest on any bonds, notes or
5875 other obligations or of any issue thereof, including rental fees and other
5876 charges, and the amounts to be raised during each year, and the use and
5877 disposition of the revenues;

5878 (3) [the] The establishment of reserves or sinking funds, the making
5879 of charges and fees to provide for the same, and the regulation and
5880 disposition thereof;

5881 (4) [limitations] Limitations on the purpose to which the proceeds of
5882 sale of bonds, notes or other obligations may be applied and pledging
5883 such proceeds to secure the payment of the bonds, notes or other
5884 obligations, or of any issues thereof;

5885 (5) [limitations] Limitations on the issuance of additional bonds,
5886 notes or other obligations; the terms upon which additional bonds, bond
5887 anticipation notes or other obligations may be issued and secured [;] and
5888 the refunding or purchase of outstanding bonds, notes or other
5889 obligations of the authority;

5890 (6) [the] The procedure, if any, by which the terms of any contract
5891 with the holders of any bonds, notes or other obligations of the authority
5892 may be amended or abrogated, the amount of bonds, notes or other
5893 obligations the holders of which must consent thereto, and the manner
5894 in which such consent may be given;

5895 (7) [limitations] Limitations on the amount of moneys derived from
5896 the financing project to be expended [by the authority] for operating,
5897 administrative or other expenses of the authority;

5898 (8) [the] The vesting in a trustee or trustees of such property, rights,
5899 powers and duties in trust as the authority may determine, which may
5900 include any or all of the rights, powers and duties of any trustee
5901 appointed by the holders of any bonds, notes or other obligations and
5902 limiting or abrogating the right of the holders of any bonds, notes or
5903 other obligations of the authority to appoint a trustee under this chapter
5904 or limiting the rights, powers and duties of such trustee;

5905 (9) [provision] Provision for a trust agreement by and between the
5906 authority and a corporate trustee which may be any trust company or
5907 bank having the powers of a trust company within or without the state,
5908 which agreement may provide for the pledging or assigning of any
5909 assets or income from assets to which or in which the authority has any
5910 rights or interest, and may further provide for such other rights and
5911 remedies exercisable by the trustee as may be proper for the protection

5912 of the holders of any bonds, notes or other obligations of the authority
5913 and not otherwise in violation of law. Such trust agreement, resolution
5914 providing for the issuance of such bonds or other instrument of the
5915 authority may secure such bonds by a pledge or assignment of any
5916 revenues to be received, any contract or the proceeds of any contract or
5917 any other property, revenues, moneys or funds available to the
5918 authority for such purpose. Such agreement may provide for the
5919 restriction of the rights of any individual holder of bonds, notes or other
5920 obligations of the authority or a financing project. All expenses incurred
5921 in carrying out the provisions of such trust agreement or resolution may
5922 be treated as a part of the cost of operation of the authority or of a
5923 financing project. The trust agreement may contain any further
5924 provisions which are reasonable to delineate further the respective
5925 rights, duties, safeguards, responsibilities and liabilities of the authority;
5926 individual and collective holders of bonds, notes and other obligations
5927 of the authority and the trustees;

5928 (10) [covenants] Covenants to do or refrain from doing such acts and
5929 things as may be necessary or convenient or desirable in order to better
5930 secure any bonds, notes or other obligations of the authority, or which,
5931 in the discretion of the authority, will tend to make any bonds, notes or
5932 other obligations to be issued more marketable notwithstanding that
5933 such covenants, acts or things may not be enumerated [herein] in this
5934 section;

5935 (11) Provisions permitting any participating corporation to enter into
5936 a leasehold mortgage of its leasehold interest in any financing project
5937 and the site thereof or to pledge or assign a loan agreement, conditional
5938 sale agreement, sale agreement or lease for the benefit of the holders of
5939 any bonds issued to finance such financing project; and

5940 [(11) any] (12) Any other matters of like or different character, which
5941 in any way affect the security or protection of the bonds, notes or other
5942 obligations. All expenses incurred in carrying out the provisions of this
5943 chapter shall be payable solely from funds provided under the authority
5944 of this chapter and no liability or obligation shall be incurred by the

5945 authority under this section beyond the extent to which moneys have
5946 been provided in accordance with the provisions of this chapter.

5947 (i) Any pledge made by the authority of income, revenues, or other
5948 property shall be valid and binding from the time the pledge is made,
5949 and shall constitute a pledge within the meaning and for all purposes of
5950 title 42a. The income, revenue, or other property so pledged and
5951 thereafter received by the authority shall immediately be subject to the
5952 lien of such pledge without any physical delivery thereof or further act,
5953 and the lien of any such pledge shall be valid and binding as against all
5954 parties having claims of any kind in tort, contract or otherwise against
5955 the authority, irrespective of whether such parties have notice thereof.

5956 (j) The board of directors of the authority [is authorized and
5957 empowered to] may obtain from any department, agency or
5958 instrumentality of the United States any insurance or guarantee as to, or
5959 of or for the payment or repayment of, interest or principal, or both, or
5960 any part thereof, on any bonds, notes or other obligations issued by the
5961 authority pursuant to the provisions of sections 15-120g to 15-120o,
5962 inclusive, and, notwithstanding any other provisions of said sections, to
5963 enter into any agreement, contract or any other instrument whatsoever
5964 with respect to any such insurance or guarantee except to the extent that
5965 such action would in any way impair or interfere with the authority's
5966 ability to perform and fulfill the terms of any agreement made with the
5967 holders of the bonds, bond anticipation notes or other obligations of the
5968 authority.

5969 (k) Neither the members of the board of directors of the authority nor
5970 any person executing bonds, notes or other obligations of the authority
5971 issued pursuant to sections 15-120g to 15-120o, inclusive, shall be liable
5972 personally on such bonds, notes or other obligations or be subject to any
5973 personal liability or accountability by reason of the issuance thereof, nor
5974 shall any director or employee of the authority be personally liable for
5975 damage or injury, not wanton, reckless, wilful or malicious, caused in
5976 the performance of his duties and within the scope of his employment
5977 or appointment as such director, officer or employee. The authority shall

5978 protect, save harmless and indemnify its directors, officers or employees
5979 from financial loss and expense, including legal fees and costs, if any,
5980 arising out of any claim, demand, suit or judgment by reason of alleged
5981 negligence or alleged deprivation of any person's civil rights or any
5982 other act or omission resulting in damage or injury, if the director,
5983 officer or employee is found to have been acting in the discharge of his
5984 duties or within the scope of his employment and such act or omission
5985 is found not to have been wanton, reckless, wilful or malicious.

5986 (l) The board of directors of the authority shall have power to
5987 purchase bonds, notes or other obligations of the authority out of any
5988 funds available therefor. The authority may hold, cancel or resell such
5989 bonds, notes or other obligations subject to and in accordance with
5990 agreements with holders of its bonds, notes and other obligations.

5991 (m) All moneys received pursuant to the authority of sections 15-120g
5992 to 15-120o, inclusive, whether as proceeds from the sale of bonds or as
5993 revenues, shall be deemed to be trust funds to be held and applied solely
5994 as provided in said sections. Any officer with whom, or any bank or
5995 trust company with which, such moneys shall be deposited shall act as
5996 trustee of such moneys and shall hold and apply the same for the
5997 purposes of sections 15-120g to 15-120o, inclusive, subject to such
5998 regulations as said sections and the resolution authorizing the bonds of
5999 any issue or the trust agreement securing such bonds may provide.

6000 (n) Any holder of bonds, notes or other obligations issued under the
6001 provisions of sections 15-120g to 15-120o, inclusive, and the trustee or
6002 trustees under any trust agreement, except to the extent the rights herein
6003 given may be restricted by any resolution authorizing the issuance of,
6004 or any such trust agreement securing, such bonds, may, either at law or
6005 in equity, by suit, action, mandamus or other proceedings, protect and
6006 enforce any and all rights under the laws of the state or granted
6007 hereunder or under such resolution or trust agreement, and may enforce
6008 and compel the performance of all duties required by said sections or by
6009 such resolution or trust agreement to be performed by the authority or
6010 by any officer, employee or agent thereof, including the fixing, charging

6011 and collecting of the rates, rents, fees and charges herein authorized and
6012 required by the provisions of such resolution or trust agreement to be
6013 fixed, established and collected.

6014 (o) The authority may make representations and agreements for the
6015 benefit of the holders of any bonds, notes or other obligations of the state
6016 which are necessary or appropriate to ensure the exclusion from gross
6017 income for federal income tax purposes of interest on bonds, notes or
6018 other obligations of the state from taxation under the Internal Revenue
6019 Code of 1986 or any subsequent corresponding internal revenue code of
6020 the United States, as from time to time amended, including agreement
6021 to pay rebates to the federal government of investment earnings derived
6022 from the investment of the proceeds of the bonds, notes or other
6023 obligations of the authority. Any such agreement may include: (1) A
6024 covenant to pay rebates to the federal government of investment
6025 earnings derived from the investment of the proceeds of the bonds,
6026 notes or other obligations of the authority, (2) a covenant that the
6027 authority will not limit or alter its rebate obligations until its obligations
6028 to the holders or owners of such bonds, notes or other obligations are
6029 finally met and discharged, and (3) provisions to (A) establish trust and
6030 other accounts which may be appropriate to carry out such
6031 representations and agreements, (B) retain fiscal agents as depositories
6032 for such fund and accounts and (C) provide that such fiscal agents may
6033 act as trustee of such funds and accounts.

6034 (p) Authority rates, rents, fees and charges shall be fixed and adjusted
6035 considering the aggregate of rates, rents, fees and charges from such
6036 financing project in order to provide funds sufficient with other
6037 revenues or moneys available therefor, if any, to (1) pay the cost of
6038 maintaining, repairing and operating the financing project and each and
6039 every portion thereof, to the extent that the payment of such cost has not
6040 otherwise been adequately provided for, (2) pay the principal of and the
6041 interest on outstanding bonds of the authority issued for such financing
6042 project as the same shall become due and payable, and (3) create and
6043 maintain reserves required or provided for in any resolution

6044 authorizing, or trust agreement securing, such bonds of the authority.
6045 Such rates, rents, fees and charges shall not be subject to supervision or
6046 regulation by any department, commission, board, body, bureau or
6047 agency of this state other than the authority.

6048 (q) A sufficient amount of the revenues derived in respect of a
6049 financing project, except such part of such revenues as may be necessary
6050 to pay the cost of maintenance, repair and operation and to provide
6051 reserves and for renewals, replacements, extensions, enlargements and
6052 improvements as may be provided for in the resolution authorizing the
6053 issuance of any bonds of the authority or in the trust agreement securing
6054 the same, shall be set aside at such regular intervals as may be provided
6055 in such resolution or trust agreement in a sinking or other similar fund
6056 which is hereby pledged to, and charged with, the payment of the
6057 principal of and the interest on such bonds as the same shall become
6058 due, and the redemption price or the purchase price of bonds retired by
6059 call or purchase as therein provided. Such pledge shall be valid and
6060 binding from the time when the pledge is made and the rates, rents, fees
6061 and charges and other revenues or other moneys so pledged and
6062 thereafter received by the authority shall immediately be subject to the
6063 lien of such pledge without any physical delivery thereof or further act,
6064 and the lien of any such pledge shall be valid and binding as against all
6065 parties having claims of any kind in tort, contract or otherwise against
6066 the authority, irrespective of whether such parties have notice thereof.
6067 Notwithstanding any provision of the Uniform Commercial Code,
6068 neither the resolution, any trust agreement, other agreement nor any
6069 lease by which a pledge is created needs to be filed or recorded except
6070 in the records of the authority. The use and disposition of moneys to the
6071 credit of such sinking or other similar fund shall be subject to the
6072 provisions of the resolution authorizing the issuance of such bonds or
6073 of such trust agreement. Unless otherwise provided in such resolution
6074 or such trust agreement, such resolution or trust agreement may permit
6075 the issuance of bonds having a subordinate lien in respect of the security
6076 authorized in this section to other bonds of the authority, and, in such
6077 case, the authority may create separate sinking or other similar funds in

6078 respect of such subordinate lien bonds.

6079 (r) The authority may issue bonds, notes or other obligations under
6080 this section (1) the interest on which may be includable in the gross
6081 income of the holder or holders thereof under the Internal Revenue Code
6082 of 1986, or any subsequent corresponding internal revenue code of the
6083 United States, as amended from time to time, and (2) that may be eligible
6084 for tax credits or exemptions or payments from the federal government,
6085 or any other desired federal income tax treatment of such bonds, notes
6086 or other obligations. Any such bonds, notes or other obligations may be
6087 issued only upon a finding by the authority that such issuance is
6088 necessary, is in the public interest, and is in furtherance of the purposes
6089 and powers of the authority. The state hereby consents to such inclusion
6090 only for the bonds, notes or other obligations of the authority so
6091 authorized.

6092 (s) The authority may provide for the issuance of bonds of the
6093 authority for the purpose of refunding any bonds of the authority then
6094 outstanding, including the payment of any redemption premium
6095 thereon and any interest accrued or to accrue to the earliest or
6096 subsequent date of redemption, purchase or maturity of such bonds.
6097 The proceeds of any such bonds issued for the purpose of refunding
6098 outstanding bonds may, in the discretion of the authority, be applied to
6099 the purchase or retirement at maturity or redemption of such
6100 outstanding bonds either on their earliest or any subsequent redemption
6101 date or upon the purchase or at the maturity thereof and may, pending
6102 such application, be placed in escrow to be applied to such purchase or
6103 retirement at maturity or redemption on such date as may be
6104 determined by the authority. Any such escrowed proceeds, pending
6105 such use, may be invested and reinvested in federally guaranteed
6106 securities and certificates of deposit or time deposits secured by direct
6107 obligations of, or obligations unconditionally guaranteed by, the United
6108 States, or obligations of a state, a territory, or a possession of the United
6109 States, or any political subdivision of such state, territory or possession,
6110 or of the District of Columbia, within the meaning of Section 103(a) of

6111 the Internal Revenue Code of 1986, or any subsequent corresponding
6112 internal revenue code of the United States, as amended from time to
6113 time, the full and timely payment of the principal of and interest on
6114 which are secured by an irrevocable deposit of federally guaranteed
6115 securities, maturing at such time or times as shall be appropriate to
6116 assure the prompt payment, as to principal, interest and redemption
6117 premium, if any, of the outstanding bonds to be so refunded. The
6118 interest, income and profits, if any, earned or realized on any such
6119 investment may also be applied to the payment of the outstanding
6120 bonds to be so refunded.

6121 (t) The authority may contract with the holders of any of its bonds or
6122 notes for the custody, collection, securing, investment and payment of
6123 any reserve funds of the authority, or of any moneys held in trust or
6124 otherwise for the payment of bonds or notes, and to carry out such
6125 contracts. Any officer with whom, or any bank or trust company with
6126 which, such moneys are deposited as trustee thereof shall hold, invest,
6127 reinvest and apply such moneys for the purposes thereof, subject to such
6128 provisions as this chapter and the resolution authorizing the issue of the
6129 bonds or notes or the trust agreement securing such bonds or notes may
6130 provide.

6131 Sec. 171. Section 15-120m of the general statutes is repealed and the
6132 following is substituted in lieu thereof (*Effective July 1, 2026*):

6133 The exercise of the powers granted by sections 15-120g to 15-120o,
6134 inclusive, constitute the performance of an essential governmental
6135 function and the authority shall not be required to pay any taxes or
6136 assessments upon or in respect of [the] any airport project, levied by any
6137 municipality or political subdivision or special district having taxing
6138 powers of the state and [the] any airport project and the principal and
6139 interest of any bonds and notes issued under the provisions of said
6140 sections, their transfer and the income therefrom, including revenues
6141 derived from the sale thereof, shall at all times be free from taxation of
6142 every kind by the state of Connecticut or under its authority, except for
6143 estate or succession taxes.

6144 Sec. 172. Subsection (a) of section 15-120o of the general statutes is
6145 repealed and the following is substituted in lieu thereof (*Effective July 1,*
6146 *2026*):

6147 (a) Within the first ninety days of each fiscal year of the authority, the
6148 board of directors of the authority shall submit a report to the Governor,
6149 the Auditors of Public Accounts and the joint standing committee of the
6150 General Assembly having cognizance of matters relating to finance,
6151 revenue and bonding. Such report shall include, but not be limited to,
6152 the following: (1) A list of all bonds issued during the preceding fiscal
6153 year, including, for each such issue, the financial advisor and
6154 underwriters, whether the issue was competitive, negotiated or
6155 privately placed, and the issue's face value and net proceeds; (2) a
6156 description of [the] any airport project, its location, and the amount of
6157 funds, if any, provided by the authority with respect to the construction
6158 of [the] any such airport project; (3) a list of all outside individuals and
6159 firms receiving in excess of five thousand dollars in the form of loans,
6160 grants or payments for services; (4) an annual comprehensive financial
6161 report prepared in accordance with generally accepted accounting
6162 principles for governmental enterprises; (5) the cumulative value of all
6163 bonds issued, the value of outstanding bonds, and the amount of the
6164 state's contingent liability; (6) the affirmative action policy statement, a
6165 description of the composition of the work force of the authority by race,
6166 sex and occupation and a description of the affirmative action efforts of
6167 the authority; and (7) a description of planned activities for the current
6168 fiscal year.

6169 Sec. 173. Section 32-75d of the general statutes is repealed and the
6170 following is substituted in lieu thereof (*Effective July 1, 2026*):

6171 (a) There is established an airport development zone, which is
6172 comprised of the following census blocks as assigned on October 1, 2011,
6173 in the towns of Windsor Locks, Suffield, East Granby and Windsor:

T1084	090034701001022,	090034701003000,	090034701003001,
T1085	090034701003002,	090034701003003,	090034701003004,

T1086	090034701003005,	090034701003017,	090034701003018,
T1087	090034701003019,	090034701003020,	090034701003021,
T1088	090034701003025,	090034701003026,	090034735022009,
T1089	090034735022010,	090034735022011,	090034735022012,
T1090	090034735022013,	090034735025004,	090034735027000,
T1091	090034735029000,	090034735029001,	090034735029002,
T1092	090034735029003,	090034735029004,	090034735029006,
T1093	090034761009000,	090034761009010,	090034761009011,
T1094	090034761009012,	090034761009013,	090034762001023,
T1095	090034762001025,	090034762002009,	090034762002013,
T1096	090034763003004,	090034763009000,	090034763009001,
T1097	090034763009002,	090034763009003,	090034763009004,
T1098	090034763009005,	090034763009006,	090034763009007,
T1099	090034763009008,	090034763009009,	090034763009010,
T1100	090034763009011,	090034763009012,	090034763009013,
T1101	090034763009014,	090034763009015,	090034763009016,
T1102	090034763009017,	090034763009018,	090034763009020,
T1103	090034763009021,	090034763009022,	090034763009023,
T1104	090034763009024,	090034763009025,	090034763009026,
T1105	090034763009031,	090034763009033,	090034771014005,
T1106	090034771014011,	090034771014012,	090034771014013,
T1107	090034771014014,	090034771014017,	090034771014018,
T1108	090034771014019,	090034771014020,	090034771023025,
T1109	090034771023026,	090034771023027,	090034771023036,
T1110	090034701003006,	090034701003022,	090034701003023,
T1111	090034701005000,	090034761001039,	090034763009028.

6174 (b) Notwithstanding the provisions of subsection (a) of this section,
6175 the Commissioner of Economic and Community Development may
6176 establish additional airport development zones surrounding any of the
6177 general aviation airports, as defined in section 15-120aa, or any other
6178 airport within the duty, power and authority of the Connecticut Airport
6179 Authority, as defined in section 15-120cc, upon receipt from one or more
6180 interested municipalities of a proposal recommending the
6181 establishment of such a zone.

6182 (1) The commissioner shall consider any such proposal if the
6183 commissioner determines that the economic development benefits of
6184 establishing a new airport development zone outweigh the anticipated

6185 costs to the state and the affected municipalities. Any such proposal
6186 shall comply with the state plan of conservation and development
6187 adopted pursuant to chapter 297.

6188 (2) A proposal submitted to the commissioner shall include, but not
6189 be limited to, an identification of:

6190 (A) The geographical scope of such proposed zone, including
6191 designation of all census blocks that are proposed to be incorporated
6192 into such zone, provided (i) each zone shall be in accordance with the
6193 applicable general aviation airport or other airport's master plan, and
6194 (ii) no zone shall extend beyond a two-mile radius of the applicable
6195 general aviation airport or other airport without approval of the General
6196 Assembly;

6197 (B) The economic development benefits anticipated from the
6198 establishment of such zone, including the nature of business and
6199 industry that will be developed and the anticipated number of jobs
6200 created; and

6201 (C) The anticipated costs of establishing such zone.

6202 (3) The commissioner may modify the geographic scope of the
6203 proposed zone to improve, within the commissioner's discretion, the
6204 balance between the anticipated economic benefit and the cost to the
6205 state and affected municipalities.

6206 (4) The commissioner may approve the establishment of a new
6207 airport development zone.

6208 (5) An airport development zone established pursuant to this
6209 subsection shall not include the land on which any general aviation
6210 airport or other airport operates, including any state-owned or
6211 controlled land.

6212 (c) (1) Notwithstanding the provisions of subsection (a) of this
6213 section, the Commissioner of Economic and Community Development

6214 shall establish an airport development zone surrounding Tweed New
6215 Haven Airport upon a proposal submitted by the town of East Haven
6216 or the city of New Haven or jointly by both said town and city.

6217 (2) Any such proposal shall comply with the state plan of
6218 conservation and development adopted pursuant to chapter 297 and
6219 shall include, but need not be limited to, an identification of:

6220 (A) The geographical scope of such proposed zone, including
6221 designation of all census blocks that are proposed to be incorporated
6222 into such zone, provided such zone shall be in accordance with the
6223 master plan of Tweed New Haven Airport and shall not extend beyond
6224 a two-mile radius of said airport without approval of the General
6225 Assembly;

6226 (B) The economic development benefits anticipated from the
6227 establishment of such zone, including the nature of business and
6228 industry that will be developed and the anticipated number of jobs
6229 created; and

6230 (C) The anticipated costs of establishing such zone.

6231 (3) The commissioner may modify the geographic scope of the
6232 proposed zone to improve, within the commissioner's discretion, the
6233 balance between the anticipated economic benefit and the cost to the
6234 state and affected municipalities.

6235 (4) An airport development zone established pursuant to this
6236 subsection shall not include the land on which the Tweed New Haven
6237 Airport operates, including any state-owned or controlled land.

6238 Sec. 174. (NEW) (*Effective from passage*) (a) Notwithstanding the
6239 provisions of chapter 204 of the general statutes, a municipality may, by
6240 vote of its legislative body, (1) abate all or a portion of the total amount
6241 of interest on any delinquent real property taxes owed to the
6242 municipality by a common interest community, as defined in section 47-
6243 202 of the general statutes, that is composed of more than five hundred

6244 units, or (2) refund all or a portion of the total amount of such interest
6245 paid on such taxes by such community, provided to be eligible for such
6246 abatement or such refund pursuant to this section, such community
6247 shall be in receivership pursuant to an order of the Superior Court.

6248 (b) A municipal water pollution control authority may, by vote of the
6249 authority, (1) abate all or a portion of the total amount of interest on any
6250 delinquent sewerage system use charge owed to the municipality by a
6251 common interest community, as defined in section 47-202 of the general
6252 statutes, that is composed of more than five hundred units, or (2) refund
6253 all or a portion of the total amount of such interest paid on any such use
6254 charge by such community, provided to be eligible for such abatement
6255 or such refund pursuant to this section, such community shall be in
6256 receivership pursuant to an order of the Superior Court.

6257 Sec. 175. Subdivision (3) of subsection (f) of section 4-66l of the 2026
6258 supplement to the general statutes is repealed and the following is
6259 substituted in lieu thereof (*Effective October 1, 2026*):

6260 (3) For the fiscal [year] years ending June 30, 2026, and June 30, 2027,
6261 the amount of the grant payable to a municipality in accordance with
6262 subsection (d) of this section shall not be reduced in the case of a
6263 municipality whose adopted budget expenditures exceed the cap set
6264 forth in subdivision (1) of this subsection.

6265 Sec. 176. Subsection (b) of section 4b-3 of the general statutes is
6266 repealed and the following is substituted in lieu thereof (*Effective July 1,*
6267 *2026*):

6268 (b) The [chairman] chairperson of the board shall be compensated
6269 [two] three hundred dollars per diem up to a maximum of [thirty] forty-
6270 five thousand dollars annually. Other members of the board shall be
6271 compensated [two] three hundred dollars per diem up to a maximum
6272 of [twenty-five] forty thousand dollars annually. The members of the
6273 board shall choose their own [chairman] chairperson. No person shall
6274 serve on [this] the board who holds another elected or paid state or

6275 municipal governmental position and no person on the board shall be
6276 directly involved in any enterprise which does business with the state
6277 or directly or indirectly involved in any enterprise concerned with real
6278 estate acquisition or development.

6279 Sec. 177. (NEW) (*Effective July 1, 2026*) No board or commission in the
6280 executive branch which compensates its members on a per diem basis
6281 shall establish a meeting schedule for any fiscal year that would cause
6282 such board or commission to expend funds on per diem reimbursement
6283 of its members in excess of the amount appropriated to such board or
6284 commission for such purpose during such fiscal year, unless the board
6285 or commission obtains prior approval of such schedule, in writing, by
6286 the Secretary of the Office of Policy and Management.

6287 Sec. 178. (*Effective from passage*) Notwithstanding the provisions of
6288 section 12-142 of the general statutes, title 7 or 10 of the general statutes,
6289 chapters 170 and 204 of the general statutes, any special act, any
6290 municipal charter or any home rule ordinance, if a municipality or
6291 regional board of education has adopted a budget or levied taxes for the
6292 fiscal year ending June 30, 2027, prior to the adoption of the state budget
6293 for said fiscal year and such municipality or regional board of education
6294 receives, pursuant to such adopted state budget, an amount of state aid
6295 more than the amount projected in the municipality's or regional board
6296 of education's adopted budget, such (1) municipality, by vote of its
6297 legislative body or, in a municipality where the legislative body is a
6298 town meeting, by vote of the board of selectmen, or (2) regional board
6299 of education, may (A) amend its budget, and (B) not later than July 1,
6300 2026, adjust the tax levy and the amount of any remaining installments
6301 of such taxes. The amendment to such budget shall be in an amount not
6302 exceeding the increase in state aid to the municipality or regional board
6303 of education.

6304 Sec. 179. Section 18 of public act 25-173 is repealed and the following
6305 is substituted in lieu thereof (*Effective from passage*):

6306 The Office of Consumer Counsel, in consultation with the Public

6307 Utilities Regulatory Authority and the Commissioner of Energy and
6308 Environmental Protection, shall prepare a report that describes the line
6309 items included in the charges known as the "combined public benefits
6310 charges" on a bill to any end use customer of an electric distribution
6311 company, as defined in section 16-1 of the general statutes, as amended
6312 by [this act] public act 25-173. Such report shall include, but need not be
6313 limited to, an examination of the enabling authority for the imposition
6314 of any such line item, and the purpose, costs and benefits associated
6315 with any such line item. Not later than [October 1, 2026] January 15,
6316 2027, the Consumer Counsel shall submit a report, in accordance with
6317 the provisions of section 11-4a of the general statutes, to the joint
6318 standing committee of the General Assembly having cognizance of
6319 matters relating to energy and technology.

6320 Sec. 180. (*Effective from passage*) Notwithstanding the provisions of
6321 section 13b-268 of the general statutes or any other provision of the
6322 general statutes, special act or regulation that prohibits the construction
6323 of any new highway railroad crossing at grade, the Department of
6324 Transportation shall allow the town of Newtown or its authority or
6325 agent to construct an at-grade pedestrian crossing on the Housatonic
6326 Railroad as part of the Housatonic Valley Rail Trail Railroad, provided
6327 such at-grade pedestrian crossing is approved by the legislative body of
6328 the town of Newtown and the Housatonic Railroad and constructed in
6329 accordance with the department's recommendations.

6330 Sec. 181. Section 5-198 of the general statutes is repealed and the
6331 following is substituted in lieu thereof (*Effective from passage*):

6332 The offices and positions filled by the following-described
6333 incumbents shall be exempt from the classified service:

- 6334 (1) All officers and employees of the Judicial Department;
- 6335 (2) All officers and employees of the Legislative Department;
- 6336 (3) All officers elected by popular vote;

6337 (4) All agency heads, members of boards and commissions and other
6338 officers appointed by the Governor;

6339 (5) All persons designated by name in any special act to hold any state
6340 office;

6341 (6) All officers, noncommissioned officers and enlisted men in the
6342 military or naval service of the state and under military or naval
6343 discipline and control;

6344 (7) (A) All correctional wardens, as provided in section 18-82, and (B)
6345 all superintendents of state institutions, the State Librarian, the
6346 president of The University of Connecticut and any other commissioner
6347 or administrative head of a state department or institution who is
6348 appointed by a board or commission responsible by statute for the
6349 administration of such department or institution;

6350 (8) The State Historian appointed by the State Library Board;

6351 (9) Deputies to the administrative head of each department or
6352 institution designated by statute to act for and perform all of the duties
6353 of such administrative head during such administrative head's absence
6354 or incapacity;

6355 (10) Executive assistants to each state elective officer and each
6356 department head, as defined in section 4-5, provided (A) each position
6357 of executive assistant shall have been created in accordance with section
6358 5-214, and (B) in no event shall the Commissioner of Administrative
6359 Services or the Secretary of the Office of Policy and Management
6360 approve more than four executive assistants for a department head and,
6361 for any department with two or more deputies, more than two executive
6362 assistants for each such deputy;

6363 (11) One personal secretary to the administrative head and to each
6364 undersecretary or deputy to such head of each department or
6365 institution;

6366 (12) All members of the professional and technical staffs of the
6367 constituent units of the state system of higher education, as defined in
6368 section 10a-1, of all other state institutions of learning, of the Board of
6369 Regents for Higher Education, and of the agricultural experiment
6370 station at New Haven, professional and managerial employees of the
6371 Department of Education and the Office of Early Childhood, teachers
6372 and administrators employed by the Technical Education and Career
6373 System and teachers certified by the State Board of Education and
6374 employed in teaching positions at state institutions;

6375 (13) Physicians, dentists, student nurses in institutions and other
6376 professional specialists who are employed on a part-time basis;

6377 (14) Persons employed to make or conduct a special inquiry,
6378 investigation, examination or installation;

6379 (15) Students in educational institutions who are employed on a part-
6380 time basis;

6381 (16) Forest fire wardens provided for by section 23-36;

6382 (17) Patients or inmates of state institutions who receive
6383 compensation for services rendered therein;

6384 (18) Employees of the Governor including employees working at the
6385 executive office, official executive residence at 990 Prospect Avenue,
6386 Hartford and the Washington D.C. office;

6387 (19) Persons filling positions expressly exempted by statute from the
6388 classified service;

6389 (20) Librarians employed by the State Board of Education or any
6390 constituent unit of the state system of higher education;

6391 (21) All officers and employees of the Division of Criminal Justice;

6392 (22) Professional employees in the education professions bargaining
6393 unit of the Department of Aging and Disability Services;

6394 (23) Lieutenant colonels in the Division of State Police within the
6395 Department of Emergency Services and Public Protection;

6396 (24) The Deputy State Fire Marshal within the Department of
6397 Administrative Services;

6398 (25) The chief administrative officer of the Workers' Compensation
6399 Commission;

6400 (26) Employees in the education professions bargaining unit;

6401 (27) Disability policy specialists employed by the Council on
6402 Developmental Disabilities;

6403 (28) The director for digital media and motion picture activities in the
6404 Department of Economic and Community Development; and

6405 (29) Any Director of Communications 1, Director of Communications
6406 1 (Rc), Director of Communications 2, Director of Communications 2
6407 (Rc), Legislative Program Manager, Communications and Legislative
6408 Program Manager, Director of Legislation, Regulation and
6409 Communication, Legislative and Administrative Advisor 1, [or]
6410 Legislative and Administrative Advisor 2, Agency Legal Director,
6411 Energy and Environmental Protection Office Director (Legal) or First
6412 Assistant Commissioner of Revenue Services, as such positions are
6413 classified within the Executive Department.

6414 Sec. 182. Section 5-207a of the general statutes is repealed and the
6415 following is substituted in lieu thereof (*Effective from passage*):

6416 (a) For purposes of this section, "state agency" has the same meaning
6417 as provided in section 1-79. For each position of employment with the
6418 state of Connecticut that involves exposure to federal tax information,
6419 the [employing] state agency with custody of the federal tax information
6420 and, in the case [where the Department of Administrative Services is the
6421 provider of human resources services for such employing agency] of an
6422 executive branch state agency, the Department of Administrative

6423 Services, shall, subject to the provisions of section 31-51i, require each
6424 applicant for, each employee applying for transfer to, and, at least every
6425 five years, [or more often if required by the United States Department
6426 of the Treasury,] each current employee of such a position, to (1) state in
6427 writing whether such applicant or employee has been convicted of a
6428 crime or whether criminal charges are pending against such applicant
6429 or employee at the time of application for employment or transfer and,
6430 if so, to identify the charges and court in which such charges are
6431 pending, and (2) be fingerprinted and submit to state and national
6432 criminal history records checks. The criminal history records checks
6433 required by this section shall be conducted in accordance with section
6434 29-17a. Each employee who has access to federal tax information shall
6435 be subject to such criminal history records check at least every five years.

6436 (b) If a contractor or subcontractor has a contract with [an] a state
6437 agency to perform work for the state agency that entails such contractor
6438 or subcontractor or any employee thereof to access federal tax
6439 information, such contractor or subcontractor and any such employee
6440 shall be subject to the requirements of subdivisions (1) and (2) of
6441 subsection (a) of this section prior to commencing such work and [as
6442 often thereafter as required by subsection (a) of this section] at least
6443 every five years thereafter.

6444 Sec. 183. Section 19a-502 of the general statutes is repealed and the
6445 following is substituted in lieu thereof (*Effective October 1, 2026*):

6446 (a) Any person establishing, conducting, managing or operating any
6447 institution without the license required under the provisions of [sections
6448 19a-490 to 19a-503, inclusive, or owning real property or improvements
6449 upon or within which such an institution is established, conducted,
6450 managed or operated,] this chapter or without the certificate required
6451 under the provisions of section [19a-491, shall be fined not more than
6452 one hundred dollars for each offense, and each day of a continuing
6453 violation after conviction shall be considered a separate offense] 19a-561
6454 shall be guilty of a class D felony and fined not more than five thousand
6455 dollars for each day of continuing action in violation of this chapter or

6456 section 19a-561.

6457 (b) Any person owning real property or improvements upon or
6458 within which an institution is established, conducted, managed or
6459 operated without the license required under this chapter or without the
6460 certificate required under section 19a-561 shall be fined not more than
6461 one hundred dollars for each offense and each day of a continuing
6462 violation after conviction shall be considered a separate offense.

6463 (c) The penalty provisions of this [subsection] section shall not apply
6464 to (1) any financial institution regulated by any state or federal agency
6465 or body, which financial institution has succeeded to the title of the
6466 premises by mortgage foreclosure and the operator, if any, continues to
6467 occupy such property, or (2) an institution that applied for license
6468 renewal within sixty days of the lapsing of its license, even if the license
6469 renewal application was incomplete at the time of application.

6470 [(b)] (d) If any person conducting, managing or operating any
6471 nursing home facility, as defined in section 19a-521, or residential care
6472 home, as defined in section 19a-521, fails to maintain or make available
6473 the financial information, data or records required under subsection (d)
6474 of section 19a-498, such person's license as a nursing home facility or
6475 residential care home administrator may be revoked or suspended in
6476 accordance with section 19a-517 or the license of such nursing home
6477 facility or residential care home may be revoked or suspended in the
6478 manner provided in section 19a-494, or both.

6479 Sec. 184. Section 19a-503 of the general statutes is repealed and the
6480 following is substituted in lieu thereof (*Effective October 1, 2026*):

6481 (a) Notwithstanding the existence or pursuit of any other remedy, the
6482 Department of Public Health may, in the manner provided by law and
6483 upon the advice of the Attorney General, conduct an investigation and
6484 maintain an action in the name of the state for injunction or other
6485 process against any person or governmental unit to restrain or prevent
6486 the establishment, conduct, management or operation of an institution

6487 or nursing facility management services, without a license or certificate
6488 under this chapter.

6489 (b) The commissioner may, after a hearing held in accordance with
6490 chapter 54, impose a civil penalty on any person establishing,
6491 conducting, managing or operating any institution without the license
6492 required under this chapter or without the certificate required under
6493 section 19a-561. The amount of any such civil penalty shall not exceed
6494 twenty-five thousand dollars for each day such person is in violation of
6495 this chapter or section 19a-561.

6496 Sec. 185. Section 19a-11 of the general statutes is repealed and the
6497 following is substituted in lieu thereof (*Effective October 1, 2026*):

6498 Any board or commission listed in subsection (b) of section 19a-14 or
6499 the Department of Public Health, with respect to professions under its
6500 jurisdiction that have no board or commission, may, in its discretion,
6501 issue [an appropriate] a summary order to any person found to be
6502 violating an applicable statute or regulation, providing for the
6503 immediate discontinuance of the violation that poses an imminent risk
6504 to public health, safety or welfare, pending proceedings to determine
6505 whether to issue a cease and desist order. Such board or commission or
6506 the department, with respect to professions under its jurisdiction that
6507 have no board or commission, may, after a hearing held in accordance
6508 with chapter 54, impose a civil penalty not to exceed twenty-five
6509 thousand dollars on a person who provides professional services under
6510 the department's jurisdiction without a license or certificate issued by
6511 the department. For the purposes of this section, each day of the
6512 provision of any such services shall be grounds for such a penalty. The
6513 board or commission may, through the Attorney General, petition the
6514 superior court for the judicial district wherein the violation occurred, or
6515 wherein the person committing the violation resides or transacts
6516 business, for the enforcement of any order issued by it and for
6517 appropriate temporary relief or a restraining order. Such board or
6518 commission shall certify and file in such court a transcript of the entire
6519 record of the hearing or hearings, including all testimony upon which

6520 such order was made and the findings and orders made by such board
6521 or commission. The court may grant such relief by injunction or
6522 otherwise, including temporary relief, as it deems equitable and may
6523 make and enter a decree enforcing, modifying and enforcing as so
6524 modified, or setting aside, in whole or in part, any order of the board or
6525 commission.

6526 Sec. 186. (NEW) (*Effective from passage*) The Commissioner of Public
6527 Health may appoint a willing licensed embalmer, as defined in section
6528 20-207 of the general statutes, to dispose of an abandoned dead human
6529 body or the abandoned cremated remains of a dead human body. An
6530 appointed embalmer may request any records necessary to identify
6531 such dead human body or cremated remains. The appointed embalmer
6532 shall notify the commissioner, in a form and manner prescribed by the
6533 commissioner, of the date and time of disposition of any such dead
6534 human body or cremated remains and the method of such disposition
6535 not later than seven days after such disposition. A dead human body or
6536 cremated remains of a dead human body shall be deemed to be
6537 abandoned, for the purposes of this section, when a licensed or formerly
6538 licensed funeral director or embalmer voluntarily or improperly
6539 relinquishes custody of such human body or cremated remains in
6540 violation of the requirements of state law, including, but not limited to,
6541 when a funeral director or embalmer ceases to operate a funeral home
6542 and fails to arrange for the transfer or disposition of such dead human
6543 body or cremated remains in the funeral director or embalmer's
6544 possession prior to ceasing operations.

6545 Sec. 187. Subsections (c) and (d) of section 7-51a of the general statutes
6546 are repealed and the following is substituted in lieu thereof (*Effective*
6547 *from passage*):

6548 (c) [For deaths occurring on or after July 1, 1997, the] The Social
6549 Security number recorded on the death certificate of the deceased
6550 person shall be [recorded in the "administrative purposes" section of the
6551 death certificate. Such administrative purposes section, and the Social
6552 Security number contained therein, shall be] restricted and disclosed

6553 only to the following eligible parties: (1) All parties specified on the
6554 death certificate, including the informant, licensed funeral director,
6555 licensed embalmer, conservator, surviving spouse, physician or
6556 advanced practice registered nurse and town clerk, for the purpose of
6557 processing the certificate, (2) the surviving spouse, (3) the next of kin, or
6558 (4) any state and federal agencies authorized by federal law to receive
6559 the Social Security number. The department shall provide any other
6560 individual, researcher or state or federal agency requesting a certified or
6561 uncertified copy of a death certificate, [or the information contained
6562 within such certificate, for a death occurring on or after July 1, 1997, such
6563 certificate or information. The] in accordance with the provisions of this
6564 section, such copy with the decedent's Social Security number [shall be]
6565 removed or redacted. [from such certificate or information or the
6566 administrative purposes section shall be omitted from such certificate.]

6567 (d) The department shall provide, as electronic data, the information
6568 contained within a certified copy of a death certificate to any individual,
6569 researcher or state or federal agency upon request. The decedent's Social
6570 Security number shall be removed, redacted or omitted from such data
6571 unless the requester is a state or federal agency authorized by federal
6572 law to receive the Social Security number.

6573 [(d)] (e) The registrar of vital statistics of any town or city in this state
6574 that has access to an electronic vital records system, as authorized by the
6575 department, may use such system to issue certified copies of birth,
6576 death, fetal death or marriage certificates that are electronically filed in
6577 such system.

6578 Sec. 188. Subsection (a) of section 19a-537 of the general statutes is
6579 repealed and the following is substituted in lieu thereof (*Effective from*
6580 *passage*):

6581 (a) As used in this section and section 19a-537a:

6582 (1) "Vacancy" means a bed that is available for an admission;

6583 (2) "Nursing home" means any chronic and convalescent facility or

6584 any rest home with nursing supervision, as defined in section 19a-521;

6585 (3) "Hospital" means a general short-term hospital licensed by the
6586 Department of Public Health or a hospital for [mental illness]
6587 psychiatric disabilities, as defined in section 17a-495, or a chronic
6588 disease hospital.

6589 Sec. 189. Section 19a-36g of the general statutes is repealed and the
6590 following is substituted in lieu thereof (*Effective from passage*):

6591 As used in this section, [and] sections 19a-36b, 19a-36h to 19a-36o,
6592 inclusive, and section 19a-36r:

6593 (1) "Catering food service establishment" means a business that is
6594 involved in the (A) sale or distribution of food and drink prepared in
6595 bulk in one geographic location for retail service in individual portions
6596 in another location, or (B) preparation and service of food in a public or
6597 private venue that is not under the ownership or control of the operator
6598 of such business;

6599 (2) "Certified food protection manager" means a food employee that
6600 has supervisory and management responsibility and the authority to
6601 direct and control food preparation and service;

6602 (3) "Class 1 food establishment" means a retail food establishment
6603 that does not serve a population that is highly susceptible to food borne
6604 illnesses and only offers (A) commercially packaged food in its original
6605 commercial package that is time or temperature controlled for safety, or
6606 (B) commercially prepackaged, precooked food that is time or
6607 temperature controlled for safety and heated, hot held and served in its
6608 original commercial package not later than four hours after heating, or
6609 (C) food prepared in the establishment that is not time or temperature
6610 controlled for safety;

6611 (4) "Class 2 food establishment" means a retail food establishment
6612 that does not serve a population that is highly susceptible to food-borne
6613 illnesses and offers a limited menu of food that is prepared or cooked

6614 and served immediately, or that prepares or cooks food that is time or
6615 temperature controlled for safety and may require hot or cold holding,
6616 but that does not involve cooling;

6617 (5) "Class 3 food establishment" means a retail food establishment
6618 that (A) does not serve a population that is highly susceptible to food-
6619 borne illnesses, and (B) offers food that is time or temperature controlled
6620 for safety and requires complex preparation, including, but not limited
6621 to, handling of raw ingredients, cooking, cooling and reheating for hot
6622 holding;

6623 (6) "Class 4 food establishment" means a retail food establishment
6624 that serves a population that is highly susceptible to food-borne
6625 illnesses, including, but not limited to, preschool students, hospital
6626 patients and nursing home patients or residents, or that conducts
6627 specialized food processes, including, but not limited to, smoking,
6628 curing or reduced oxygen packaging for the purposes of extending the
6629 shelf life of the food;

6630 (7) "Cold holding" means maintained at a temperature of forty-one
6631 degrees Fahrenheit or below;

6632 (8) "Commissioner" means the Commissioner of Public Health or the
6633 commissioner's designee;

6634 (9) "Contact hour" means a minimum of fifty minutes of a training
6635 activity;

6636 (10) "Department" means the Department of Public Health;

6637 (11) "Director of health" means the director of a local health
6638 department or district health department appointed pursuant to section
6639 19a-200 or 19a-242;

6640 (12) "Food code" means the food code administered under section
6641 19a-36h;

6642 (13) "Food establishment" means an operation that (A) stores,

6643 prepares, packages, serves, vends directly to the consumer or otherwise
6644 provides food for human consumption, including, but not limited to, a
6645 restaurant, catering food service establishment, food service
6646 establishment, temporary food service establishment, itinerant food
6647 vending establishment, market, conveyance used to transport people,
6648 institution or food bank, or (B) relinquishes possession of food to a
6649 consumer directly, or indirectly through a delivery service, including,
6650 but not limited to, home delivery of grocery orders or restaurant takeout
6651 orders or a delivery service that is provided by common carriers. "Food
6652 establishment" does not include a vending machine, as defined in
6653 section 21a-34, a private residential dwelling in which food is prepared
6654 under section 21a-62a or a food manufacturing establishment, as
6655 defined in section 21a-151;

6656 (14) "Food inspector" means a director of health, or his or her
6657 authorized agent, or a registered environmental health specialist who
6658 has been certified as a food inspector by the commissioner;

6659 (15) "Food inspection training officer" means a certified food
6660 inspector who has received training developed or approved by the
6661 commissioner and been authorized by the commissioner to train
6662 candidates for food inspector certification;

6663 (16) "Food-borne illness" means illness, including, but not limited to,
6664 illness due to heavy metal intoxications, staphylococcal food poisoning,
6665 botulism, salmonellosis, shigellosis, *Clostridium perfringens*
6666 intoxication and hepatitis A, acquired through the ingestion of a
6667 common-source food or water contaminated with a chemical, infectious
6668 agent or the toxic products of a chemical or infectious agent;

6669 (17) "Food-borne outbreak" means illness, including, but not limited
6670 to, illness due to heavy metal intoxications, staphylococcal food
6671 poisoning, botulism, salmonellosis, shigellosis, *Clostridium perfringens*
6672 intoxication and hepatitis A, in two or more individuals, acquired
6673 through the ingestion of common-source food or water contaminated
6674 with a chemical, infectious agent or the toxic products of a chemical or

6675 infectious agent;

6676 (18) "Hot holding" means maintained at a temperature of one
6677 hundred thirty-five degrees Fahrenheit or above;

6678 (19) "Itinerant food vending establishment" means a vehicle-
6679 mounted, self-contained, mobile food establishment;

6680 (20) "Permit" means a written document issued by a director of health
6681 that authorizes a person to operate a food establishment;

6682 (21) "Temporary food service establishment" means a food
6683 establishment that operates for a period of not more than fourteen
6684 consecutive days in conjunction with a single event or celebration;

6685 (22) "Time or temperature controlled for safety" means maintained at
6686 a certain temperature or maintained for a certain length of time, or both,
6687 to prevent microbial growth and toxin production; and

6688 (23) "Variance" means a written document issued by the
6689 commissioner that authorizes a modification or waiver of one or more
6690 requirements of the food code.

6691 Sec. 190. Subsection (b) of section 19a-36h of the 2026 supplement to
6692 the general statutes is repealed and the following is substituted in lieu
6693 thereof (*Effective from passage*):

6694 (b) The commissioner may adopt regulations, in accordance with the
6695 provisions of chapter 54, to implement the provisions of this section,
6696 [and] sections 19a-36i to 19a-36m, inclusive, and section 19a-36r.

6697 Sec. 191. Section 19a-36b of the general statutes is repealed and the
6698 following is substituted in lieu thereof (*Effective from passage*):

6699 (a) Any person who serves meals to individuals at registered
6700 congregate meal sites funded under Title III of the Older Americans Act
6701 of 1965, as amended from time to time, which were prepared under the
6702 supervision of a [qualified food operator] certified food protection

6703 manager, shall be exempt from the examination requirement for
6704 [qualified food operators] certified food protection managers.

6705 (b) Any volunteer who serves meals for a nonprofit organization shall
6706 be exempt from the examination requirement for [qualified food
6707 operators] certified food protection managers.

6708 (c) The Commissioner of Public Health, in conjunction with the
6709 Commissioner of Social Services, shall adopt regulations in accordance
6710 with the provisions of chapter 54 to establish training procedures for
6711 persons exempt from the examination requirement for [qualified food
6712 operators] certified food protection managers under the provisions of
6713 subsections (a) and (b) of this section.

6714 Sec. 192. Section 19a-580h of the general statutes is repealed and the
6715 following is substituted in lieu thereof (*Effective from passage*):

6716 (a) As used in this section:

6717 (1) "Medical order for life-sustaining treatment" means a [written
6718 medical order] specific set of written medical orders developed by the
6719 Department of Public Health specific to the program established in
6720 accordance with the provisions of this section and made by a physician,
6721 advanced practice registered nurse or physician assistant to effectuate a
6722 patient's request for life-sustaining treatment when the patient has been
6723 determined by a physician, physician assistant or advanced practice
6724 registered nurse to be approaching the end stage of a serious, life-
6725 limiting illness or is in a condition of advanced, chronic progressive
6726 frailty;

6727 (2) "Health care provider" means any person, corporation, limited
6728 liability company, facility or institution operated, owned or licensed by
6729 this state to provide health care or professional medical services; and

6730 (3) "Legally authorized representative" means a minor patient's
6731 parent, guardian appointed by the Probate Court or a health care
6732 representative appointed in accordance with sections 19a-576 and 19a-

6733 577.

6734 (b) The Commissioner of Public Health shall establish a state-wide
6735 program to implement the use of medical orders for life-sustaining
6736 treatment by health care providers. Patient participation in the program
6737 shall be voluntary. An agreement to participate in the program shall be
6738 documented by the signature of the patient or the patient's legally
6739 authorized representative on the medical order for life-sustaining
6740 treatment form.

6741 (c) Notwithstanding the provisions of sections 19a-495 and 19a-580d
6742 and the regulations adopted thereunder, the Commissioner of Public
6743 Health shall adopt regulations, in accordance with the provisions of
6744 chapter 54, for the program established in accordance with this section
6745 to ensure that: (1) Medical orders for life-sustaining treatment are
6746 transferrable among, and recognized by, various types of health care
6747 institutions subject to any limitations set forth in federal law; (2) any
6748 procedures and forms developed for recording medical orders for life-
6749 sustaining treatment require the signature of the patient or the patient's
6750 legally authorized representative on the medical order for life-
6751 sustaining treatment and the patient or the patient's legally authorized
6752 representative is given [the original order immediately after signing
6753 such] a copy of or access to the order and a copy of such order is
6754 immediately placed in the patient's medical record; (3) prior to
6755 requesting the signature of the patient or the patient's legally authorized
6756 representative on such order, the physician, advanced practice
6757 registered nurse or physician assistant writing the medical order
6758 discusses with the patient or the patient's legally authorized
6759 representative the patient's goals for care and treatment and the benefits
6760 and risks of various methods for documenting the patient's wishes for
6761 end-of-life treatment, including medical orders for life-sustaining
6762 treatment; and (4) each physician, advanced practice registered nurse or
6763 physician assistant that intends to write a medical order for life-
6764 sustaining treatment receives training concerning: (A) The importance
6765 of talking with patients about their personal treatment goals; (B)

6766 methods for presenting choices for end-of-life care that elicit
6767 information concerning patients' preferences and respects those
6768 preferences without directing patients toward a particular option for
6769 end-of-life care; (C) the importance of fully informing patients about the
6770 benefits and risks of an immediately effective medical order for life-
6771 sustaining treatment; (D) awareness of factors that may affect the use of
6772 medical orders for life-sustaining treatment, including, but not limited
6773 to, advanced health care directives, race, ethnicity, age, gender,
6774 socioeconomic position, immigrant status, sexual minority status,
6775 language, disability, homelessness, mental illness and geographic area
6776 of residence; and (E) procedures for properly completing and
6777 effectuating medical orders for life-sustaining treatment.

6778 (d) A medical order for life-sustaining treatment for a person
6779 participating in the program described in this section shall not be valid
6780 unless it is completed on a form prescribed by the department and
6781 executed in accordance with the requirements of this section and any
6782 regulations adopted under this section.

6783 ~~[(d)]~~ (e) Nothing in this section shall be construed to limit the
6784 authority of the Commissioner of Developmental Services under
6785 subsection (g) of section 17a-238 concerning orders applied to persons
6786 receiving services under the direction of said commissioner.

6787 ~~[(e)]~~ (f) The Commissioner of Public Health may implement policies
6788 and procedures necessary to administer the provisions of this section
6789 until such time as regulations are adopted pursuant to subsection (c) of
6790 this section.

6791 Sec. 193. Subsection (a) of section 19a-112h of the general statutes is
6792 repealed and the following is substituted in lieu thereof (*Effective from*
6793 *passage*):

6794 (a) The Commissioner of Public Health shall establish and contract
6795 for the administration of a state-wide human immunodeficiency virus
6796 pre-exposure prophylaxis and post-exposure prophylaxis drug

6797 assistance program using appropriated AIDS Services funding,
6798 provided such funding is equal to or greater than twenty-five thousand
6799 dollars annually. The program shall provide financial assistance to
6800 individuals at risk of acquiring human immunodeficiency for (1) the
6801 purchase of pre-exposure and post-exposure prophylaxis for human
6802 immunodeficiency virus prescribed by a licensed physician consistent
6803 with the recommendations of the National Centers for Disease Control
6804 and Prevention, and (2) payment of associated laboratory testing and
6805 other related costs. For the purposes of this subsection, "financial
6806 assistance" includes, but need not be limited to, payments for out-of-
6807 pocket costs, copayments, coinsurance, and up to full cost payments
6808 toward a deductible for individuals who are underinsured and for
6809 whom the program is the payer of last resort.

6810 Sec. 194. Section 19a-2a of the 2026 supplement to the general statutes
6811 is repealed and the following is substituted in lieu thereof (*Effective*
6812 *October 1, 2026*):

6813 The Commissioner of Public Health shall employ the most efficient
6814 and practical means for the prevention and suppression of disease and
6815 shall administer all laws under the jurisdiction of the Department of
6816 Public Health and the Public Health Code. The commissioner shall have
6817 responsibility for the overall operation and administration of the
6818 Department of Public Health. The commissioner shall have the power
6819 and duty to: (1) Administer, coordinate and direct the operation of the
6820 department; (2) adopt and enforce regulations, in accordance with
6821 chapter 54, as are necessary to carry out the purposes of the department
6822 as established by statute; (3) establish rules for the internal operation
6823 and administration of the department; (4) establish and develop
6824 programs and administer services to achieve the purposes of the
6825 department as established by statute; (5) enter into a contract, including,
6826 but not limited to, a contract with another state, for facilities, services
6827 and programs to implement the purposes of the department as
6828 established by statute; (6) designate a deputy commissioner or other
6829 employee of the department to sign any license, certificate or permit

6830 issued by said department; (7) conduct a hearing, issue subpoenas,
6831 administer oaths, compel testimony and render a final decision in any
6832 case when a hearing is required or authorized under the provisions of
6833 any statute dealing with the Department of Public Health; (8) with the
6834 health authorities of this and other states, secure information and data
6835 concerning the prevention and control of epidemics and conditions
6836 affecting or endangering the public health, and compile such
6837 information and statistics and shall disseminate among health
6838 authorities and the people of the state such information as may be of
6839 value to them; (9) annually issue a list of reportable diseases, emergency
6840 illnesses and health conditions and a list of reportable laboratory
6841 findings and amend such lists as the commissioner deems necessary and
6842 distribute such lists as well as any necessary forms to each licensed
6843 physician, licensed physician assistant, licensed advanced practice
6844 registered nurse and clinical laboratory in this state. The commissioner
6845 shall prepare printed forms for reports and returns, with such
6846 instructions as may be necessary, for the use of directors of health,
6847 boards of health and registrars of vital statistics; and (10) specify
6848 uniform methods of keeping statistical information by public and
6849 private agencies, organizations and individuals, including a client
6850 identifier system, and collect and make available relevant statistical
6851 information, including the number of persons treated, frequency of
6852 admission and readmission, and frequency and duration of treatment.
6853 In the administration or enforcement of any applicable statute,
6854 regulation, permit or order, the department may resolve any dispute
6855 regarding compliance or ensure compliance with the regulatory
6856 requirements by agreed settlement or consent order, except consent
6857 orders resolving petitions filed in accordance with section 19a-12e shall
6858 be subject to the approval of the board or commission having
6859 jurisdiction over the health care professional. The client identifier
6860 system shall be subject to the confidentiality requirements set forth in
6861 section 17a-688 and regulations adopted thereunder. The commissioner
6862 may designate any person to perform any of the duties listed in
6863 subdivision (7) of this section. The commissioner shall have authority
6864 over directors of health and may, for cause, remove any such director;

6865 but any person claiming to be aggrieved by such removal may appeal
6866 to the Superior Court which may affirm or reverse the action of the
6867 commissioner as the public interest requires. The commissioner shall
6868 assist and advise local directors of health and district directors of health
6869 in the performance of their duties, and may require the enforcement of
6870 any law, regulation or ordinance relating to public health. In the event
6871 the commissioner reasonably suspects impropriety on the part of a local
6872 director of health or district director of health, or employee of such
6873 director, in the performance of his or her duties, the commissioner shall
6874 provide notification and any evidence of such impropriety to the
6875 appropriate governing authority of the municipal health authority,
6876 established pursuant to section 19a-200, or the district department of
6877 health, established pursuant to section 19a-244, for purposes of
6878 reviewing and assessing a director's or an employee's compliance with
6879 such duties. Such governing authority shall provide a written report of
6880 its findings from the review and assessment to the commissioner not
6881 later than ninety days after such review and assessment. When
6882 requested by local directors of health or district directors of health, the
6883 commissioner shall consult with them and investigate and advise
6884 concerning any condition affecting public health within their
6885 jurisdiction. The commissioner shall investigate nuisances and
6886 conditions affecting, or that he or she has reason to suspect may affect,
6887 the security of life and health in any locality and, for that purpose, the
6888 commissioner, or any person authorized by the commissioner, may
6889 enter and examine any ground, vehicle, apartment, building or place,
6890 and any person designated by the commissioner shall have the
6891 authority conferred by law upon constables. Whenever the
6892 commissioner determines that any provision of the general statutes or
6893 regulation of the Public Health Code is not being enforced effectively by
6894 a local health department or health district, he or she shall forthwith take
6895 such measures, including the performance of any act required of the
6896 local health department or health district, to ensure enforcement of such
6897 statute or regulation and shall inform the local health department or
6898 health district of such measures. In September of each year the
6899 commissioner shall certify to the Secretary of the Office of Policy and

6900 Management the population of each municipality. The commissioner
6901 may solicit and accept for use any gift of money or property made by
6902 will or otherwise, and any grant of or contract for money, services or
6903 property from the federal government, the state, any political
6904 subdivision thereof, any other state or any private source, and do all
6905 things necessary to cooperate with the federal government or any of its
6906 agencies in making an application for any grant or contract. The
6907 commissioner may enter into any contracts or agreements, in
6908 accordance with any established procedures, as may be necessary for
6909 the distribution or use of such money, services or property in
6910 accordance with any requirements to fulfill any conditions of a gift,
6911 grant or contract. The commissioner may establish state-wide and
6912 regional advisory councils. For purposes of this section, "employee of
6913 such director" means an employee of, a consultant employed or retained
6914 by or an independent contractor retained by a local director of health, a
6915 district director of health, a local health department or a health district.

6916 Sec. 195. Subsection (c) of section 31-225a of the 2026 supplement to
6917 the general statutes is repealed and the following is substituted in lieu
6918 thereof (*Effective October 1, 2026*):

6919 (c) (1) (A) Any week for which the employer has compensated the
6920 claimant in the form of wages in lieu of notice, dismissal payments or
6921 any similar payment for loss of wages shall be considered a week of
6922 employment for the purpose of determining employer chargeability.

6923 (B) No benefits shall be charged to any employer who paid wages of
6924 five hundred dollars or less to the claimant in his or her base period.

6925 (C) No dependency allowance paid to a claimant shall be charged to
6926 any employer.

6927 (D) In the event of a natural disaster declared by the President of the
6928 United States, no benefits paid on the basis of total or partial
6929 unemployment that is the result of physical damage to a place of
6930 employment caused by severe weather conditions including, but not

6931 limited to, hurricanes, snow storms, ice storms or flooding, or fire except
6932 where caused by the employer, shall be charged to any employer.

6933 (E) If the administrator finds that (i) an individual's most recent
6934 separation from a base period employer occurred under conditions that
6935 would result in disqualification by reason of subdivision (2), (6) or (9) of
6936 subsection (a) of section 31-236, or (ii) an individual was discharged for
6937 violating an employer's drug testing policy, provided the policy has
6938 been adopted and applied consistent with sections 31-51t to 31-51aa,
6939 inclusive, section 14-261b and any applicable federal law, no benefits
6940 paid thereafter to such individual with respect to any week of
6941 unemployment that is based upon wages paid by such employer with
6942 respect to employment prior to such separation shall be charged to such
6943 employer's account, provided such employer shall have filed a notice
6944 with the administrator within the time allowed for appeal in section 31-
6945 241.

6946 (F) No base period employer's account shall be charged with respect
6947 to benefits paid to a claimant if such employer continues to employ such
6948 claimant at the time the employer's account would otherwise have been
6949 charged to the same extent that he or she employed him or her during
6950 the individual's base period, provided the employer shall notify the
6951 administrator within the time allowed for appeal in section 31-241.

6952 (G) If a claimant has failed to accept suitable employment under the
6953 provisions of subdivision (1) of subsection (a) of section 31-236 and the
6954 disqualification has been imposed, the account of the employer who
6955 makes an offer of employment to a claimant who was a former
6956 employee shall not be charged with any benefit payments made to such
6957 claimant after such initial offer of reemployment until such time as such
6958 claimant resumes employment with such employer, provided such
6959 employer shall make application therefor in a form acceptable to the
6960 administrator. The administrator shall notify such employer whether or
6961 not his or her application is granted. Any decision of the administrator
6962 denying suspension of charges as herein provided may be appealed
6963 within the time allowed for appeal in section 31-241.

6964 (H) Fifty per cent of benefits paid to a claimant under the federal-state
6965 extended duration unemployment benefits program established by the
6966 federal Employment Security Act shall be charged to the experience
6967 accounts of the claimant's base period employers in the same manner as
6968 the regular benefits paid for such benefit year.

6969 (I) No base period employer's account shall be charged with respect
6970 to benefits paid to a claimant who voluntarily left suitable work with
6971 such employer (i) to care for a seriously ill spouse, parent or child, or (ii)
6972 due to the discontinuance of the transportation used by the claimant to
6973 get to and from work, as provided in subparagraphs (A)(ii) and (A)(iii)
6974 of subdivision (2) of subsection (a) of section 31-236.

6975 (J) No base period employer's account shall be charged with respect
6976 to benefits paid to a claimant who has been discharged or suspended
6977 because the claimant has been disqualified from performing the work
6978 for which he or she was hired due to the loss of such claimant's operator
6979 license as a result of a drug or alcohol test or testing program conducted
6980 in accordance with section 14-44k, 14-227a or 14-227b while the claimant
6981 was off duty.

6982 (K) No base period employer's account shall be charged with respect
6983 to benefits paid to a claimant whose separation from employment is
6984 attributable to the return of an individual who was absent from work
6985 due to a bona fide leave taken pursuant to sections 31-49f to 31-49t,
6986 inclusive, or 31-51kk to 31-51qq, inclusive.

6987 (L) On and after January 1, 2027, no base period employer's account
6988 shall be charged with respect to benefits paid to a claimant through the
6989 voluntary shared work unemployment compensation program,
6990 established pursuant to section 31-274j, if a claim for benefits is filed in
6991 a week in which the state is in an extended benefit period or high
6992 unemployment period, pursuant to sections 31-232b to 31-232g,
6993 inclusive. Such noncharge shall continue until the United States
6994 Secretary of Labor has notified the Labor Commissioner that such
6995 extended benefit period or high unemployment period has been

6996 triggered off.

6997 (2) All benefits paid that are not charged to any employer shall be
6998 pooled.

6999 (3) The noncharging provisions of this chapter, except subparagraphs
7000 (D), (F) and (K) of subdivision (1) of this subsection, shall not apply to
7001 reimbursing employers.

7002 Sec. 196. Section 31-266c of the general statutes is repealed and the
7003 following is substituted in lieu thereof (*Effective October 1, 2026*):

7004 (a) The administrator, upon the advice of the Attorney General, may
7005 abate any contributions or payments in lieu of contributions due under
7006 this chapter which have been found by the administrator to be
7007 uncollectible.

7008 (b) The administrator or the administrator's duly authorized agent
7009 may make or entertain an offer of compromise for any contributions or
7010 payments in lieu of contributions due under this chapter if such offer is
7011 based upon doubt as to the employer's liability for the amount in
7012 controversy or doubt as to the collectibility of such amount. For
7013 purposes of this section, doubt as to the employer's liability for the
7014 amount in controversy exists if there is a genuine dispute as to the
7015 existence or amount of the employer's liability under this chapter, and
7016 doubt as to the collectibility of such amount exists if the employer's
7017 assets and income are less than the full amount of the employer's debts,
7018 obligations and liabilities under state or federal law.

7019 Sec. 197. Section 31-236f of the general statutes is repealed and the
7020 following is substituted in lieu thereof (*Effective July 1, 2026*):

7021 The administrator, as defined in section 31-232b, [in consultation with
7022 the advisory board established pursuant to section 31-250a,] shall
7023 develop and implement a procedure or program to insure that an
7024 employee, at the time of termination by an employer, receives adequate
7025 information regarding the availability of unemployment compensation

7026 benefits under chapter 567 and the procedure required for making a
7027 claim for such benefits.

7028 Sec. 198. Section 31-264a of the general statutes is repealed and the
7029 following is substituted in lieu thereof (*Effective July 1, 2026*):

7030 (a) Unless the context requires a different meaning, the term "bonds"
7031 or "revenue bonds" under this section and sections 3-21a, 31-222, 31-
7032 225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-259, 31-
7033 263, 31-264b and 31-274j includes notes issued in anticipation of the
7034 issuance of revenue bonds, or notes issued pursuant to a commercial
7035 paper program.

7036 (b) There is established a fund to be known as the Unemployment
7037 Compensation Advance Fund. The fund shall be administered by the
7038 State Treasurer as a trust fund, in accordance with the provisions of this
7039 section and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-
7040 232f, 31-236, [31-250a,] 31-259, 31-263, 31-264b and 31-274j. The state
7041 treasurer may enter into contracts that may be useful to the
7042 organization, establishment, operation and administration of the fund
7043 under all applicable state and federal laws and may contract with any
7044 person to provide whatever services to the fund as, in the discretion of
7045 the State Treasurer, are necessary for the proper operation and
7046 administration of the fund. All costs of organizing, establishing and
7047 operating the fund, including the costs of personnel and contractual
7048 services, shall be a charge upon and paid by the State Treasurer from
7049 the fund. In addition, all costs of establishing and administering the
7050 necessary procedures for billing, payment and collection of the
7051 assessments authorized to be established by the administrator pursuant
7052 to section 31-225a shall be a charge upon and paid by the State Treasurer
7053 from the fund. All costs related to the organization, establishment and
7054 operation of the fund and all costs related to the establishment and
7055 administration of billing, payment and collection procedures for
7056 moneys received from employers in payment of assessments
7057 established in accordance with said section 31-225a, to the extent not
7058 payable from the fund, may be paid from other moneys of the state

7059 when made available for such purpose. There is established within the
7060 fund an advance account, a debt service and reserve account and an
7061 administration account, which accounts shall be held separate and apart
7062 from each other. Additional accounts and subaccounts may be
7063 established in the proceedings under which the revenue bonds are
7064 authorized.

7065 (c) There shall be deposited in the advance account: (1) The proceeds
7066 of revenue bonds issued by the state for deposit into the account and
7067 use in accordance with this section and sections 3-21a, 31-222, 31-225a,
7068 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-259, 31-263, 31-
7069 264b and 31-274j; (2) federal grants and awards or other federal
7070 assistance received by the state for deposit into the account or for other
7071 purposes in accordance with said sections; and (3) interest or other
7072 income earned on the investment of moneys in the advance account
7073 pending transfer or use pursuant to said sections.

7074 (d) To the extent that amounts are available therefor in the advance
7075 account, and on request of the administrator pursuant to subsection (h)
7076 of this section, the State Treasurer shall apply the proceeds (1) to repay,
7077 in accordance with the proceedings authorizing any revenue bonds
7078 issued pursuant to this section and sections 3-21a, 31-222, 31-225a, 31-
7079 231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-259, 31-263, 31-264b
7080 and 31-274j, the outstanding balance of all or any part of the advances
7081 made to the state from the federal unemployment account under Title
7082 XII of the Social Security Act, 42 USC Sections 1321 to 1324, inclusive,
7083 and any interest due on the advances, and (2) to provide advances to the
7084 Unemployment Compensation Benefit Fund.

7085 (e) Within the debt service and reserve account there are established
7086 the following subaccounts: (1) A reserve subaccount into which shall be
7087 deposited the proceeds of revenue bonds issued by the state for deposit
7088 into the reserve subaccount and use in accordance with this section and
7089 sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-
7090 236, [31-250a,] 31-259, 31-263, 31-264b and 31-274j; and (2) a debt service
7091 subaccount into which shall be deposited, in accordance with the

7092 proceeding authorizing the bonds, the proceeds of the initial issuance of
7093 revenue bonds which are expected to be applied as capitalized interest
7094 to the extent required, and payments received from or on behalf of any
7095 employer in payment of assessments established in accordance with
7096 said sections attributable to the debt service requirement. Moneys in
7097 each subaccount created under this subsection may be applied by the
7098 State Treasurer to debt service on revenue bonds. The Treasurer shall
7099 apply amounts in the reserve subaccount to the payment of debt service
7100 on bonds whenever amounts on deposit in the debt service subaccount
7101 are insufficient. The net proceeds of any refunding bonds shall be
7102 deposited in a special subaccount within the debt service and reserve
7103 account and shall be applied solely to the retirement or redemption of
7104 the bonds to be refunded.

7105 (f) There shall be deposited in the administration account: (1) The
7106 proceeds of revenue bonds expected to be deposited into the
7107 administration account and use in accordance with this section and
7108 sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-
7109 236, [31-250a,] 31-259, 31-263, 31-264b and 31-274j; and (2) any additional
7110 money received from employers in payment of assessments established
7111 in accordance with said sections, to offset the costs and expenses of
7112 administering and operating the fund. Amounts in the administration
7113 account may be applied to offset the costs and expenses of establishing,
7114 administering and operating the fund.

7115 (g) The fund shall be maintained separate and apart from all other
7116 moneys, funds and accounts of the state. Investment earnings credited
7117 to the assets of the fund and to any account and subaccount within the
7118 fund shall become part of the assets of the fund, account and
7119 subaccount, except as otherwise required for rebates in order to assure
7120 the excludability of the interest on the bonds from federal income
7121 taxation, as provided in the proceedings authorizing any revenue
7122 bonds. Any balance remaining in the fund at the end of any fiscal year
7123 shall be carried forward in the fund, account and subaccount for the next
7124 fiscal year.

7125 (h) Upon the issuance of revenue bonds and to the extent there are
7126 sufficient proceeds or other amounts in the advance account available
7127 therefor, any advances to the Unemployment Compensation Benefit
7128 Fund that the administrator deems necessary for the payment of
7129 benefits under this chapter or to the Unemployment Compensation
7130 Fund for the repayment of advances made to the state from the federal
7131 unemployment account, including interest thereon, may be obtained
7132 from the advance account of the Unemployment Compensation
7133 Advance Fund. The State Treasurer shall, on request filed in writing by
7134 the administrator, withdraw from the advance account of the
7135 Unemployment Compensation Advance Fund and deposit in the
7136 Unemployment Compensation Benefit Fund, amounts determined by
7137 the administrator to be necessary for the payment of benefits under this
7138 chapter without incurring federal interest charges, or deposit in the
7139 Unemployment Compensation Fund amounts determined by the
7140 administrator to be required for the repayment of advances made to the
7141 state from the federal unemployment account, including interest
7142 thereon. The State Treasurer shall, from time to time and at least
7143 annually, determine the amount of interest, amortization, reserve and
7144 associated costs required for each advance made from the advance
7145 account under this subsection computed in accordance with the
7146 requirements of the Unemployment Compensation Fund and the
7147 proceedings under which the revenue bonds are authorized and such
7148 amounts shall be assessed by the administrator as provided in
7149 subdivision (2) of subsection (e) of section 31-225a. For purposes of this
7150 subsection, "associated costs" includes all costs related to the efficient
7151 establishment, operation and administration of the Unemployment
7152 Compensation Advance Fund pursuant to subsection (b) of this section,
7153 and the proceedings under which the bonds are issued pursuant to this
7154 section and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-
7155 232f, 31-236, [31-250a,] 31-259, 31-263, 31-264b and 31-274j and the costs
7156 of establishing and administering the billing, payment and collection
7157 procedures referred to in subsection (b) of this section.

7158 (i) The moneys in the advance account may also be used to pay any

7159 costs related to the issuance of revenue bonds issued pursuant to section
7160 31-264b and to pay any debt service thereon for which amounts on
7161 deposit in the debt service and reserve account maintained pursuant to
7162 this section are insufficient.

7163 (j) Notwithstanding any provision of this section and sections 3-21a,
7164 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-
7165 259, 31-263, 31-264b and 31-274j to the contrary, any money received
7166 from the Unemployment Compensation Fund may not be used for any
7167 purpose inconsistent with federal law, and any federal grants, awards,
7168 advances or other federal assistance referred to herein may not be used
7169 for any purpose other than that for which such amounts were granted,
7170 awarded, advanced, or otherwise appropriated, respectively.

7171 Sec. 199. Section 31-264b of the general statutes is repealed and the
7172 following is substituted in lieu thereof (*Effective July 1, 2026*):

7173 (a) The State Bond Commission may authorize the issuance of
7174 revenue bonds of the state in one or more series and in principal
7175 amounts necessary or estimated to be necessary as an advance to the
7176 Unemployment Compensation Fund, or to repay advances made to the
7177 state from the federal unemployment account, but not in excess of one
7178 billion dollars outstanding at any one time and such additional amount
7179 of bonds required to fund any debt service and reserve account in
7180 accordance with the proceedings authorizing the bonds and the costs of
7181 issuance, capitalized interest, if any, and the initial costs and expenses
7182 of the administration account, provided in computing the total amount
7183 of bonds which may at any one time be outstanding, the principal
7184 amount of any refunding bonds issued to refund bonds shall be
7185 excluded. The legislature finds that it is an essential governmental
7186 function to assure that the balance in the state's account in the federal
7187 Unemployment Trust Fund is maintained at a level which is sufficient
7188 to pay all benefits and further finds that the financing and payment of
7189 the outstanding principal amount which has been advanced to the state
7190 from the federal account of the Unemployment Trust Fund and the
7191 financing and funding of the state's account in the Unemployment Trust

7192 Fund by the issuance of revenue bonds pursuant to this section and
7193 sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-
7194 236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j is in the public
7195 interest, will substantially result in savings of interest costs, will achieve
7196 a public purpose of reducing overall costs of providing employment
7197 benefits and will thereby foster and promote economic growth, provide
7198 employment opportunities for the residents of the state and assist
7199 companies by reducing their overall costs of doing business in the state.

7200 (b) Bonds issued pursuant to subsection (a) of this section shall be
7201 special obligations of the state and shall not be payable from nor
7202 charged upon any funds other than the Unemployment Compensation
7203 Advance Fund and revenues pledged to the payment thereof, nor shall
7204 the state or any political subdivision thereof be subject to any liability
7205 thereon other than from such sources. The issuance of revenue bonds
7206 under the provisions of this section and sections 3-21a, 31-222, 31-225a,
7207 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-259, 31-263, 31-
7208 264a and 31-274j shall not directly or indirectly or contingently obligate
7209 the state or any political subdivision thereof to levy or to pledge any
7210 form of taxation whatever therefor or to make any appropriation for
7211 their payment other than the appropriation set forth in this section. The
7212 bonds shall not constitute a charge, lien or encumbrance, legal or
7213 equitable, upon any property of the state or of any political subdivision
7214 thereof, except the Unemployment Compensation Advance Fund and
7215 revenues pledged or otherwise encumbered under the provisions and
7216 for the purpose of said sections. The substance of this limitation shall be
7217 plainly stated on the face of each bond. Revenue bonds issued pursuant
7218 to said sections shall not be subject to any statutory limitation on the
7219 indebtedness of the state and the bonds, when issued, shall not be
7220 included in computing the aggregate indebtedness of the state in respect
7221 to, and to the extent of, any such limitation. As part of the contract of the
7222 state with the owners of the revenue bonds, all amounts necessary for
7223 the punctual payment of the debt service requirements with respect to
7224 the revenue bonds shall be deemed appropriated, but only from the
7225 sources pledged pursuant to this section and sections 3-21a, 31-222, 31-

7226 225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-259, 31-
7227 263, 31-264a and 31-274j.

7228 (c) The revenue bonds referred to in subsection (a) of this section may
7229 be executed and delivered at the time or times, shall be dated, shall bear
7230 interest at the rate or rates, shall mature at the time or times not
7231 exceeding ten years from their date, have the rank or priority, be payable
7232 in the medium of payment, be issued in coupon or in registered form,
7233 or both, carry the registration and transfer privileges and be made
7234 redeemable before maturity at the price or prices and under the terms
7235 and conditions, all as may be provided by the State Bond Commission.
7236 With the exception of subsections (i) and (p) all provisions of section 3-
7237 20 and the exercise of any right or power granted thereby which are not
7238 inconsistent with the provisions of this section and sections 3-21a, 31-
7239 222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-
7240 259, 31-263, 31-264a and 31-274j are hereby adopted and may be invoked
7241 in respect to all revenue bonds authorized by the State Bond
7242 Commission pursuant to said sections. For the purposes of subsection
7243 (o) of said section 3-20, "bond act" includes said sections. None of the
7244 revenue bonds shall be authorized, except upon a finding by the State
7245 Bond Commission that there has been filed with it a request for
7246 authorization, which is signed by or on behalf of the State Treasurer and
7247 states the terms and conditions as said commission, in its discretion,
7248 may require.

7249 (d) The principal of and interest on any bonds issued pursuant to this
7250 section and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-
7251 232f, 31-236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j shall be
7252 secured by a pledge of the Unemployment Compensation Advance
7253 Fund and any revenues, receipts, funds or moneys payable to the fund,
7254 including any federal grants or advances available for the fund and
7255 including the amounts of payment received from assessments
7256 established pursuant to said sections, all as set forth in the proceedings
7257 authorizing the bonds pursuant to said sections. Any pledge made by
7258 the state pursuant to said sections is a pledge within the meaning and

7259 for all purposes of title 42a and shall be valid and binding from the time
7260 when the pledge is made. Any revenues or other receipts, funds or
7261 moneys so pledged and thereafter received by the state shall be subject
7262 immediately to the lien of the pledge without any physical delivery
7263 thereof or further act. The lien of any pledge shall be valid and binding
7264 as against all parties having claims of any kind in tort, contract or
7265 otherwise against the state, irrespective of whether the parties have
7266 notice of the claims. Neither this section nor sections 3-21a, 31-222, 31-
7267 225, 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-259, 31-263,
7268 31-264a and 31-274j, the resolution nor any other instrument by which a
7269 pledge is created need be recorded.

7270 (e) Revenue bonds issued pursuant to this section and sections 3-21a,
7271 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-236, [31-250a,] 31-
7272 259, 31-263, 31-264a and 31-274j are hereby made securities in which
7273 public officers and public bodies of the state and its political
7274 subdivisions, all insurance companies, credit unions, savings and loan
7275 associations, investment companies, banking associations, trust
7276 companies, executors, administrators, trustees and other fiduciaries and
7277 pension, profit-sharing and retirement funds may properly and legally
7278 invest funds, including capital in their control or belonging to them. The
7279 bonds are hereby made securities which may properly and legally be
7280 deposited with and received by any state or municipal officer or any
7281 agency or political subdivision of the state for any purpose for which
7282 the deposit of bonds or other obligations of the state is now or may
7283 hereafter be authorized by law.

7284 (f) The proceedings under which bonds are authorized to be issued
7285 may contain any or all of the following: (1) Provisions respecting
7286 custody of the proceeds from the sale of the bonds, including any
7287 requirement that the proceeds be deposited in the Unemployment
7288 Compensation Advance Fund and held separate from, or not be
7289 commingled with, other funds of the state; (2) provisions for the
7290 investment and reinvestment of bond proceeds and after the disposition
7291 of any excess bond proceeds or investment earnings thereon; (3)

7292 provisions for the execution of reimbursement agreements or similar
7293 agreements in connection with credit facilities, including, but not
7294 necessarily limited to, letters of credit or policies of bond insurance,
7295 remarketing agreements and agreements for the purpose of moderating
7296 interest rate fluctuations, and of such other agreements entered into
7297 pursuant to section 3-20a; (4) provisions for the collection, custody,
7298 investment, reinvestment and use of the pledged revenues or other
7299 receipts, funds or moneys pledged therefor as provided in this section
7300 and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f,
7301 31-236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j; (5) provisions
7302 regarding the establishment and maintenance of reserves, sinking funds
7303 and any other funds and accounts of the Unemployment Compensation
7304 Advance Fund pursuant to said sections and in the amounts and on the
7305 terms approved by the State Bond Commission in the amounts
7306 established by the State Bond Commission; (6) covenants for the
7307 establishment of pledged revenue coverage requirements for the bonds;
7308 (7) provisions for the issuance of additional bonds on a parity with
7309 bonds theretofore issued, including establishment of coverage
7310 requirements with respect thereto as herein provided; (8) provisions
7311 regarding the rights and remedies available in case of a default to
7312 bondowners, noteowners or any trustee under any contract, loan
7313 agreement, document, instrument or trust indenture, including the right
7314 to appoint a trustee to represent their interests upon occurrence of an
7315 event of default, as defined in said proceedings, provided if any revenue
7316 bonds are secured by a trust indenture, the respective owners of the
7317 bonds shall have no authority, except as set forth in the trust indenture,
7318 to appoint a separate trustee to represent them; (9) provisions for the
7319 payment of rebate amounts; and (10) provisions of covenants of like or
7320 different character from the foregoing which are consistent with this
7321 section and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-
7322 232f, 31-236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j, and which
7323 the State Bond Commission determines in such proceedings are
7324 necessary, convenient or desirable in order to better secure the revenue
7325 bonds, or will tend to make the revenue bonds more marketable, and
7326 which are in the best interests of the state. Any provision which may be

7327 included in proceedings authorizing the issuance of bonds hereunder
7328 may be included in an indenture of trust duly approved in accordance
7329 with said sections, which secures the revenue bonds issued in
7330 anticipation thereof, and in such case the provision of the indenture
7331 shall be deemed to be a part of the proceedings as though they were
7332 expressly included therein.

7333 (g) Whether or not any revenue bonds issued pursuant to this section
7334 and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f,
7335 31-236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j are of the form and
7336 character to qualify as negotiable instruments under the terms of title
7337 42a, the bonds are hereby made negotiable instruments within the
7338 meaning of and for all purposes of title 42a, subject only to the
7339 provisions of the bonds.

7340 (h) The state covenants with the purchasers and all subsequent
7341 owners and transferees of revenue bonds issued by the state pursuant
7342 to this section and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-
7343 232d, 31-232f, 31-236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j, in
7344 consideration of the acceptance of and payment for the bonds, that the
7345 bonds shall be free at all times from taxes levied by any municipality or
7346 political subdivision or special district having taxing powers of the state,
7347 and the principal and interest of any bonds issued under the provisions
7348 of said sections, their transfer and the income therefrom, including any
7349 profit on the sale or transfer thereof, shall at all times be exempt from
7350 any taxation by the state of Connecticut or under its authority, except
7351 for estate or succession taxes. The State Treasurer is authorized to
7352 include this covenant of the state in any agreement with the owner of
7353 any bonds and in any credit facility or reimbursement agreement with
7354 respect to the bonds.

7355 (i) The state further covenants with the purchasers and all subsequent
7356 owners and transferees of bonds issued by the state pursuant to this
7357 section and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-
7358 232f, 31-236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j, in
7359 consideration of the acceptance of the payment of the bonds, until the

7360 bonds, together with the interest thereon, with interest on any unpaid
7361 installment of interest and all costs and expenses in connection with any
7362 action or proceeding on behalf of the owners, are fully met and
7363 discharged or unless expressly permitted or otherwise authorized by
7364 the terms of each contract and agreement made or entered into by or on
7365 behalf of the state with or for the benefit of such owners, that the state
7366 will cause the administrator to impose, charge, raise, levy, collect and
7367 apply the pledged assessments and other revenues, receipts, funds or
7368 moneys pledged for the payment of debt service requirements in each
7369 year in which bonds are outstanding and further, that the state (1) will
7370 not limit or alter the duties imposed on the administrator, the State
7371 Treasurer and other officers of the state by the proceedings authorizing
7372 the issuance of bonds with respect to application of pledged
7373 assessments or other revenues, receipts, funds or moneys pledged for
7374 the payment of debt service requirements; (2) will not issue any bonds,
7375 notes or other evidences of indebtedness, other than the bonds, having
7376 any rights arising out of said sections or secured by any pledge of or
7377 other lien or charge on the pledged revenues or other receipts, funds or
7378 moneys pledged for the payment of debt service requirements; (3) will
7379 not create or cause to be created any lien or charge on the pledged
7380 amounts, other than a lien or pledge created thereon pursuant to said
7381 sections, provided nothing in this subsection shall prevent the state from
7382 issuing evidences of indebtedness (A) which are secured by a pledge or
7383 lien which is, and shall on the face thereof, be expressly subordinate and
7384 junior in all respects to every lien and pledge created by or pursuant to
7385 said sections; or (B) which are secured by a pledge of or lien on moneys
7386 or funds derived on or after the date every pledge or lien thereon created
7387 by or pursuant to said sections shall be discharged and satisfied; (4) will
7388 carry out and perform, or cause to be carried out and performed, each
7389 and every promise, covenant, agreement or contract made or entered
7390 into by the state or on its behalf with the owners of any bonds; (5) will
7391 not in any way impair the rights, exemptions or remedies of the owners;
7392 and (6) will not limit, modify, rescind, repeal or otherwise alter the
7393 rights or obligations of the appropriate officers of the state to impose,
7394 maintain, charge or collect the assessments and other revenues or

7395 receipts constituting the pledged revenues as may be necessary to
7396 produce sufficient revenues to fulfill the terms of the proceedings
7397 authorizing the issuance of the bonds, including pledged revenue
7398 coverage requirements, and provided nothing herein shall preclude the
7399 state from exercising its power, through a change in law, to limit,
7400 modify, rescind, repeal or otherwise alter the character of the pledged
7401 assessments or revenues or to substitute like or different sources of
7402 assessments, taxes, fees, charges or other receipts as pledged revenues
7403 if and when adequate provision shall be made by law for the protection
7404 of the holders of outstanding bonds pursuant to the proceedings under
7405 which the bonds are issued, including changing or altering the method
7406 of establishing the assessments as provided in subparagraph (B) of
7407 subdivision (2) of subsection (e) of section 31-225a. The State Bond
7408 Commission is authorized to include this covenant of the state, as a
7409 contract of the state, in any agreement with the owner of any bonds and
7410 in any credit facility or reimbursement agreement with respect to the
7411 bonds.

7412 (j) Pending the use and application of any bond proceeds, the
7413 proceeds may be invested by, or at the direction of, the State Treasurer
7414 in obligations listed in section 3-20.

7415 (k) Any revenue bonds issued under the provisions of this section
7416 and sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f,
7417 31-236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j and at any time
7418 outstanding may, at any time and from time to time, be refunded by the
7419 state by the issuance of its revenue refunding bonds in whatever
7420 amounts the State Bond Commission may deem necessary, but not to
7421 exceed an amount sufficient to refund the principal of the revenue
7422 bonds to be so refunded, to pay any unpaid interest thereon and any
7423 premiums and commissions necessary to be paid in connection
7424 therewith and to pay costs and expenses which the State Treasurer may
7425 deem necessary or advantageous in connection with the authorization,
7426 sale and issuance of refund bonds. Any such refunding may be effected
7427 whether the revenue bonds to be refunded shall have matured or shall

7428 thereafter mature. All revenue refunding bonds issued hereunder shall
7429 be payable solely from the Unemployment Compensation Advance
7430 Fund and revenues or other receipts, funds or moneys out of which the
7431 revenue bonds to be refunded thereby are payable and shall be subject
7432 to and may be secured in accordance with the provisions of this section.

7433 (l) The State Treasurer shall have power, out of any funds available
7434 therefor, to purchase revenue bonds issued pursuant to this section and
7435 sections 3-21a, 31-222, 31-225a, 31-231a, 31-232b, 31-232d, 31-232f, 31-
7436 236, [31-250a,] 31-259, 31-263, 31-264a and 31-274j. The State Treasurer
7437 may hold, pledge, cancel or resell the bonds, subject to and in
7438 accordance with agreements with bondholders.

7439 Sec. 200. Section 31-250a of the general statutes is repealed. (*Effective*
7440 *October 1, 2026*)

7441 Sec. 201. Subdivision (2) of section 31-76b of the general statutes is
7442 repealed and the following is substituted in lieu thereof (*Effective October*
7443 *1, 2026*):

7444 (2) (A) "Hours worked" [include] includes all time during which an
7445 employee is required by the employer to be on the employer's premises
7446 or to be on duty, or to be at the prescribed work place, and all time
7447 during which an employee is employed or permitted to work, whether
7448 or not required to do so, provided time allowed for meals shall be
7449 excluded unless the employee is required or permitted to work. Such
7450 time includes, but shall not be limited to, (i) the time when an employee
7451 is required to wait on the premises while no work is provided by the
7452 employer, and (ii) the time an employee spends in security screenings
7453 required by an employer. (B) All time during which an employee is
7454 required to be on call for emergency service at a location designated by
7455 the employer shall be considered to be working time and shall be paid
7456 for as such, whether or not the employee is actually called upon to work.
7457 (C) When an employee is subject to call for emergency service but is not
7458 required to be at a location designated by the employer but is simply
7459 required to keep the employer informed as to the location at which he

7460 may be contacted, or when an employee is not specifically required by
7461 his employer to be subject to call but is contacted by his employer or on
7462 the employer's authorization directly or indirectly and assigned to duty,
7463 working time shall begin when the employee is notified of his
7464 assignment and shall end when the employee has completed his
7465 assignment. (D) Notwithstanding the provisions of this subdivision,
7466 when an individual employed by a third-party provider to provide
7467 "companionship services", as defined in the regulations of the federal
7468 Fair Labor Standards Act, is required to be present at a worksite for a
7469 period of not less than twenty-four consecutive hours, such individual
7470 and his or her employer may agree in writing to exclude a regularly
7471 scheduled sleeping period of not more than eight hours from hours
7472 worked, provided (i) adequate on-site sleeping facilities are furnished
7473 to such individual, and (ii) such individual receives at least five hours
7474 of sleep time. If the scheduled sleeping period is more than eight hours,
7475 only eight hours will be excluded. If the scheduled sleeping period is
7476 interrupted by an assignment to work, the interruption shall be counted
7477 as hours worked. If such individual does not receive at least five hours
7478 of sleep time during the scheduled sleeping period, the entire sleeping
7479 period shall be considered hours worked. The provisions of this
7480 subparagraph shall be effective on and after the effective date of the
7481 United States Department of Labor's Final Rule concerning the
7482 Application of the federal Fair Labor Standards Act to Domestic Service
7483 published in the Federal Register of October 1, 2013;

7484 Sec. 202. (*Effective from passage*) (a) There is established a task force to
7485 study and provide recommendations on the establishment of heat safety
7486 standards for workplaces. The study shall include, but need not be
7487 limited to, an examination of (1) best practices to prevent employee
7488 exposure to the risk of heat illness, and (2) laws and regulations
7489 governing heat safety standards implemented in other states.

7490 (b) The task force shall consist of the following members:

7491 (1) The chairpersons and ranking members of the joint standing
7492 committee of the General Assembly having cognizance of matters

- 7493 relating to labor and public employees, or their designees;
- 7494 (2) One appointed by the speaker of the House of Representatives,
7495 who is a member of an organization that advocates for the prevention
7496 of sudden death from exertional heat stroke;
- 7497 (3) One appointed by the president pro tempore of the Senate;
- 7498 (4) One appointed by the majority leader of the House of
7499 Representatives;
- 7500 (5) One appointed by the majority leader of the Senate;
- 7501 (6) One appointed by the minority leader of the House of
7502 Representatives;
- 7503 (7) One appointed by the minority leader of the Senate; and
- 7504 (8) The Labor Commissioner, or the commissioner's designee.
- 7505 (c) Any member of the task force appointed under subdivision (2),
7506 (3), (4), (5), (6) or (7) of subsection (b) of this section may be a member
7507 of the General Assembly.
- 7508 (d) All initial appointments to the task force shall be made not later
7509 than thirty days after the effective date of this section. Any vacancy shall
7510 be filled by the appointing authority.
- 7511 (e) The chairpersons of the joint standing committee of the General
7512 Assembly having cognizance of matters relating to labor and public
7513 employees, or their designees, shall be the chairpersons of the task force.
7514 Such chairpersons shall schedule the first meeting of the task force,
7515 which shall be held not later than sixty days after the effective date of
7516 this section.
- 7517 (f) The administrative staff of the joint standing committee of the
7518 General Assembly having cognizance of matters relating to labor and
7519 public employees shall serve as administrative staff of the task force.

7520 (g) Not later than January 1, 2027, the task force shall submit a report
7521 on its findings and recommendations to the joint standing committee of
7522 the General Assembly having cognizance of matters relating to labor
7523 and public employees, in accordance with the provisions of section 11-
7524 4a of the general statutes. The task force shall terminate on the date that
7525 it submits such report or January 1, 2027, whichever is later.

7526 Sec. 203 Subsection (a) of section 31-102 of the general statutes is
7527 repealed and the following is substituted in lieu thereof (*Effective October*
7528 *1, 2026*):

7529 (a) There shall continue to be in the Labor Department the
7530 Connecticut State Board of Labor Relations, which shall be composed of
7531 three members. On or before June first in the odd-numbered years, as
7532 the term of each member expires, the Governor shall, with the advice
7533 and consent of the General Assembly, appoint a successor to serve for a
7534 term of six years. Each member of the board shall have been an elector
7535 in this state for at least one year next preceding his appointment. Any
7536 member may be removed by the Governor for cause shown in a public
7537 hearing after the accused has been given a copy of the charges made and
7538 has had an opportunity to answer such charges. The Governor shall fill
7539 any vacancy by appointment for the unexpired term. No member shall
7540 receive a salary but each member shall be paid [one hundred fifty] three
7541 hundred dollars in lieu of expenses for each day during which he is
7542 engaged in the duties of the board. The offices of the board shall be in
7543 the department at Wethersfield. The board is authorized to hold
7544 hearings at any place in this state. Subject to the provisions of chapter
7545 67, the board shall appoint such employees, including an assistant to the
7546 agent, for such periods as may be necessary to carry out the work of the
7547 board and the provisions of this chapter without undue delay. All files,
7548 records and documents accumulated by the board shall be kept in
7549 offices provided by the department. All decisions shall be made by a
7550 majority of the board and a copy shall be filed with the commissioner.
7551 As provided in section 4-60 and more frequently if required by the
7552 governor, the board shall make a written report to the Governor, a copy

7553 of which shall be filed with the commissioner.

7554 Sec. 204. Section 31-98 of the general statutes is repealed and the
7555 following is substituted in lieu thereof (*Effective October 1, 2026*):

7556 (a) The panel, or its single member if sitting in accordance with
7557 section 31-93, may, in its discretion and with the consent of the parties,
7558 issue an oral decision immediately upon conclusion of the proceedings.
7559 If the decision is to be in writing, it shall be signed, within fifteen days,
7560 by a majority of the members of the panel or by the single member so
7561 sitting, and the decision shall state such details as will clearly show the
7562 nature of the decision and the points disposed of by the panel. Where
7563 the decision is in writing, one copy thereof shall be filed by the panel in
7564 the office of the town clerk in the town where the controversy arose and
7565 one copy shall be given to each of the parties to the controversy. The
7566 panel or single member which has rendered an oral decision
7567 immediately upon conclusion of the proceedings shall submit a written
7568 copy of the decision to each party within fifteen days from the issuance
7569 of such oral decision. In all cases where a decision is rendered orally
7570 from the bench, the secretary shall cause such oral decision to be
7571 transcribed, approved by the panel or single member as applicable and
7572 filed with the records of the board proceedings.

7573 (b) Upon the conclusion of the proceedings, each member of the panel
7574 shall receive [three hundred twenty-five] five hundred dollars and a
7575 panel member who prepares a written decision shall receive an
7576 additional [five hundred] one thousand dollars, or the single member,
7577 if sitting in accordance with section 31-93, shall receive [three hundred
7578 twenty-five] five hundred dollars, provided if the proceedings extend
7579 beyond one day, each member shall receive [three hundred twenty-five]
7580 five hundred dollars for each additional day beyond the first day, and
7581 provided further no proceeding may be extended beyond two days
7582 without the prior approval of the Labor Commissioner for each such
7583 additional day.

7584 (c) Upon the conclusion of an executive panel session, each member

7585 of such panel shall receive [two] three hundred dollars.

7586 Sec. 205. Section 228 of public act 25-168 is repealed and the following
7587 is substituted in lieu thereof (*Effective from passage*):

7588 (a) The Comptroller shall conduct a study on the compensation of
7589 transportation network company drivers and third-party delivery
7590 company drivers in the state. In conducting such study, the Comptroller
7591 shall obtain and analyze data and information related to income earned
7592 by transportation network company drivers and third-party delivery
7593 company drivers for services provided by such drivers in the state and
7594 costs directly attributable to providing such services. Such data and
7595 information shall be aggregated in a manner that does not report
7596 personally identifiable information and shall exclude any proprietary,
7597 trade secret, competitively sensitive or otherwise confidential
7598 commercial information that is not publicly available. The Comptroller
7599 may enter into a contract with a consultant in order to conduct such
7600 study. Not later than [July 1, 2026] October 1, 2026, the Comptroller shall
7601 file a report on such data and information, in accordance with the
7602 provisions of section 11-4a of the general statutes, with the joint
7603 standing committee of the General Assembly having cognizance of
7604 matters relating to labor and public employees.

7605 (b) The Comptroller shall, within available appropriations, spend not
7606 more than one hundred thousand dollars on conducting such study.

7607 Sec. 206. Section 44 of house bill 5003 of the current session, as
7608 amended by House Amendment Schedule "A", is repealed and the
7609 following is substituted in lieu thereof (*Effective July 1, 2027*):

7610 (a) As used in this section and sections 45 to 47, inclusive, of [this act]
7611 house bill 5003 of the current session, as amended by House
7612 Amendment Schedule "A":

7613 (1) "Public utility pole" means a pole, including a portion of a pole,
7614 owned by a telephone company or an electric distribution company that
7615 is used to support wires for (A) the distribution of electricity, (B)

7616 telecommunications services, as defined in section 16-247a of the
7617 general statutes, or (C) the lighting of streets or sidewalks;

7618 (2) "Double utility poles" means a replacement public utility pole
7619 built or installed alongside, or attached to, an existing public utility pole,
7620 or a portion of an existing public utility pole, for the purpose of
7621 transferring the wires from the existing utility pole to the replacement
7622 utility pole, provided the existing public utility pole, including any
7623 portion of such utility pole, has not been removed after the installation
7624 of the replacement utility pole;

7625 (3) "Utility pole custodian" means the electric distribution company
7626 or telephone company with a duty to maintain a public utility pole;

7627 (4) "Utility pole attachment database system" means a software
7628 system designated by the Public Utilities Regulatory Authority for the
7629 purpose of maintaining a database of attachments to public utility poles
7630 in the state;

7631 (5) "User" means any person or entity that is not the owner of a public
7632 utility pole who maintains equipment of any sort on such pole, except
7633 when a public utility pole is owned by more than one person or entity,
7634 the person or entity that is a partial owner of such pole and that is not
7635 performing the removal or replacement work shall be considered a
7636 "user" for the purposes of this section and section 45 of [this act] house
7637 bill 5003 of the current session, as amended by House Amendment
7638 Schedule "A". "User" does not include any municipality or political
7639 subdivision of the state or an electric distribution company if such
7640 company owns the public utility pole;

7641 (6) "Electric distribution company" has the same meaning as
7642 provided in section 16-1 of the general statutes;

7643 (7) "Telephone company" has the same meaning as provided in
7644 section 16-1 of the general statutes; and

7645 (8) "Complex transfer" means work to transfer a public utility pole

7646 attachment that would be reasonably likely to cause a service outage or
7647 damage to any other such attachments, including work such as splicing
7648 a communication attachment or relocating existing wireless
7649 attachments. Any transfer involving mobile, fixed, and point-to-point
7650 wireless communications and attachments owned by wireless Internet
7651 service providers shall be deemed a complex transfer.

7652 (b) A utility pole custodian, or the custodian's agent, shall deliver
7653 notice of any removal and replacement work concerning such utility
7654 pole to each user of such utility pole not more than seventy-two hours
7655 (1) after starting any such work if such work is planned, or (2) after such
7656 work is completed if such work was unplanned and necessary to correct
7657 a hazardous condition on an emergency basis. Such notice shall describe
7658 the location of the public utility pole, the nature of the work completed
7659 or to be completed, the date upon which such work was completed or is
7660 to be completed and the delivery date of such notice. Such notice shall
7661 be delivered to each user of the public utility pole by electronic means
7662 through the utility pole attachment database system.

7663 (c) Except as provided in section 46 of [this act] house bill 5003 of the
7664 current session, as amended by House Amendment Schedule "A", each
7665 user of a public utility pole, except an electric distribution company, that
7666 receives notice of work pursuant to subsection (b) of this section shall
7667 transfer its equipment from the existing public utility pole to the
7668 replacement public utility pole not later than (1) twenty days after
7669 receiving such notice if such notice requires the transfer of equipment
7670 from fifty or fewer public utility poles, or (2) forty-five days after
7671 receiving such notice if such notice requires the transfer of equipment
7672 from greater than fifty public utility poles. Except as provided in section
7673 46 of house bill 5003 of the current session, as amended by House
7674 Amendment Schedule "A", each user that is an electric distribution
7675 company that receives notice of work pursuant to subsection (b) of this
7676 section shall transfer its equipment from the existing public utility pole
7677 to the replacement public utility pole not later than forty-five days after
7678 receiving such notice. Upon the completion of the work to transfer

7679 equipment pursuant to this subsection, the user shall provide notice by
7680 electronic means through the utility pole attachment database system to
7681 the utility pole custodian that such work has been completed.

7682 (d) (1) Except as provided in section 46 of [this act] house bill 5003 of
7683 the current session, as amended by House Amendment Schedule "A", if
7684 a user fails to complete the work required to transfer the user's
7685 equipment in the time required under subsection (c) of this section, the
7686 telephone company, or such company's agent, may complete such work
7687 on the user's behalf. Such company, or such company's agent, may
7688 submit a bill to such user based on the prevailing rate of wages
7689 established pursuant to section 31-53 of the general statutes, as amended
7690 by [this act] house bill 5003 of the current session, as amended by House
7691 Amendment Schedule "A", for any such work completed on behalf of
7692 such user. Such user shall pay such bill not later than sixty days after
7693 receipt.

7694 (2) A user shall not be in violation of this section if (A) such user is
7695 prevented from timely completing the transfer of such user's equipment
7696 due solely to a municipality's failure to timely remove or transfer any
7697 equipment owned by such municipality or a political subdivision of the
7698 municipality, (B) a telephone company, or such company's agent, fails
7699 to complete any work required to transfer such user's equipment
7700 pursuant to subdivision (1) of this subsection, or (C) the user can
7701 demonstrate good cause to the authority why such user failed to timely
7702 complete such transfer, including, but not limited to, the presence of an
7703 unidentified attachment to a public utility pole, a significant weather
7704 event that precludes or delays the timely completion of required work,
7705 the existence of a declared emergency in the state, or if the transfer is a
7706 complex transfer. Nothing in this section shall be construed to excuse
7707 such user from completing such work within a reasonable period of
7708 time, considering the circumstances of such work, as determined by the
7709 authority.

7710 (e) (1) Except as provided in subdivision (2) of this subsection, a user
7711 that fails to transfer the user's equipment to a replacement public utility

7712 pole in compliance with subsection (c) of this section or fails to pay a bill
7713 submitted to such user pursuant to subsection (d) of this section within
7714 sixty days of receipt shall be in violation of this section. The Public
7715 Utilities Regulatory Authority may impose, by order of the authority, a
7716 civil penalty not to exceed one hundred dollars for each violation of
7717 subsection (c) of this section, and in the case of a continued violation,
7718 each day thereof shall be deemed a separate violation. The authority
7719 shall impose any such civil penalty in accordance with the procedure
7720 established in section 16-41 of the general statutes.

7721 (2) The authority shall impose no penalty on a user pursuant to this
7722 subsection if (A) the user of a public utility pole was prevented from
7723 completing the transfer of such user's equipment due solely to a
7724 municipality's failure to timely remove or transfer any equipment
7725 owned by such municipality or a political subdivision of the
7726 municipality, (B) a telephone company, or such company's agent, fails
7727 to complete any work required to transfer such user's equipment
7728 pursuant to subsection (d) of this section, or (C) the user can
7729 demonstrate good cause to the authority why such user failed to timely
7730 complete such transfer, including, but not limited to, the presence of an
7731 unidentified attachment to a public utility pole, a significant weather
7732 event that precludes or delays the timely completion of required work,
7733 the existence of a declared emergency in the state, or if the transfer is a
7734 complex transfer. If the authority finds the user has demonstrated good
7735 cause pursuant to subparagraph (C) of this subdivision, the authority
7736 shall issue a written decision that articulates the basis for such finding.

7737 (f) (1) An electric distribution company or telephone company that
7738 removes a public utility pole, including any portion of such a utility
7739 pole, and installs a replacement public utility pole shall complete the
7740 transfer of any wires or equipment owned by the electric distribution
7741 company or telephone company not later than forty-five days after such
7742 company receives notice of work pursuant to subsection (b) of this
7743 section.

7744 (2) An electric distribution company or telephone company that fails

7745 to comply with subdivision (1) of this subsection shall be in violation of
7746 this section. The Public Utilities Regulatory Authority may impose, by
7747 order of the authority, a civil penalty not to exceed one hundred dollars
7748 for each violation of this subsection, and in the case of a continued
7749 violation, each day thereof shall be deemed a separate violation. The
7750 authority shall impose any such civil penalty in accordance with the
7751 procedure established in section 16-41 of the general statutes, except
7752 when such company can demonstrate good cause to the authority why
7753 such company failed to timely complete such transfer, including, but not
7754 limited to, the presence of an unidentified attachment to a public utility
7755 pole, a significant weather event that precludes or delays the timely
7756 completion of required work, the existence of a declared emergency in
7757 the state, or if the transfer is a complex transfer. If the authority finds the
7758 company has demonstrated good cause, the authority shall issue a
7759 written decision that articulates the basis for such finding.

7760 (g) The Public Utilities Regulatory Authority shall remit the amount
7761 of any civil penalty collected pursuant to this section or section 45 of
7762 [this act] house bill 5003 of the current session, as amended by House
7763 Amendment Schedule "A", to the Commissioner of Social Services for
7764 the purpose of providing funding for the Connecticut energy assistance
7765 program administered by the commissioner pursuant to section 17b-2
7766 of the general statutes.

7767 (h) The Public Utilities Regulatory Authority may adopt regulations,
7768 in accordance with chapter 54 of the general statutes, to implement the
7769 provisions of this section and section 45 of [this act] house bill 5003 of
7770 the current session, as amended by House Amendment Schedule "A".

7771 Sec. 207. Section 32-9y of the 2026 supplement to the general statutes
7772 is repealed and the following is substituted in lieu thereof (*Effective July*
7773 *1, 2026*):

7774 (a) As used in this section:

7775 (1) "Commissioner" means the Commissioner of Economic and

7776 Community Development; and

7777 (2) "Greyfield" means any previously developed commercial retail or
7778 office property that (A) is economically nonviable in its current state and
7779 exhibits conditions that significantly complicate its redevelopment or
7780 reuse, as determined by the commissioner; and (B) is not currently
7781 eligible for any brownfield remediation and development program
7782 provided in chapter 588gg.

7783 (b) On and after July 1, 2025, the commissioner may use bond funds
7784 and available resources to provide not more than fifty million dollars in
7785 the aggregate for grants or loans in support of major projects selected
7786 pursuant to subsection (c) of this section.

7787 (c) On and after July 1, 2025, the commissioner, in coordination with
7788 the Commissioner of Housing, the Connecticut Municipal
7789 Redevelopment Authority and the Capital Region Development
7790 Authority, may establish a greyfield revitalization program, which shall
7791 provide grants or loans to facilitate the renovation and repurposing of
7792 commercial retail and office space determined by the Commissioner of
7793 Economic and Community Development to be a greyfield and to
7794 provide grants to the Connecticut Municipal Redevelopment Authority
7795 or the Capital Region Development Authority to provide grants or loans
7796 to facilitate the renovation and repurposing of such commercial retail
7797 and office space. The commissioner shall develop a competitive
7798 application process and criteria to (1) evaluate applications submitted
7799 pursuant to this subsection, and (2) select projects for funding pursuant
7800 to subsection (b) of this section.

7801 (d) Eligible use of grant or loan funds include: (1) Architectural and
7802 engineering assessment of buildings and site readiness to determine
7803 suitability for conversion to multi-family housing; (2) demolition; (3)
7804 remediation and abatement of building materials that were used in
7805 accordance with the State Building Code when the structure was
7806 constructed; (4) renovation or conversion construction costs; (5)
7807 planning studies to assess the viability of one or more potential future

7808 project sites under the program; and (6) reasonable administrative
7809 expenses not to exceed five per cent of any grant awarded.

7810 (e) Financial assistance awarded pursuant to this section shall be
7811 exempt from the provisions of section 32-462.

7812 (f) The commissioner may contract with nongovernmental entities,
7813 including, but not limited to, nonprofit organizations, economic and
7814 community development organizations, lending institutions, and
7815 technical assistance providers to carry out the provisions of this section.

7816 (g) The provisions of this section in relation to the renovation and
7817 repurposing of commercial retail and office space shall apply solely
7818 within the territorial boundaries of the capital city economic
7819 development district, as defined in section 32-600, and the town of East
7820 Hartford.

7821 Sec. 208. (NEW) (*Effective October 1, 2026*) (a) The Chief Workforce
7822 Officer shall establish a program to serve residents of the Clay Arsenal
7823 neighborhood in the city of Hartford by connecting such residents
7824 seeking employment, training or career advancement to employment
7825 opportunities. Such program shall be known as the Clay Arsenal
7826 Workforce Readiness Program. In establishing such program the
7827 commissioner shall:

7828 (1) Establish and maintain a listing of available (A) job opportunities,
7829 (B) training programs, (C) credentials, as defined in section 10a-35b of
7830 the general statutes, offered in the state, (D) apprenticeships, and (E)
7831 employment support services;

7832 (2) Establish and maintain relationships with employers, workforce
7833 development groups, education institutions and community-based
7834 organizations in the region in order to:

7835 (A) Identify workforce needs and hiring opportunities in the state;

7836 (B) Support the development of training and pipeline programs; and

7837 (C) Establish a referral process to refer participating residents to
7838 employers;

7839 (3) Assist participating residents in meeting workplace expectations
7840 or requirements by:

7841 (A) Assessing participating residents' workforce readiness;

7842 (B) Identifying gaps in required training, education or support
7843 services;

7844 (C) Facilitating training opportunities; and

7845 (D) Developing career pathway programs that align with regional
7846 employer demand; and

7847 (4) Provide residents with employment and training opportunities
7848 based on the residents' skills, interest, readiness and current employer
7849 demand.

7850 (b) The Chief Workforce Officer may contract with nongovernmental
7851 entities that provide workforce development opportunities and training
7852 to carry out the provisions of this section.

7853 (c) Not later than January 1, 2027, and annually thereafter, the Chief
7854 Workforce Officer shall submit a report on the program, in accordance
7855 with the provisions of section 11-4a of the general statutes, to the joint
7856 standing committee of the General Assembly having cognizance of
7857 matters relating to finance, revenue and bonding. Such report shall
7858 include (1) a list identifying the participating employers, workforce
7859 development groups, education institutions and community-based
7860 organizations, (2) a description of the level of support provided by each
7861 such participating entity, (3) a summary of the way in which the
7862 coordination among such entities is structured and implemented, (4)
7863 identification of the performance outcomes of the program, including,
7864 but not limited to, participant engagement, training enrollment and
7865 completion by participants and job placement of participants, and (5)

7866 recommendations for program improvement.

7867 Sec. 209. Section 16-256l of the 2026 supplement to the general
7868 statutes, as amended by section 62 of public act 26-1, is repealed and the
7869 following is substituted in lieu thereof (*Effective from passage*):

7870 (a) As used in this section, "provider" means a telephone or
7871 telecommunications company providing local telephone service,
7872 provider of commercial mobile radio service, as defined in 47 CFR
7873 Section 20.3, as amended from time to time, and voice over Internet
7874 protocol service provider, as defined in section 28-30b.

7875 (b) [On] (1) For each monthly period commencing on and after July
7876 1, 2026, each provider shall assess against each subscriber a fee in an
7877 amount equal to five cents per month per access line. Each fee assessed
7878 under this [subsection] subdivision shall be remitted [to the office of the
7879 State Treasurer for deposit into the firefighters cancer relief account
7880 established pursuant to section 7-313h, not later than the fifteenth day
7881 of each month. No part of any fee assessed under this subsection shall
7882 be subject to a refund.] pursuant to the provisions of subdivisions (2)
7883 and (3) of this subsection.

7884 (2) Each provider shall report all fees assessed pursuant to
7885 subdivision (1) of this subsection and remit such fees at such time and
7886 in the same manner as such provider files a return and remits a tax
7887 payment pursuant to section 12-414. Such report shall include, but need
7888 not be limited to, the number of access lines on which such fee was
7889 assessed and the total amount of such fees collected during such tax
7890 period or each month of such tax period, as applicable. Such fees shall
7891 not be included in gross receipts on such return.

7892 (3) Not later than August 1, 2026, and each month thereafter, the
7893 Commissioner of Revenue Services shall deposit all fees remitted
7894 pursuant to subdivision (2) of this subsection into the firefighter's cancer
7895 relief account established pursuant to section 7-313h.

7896 (c) Not later than May 1, 2026, the provider shall provide written

7897 notice to each subscriber disclosing the amount and frequency of such
7898 fee.

7899 (d) No part of any fee assessed pursuant to subsection (b) of this
7900 section shall be subject to a refund.

7901 ~~[(d)]~~ (e) The fee described in subsection (b) of this section shall not
7902 apply to any prepaid wireless telecommunications service, as defined in
7903 section 28-30b.

7904 Sec. 210. Subparagraph (B) of subdivision (9) of subsection (a) of
7905 section 12-407 of the 2026 supplement to the general statutes is repealed
7906 and the following is substituted in lieu thereof (*Effective from passage*):

7907 (B) "Gross receipts" do not include any of the following: (i) Cash
7908 discounts allowed and taken on sales; (ii) any portion of the sales price
7909 of property returned by purchasers, which upon rescission of the
7910 contract of sale is refunded either in cash or credit, provided the
7911 property is returned within ninety days from the date of sale; (iii) the
7912 amount of any tax, not including any manufacturers' or importers'
7913 excise tax, imposed by the United States upon or with respect to retail
7914 sales whether imposed upon the retailer or the purchaser; (iv) the
7915 amount charged for labor rendered in installing or applying the
7916 property sold, provided such charge is separately stated and exclusive
7917 of such charge for any service rendered within the purview of
7918 subparagraph (I) of subdivision (37) of this subsection; (v) unless the
7919 provisions of subdivision (4) of section 12-430 or of section 12-430a are
7920 applicable, any amount for which credit is given to the purchaser by the
7921 retailer, provided such credit is given solely for property of the same
7922 kind accepted in part payment by the retailer and intended by the
7923 retailer to be resold; (vi) the full face value of any coupon used by a
7924 purchaser to reduce the price paid to the retailer for an item of tangible
7925 personal property, whether or not the retailer will be reimbursed for
7926 such coupon, in whole or in part, by the manufacturer of the item of
7927 tangible personal property or by a third party; (vii) the amount charged
7928 for separately stated compensation, fringe benefits, workers'

7929 compensation and payroll taxes or assessments paid to or on behalf of
7930 employees of a retailer who has contracted to manage a service
7931 recipient's property or business premises and renders management
7932 services described in subparagraph (I) or (J) of subdivision (37) of this
7933 subsection, provided the employees perform such services solely for the
7934 service recipient at its property or business premises and "gross
7935 receipts" shall include the separately stated compensation, fringe
7936 benefits, workers' compensation and payroll taxes or assessments paid
7937 to or on behalf of any employee of the retailer who is an officer, director
7938 or owner of more than five per cent of the outstanding capital stock of
7939 the retailer. Determination whether an employee performs services
7940 solely for a service recipient at its property or business premises for
7941 purposes of this subdivision shall be made by reference to such
7942 employee's activities during the time period beginning on the later of
7943 the commencement of the management contract, the date of the
7944 employee's first employment by the retailer or the date which is six
7945 months immediately preceding the date of such determination; (viii) the
7946 amount charged for separately stated compensation, fringe benefits,
7947 workers' compensation and payroll taxes or assessments paid to or on
7948 behalf of (I) a leased employee, or (II) a worksite employee by a
7949 professional employer organization pursuant to a professional
7950 employer agreement. For purposes of this subparagraph, an employee
7951 shall be treated as a leased employee if the employee is provided to the
7952 client at the commencement of an agreement with an employee leasing
7953 organization under which at least seventy-five per cent of the employees
7954 provided to the client at the commencement of such initial agreement
7955 qualify as leased employees pursuant to Section 414(n) of the Internal
7956 Revenue Code of 1986, or any subsequent corresponding internal
7957 revenue code of the United States, as from time to time amended, or the
7958 employee is added to the client's workforce by the employee leasing
7959 organization subsequent to the commencement of such initial
7960 agreement and qualifies as a leased employee pursuant to Section 414(n)
7961 of said Internal Revenue Code of 1986 without regard to subparagraph
7962 (B) of paragraph (2) thereof. A leased employee, or a worksite employee
7963 subject to a professional employer agreement, shall not include any

7964 employee who is hired by a temporary help service and assigned to
7965 support or supplement the workforce of a temporary help service's
7966 client; (ix) the amount received by a retailer from a purchaser as the
7967 battery deposit that is required to be paid under subsection (a) of section
7968 22a-256h; the refund value of a beverage container that is required to be
7969 paid under subsection (a) of section 22a-244 or a deposit that is required
7970 by law to be paid by the purchaser to the retailer and that is required by
7971 law to be refunded to the purchaser by the retailer when the same or
7972 similar tangible personal property is delivered as required by law to the
7973 retailer by the purchaser, if such amount is separately stated on the bill
7974 or invoice rendered by the retailer to the purchaser; [and] (x) the amount
7975 charged for separately stated compensation, fringe benefits, workers'
7976 compensation and payroll taxes or assessments paid to a media payroll
7977 services company, as defined in this subsection; and (xi) the amount of
7978 any subscriber fee assessed pursuant to section 16-256l.

7979 Sec. 211. (NEW) (*Effective from passage*) During the fiscal year ending
7980 June 30, 2026, and each fiscal year thereafter, the Department of Social
7981 Services shall, in consultation with the Secretary of the Office of Policy
7982 and Management, divert federal Medicaid revenue resulting from
7983 disproportionate share hospital claiming at John Dempsey Hospital in
7984 an amount to be determined by the secretary, not to exceed an amount
7985 equal to \$15,000,000 multiplied by the number of hospitals owned and
7986 operated by The University of Connecticut Health Center Joint Venture
7987 Initiative at any point during such fiscal year. Such revenue shall be
7988 diverted and transferred to The University of Connecticut Health Center
7989 to support operational costs associated with The University of
7990 Connecticut Health Center Joint Venture Initiative. The Department of
7991 Social Services and The University of Connecticut Health Center shall
7992 enter into a memorandum of understanding to effectuate the transfer of
7993 such funds.

7994 Sec. 212. (*Effective July 1, 2026*) For the fiscal year ending June 30, 2027,
7995 the Department of Social Services may, with the approval of the
7996 Secretary of the Office of Policy and Management, establish receivables

7997 for the collection of revenue anticipated under section 12-263q of the
7998 general statutes.

7999 Sec. 213. (*Effective from passage*) The sum of \$1,500,000 shall be reduced
8000 from the amount appropriated to The University of Connecticut Health
8001 Center, for Operating Expenses, for the fiscal year ending June 30, 2027.

8002 Sec. 214. (*Effective from passage*) The sum of \$1,500,000 is appropriated
8003 to the Department of Social Services for the fiscal year ending June 30,
8004 2027, for the purpose of funding the Medicaid state share to allow for
8005 the expansion of the physician supplemental payment issued to The
8006 University of Connecticut Health Center under the Medicaid program.

8007 Sec. 215. (NEW) (*Effective January 1, 2027*) (a) For the purposes of this
8008 section:

8009 (1) "Campus" has the same meaning as provided in section 19a-508c
8010 of the general statutes;

8011 (2) "Health system" has the same meaning as provided in section 19a-
8012 508c of the general statutes;

8013 (3) "Hospital" has the same meaning as provided in section 19a-490
8014 of the general statutes; and

8015 (4) "Infusion center" means a site that offers intravenous infusions
8016 and intramuscular or subcutaneous injections of medications, fluids or
8017 biological products for complex medical conditions, including, but not
8018 limited to, cancers and autoimmune disorders.

8019 (b) Any hospital or health system that schedules a patient for any
8020 infusion or injection service to be provided at a hospital-based
8021 outpatient infusion center located outside the hospital campus shall, at
8022 the time of scheduling, provide the patient with a written notice
8023 disclosing that such patient may incur financial liability for such service
8024 that is greater than the financial liability such patient would incur for
8025 such service if such service were provided at a non-hospital-based

8026 infusion center.

8027 Sec. 216. (NEW) (*Effective January 1, 2027*) (a) For the purposes of this
8028 section:

8029 (1) "Campus" has the same meaning as provided in section 19a-508c
8030 of the general statutes;

8031 (2) "Hospital" has the same meaning as provided in section 19a-490
8032 of the general statutes;

8033 (3) "Infusion center" means a site that offers intravenous infusions
8034 and intramuscular or subcutaneous injections of medications, fluids or
8035 biological products for complex medical conditions, including, but not
8036 limited to, cancers and autoimmune disorders;

8037 (4) "Utilization review" has the same meaning as provided in section
8038 38a-591a of the general statutes; and

8039 (5) "Utilization review company" has the same meaning as provided
8040 in section 38a-591a of the general statutes.

8041 (b) Each insurer, health care center, hospital service corporation,
8042 medical service corporation, fraternal benefit society or other entity that
8043 delivers, issues for delivery, renews, amends or continues an individual
8044 or group health insurance policy in this state providing coverage of the
8045 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469
8046 of the general statutes, or utilization review company that conducts
8047 utilization review for such insurer, center, corporation, society or entity,
8048 and issues prior authorization for, or precertifies, any infusion or
8049 injection service to be provided at an infusion center on or after January
8050 1, 2027, shall, at the time of issuing such prior authorization or
8051 precertification for such service, provide the covered person with
8052 written notice disclosing that if such service is provided at any hospital-
8053 based outpatient infusion center located outside the hospital campus,
8054 such covered person may incur financial liability that is greater than the
8055 financial liability such covered person would incur for such service if

8056 such service were provided at a non-hospital-based infusion center.

8057 Sec. 217. (*Effective from passage*) (a) As used in this section:

8058 (1) "Campus" has the same meaning as provided in section 19a-508c
8059 of the general statutes;

8060 (2) "Facility fee" has the same meaning as provided in section 19a-
8061 508c of the general statutes;

8062 (3) "Hospital" has the same meaning as provided in section 19a-490
8063 of the general statutes;

8064 (4) "Infusion center" means a site that offers intravenous infusions
8065 and intramuscular or subcutaneous injections of medications, fluids or
8066 biological products for complex medical conditions, including, but not
8067 limited to, cancers and autoimmune disorders; and

8068 (5) "Surprise bill" has the same meaning as provided in section 38a-
8069 477aa of the general statutes.

8070 (b) The Insurance Department, in consultation with the Office of the
8071 Healthcare Advocate, shall conduct a study of (1) potential methods to
8072 lower the costs associated with infusion and injection services provided
8073 at hospital-based outpatient infusion centers located outside hospital
8074 campuses, (2) appropriate patient protections for stop-loss insurance
8075 coverage used in conjunction with self-funded employee health benefit
8076 plans, and (3) surprise bills for ground ambulance services.

8077 (c) Not later than October 1, 2027, the Insurance Department shall
8078 submit a report, in accordance with the provisions of section 11-4a of the
8079 general statutes, to the joint standing committee of the General
8080 Assembly having cognizance of matters relating to insurance on the
8081 results and recommendations of the study conducted pursuant to
8082 subsection (b) of this section. Such report shall include, but need not be
8083 limited to, recommendations concerning:

8084 (1) Whether payments for services provided at an infusion center

8085 should be (A) set at not greater than ten per cent above the Medicare
8086 average sales price calculated in accordance with 42 CFR 414.904, as
8087 amended from time to time, or a different reimbursement rate payable
8088 under Medicare, or (B) based on data from the all-payer claims database
8089 established under section 19a-755a of the general statutes; and

8090 (2) Whether a facility fee for services provided at an infusion center
8091 should be prohibited.

8092 Sec. 218. Subdivision (2) of subsection (a) of section 38a-477i of the
8093 general statutes is repealed and the following is substituted in lieu
8094 thereof (*Effective October 1, 2026*):

8095 (2) "Anti-steering clause" means any provision, including, but not
8096 limited to, any utilization management provision, in a health care
8097 contract that restricts the ability of the health carrier or health plan
8098 administrator from encouraging an enrollee to obtain a health care
8099 service from a competitor of a hospital or health system, including
8100 offering incentives to encourage enrollees to utilize specific health care
8101 providers such as centers of excellence or any other pay-for-
8102 performance program;

8103 Sec. 219. Section 12-71e of the general statutes is repealed and the
8104 following is substituted in lieu thereof (*Effective October 1, 2026, and*
8105 *applicable to assessment years commencing on or after October 1, 2026*):

8106 (a) Notwithstanding the provisions of any special act, municipal
8107 charter or home rule ordinance, (1) for the assessment year commencing
8108 October 1, 2016, the mill rate for motor vehicles shall not exceed 39 mills,
8109 (2) for the assessment years commencing October 1, 2017, to October 1,
8110 2020, inclusive, the mill rate for motor vehicles shall not exceed 45 mills,
8111 and (3) for the assessment year commencing October 1, 2021, and each
8112 assessment year thereafter, the mill rate for motor vehicles shall not
8113 exceed 32.46 mills.

8114 (b) Any municipality or district may establish a mill rate for motor
8115 vehicles that is equal to or lower than 32.46 mills, including zero mills.

8116 Such mill rate may be different from the mill rate for real property and
8117 personal property other than motor vehicles to comply with the
8118 provisions of this section, provided the mill rate for motor vehicles is
8119 lower than the mill rate for real property and personal property. No
8120 district or borough may set a motor vehicle mill rate that if combined
8121 with the motor vehicle mill rate of the town, city, consolidated town and
8122 city or consolidated town and borough in which such district or
8123 borough is located would result in a combined motor vehicle mill rate
8124 (1) above 39 mills for the assessment year commencing October 1, 2016,
8125 (2) above 45 mills for the assessment years commencing October 1, 2017,
8126 to October 1, 2020, inclusive, or (3) above 32.46 mills for the assessment
8127 year commencing October 1, 2021, and each assessment year thereafter.

8128 (c) Notwithstanding the provisions of any special act, municipal
8129 charter or home rule ordinance, a municipality or district that set a
8130 motor vehicle mill rate prior to May 7, 2022, for the assessment year
8131 commencing October 1, 2021, may, by vote of its legislative body, or if
8132 the legislative body is a town meeting, the board of selectmen, revise
8133 such mill rate to meet the requirements of this section, provided such
8134 revision occurs not later than June 15, 2022.

8135 (d) Notwithstanding the provisions of section 12-112, any board of
8136 assessment appeals of a municipality that mailed or distributed, prior to
8137 October 31, 2017, bills to taxpayers for motor vehicle property taxes
8138 based on assessments made for the assessment year commencing
8139 October 1, 2016, shall hear or entertain any appeals related to such
8140 assessments not later than December 15, 2017.

8141 (e) The Secretary of the Office of Policy and Management shall notify
8142 the chief executive officer of each municipality:

8143 (1) Annually, (A) of the municipality's option to reduce the mill rate
8144 for motor vehicles to lower than 32.46 mills, including zero mills, and
8145 (B) that such mill rate may be different from the mill rate for real
8146 property and personal property other than motor vehicles to comply
8147 with the provisions of this section, provided the mill rate for motor

8148 vehicles is lower than the mill rate for real property and personal
8149 property; and

8150 (2) In advance of the implementation of a municipality's revaluation
8151 pursuant to section 12-62, of the municipality's option to consider and
8152 evaluate the reduction of the mill rate for motor vehicles in the same
8153 fiscal year in which the revaluation is implemented.

8154 (f) Notwithstanding the provisions of subsections (a) and (b) of this
8155 section and subdivision (1) of subsection (e) of this section, the city of
8156 Bridgeport may establish a mill rate for motor vehicles that is equal to
8157 or greater than the mill rate for real property and personal property,
8158 provided such motor vehicle mill rate shall not exceed 32.46 mills.

8159 ~~[(f)]~~ (g) For the purposes of this section, "municipality" means any
8160 town, city, borough, consolidated town and city, consolidated town and
8161 borough and "district" has the same meaning as provided in section 7-
8162 324.

8163 Sec. 220. *(Effective from passage)* The Legislative Commissioners' Office
8164 shall, in codifying the provisions of this act, make such technical,
8165 grammatical and punctuation changes as are necessary to carry out the
8166 purposes of this act, including, but not limited to, correcting inaccurate
8167 internal references.

8168 Sec. 221. Section 3-13m of the 2026 supplement to the general statutes
8169 is repealed and the following is substituted in lieu thereof *(Effective from*
8170 *passage)*:

8171 (a) For purposes of this section, "virtual currency" has the same
8172 meaning as provided in section 36a-596.

8173 ~~[Neither]~~ (b) Except as provided in subsection (c) of this section,
8174 neither the state nor any political subdivision of the state shall (1) accept
8175 or require payment in the form of virtual currency for an amount due to
8176 the state or the political subdivision, [or (2) purchase, hold, invest in or]
8177 (2) establish a reserve of virtual currency, [. For purposes of this section,

8178 "virtual currency" has the same meaning as provided in section 36a-596.]
8179 or (3) purchase, hold or invest in a reserve of virtual currency.

8180 (c) The state may invest in regulated securities comprised of virtual
8181 currency or companies, entities or funds that hold investments in virtual
8182 currency, provided any such state investment (1) is made solely through
8183 a company, entity or fund that is regulated by a state or federal
8184 regulatory authority or equivalent foreign jurisdiction; (2) does not
8185 constitute the establishment of a reserve of virtual currency for
8186 transactional or treasury purposes; (3) complies with all applicable
8187 fiduciary, investment and risk management standards otherwise
8188 required by law; and (4) complies with the investment policy statement
8189 established pursuant to section 3-13b and any additional standards for
8190 custody, capitalization or compliance established by the Treasurer.

8191 Sec. 222. Subsection (a) of section 5-142 of the general statutes is
8192 repealed and the following is substituted in lieu thereof (*Effective October*
8193 *1, 2026*):

8194 (a) If any member of the Division of State Police within the
8195 Department of Emergency Services and Public Protection or of any
8196 correctional institution, or any institution or facility of the Department
8197 of Mental Health and Addiction Services giving care and treatment to
8198 persons afflicted with a mental disorder or disease, or any institution for
8199 the care and treatment of persons afflicted with any mental defect, or
8200 any full-time enforcement officer of the Department of Energy and
8201 Environmental Protection, the Department of Motor Vehicles, the
8202 Department of Consumer Protection who carries out the duties and
8203 responsibilities of sections 30-2 to 30-68m, inclusive, Adult Probation
8204 Services, the division within the Department of Administrative Services
8205 that carries out construction services or the Board of Pardons and
8206 Paroles, any probation officer for juveniles or any employee of any
8207 juvenile detention home, any member of the police or fire security force
8208 of The University of Connecticut, any member of the police or fire
8209 security force of Bradley International Airport, any member of the Office
8210 of State Capitol Police or any person appointed under section 29-18 as a

8211 special policeman for the State Capitol building and grounds and the
8212 Legislative Office Building and parking garage and related structures
8213 and facilities and other areas under the supervision and control of the
8214 Joint Committee on Legislative Management, the Chief State's Attorney,
8215 the Chief Public Defender, the Deputy Chief State's Attorney, the
8216 Deputy Chief Public Defender, any state's attorney, any assistant state's
8217 attorney or deputy assistant state's attorney, any public defender,
8218 assistant public defender or deputy assistant public defender, any chief
8219 inspector or inspector appointed under section 51-286 or any staff
8220 member or employee of the Division of Criminal Justice or of the
8221 Division of Public Defender Services, or any Judicial Department
8222 employee, or any health care provider employed at a state-operated
8223 health care facility or institution that provides direct patient care,
8224 sustains any injury (1) while making an arrest or in the actual
8225 performance of such police duties or guard duties or fire duties or
8226 inspection duties, or prosecution or public defender or courthouse
8227 duties, or while attending or restraining an inmate of any such
8228 institution or as a result of being assaulted in the performance of such
8229 person's duty, or while responding to an emergency or code at a
8230 correctional institution, and (2) that is a direct result of the special
8231 hazards inherent in such duties, the state shall pay all necessary medical
8232 and hospital expenses resulting from such injury. For purposes of this
8233 subsection, "health care provider" means an individual directly
8234 employed by a state agency who is involved in direct patient care. If
8235 total incapacity results from such injury, such person shall be removed
8236 from the active payroll the first day of incapacity, exclusive of the day
8237 of injury, and placed on an inactive payroll. Such person shall continue
8238 to receive the full salary that such person was receiving at the time of
8239 injury subject to all salary benefits of active employees, including annual
8240 increments, and all salary adjustments, including salary deductions,
8241 required in the case of active employees, for a period of two hundred
8242 sixty weeks from the date of the beginning of such incapacity.
8243 Thereafter, such person shall be removed from the payroll and shall
8244 receive compensation at the rate of fifty per cent of the salary that such
8245 person was receiving at the expiration of said two hundred sixty weeks

8246 as long as such person remains so disabled, except that any such person
8247 who is a member of the Division of State Police within the Department
8248 of Emergency Services and Public Protection shall receive compensation
8249 at the rate of sixty-five per cent of such salary as long as such person
8250 remains so disabled. Such benefits shall be payable to a member of the
8251 Division of State Police after two hundred sixty weeks of disability only
8252 if the member elects in writing to receive such benefits in lieu of any
8253 benefits payable to the employee under the state employees retirement
8254 system. In the event that such disabled member of the Division of State
8255 Police elects the compensation provided under this subsection, no
8256 benefits shall be payable under chapter 568 or the state employees
8257 retirement system until the former of the employee's death or recovery
8258 from such disability. The provisions of section 31-293 shall apply to any
8259 such payments, and the state of Connecticut is authorized to bring an
8260 action or join in an action as provided by said section for reimbursement
8261 of moneys paid and which it is obligated to pay under the terms of this
8262 subsection. All other provisions of the workers' compensation law not
8263 inconsistent with this subsection, including the specific indemnities and
8264 provisions for hearing and appeal, shall be available to any such state
8265 employee or the dependents of such a deceased employee. All payments
8266 of compensation made to a state employee under this subsection shall
8267 be charged to the appropriation provided for compensation awards to
8268 state employees. On and after October 1, 1991, any full-time officer of
8269 the Department of Energy and Environmental Protection, the
8270 Department of Motor Vehicles, the Department of Consumer Protection
8271 who carries out the duties and responsibilities of sections 30-2 to 30-68m,
8272 inclusive, Adult Probation Services, the division within the Department
8273 of Administrative Services that carries out construction services or the
8274 Board of Pardons and Paroles, any probation officer for juveniles or any
8275 employee of any juvenile detention home, the Chief State's Attorney, the
8276 Chief Public Defender, the Deputy Chief State's Attorney, the Deputy
8277 Chief Public Defender, any state's attorney, assistant state's attorney or
8278 deputy assistant state's attorney, any public defender, assistant public
8279 defender or deputy assistant public defender, any chief inspector or
8280 inspector appointed under section 51-286 or any staff member or

8281 employee of the Division of Criminal Justice or the Division of Public
8282 Defender Services, or any Judicial Department employee who sustains
8283 any injury in the course and scope of such person's employment shall
8284 be paid compensation in accordance with the provisions of section 5-143
8285 and chapter 568, except, if such injury is sustained as a result of being
8286 assaulted in the performance of such person's duty, any such person
8287 shall be compensated pursuant to the provisions of this subsection.

8288 Sec. 223. Section 12-217jj of the 2026 supplement to the general
8289 statutes is repealed and the following is substituted in lieu thereof
8290 (*Effective from passage*):

8291 (a) As used in this section:

8292 (1) "Commissioner" means the Commissioner of Revenue Services.

8293 (2) "Department" means the Department of Economic and
8294 Community Development.

8295 (3) (A) "Qualified production" means entertainment content created
8296 in whole or in part within the state, including motion pictures, except as
8297 otherwise provided in this subparagraph; documentaries; long-form,
8298 specials, mini-series, series, sound recordings, videos and music videos
8299 and interstitials television programming; interactive television;
8300 relocated television production; interactive games; videogames;
8301 commercials; any format of digital media, including an interactive web
8302 site, created for distribution or exhibition to the general public; and any
8303 trailer, pilot, video teaser or demo created primarily to stimulate the
8304 sale, marketing, promotion or exploitation of future investment in either
8305 a product or a qualified production via any means and media in any
8306 digital media format, film or videotape, provided such program meets
8307 all the underlying criteria of a qualified production. For state fiscal years
8308 ending on or after June 30, 2014, "qualified production" shall not include
8309 a motion picture that has not been designated as a state-certified
8310 qualified production prior to July 1, 2013, and no tax credit voucher for
8311 such motion picture may be issued for such motion picture, except, for

8312 state fiscal years ending on or after June 30, 2015, "qualified production"
8313 shall include a motion picture for which twenty-five per cent or more of
8314 the principal photography shooting days are in this state at a facility that
8315 receives not less than twenty-five million dollars in private investment
8316 and opens for business on or after July 1, 2013, and a tax credit voucher
8317 may be issued for such motion picture.

8318 (B) "Qualified production" shall not include any ongoing television
8319 program created primarily as news, weather or financial market reports;
8320 a production featuring current events, other than a relocated television
8321 production, sporting events, an awards show or other gala event; a
8322 production whose sole purpose is fundraising; a long-form production
8323 that primarily markets a product or service; a production used for
8324 corporate training or in-house corporate advertising or other similar
8325 productions; or any production for which records are required to be
8326 maintained under 18 USC 2257, as amended from time to time, with
8327 respect to sexually explicit content.

8328 (4) "Eligible production company" means a corporation, partnership,
8329 limited liability company, or other business entity engaged in the
8330 business of producing qualified productions on a one-time or ongoing
8331 basis, and qualified by the Secretary of the State to engage in business
8332 in the state.

8333 (5) "Production expenses or costs" means all expenditures clearly and
8334 demonstrably incurred in the state in the preproduction, production or
8335 postproduction costs of a qualified production, including:

8336 (A) Expenditures incurred in the state in the form of either
8337 compensation or purchases including production work, production
8338 equipment not eligible for the infrastructure tax credit provided in
8339 section 12-217kk, production software, postproduction work,
8340 postproduction equipment, postproduction software, set design, set
8341 construction, props, lighting, wardrobe, makeup, makeup accessories,
8342 special effects, visual effects, audio effects, film processing, music,
8343 sound mixing, editing, location fees, soundstages and any and all other

8344 costs or services directly incurred in connection with a state-certified
8345 qualified production;

8346 (B) Expenditures for distribution, including preproduction,
8347 production or postproduction costs relating to the creation of trailers,
8348 marketing videos, commercials, point-of-purchase videos and any and
8349 all content created on film or digital media, including the duplication of
8350 films, videos, CDs, DVDs and any and all digital files now in existence
8351 and those yet to be created for mass consumer consumption; the
8352 purchase, by a company in the state, of any and all equipment relating
8353 to the duplication or mass market distribution of any content created or
8354 produced in the state by any digital media format which is now in use
8355 and those formats yet to be created for mass consumer consumption;
8356 and

8357 (C) "Production expenses or costs" does not include the following: (i)
8358 On and after January 1, 2008, compensation in excess of fifteen million
8359 dollars paid to any individual or entity representing an individual, for
8360 services provided in the production of a qualified production and on or
8361 after January 1, 2010, compensation subject to Connecticut personal
8362 income tax in excess of twenty million dollars paid in the aggregate to
8363 any individuals or entities representing individuals, for star talent
8364 provided in the production of a qualified production; (ii) media buys,
8365 promotional events or gifts or public relations associated with the
8366 promotion or marketing of any qualified production; (iii) deferred,
8367 leveraged or profit participation costs relating to any and all personnel
8368 associated with any and all aspects of the production, including, but not
8369 limited to, producer fees, director fees, talent fees and writer fees; (iv)
8370 costs relating to the transfer of the production tax credits; (v) any
8371 amounts paid to persons or businesses as a result of their participation
8372 in profits from the exploitation of the qualified production; and (vi) any
8373 expenses or costs relating to an independent certification, as required by
8374 subsection (h) of this section, or as the department may otherwise
8375 require, pertaining to the amount of production expenses or costs set
8376 forth by an eligible production company in its application for a

8377 production tax credit.

8378 (6) "Sound recording" means a recording of music, poetry or spoken-
8379 word performance, but does not include the audio portions of dialogue
8380 or words spoken and recorded as part of a motion picture, video,
8381 theatrical production, television news coverage or athletic event.

8382 (7) "State-certified qualified production" means a qualified
8383 production produced by an eligible production company that (A) is in
8384 compliance with regulations adopted pursuant to subsection (l) of this
8385 section, (B) is authorized to conduct business in this state, and (C) has
8386 been approved by the department as qualifying for a production tax
8387 credit under this section.

8388 (8) "Interactive web site" means a web site, the production expenses
8389 or costs of which (A) exceed five hundred thousand dollars per income
8390 year, and (B) is primarily (i) interactive games or end user applications,
8391 or (ii) animation, simulation, sound, graphics, story lines or video
8392 created or repurposed for distribution over the Internet. An interactive
8393 web site does not include a web site primarily used for institutional,
8394 private, industrial, retail or wholesale marketing or promotional
8395 purposes, or which contains obscene content.

8396 (9) "Post-certification remedy" means the recapture, disallowance,
8397 recovery, reduction, repayment, forfeiture, decertification or any other
8398 remedy that would have the effect of reducing or otherwise limiting the
8399 use of a tax credit provided by this section.

8400 (10) "Compensation" means base salary or wages and does not
8401 include bonus pay, stock options, restricted stock units or similar
8402 arrangements.

8403 (11) "Relocated television production" means:

8404 (A) An ongoing television program all of the prior seasons of which
8405 were filmed outside this state, and may include current events shows,
8406 except those referenced in subparagraph (B)(i) of this subdivision.

8407 (B) An eligible production company's television programming in this
8408 state that (i) is not a general news program, sporting event or game
8409 broadcast, and (ii) is created at a qualified production facility that has
8410 had a minimum investment of twenty-five million dollars made by such
8411 eligible production company on or after January 1, 2012, at which
8412 facility the eligible production company creates ongoing television
8413 programming as defined in subparagraph (A) of this subdivision, and
8414 creates at least two hundred new jobs in Connecticut on or after January
8415 1, 2012. For purposes of this subdivision, "new job" means a full-time
8416 job, as defined in section 12-217ii, that did not exist in this state prior to
8417 January 1, 2012, and is filled by a new employee, and "new employee"
8418 includes a person who was employed outside this state by the eligible
8419 production company prior to January 1, 2012, but does not include a
8420 person who was employed in this state by the eligible production
8421 company or a related person, as defined in section 12-217ii, with respect
8422 to the eligible production company during the prior twelve months.

8423 (C) A relocated television production may be a state-certified
8424 qualified production for not more than ten successive income years,
8425 after which period the eligible production company shall be ineligible
8426 to resubmit an application for certification.

8427 (b) (1) The Department of Economic and Community Development
8428 shall administer a system of tax credit vouchers within the resources,
8429 requirements and purposes of this section for eligible production
8430 companies producing a state-certified qualified production in the state.

8431 (2) Any eligible production company incurring production expenses
8432 or costs shall be eligible for a credit (A) for income years commencing
8433 on or after January 1, 2010, but prior to January 1, 2018, against the tax
8434 imposed under chapter 207 or this chapter, (B) for income years
8435 commencing on or after January 1, 2018, but prior to January 1, 2022,
8436 against the tax imposed under chapter 207 or 211 or this chapter, and
8437 (C) for income years commencing on or after January 1, 2022, against the
8438 tax imposed under chapter 207, 211, 219 or this chapter, as follows: (i)
8439 For any such company incurring such expenses or costs of not less than

8440 one hundred thousand dollars, but not more than five hundred
8441 thousand dollars, a credit equal to ten per cent of such expenses or costs,
8442 (ii) for any such company incurring such expenses or costs of more than
8443 five hundred thousand dollars, but not more than one million dollars, a
8444 credit equal to fifteen per cent of such expenses or costs, and (iii) for any
8445 such company incurring such expenses or costs of more than one million
8446 dollars, a credit equal to thirty per cent of such expenses or costs.

8447 (c) No eligible production company incurring an amount of
8448 production expenses or costs that qualifies for such credit shall be
8449 eligible for such credit unless on or after January 1, 2010, such company
8450 conducts (1) not less than fifty per cent of principal photography days
8451 within the state, or (2) expends not less than fifty per cent of
8452 postproduction costs within the state, or (3) expends not less than one
8453 million dollars of postproduction costs within the state. The provisions
8454 of this subsection shall not apply to an eligible production company that
8455 produces an interactive Internet web site created for distribution or
8456 exhibition to the general public.

8457 (d) For income years commencing on or after January 1, 2010, no
8458 expenses or costs incurred outside the state and used within the state
8459 shall be eligible for a credit, and one hundred per cent of such expenses
8460 or costs shall be counted toward such credit when incurred within the
8461 state and used within the state.

8462 (e) (1) On and after July 1, 2006, and for income years commencing
8463 on or after January 1, 2006, any credit allowed pursuant to this section
8464 may be sold, assigned or otherwise transferred, in whole or in part, to
8465 one or more taxpayers, provided (A) no credit, after issuance, may be
8466 sold, assigned or otherwise transferred, in whole or in part, more than
8467 three times, (B) in the case of a credit allowed for the income year
8468 commencing on or after January 1, 2011, but prior to January 1, 2012,
8469 any entity that is not subject to tax under chapter 207 or this chapter may
8470 transfer not more than fifty per cent of such credit in any one income
8471 year, and (C) in the case of a credit allowed for an income year
8472 commencing on or after January 1, 2012, any entity that is not subject to

8473 tax under chapter 207 or this chapter may transfer not more than
8474 twenty-five per cent of such credit in any one income year.

8475 (2) Notwithstanding the provisions of subdivision (1) of this
8476 subsection, any entity that is not subject to tax under this chapter or
8477 chapter 207 shall not be subject to the limitations on the transfer of
8478 credits provided in subparagraphs (B) and (C) of said subdivision (1),
8479 provided such entity owns not less than fifty per cent, directly or
8480 indirectly, of a business entity, as defined in section 12-284b.

8481 (3) Notwithstanding the provisions of subdivision (1) of this
8482 subsection, any qualified production that is created in whole or in
8483 significant part, as determined by the Commissioner of Economic and
8484 Community Development, at a qualified production facility shall not be
8485 subject to the limitations of subparagraph (B) or (C) of said subdivision
8486 (1). For purposes of this subdivision, "qualified production facility"
8487 means a facility (A) located in this state, (B) intended for film, television
8488 or digital media production, and (C) that has had a minimum
8489 investment of three million dollars, or less if the Commissioner of
8490 Economic and Community Development determines such facility
8491 otherwise qualifies.

8492 (4) (A) For the income year commencing on or after January 1, 2018,
8493 but prior to January 1, 2019, any credit that is sold, assigned or otherwise
8494 transferred, in whole or in part, to one or more taxpayers pursuant to
8495 subdivision (1) of this subsection may be claimed against the tax
8496 imposed under chapter 211 only if there is common ownership of at least
8497 fifty per cent between such taxpayer and the eligible production
8498 company that sold, assigned or otherwise transferred such credit. Such
8499 taxpayer may only claim ninety-two per cent of the amount of such
8500 credit entered by the department on the production tax credit voucher.

8501 (B) For income years commencing on or after January 1, 2019, any
8502 credit that is sold, assigned or otherwise transferred, in whole or in part,
8503 to one or more taxpayers pursuant to subdivision (1) of this subsection,
8504 which credit is claimed against the tax imposed under chapter 211, shall

8505 be subject to the following limits:

8506 (i) The taxpayer may only claim ninety-five per cent of the amount of
8507 such credit entered by the department on the production tax credit
8508 voucher; and

8509 (ii) If there is common ownership of at least fifty per cent between
8510 such taxpayer and the eligible production company that sold, assigned
8511 or otherwise transferred such credit, such taxpayer may only claim
8512 ninety-two per cent of the amount of such credit entered by the
8513 department on the production tax credit voucher.

8514 (5) (A) For income years commencing on or after January 1, 2022, but
8515 prior to January 1, 2024, and on or after January 1, [2026] 2028, any credit
8516 that is claimed against the tax imposed under chapter 219 shall be
8517 subject to the following limits:

8518 (i) Any credit that is sold, assigned or otherwise transferred, in whole
8519 or in part, to one or more taxpayers pursuant to subdivision (1) of this
8520 subsection may be claimed against the tax imposed under chapter 219
8521 only if there is common ownership of at least fifty per cent between such
8522 taxpayer and the eligible production company that sold, assigned or
8523 otherwise transferred such credit; and

8524 (ii) The eligible production company or taxpayer claiming the credit
8525 against the tax imposed under chapter 219 may only claim seventy-eight
8526 per cent of the amount of such credit entered by the department on the
8527 production tax credit voucher.

8528 (B) For income years commencing on or after January 1, 2024, but
8529 prior to January 1, [2026] 2028, any credit that is claimed against the tax
8530 imposed under chapter 219 shall be subject to the following limits:

8531 (i) Any credit that is sold, assigned or otherwise transferred, in whole
8532 or in part, to one or more taxpayers pursuant to subdivision (1) of this
8533 subsection may be claimed against the tax imposed under chapter 219
8534 only if there is common ownership of at least fifty per cent between such

8535 taxpayer and the eligible production company that sold, assigned or
8536 otherwise transferred such credit; and

8537 (ii) The eligible production company or taxpayer claiming the credit
8538 against the tax imposed under chapter 219 may only claim ninety-two
8539 per cent of the amount of such credit entered by the department on the
8540 production tax credit voucher.

8541 (f) (1) On and after July 1, 2006, and for income years commencing on
8542 or after January 1, 2006, but prior to January 1, 2015, all or part of any
8543 such credit allowed under this section may be claimed against the tax
8544 imposed under chapter 207 or this chapter for the income year in which
8545 the production expenses or costs were incurred, or in the three
8546 immediately succeeding income years.

8547 (2) For production tax credit vouchers issued on or after July 1, 2015,
8548 but prior to January 1, 2018, all or part of any such credit may be claimed
8549 against the tax imposed under chapter 207 or this chapter, for the
8550 income year in which the production expenses or costs were incurred,
8551 or in the five immediately succeeding income years.

8552 (3) For production tax credit vouchers issued on or after July 1, 2018,
8553 but prior to January 1, 2022, all or part of any such credit may be claimed
8554 against the tax imposed under chapter 207 or 211 or this chapter, for the
8555 income year in which the production expenses or costs were incurred,
8556 or in the five immediately succeeding income years.

8557 (4) For production tax credit vouchers issued on or after January 1,
8558 2022, all or part of any such credit may be claimed against the tax
8559 imposed under chapter 207, 211, 219 or this chapter, for the income year
8560 in which the production expenses or costs were incurred, or in the five
8561 immediately succeeding income years.

8562 (g) Any production tax credit allowed under this section shall be
8563 nonrefundable.

8564 (h) (1) An eligible production company shall apply to the department

8565 for a tax credit voucher on an annual basis, but not later than ninety days
8566 after the first production expenses or costs are incurred in the
8567 production of a qualified production, and shall provide with such
8568 application such information as the department may require to
8569 determine such company's eligibility to claim a credit under this section.
8570 No production expenses or costs may be listed more than once for
8571 purposes of the tax credit voucher pursuant to this section or section 12-
8572 217kk, and if a production expense or cost has been included in a claim
8573 for a credit, such production expense or cost may not be included in any
8574 subsequent claim for a credit.

8575 (2) Not later than ninety days after the end of the annual period, or
8576 after the completion of the independent certification, an eligible
8577 production company shall apply to the department for a production tax
8578 credit voucher, and shall provide with such application (A) a report that
8579 includes the number of full-time jobs and the number of part-time jobs
8580 created by the eligible production company during the annual period, a
8581 description of each such job and an explanation of what the eligible
8582 production company considers to be job creation for purposes of the
8583 report, and (B) such information and independent certification as the
8584 department may require pertaining to the amount of such company's
8585 production expenses or costs. Such independent certification shall be
8586 provided by an audit professional chosen from a list compiled by the
8587 department. If the department determines that such company is eligible
8588 to be issued a production tax credit voucher, the department shall enter
8589 on the voucher the amount of production expenses or costs that has been
8590 established to the satisfaction of the department and the amount of such
8591 company's credit under this section. The department shall provide a
8592 copy of such voucher to the commissioner, upon request.

8593 (3) The department shall charge a reasonable and nonrefundable
8594 administrative fee sufficient to cover the department's costs to analyze
8595 applications submitted under this section.

8596 (i) If an eligible production company sells, assigns or otherwise
8597 transfers a credit under this section to another taxpayer, the transferor

8598 and transferee shall jointly submit written notification of such transfer
8599 to the department not later than thirty days after such transfer. If such
8600 transferee sells, assigns or otherwise transfers a credit under this section
8601 to a subsequent transferee, such transferee and such subsequent
8602 transferee shall jointly submit written notification of such transfer to the
8603 department not later than thirty days after such transfer. The
8604 notification after each transfer shall include the credit voucher number,
8605 the date of transfer, the amount of such credit transferred, the tax credit
8606 balance before and after the transfer, the tax identification numbers for
8607 both the transferor and the transferee, and any other information
8608 required by the department. Failure to comply with this subsection will
8609 result in a disallowance of the tax credit until there is full compliance on
8610 the part of the transferor and the transferee, and for a second or third
8611 transfer, on the part of all subsequent transferors and transferees. The
8612 department shall provide a copy of the notification of assignment to the
8613 commissioner upon request.

8614 (j) Any eligible production company that submits information to the
8615 department that it knows to be fraudulent or false shall, in addition to
8616 any other penalties provided by law, be liable for a penalty equal to the
8617 amount of such company's credit entered on the production tax credit
8618 voucher issued under this section.

8619 (k) No tax credits transferred pursuant to this section shall be subject
8620 to a post-certification remedy, and the department and the
8621 commissioner shall have no right, except in the case of possible material
8622 misrepresentation or fraud, to conduct any further or additional review,
8623 examination or audit of the expenditures or costs for which such tax
8624 credits were issued. The sole and exclusive remedy of the department
8625 and the commissioner shall be to seek collection of the amount of such
8626 tax credits from the entity that committed the fraud or
8627 misrepresentation.

8628 (l) The department, in consultation with the commissioner, may
8629 adopt regulations, in accordance with the provisions of chapter 54, as
8630 may be necessary for the administration of this section.

8631 Sec. 224. (NEW) (*Effective from passage and applicable to assessment years*
8632 *commencing on or after October 1, 2027*) (a) Except as provided in
8633 subsection (c) of this section, any municipality may, upon approval of
8634 its legislative body or, in a municipality where the legislative body is a
8635 town meeting, by vote of the board of selectmen, provide an exemption
8636 from property tax applicable to the assessed value of any dwelling
8637 declared to be the primary residence of (1) the owner or owners of such
8638 dwelling, or (2) any person or persons for whom such dwelling is held
8639 in trust, in accordance with the provisions of subsection (b) of this
8640 section, in the amount of fifty thousand dollars of the assessed value of
8641 such dwelling. Such municipality may require a term of residency to be
8642 eligible for an exemption under this section.

8643 (b) Any owner or owners of a dwelling, or person or persons for
8644 whom such dwelling is held in trust, claiming the exemption provided
8645 pursuant to this section for any assessment year shall, on or before the
8646 first day of November in such assessment year, file with the assessor or
8647 board of assessors in the municipality in which such dwelling is located
8648 an application claiming such exemption. Such application shall be made
8649 in the manner prescribed and on a form prepared for such purpose by
8650 the Secretary of the Office of Policy and Management, and shall include,
8651 but not be limited to, a declaration that (1) such dwelling is the primary
8652 residence of the applicant or applicants, (2) the applicant or applicants
8653 have no other primary residence, and (3) the applicant or applicants
8654 have not claimed the exemption provided in this section for more than
8655 one such dwelling in the same assessment year, and any documentation
8656 the secretary deems necessary to verify such declaration. The secretary
8657 shall make such application available to the public on the Internet web
8658 site of the Office of Policy and Management. Failure to file such
8659 application in the manner and form provided by the secretary within
8660 the time limit prescribed shall constitute a waiver of the right to such
8661 exemption for such assessment year.

8662 (c) No municipality shall provide an exemption from property tax
8663 pursuant to this section and an exemption from property tax pursuant

8664 to section 12-8100 of the general statutes for the same assessment year.

8665 (d) As used in this section, "dwelling" means a single-family
8666 dwelling, condominium, as defined in section 47-68a of the general
8667 statutes, or unit in a common interest community, as defined in section
8668 47-202 of the general statutes.

8669 Sec. 225. Section 12-8100 of the 2026 supplement to the general
8670 statutes is repealed and the following is substituted in lieu thereof
8671 (*Effective from passage and applicable to assessment years commencing on or*
8672 *after October 1, 2027*):

8673 (a) [Any] Except as provided in subsection (b) of this section, any
8674 municipality may, upon approval by its legislative body or, in a
8675 municipality where the legislative body is a town meeting, by vote of
8676 the board of selectmen, provide an exemption from property tax of not
8677 less than five per cent and not more than thirty-five per cent of the
8678 assessed value, for owner-occupied dwellings, including
8679 condominiums, as defined in section 47-68a, and units in a common
8680 interest community, as defined in section 47-202, that are the primary
8681 residences of such owners and consist of not more than two units. Such
8682 municipality may also require a term of residency for owners to be
8683 eligible for an exemption under this section or an assessed value
8684 maximum for dwellings to be eligible for an exemption under this
8685 section, or both.

8686 (b) No municipality shall provide an exemption from property tax
8687 pursuant to this section and an exemption from property tax pursuant
8688 to section 224 of this act for the same assessment year.

8689 Sec. 226. (NEW) (*Effective October 1, 2026*) As used in this section and
8690 sections 227 to 237, inclusive, of this act, unless the context otherwise
8691 requires:

8692 (1) "Affiliate" means a person, entity or organization controlling,
8693 controlled by or under common control with another person, entity or
8694 organization. "Affiliate" does not include a medical foundation

8695 organized under chapter 594b of the general statutes. As used in this
8696 subdivision, "controlled by" means the other person, entity or
8697 organization, or one of such other person's, entity's or organization's
8698 affiliates, officers or management employees, acting in such capacity,
8699 acts as a general partner of a general or limited partnership or manager
8700 of a limited liability company.

8701 (2) "Applicant" means any person or health care facility that applies
8702 for a certificate of need pursuant to section 6 or 7 of this act.

8703 (3) "Bed capacity" means the total number of inpatient beds in a
8704 facility licensed by the Department of Public Health under sections 19a-
8705 490 to 19a-503, inclusive, of the general statutes.

8706 (4) "Certificate of need" means a certificate issued pursuant to section
8707 231 or 232 of this act.

8708 (5) "Change of ownership or control" means any change in the
8709 ownership or beneficial ownership or the change of control of an entity,
8710 including (A) a corporate merger, (B) an acquisition of one or more
8711 entities by direct or indirect purchase in any manner of not less than
8712 twenty-five per cent of the assets, equity or voting shares of a health care
8713 facility, (C) a transfer of control of a board of directors or governing
8714 body, or (D) a real estate sale or lease agreement involving not less than
8715 twenty per cent of the total assets of a hospital.

8716 (6) "Commissioner" means the Commissioner of Public Health, or the
8717 commissioner's designee.

8718 (7) "Day" means a calendar day.

8719 (8) "Department" means the Department of Public Health.

8720 (9) "Free clinic" means a private, nonprofit community-based
8721 organization that provides medical, dental, pharmaceutical or mental
8722 health services at reduced cost or no cost to low-income, uninsured and
8723 underinsured individuals.

8724 (10) "Health care facility" means (A) a hospital, including any satellite
8725 location licensed by the Department of Public Health under chapter
8726 368v of the general statutes; (B) specialty hospital; (C) freestanding
8727 emergency department; (D) outpatient surgical facility (i) as defined in
8728 section 19a-493b of the general statutes and licensed under chapter 368v
8729 of the general statutes, or (ii) as established by a short-term acute care
8730 general hospital licensed by the department under said chapter; (E) a
8731 hospital or other facility or institution operated by the state that
8732 provides services that are eligible for reimbursement under Title XVIII
8733 or XIX of the federal Social Security Act, 42 USC 301, as amended from
8734 time to time; (F) a central service facility; (G) a mental health facility; (H)
8735 a substance abuse treatment facility; (I) any other facility requiring
8736 certificate of need review pursuant to section 229 of this act; and (J) any
8737 parent company, subsidiary, affiliate or joint venture, or any
8738 combination thereof, of any facility described in subparagraphs (A) to
8739 (J), inclusive, of this subdivision.

8740 (11) "Large group practice" means eight or more full-time equivalent
8741 physicians, legally organized in a partnership, professional corporation,
8742 limited liability company formed to render professional services,
8743 medical foundation, not-for-profit corporation, faculty practice plan or
8744 other similar entity (A) in which each physician who is a member of the
8745 group provides substantially the full range of services that the physician
8746 routinely provides, including, but not limited to, medical care,
8747 consultation, diagnosis or treatment, through the joint use of shared
8748 office space, facilities, equipment or personnel; (B) for which
8749 substantially all of the services of the physicians who are members of
8750 the group are provided through the group and are billed in the name of
8751 the group practice and amounts so received are treated as receipts of the
8752 group; or (C) in which the overhead expenses of, and the income from,
8753 the group are distributed in accordance with methods previously
8754 determined by members of the group. An entity that otherwise meets
8755 the definition of group practice under this section shall be considered a
8756 group practice although its shareholders, partners or owners of the
8757 group practice include single-physician professional corporations,

8758 limited liability companies formed to render professional services or
8759 other entities in which beneficial owners are individual physicians.

8760 (12) "Panel" means the three-person panel established under section
8761 227 of this act to decide all certificate of need applications.

8762 (13) "Person" means any individual, partnership, corporation, limited
8763 liability company, association, governmental subdivision, agency or
8764 public or private organization of any character. "Person" does not
8765 include the agency conducting the certificate of need application
8766 proceeding under section 231 or 232 of this act.

8767 (14) "Physician" means an individual licensed to practice medicine
8768 pursuant to chapter 370 of the general statutes.

8769 (15) "Program" means the certificate of need program established
8770 pursuant to section 228 of this act.

8771 Sec. 227. (NEW) (*Effective October 1, 2026*) (a) There is established
8772 within the department, for administrative purposes only, a panel that
8773 shall make all final decisions and rulings regarding certificate of need
8774 applications submitted on and after July 1, 2027, pursuant to section 231
8775 or 232 of this act, civil penalties and cease and desist orders imposed on
8776 and after July 1, 2027, pursuant to section 235 of this act, approvals of
8777 policies and procedures effective on and after July 1, 2027, pursuant to
8778 section 236 of this act, hospital plans for continued access to care during
8779 service termination on and after July 1, 2027, pursuant to section 237 of
8780 this act, and sales of nonprofit hospitals pursuant to section 19a-486a of
8781 the general statutes. The panel shall consist of three members, who shall
8782 include (1) the Commissioner of Public Health, or the commissioner's
8783 designee, who shall act as chairperson of the panel, (2) the Secretary of
8784 the Office of Policy and Management, or the secretary's designee, and
8785 (3) the Commissioner of Social Services, or the Commissioner of Social
8786 Services' designee.

8787 (b) On and after July 1, 2027, the panel shall hold monthly meetings
8788 to review and decide any certificate of need application that has been

8789 submitted to the panel at least five days before the meeting date. In
8790 addition to the monthly meetings, the chairperson may at any time call
8791 a special meeting of the panel to review and decide any application
8792 prepared for presentation to the panel or any other matter appropriate
8793 for panel review under this section or sections 228 to 237, inclusive, of
8794 this act. The panel may cancel a monthly meeting if no application or
8795 other business has been appropriately submitted with at least five days'
8796 notice to the panel for review at such meeting.

8797 Sec. 228. (NEW) (*Effective October 1, 2026*) (a) There is established
8798 within the department a Certificate of Need Program that shall support
8799 the review of certificate of need applications. The commissioner shall
8800 designate a director who shall oversee the program.

8801 (b) On and after July 1, 2027, (1) each person applying for a certificate
8802 of need shall file an application with the Certificate of Need Program,
8803 and (2) the program shall prepare a report regarding the certificate of
8804 need application.

8805 (c) On and after July 1, 2027, the Certificate of Need Program shall
8806 make all determinations as to whether a certificate of need is required
8807 pursuant to section 229 of this act.

8808 (d) The Certificate of Need Program shall monitor compliance with
8809 the provisions of sections 227 to 237, inclusive, of this act and with any
8810 order or decision, including any conditions placed thereon, that is
8811 issued by the panel. In any enforcement action made under section 235
8812 of this act, the Certificate of Need Program shall present the allegations
8813 set forth in the enforcement action at the public hearing before the panel.

8814 Sec. 229. (NEW) (*Effective October 1, 2026*) (a) On and after July 1, 2027,
8815 a certificate of need issued by the panel shall be required for:

8816 (1) The establishment of a new health care facility;

8817 (2) A change of ownership or control of a health care facility;

8818 (3) A change of ownership or control of a large group practice to any
8819 entity other than a (A) physician, or (B) group of two or more physicians
8820 legally organized in a partnership, professional corporation or limited
8821 liability company formed to render professional services and not
8822 employed by or an affiliate of any hospital, medical foundation,
8823 insurance company or other similar entity;

8824 (4) The acquisition of computed tomography scanners, magnetic
8825 resonance imaging scanners, positron emission tomography scanners or
8826 positron emission tomography-computed tomography scanners, by any
8827 person, physician, provider, short-term acute care general hospital or
8828 children's hospital, except (A) as provided for in subdivision (18) of
8829 subsection (b) of this section, and (B) a certificate of need issued by the
8830 panel shall not be required where such scanner is a replacement for a
8831 scanner that was previously acquired through certificate of need
8832 approval or a certificate of need determination, including a replacement
8833 scanner that has dual modalities or functionalities if the applicant
8834 already offers similar imaging services for each of the scanner's
8835 modalities or functionalities that will be utilized;

8836 (5) An increase in the licensed bed capacity of a health care facility;

8837 (6) The acquisition of equipment utilizing technology that has not
8838 previously been utilized in the state;

8839 (7) An increase of two or more operating rooms within any three-year
8840 period by an outpatient surgical facility, as defined in section 19a-493b
8841 of the general statutes, or by a short-term acute care general hospital;

8842 (8) The establishment of cardiac services, including inpatient and
8843 outpatient cardiac catheterization, interventional cardiology and
8844 cardiovascular surgery; and

8845 (9) The acquisition of nonhospital-based linear accelerators, except a
8846 certificate of need issued by the panel shall not be required where such
8847 accelerator is a replacement for an accelerator that was previously
8848 acquired through certificate of need approval or a certificate of need

8849 determination.

8850 (b) On and after July 1, 2027, a certificate of need issued by the panel
8851 shall not be required for:

8852 (1) A health care facility owned and operated by the federal
8853 government;

8854 (2) The establishment of offices by a licensed private practitioner,
8855 whether for individual or group practice, except when a certificate of
8856 need is required in accordance with the requirements of section 19a-
8857 493b of the general statutes or subdivision (3), (4) or (6) of subsection (a)
8858 of this section;

8859 (3) A health care facility operated by a religious group that
8860 exclusively relies upon spiritual means through prayer for healing;

8861 (4) Residential care homes, nursing homes and rest homes, as defined
8862 in section 19a-490 of the general statutes;

8863 (5) An assisted living services agency, as defined in section 19a-490 of
8864 the general statutes;

8865 (6) A home health agency, as defined in section 19a-490 of the general
8866 statutes;

8867 (7) Hospice services, as described in section 19a-122b of the general
8868 statutes;

8869 (8) An outpatient rehabilitation facility;

8870 (9) Outpatient chronic dialysis services;

8871 (10) Transplant services;

8872 (11) A free clinic;

8873 (12) A school-based health center and an expanded school health site,
8874 as such terms are defined in section 19a-6r of the general statutes, a

8875 community health center, as defined in section 19a-490a of the general
8876 statutes, a not-for-profit outpatient clinic licensed in accordance with the
8877 provisions of chapter 368v of the general statutes and a federally
8878 qualified health center;

8879 (13) A program licensed or funded exclusively by the Department of
8880 Children and Families, provided such program is not a psychiatric
8881 residential treatment facility;

8882 (14) Any facility, institution or provider that is (A) operated as a
8883 nonprofit or by the state, and (B) solely providing behavioral health or
8884 substance use disorder treatment services;

8885 (15) A health care facility operated by a nonprofit educational
8886 institution exclusively for students, faculty and staff of such institution
8887 and their dependents;

8888 (16) An outpatient clinic or program operated exclusively by or
8889 contracted to be operated exclusively by a municipality, municipal
8890 agency, municipal board of education or a health district, as described
8891 in section 19a-241 of the general statutes;

8892 (17) A residential facility for persons with intellectual disability
8893 licensed pursuant to section 17a-227 of the general statutes and certified
8894 to participate in the Title XIX Medicaid program as an intermediate care
8895 facility for individuals with intellectual disabilities;

8896 (18) Replacement of existing computed tomography scanners,
8897 magnetic resonance imaging scanners, positron emission tomography
8898 scanners or positron emission tomography-computed tomography
8899 scanners, if such equipment was acquired through certificate of need
8900 approval or a certificate of need determination, provided a health care
8901 facility, provider, physician or person notifies the Department of Public
8902 Health of the date on which the equipment is replaced and the
8903 disposition of the replaced equipment, including if a replacement
8904 scanner has dual modalities or functionalities and the applicant already
8905 offers similar imaging services for each of the equipment's modalities or

8906 functionalities that will be utilized;

8907 (19) Acquisition of cone-beam dental imaging equipment that is to be
8908 used exclusively by a dentist licensed pursuant to chapter 379 of the
8909 general statutes;

8910 (20) The partial or total elimination of services provided by an
8911 outpatient surgical facility, as defined in section 19a-493b of the general
8912 statutes;

8913 (21) The termination of services for which the Department of Public
8914 Health has requested the facility to relinquish its license;

8915 (22) Acquisition of any equipment by any person that is to be used
8916 exclusively for scientific research, provided the equipment shall not be
8917 used in the diagnosis, treatment or prevention of any medical condition
8918 for humans;

8919 (23) The establishment of a harm reduction center through the pilot
8920 program established pursuant to section 17a-673c of the general
8921 statutes;

8922 (24) On or before June 30, 2028, a birth center, as defined in
8923 section 19a-490 of the general statutes, that is enrolled as a provider in
8924 the Connecticut medical assistance program, as defined in section 17b-
8925 245g of the general statutes;

8926 (25) An association between a group practice and a management
8927 services organization under which such management services
8928 organization does not directly share in the profits or net revenue of the
8929 group practice but rather is paid a fair market value through a contract
8930 for services rendered; and

8931 (26) The relocation of a health care facility within the same town or
8932 within ten miles of the existing facility location, provided such
8933 relocation will not result in a substantial change to the payer mix or
8934 patient population served by the facility.

8935 (c) On and after July 1, 2027, any person, health care facility or
8936 institution that is unsure whether a certificate of need is required for a
8937 particular proposal under this section shall send a letter to the
8938 Certificate of Need Program that describes the proposal and requests
8939 that the program make a determination as to whether a certificate of
8940 need is required for such proposal. A person, health care facility or
8941 institution making such request shall provide the program with any
8942 information the program requests as part of its determination process.
8943 The program shall provide a determination not later than thirty days
8944 after receipt of such request.

8945 (d) On and after July 1, 2027, any acquiring person or entity in a
8946 change of ownership or control of a large group practice to any person
8947 or entity that does not require a certificate of need pursuant to
8948 subdivision (3) of subsection (a) of this section shall submit notices to
8949 the program, in a form and manner prescribed by the commissioner, of
8950 such transfer consistent with this subsection.

8951 (1) Not less than thirty days prior to the closing of a transaction, the
8952 acquiring person or entity shall submit a notice for each such group
8953 practice, in a form and manner prescribed by the commissioner, setting
8954 forth: (A) The names and medical specialties of each physician
8955 practicing medicine with the group practice; (B) the names of the
8956 business entities that provide clinical or managerial services as part of
8957 the group practice; (C) the address for each location where clinical
8958 services are provided by the group practice; (D) a description of the
8959 clinical services provided at each location of the group practice; (E) the
8960 zip codes of the primary service area served by each location of the
8961 group practice; and (F) the resulting name, ownership, and business
8962 type of the group practice after the proposed change of ownership,
8963 control or affiliation, including the name and business type of any
8964 person or entity that will control, directly or indirectly, at least ten per
8965 cent of the large group practice. The program shall, unless otherwise
8966 prohibited by federal or state law, post such information on its Internet
8967 web site.

8968 (2) Not later than thirty days after the close of the transaction or after
8969 the abandonment of such transaction, the acquiring person or entity
8970 shall submit a report indicating the date on which the transaction closed
8971 or was abandoned.

8972 (3) When the provision of thirty days' notice pursuant to subdivision
8973 (1) of this subsection is not practicable due to circumstances outside of
8974 the acquiring person or entity's control, such as death, incapacity or
8975 other exigent circumstances, the acquiring person or entity shall provide
8976 notice to the program as soon as practicable but in no case later than
8977 fourteen days after the close of the transaction.

8978 (e) Not later than January 1, 2028, the commissioner shall report to
8979 the Governor and, in accordance with the provisions of section 11-4a of
8980 the general statutes, to the joint standing committee of the General
8981 Assembly having cognizance of matters relating to public health
8982 concerning the commissioner's recommendations, if any, regarding an
8983 exemption from certificate of need requirements related to temporary
8984 increases in licensed bed capacity of a hospital due to a surge in
8985 admissions that cannot be accommodated by the hospital's existing
8986 licensed bed capacity.

8987 Sec. 230. (NEW) (*Effective October 1, 2026*) (a) In any deliberation
8988 involving a certificate of need application filed pursuant to section 231
8989 of this act, the panel shall determine whether the applicant has
8990 demonstrated, by a preponderance of the evidence, that the proposal is
8991 in the public's interest. In making such determination, the panel shall
8992 consider, consistent with any relevant regulations, policies or
8993 procedures of the department, the following factors:

8994 (1) Whether the proposal promotes delivery of high-quality care in
8995 the primary service area of the applicant;

8996 (2) Whether the proposal promotes access to health care services,
8997 including Medicaid access, in the primary service area of the applicant;

8998 (3) Whether the proposal promotes delivery of cost-effective care in

8999 the primary service area of the applicant;

9000 (4) Whether the proposal promotes financial stability of the health
9001 care system, including, but not limited to, whether the proposal is
9002 financially feasible for the applicant and whether there is any evidence
9003 of prior financial mismanagement or misconduct by the applicant;

9004 (5) Whether there is a clear public need for the proposal and the
9005 services to be provided under the proposal; and

9006 (6) Whether the proposal would result in an unnecessary duplication
9007 of services.

9008 (b) In analyzing whether a certificate of need application satisfies the
9009 certificate of need criteria set forth in subsection (a) of this section, the
9010 panel and the Certificate of Need Program may engage, when, in the
9011 sole discretion of the director, an expert with specialized knowledge is
9012 required, any third-party consultant that the panel or program deems
9013 necessary to analyze the application materials and proposal set forth in
9014 the application pursuant to such criteria. All costs associated with such
9015 third-party consultant shall be borne by the applicant, provided the total
9016 costs for all consultants to the panel and the program under this
9017 subsection for a single application shall not exceed one hundred
9018 thousand dollars. Each third-party consultant engaged under this
9019 subsection shall submit each invoice for consulting services directly to
9020 the applicant for payment not later than thirty days after the issuance of
9021 the invoice. The provisions of chapter 57 of the general statutes and
9022 sections 4-212 to 4-219, inclusive, and 4e-19 of the general statutes shall
9023 not apply to any retainer agreement executed pursuant to this
9024 subsection.

9025 (1) No consultant shall be retained in connection with the processing
9026 of an application under the expedited review process described in
9027 section 232 of this act unless such expedited application is referred for a
9028 full review pursuant to subsection (g) of section 232 of this act.

9029 (2) If the program determines that a consultant is necessary under this

9030 subsection, the program shall provide notice to the applicant prior to
9031 expending any money and provide the applicant the opportunity to
9032 withdraw the application prior to incurring any consulting fees.

9033 (3) Not later than July 1, 2028, and annually thereafter, the
9034 commissioner shall report to the Governor and, in accordance with the
9035 provisions of section 11-4a of the general statutes, to the joint standing
9036 committee of the General Assembly having cognizance of matters
9037 relating to public health regarding all consultants engaged under this
9038 subsection, including (A) the number of engagements, (B) the categories
9039 of certificate of need proposals for which the engagements were made,
9040 (C) the amount spent on each engagement, (D) the nature of the
9041 expertise sought in each engagement, and (E) any reports produced
9042 under each engagement.

9043 Sec. 231. (NEW) (*Effective October 1, 2026*) (a) On and after July 1, 2027,
9044 an applicant seeking a certificate of need shall submit an application to
9045 the Certificate of Need Program, in a form and manner prescribed by
9046 the commissioner, and include all information required pursuant to the
9047 regulations, policies and procedures promulgated pursuant to section
9048 236 of this act. Each application shall be submitted based on monthly
9049 deadlines, including submission dates of the fifteenth day of each
9050 month.

9051 (b) The applicant shall include with the application a nonrefundable
9052 application fee based on the total cost associated with the project. The
9053 amount of the fee shall be as follows: (1) One thousand dollars for a
9054 project that will cost not greater than fifty thousand dollars; (2) two
9055 thousand dollars for a project that will cost greater than fifty thousand
9056 dollars but not greater than one hundred thousand dollars; (3) three
9057 thousand dollars for a project that will cost greater than one hundred
9058 thousand dollars but not greater than five hundred thousand dollars; (4)
9059 four thousand dollars for a project that will cost greater than five
9060 hundred thousand dollars but not greater than one million dollars; (5)
9061 five thousand dollars for a project that will cost greater than one million
9062 dollars but not greater than five million dollars; (6) eight thousand

9063 dollars for a project that will cost greater than five million dollars but
9064 not greater than ten million dollars; and (7) ten thousand dollars for a
9065 project that will cost greater than ten million dollars.

9066 (c) Not later than twenty-one days prior to the deadline to submit a
9067 certificate of need application described in subsection (a) of this section,
9068 an applicant for a certificate of need shall submit a notice to the program
9069 for posting on the program's Internet web site. If the applicant has not
9070 submitted the application on or before ninety days after submission of
9071 such notice, a new notice shall be required under this subsection prior
9072 to submitting the application. Such notice shall include, but need not be
9073 limited to:

9074 (1) The identity of the applicant and any known parties to the
9075 application;

9076 (2) The street address and town where the proposal that is the subject
9077 of the application is located; and

9078 (3) A brief description in plain language of the proposal, including a
9079 reference to the subdivision of subsection (a) of section 229 of this act
9080 under which the application is being submitted.

9081 (d) Any person wishing to request party or intervenor status in
9082 connection with a certificate of need application shall file a notice of such
9083 person's intent, including a statement of whether such person seeks a
9084 hearing on the application, with the program not later than twenty days
9085 after the posting on the program's Internet web site of the applicant's
9086 notice of the intent to file the application. Any person who files such a
9087 notice of intent under this subsection, or who demonstrates good cause
9088 for failing to file such a notice, may file a petition for party or intervenor
9089 status not later than twenty-one days after the applicant's filing of the
9090 certificate of need application.

9091 (1) If a petition for party or intervenor status is filed, the panel shall
9092 appoint a hearing officer to resolve the request.

9093 (2) The applicant may object to any request for party or intervenor
9094 status not later than five days after the request is filed.

9095 (3) The hearing officer shall render a decision on the petition not later
9096 than fifteen days after the request is filed.

9097 (4) If a request to intervene is granted, the decision granting
9098 intervention shall set out the scope of intervention rights granted,
9099 including whether or not an intervenor's request for a hearing is granted
9100 or whether intervention is limited to submission of written materials.

9101 (e) Not later than fifteen days after the deadline to submit an
9102 application described in subsection (a) of this section, the program shall
9103 notify each certificate of need applicant whether the applicant's
9104 application is deemed complete. To be deemed complete, the applicant
9105 shall have submitted relevant responses to all application questions and
9106 data requests in the application. For any application that is deemed
9107 incomplete, the program shall, not later than five days after deeming
9108 such application incomplete, notify the applicant, in writing, of each
9109 application and data element that was not adequately addressed by the
9110 applicant. The program shall not review any incomplete application
9111 until the applicant submits a revised and completed application that
9112 adequately addresses such application and data elements to the
9113 program in a subsequent application period. The subsequent filing of
9114 the revised application shall not require any additional filing fee unless
9115 the total cost of the proposal is amended such that a different fee would
9116 be required under subsection (b) of this section, in which case the
9117 applicant shall submit the net difference.

9118 (f) The program shall submit a report to the record summarizing the
9119 certificate of need application and providing an analysis of each
9120 criterion listed in section 230 of this act. The program shall provide such
9121 report no later than ten days prior to any public hearing and in no case
9122 later than ninety days after the application was deemed complete.

9123 (1) The program may request additional information from the

9124 applicant during the course of analyzing the certificate of need
9125 application. Any such request shall not delay timelines for review of the
9126 application except by mutual agreement of the applicant and the
9127 program. All additional information shall, unless otherwise prohibited
9128 by federal or state law, be made part of the public certificate of need
9129 record.

9130 (2) The program may supplement the record with relevant data,
9131 analyses, reports or other similar evidence not later than seventy-five
9132 days after the application is deemed complete, provided the applicant
9133 shall have ten days to respond, in writing, to such evidence. Any
9134 response from the applicant shall be included in the record.

9135 (g) The panel, or a hearing officer designated by the panel, shall hold
9136 a public hearing on each properly filed and complete certificate of need
9137 application filed under this section unless the applicant waives the
9138 applicant's right to a public hearing.

9139 (1) An applicant may waive the applicant's right to a public hearing,
9140 in writing, not later than thirty days after the application is deemed
9141 complete, if the applicant is the only party to the proceeding and no
9142 person is granted intervenor status pursuant to section 4-177a of the
9143 general statutes and subsection (d) of this section. Such waiver shall
9144 constitute a waiver of the applicant's right to appeal under section 4-183
9145 of the general statutes.

9146 (2) The panel shall convene a public hearing on an application not
9147 later than ninety days after the program deems the application as
9148 properly filed and complete.

9149 (3) The hearing record shall close not later than ten days after the
9150 adjournment of the hearing unless the applicant and program mutually
9151 agree to maintain the record open for some period. Any transcript of the
9152 hearing shall be made part of the record without needing to reopen the
9153 record. If no hearing is held, the record shall close ten days after the
9154 submission of the report.

9155 (4) The panel may appoint a hearing officer to administer any hearing
9156 under this section and to draft the proposed final decision consistent
9157 with this section and chapter 54 of the general statutes. A hearing officer
9158 appointed by the panel may draft a proposed final decision even for
9159 dockets in which the applicant waived the right to a hearing and no
9160 hearing was held.

9161 (h) Not later than sixty days after the record of the public hearing is
9162 closed, or one hundred fifty days after the application was deemed
9163 complete if the applicant affirmatively waives a public hearing, the
9164 hearing officer, if one is appointed, shall transmit the report required
9165 pursuant to this section, the record of such hearing, if any, and the
9166 hearing officer's proposed final decision to the panel for consideration
9167 at the panel's next monthly meeting. If no hearing officer is appointed
9168 for a docket that did not have a hearing, the director of the program shall
9169 prepare and submit the proposed final decision. If the proposed final
9170 decision recommends conditions pursuant to this section, the program
9171 or hearing officer shall meet with the applicant, unless otherwise
9172 prohibited by law, at least five days before transmitting such proposed
9173 final decision, to preview the conditions to be proposed.

9174 (i) An applicant may file written briefs or exceptions and request oral
9175 argument regarding the proposed final decision not later than fourteen
9176 days after the publication of such proposed final decision.

9177 (j) At the panel meeting to review one or more certificate of need
9178 applications filed under this section, the panel shall vote on the
9179 disposition of each application that has been submitted to the panel at
9180 least five days prior to such meeting. The panel shall decide any
9181 presented application by majority vote. The panel may approve the
9182 application, with or without conditions, deny the application or remand
9183 the application to the hearing officer for further development of the
9184 record for presentation at the next panel meeting, or order the program
9185 and applicant to engage in agreed settlement negotiations.

9186 (1) Any proposed final decision that is approved by the vote of the

9187 panel shall be automatically converted to a final decision upon the
9188 approval vote of the panel.

9189 (2) Any proposed final decision that is voted to be modified by the
9190 panel shall be modified consistent with the direction of the panel and
9191 posted as a final decision of the panel not later than thirty days after the
9192 panel's vote to modify, provided, at least five days before posting the
9193 modified final decision, the program or hearing officer shall meet with
9194 the applicant, unless otherwise prohibited by law, to preview the
9195 conditions to be finalized.

9196 (3) Any docket remanded for further development of the record and
9197 presentation at the next meeting shall not be so remanded more than
9198 twice by the panel unless by mutual agreement of the panel and the
9199 applicant.

9200 (4) Any docket referred for settlement negotiations shall have the
9201 resulting negotiated proposed settlement presented at the next panel
9202 meeting. The panel shall vote on the proposed settlement and may
9203 approve the proposed settlement or reject such settlement and move to
9204 one of the other available dispositions of the docket.

9205 (5) Nothing in this section shall preclude the program and the
9206 applicant from engaging in negotiations to reach an agreed settlement
9207 at an earlier point in the process, provided such negotiations occur not
9208 earlier than thirty days after the application has been deemed complete.
9209 Any negotiated agreement shall be presented for review and a vote on
9210 the disposition thereof at the next meeting of the panel that is at least
9211 five days after the date of the settlement.

9212 (k) The Certificate of Need Program may recommend, and the panel
9213 may impose, any condition on an approval of a certificate of need
9214 application filed under this section, provided (1) any such condition is
9215 consistent with the purposes of sections 227 to 237, inclusive, of this act,
9216 and (2) the program or hearing officer shall meet with the applicant,
9217 unless otherwise prohibited by law, at least five days before issuing a

9218 proposed final decision or a final decision that imposes any such
9219 condition, to preview each such condition to be met by the applicant.
9220 The applicant and any party to the application may request an
9221 amendment to or relief from any condition, in a form and manner
9222 prescribed by the commissioner, due to changed circumstances,
9223 hardship or for other good cause. The panel may grant or deny any such
9224 request. The determination to deny such request shall not be subject to
9225 appeal under section 4-183 of the general statutes.

9226 (l) Any final decision issued pursuant to this section for a docket in
9227 which a public hearing was held, either under subsection (e) of this
9228 section or as a result of the docket being remanded by the panel for
9229 further development of the record pursuant to subsection (j) of this
9230 section, shall be subject to appeal under section 4-183 of the general
9231 statutes.

9232 (m) Any deadlines in this section may be extended by mutual
9233 agreement of the program and the applicant.

9234 Sec. 232. (NEW) (*Effective October 1, 2026*) (a) Not later than January
9235 1, 2028, the panel shall create an expedited review pathway for certain
9236 categories of applications for certificates of need required under
9237 subsection (a) of section 229 of this act, or subcategories thereof. On and
9238 after January 1, 2028, an applicant may request an expedited review of
9239 the following categories of applications:

9240 (1) The relocation of a health care facility greater than ten miles away
9241 from its current location and outside the current town in which it is
9242 located;

9243 (2) The increase in the number of inpatient or outpatient hospital
9244 beds;

9245 (3) The acquisition of computed tomography scanners, magnetic
9246 resonance imaging scanners, positron emission tomography scanners or
9247 positron emission tomography-computed tomography scanners, by any
9248 person, physician, provider, short-term acute care general hospital or

9249 children's hospital, where certificate of need approval is required for
9250 such acquisition;

9251 (4) An increase of two or three operating rooms, within any three-
9252 year period, by an outpatient surgical facility, as defined in section 19a-
9253 493b of the general statutes, or by a short-term acute care general
9254 hospital; and

9255 (5) Any other category designated by the commissioner in
9256 regulations adopted in accordance with the provisions of chapter 54 of
9257 the general statutes.

9258 (b) On and after January 1, 2028, an applicant requesting expedited
9259 review of a certificate of need application shall submit such application,
9260 in a form and manner prescribed by the commissioner, pursuant to the
9261 deadlines described in subsection (a) of section 231 of this act and
9262 provide the same application fee described in subsection (b) of said
9263 section and notice of intent to the program as described in subsection (c)
9264 of said section.

9265 (c) An application processed through the expedited pathway shall
9266 not be entitled to a hearing before a hearing officer, except (1) the
9267 program may hold a hearing before a hearing officer appointed by the
9268 panel not later than thirty days after deeming the application complete
9269 without affecting any other timelines under this subsection, or (2) the
9270 panel may remove the application from the expedited pathway and
9271 have it processed through the standard pathway described in section
9272 231 of this act.

9273 (d) Not later than fifteen days after submitting an application for a
9274 certificate of need for expedited review under this section, the program
9275 shall notify the applicant requesting expedited review whether such
9276 applicant's application is deemed complete and whether the application
9277 meets the requirements for expedited review.

9278 (1) For any application that is deemed incomplete, the Certificate of
9279 Need Program shall, not later than five days after deeming such

9280 application incomplete, notify the applicant, in writing, of any
9281 application or data elements that were not adequately addressed by the
9282 applicant. The program shall not review such an application until the
9283 applicant submits an application that adequately addresses such
9284 application or data elements to the program in a subsequent application
9285 period.

9286 (2) For any application that is deemed complete but ineligible for
9287 expedited review under this section, the Certificate of Need Program
9288 shall review the application under the standard process set forth in
9289 section 231 of this act.

9290 (e) Any person who wishes to seek intervenor or party status shall
9291 file a request to do so not later than fourteen days after the filing of a
9292 certificate of need application filed under the expedited pathway.

9293 (1) The panel shall appoint a hearing officer to review any request to
9294 intervene or for party status.

9295 (2) The applicant may respond to such request not later than five days
9296 after filing.

9297 (3) The hearing officer shall resolve the request for party or intervenor
9298 status not later than five days after the applicant's response.

9299 (4) If party or intervenor status is granted, the application shall be
9300 removed from the expedited pathway and processed through the
9301 standard pathway described in section 231 of this act. In determining
9302 whether to grant intervention, the hearing officer shall consider the
9303 unique nature of the expedited process and potential burden imposed
9304 by permitting intervention.

9305 (5) The date of any referral of an application under this subsection to
9306 the standard pathway shall be considered the date on which the
9307 application was deemed complete.

9308 (f) For any complete application that is eligible for expedited review

9309 under this section, the Certificate of Need Program shall complete its
9310 analysis and the director shall issue a proposed final decision not later
9311 than sixty days after the application is deemed complete and eligible for
9312 expedited review under this section and present the application to the
9313 panel at its next meeting.

9314 (g) An applicant may file written briefs or exceptions and request oral
9315 argument regarding the proposed final decision not later than seven
9316 days after the publication of such proposed final decision. The program
9317 shall submit the proposed final decision and any subsequent
9318 submissions from the applicant to the panel.

9319 (h) The panel shall base its decision in the expedited pathway on the
9320 same standards and guidelines as those in subsection (a) of section 230
9321 of this act. At the panel's meeting to consider an expedited application,
9322 the panel shall vote on the disposition of the certificate of need
9323 application. The panel may approve the application, with or without
9324 conditions, deny the application, remand the application to the program
9325 for further development of the record for presentation at the next panel
9326 meeting, remand the application for further development of the record
9327 in the standard certificate of need application process pursuant to
9328 section 231 of this act, or order the program and applicant to engage in
9329 agreed settlement negotiations.

9330 (1) Any proposed final decision that is approved by the vote of the
9331 panel shall be automatically converted to a final decision upon such
9332 approval.

9333 (2) Any proposed final decision that is voted to be modified by the
9334 panel shall be modified consistent with the direction of the panel and
9335 posted as a final decision of the panel not later than twenty-one days
9336 after the panel's vote to modify, provided, at least five days before
9337 posting the modified final decision, the program or hearing officer shall
9338 meet with the applicant, unless otherwise prohibited by law, to preview
9339 the conditions to be finalized.

9340 (3) Any docket remanded for further development of the record and
9341 presentation at the next meeting shall not be so remanded more than
9342 twice by the panel unless by mutual agreement of the panel and the
9343 applicant.

9344 (4) Any docket remanded for processing under the standard
9345 certificate of need application pursuant to section 231 of this act shall
9346 have the date of the panel's vote be the date on which the application is
9347 considered to be deemed complete in the standard process.

9348 (5) Any docket referred for settlement negotiations shall have the
9349 resulting negotiated proposed settlement presented at the next panel
9350 meeting. The panel shall vote on the proposed settlement and may
9351 approve the proposed settlement or reject such settlement and move to
9352 one of the other available dispositions of the docket.

9353 (6) Nothing in this section shall preclude the program and the
9354 applicant from engaging in negotiations to reach an agreed settlement
9355 at an earlier point in the process, provided such negotiations occur not
9356 earlier than fifteen days after the application has been deemed complete.
9357 Any negotiated agreement shall be presented for review and a vote on
9358 the disposition thereof at the next meeting of the panel that is at least
9359 five days after the date of the settlement.

9360 (i) The Certificate of Need Program may recommend, and the panel
9361 may impose any condition on, an approval of an expedited certificate of
9362 need application, provided (1) any such condition is consistent with the
9363 purposes of sections 227 to 237, inclusive, of this act, and (2) the program
9364 or hearing officer shall meet with the applicant, unless otherwise
9365 prohibited by law, at least five days before issuing a proposed final
9366 decision or a final decision that imposes any such condition, to preview
9367 each such condition to be met by the applicant. The applicant and any
9368 party to the application may request an amendment to or relief from any
9369 condition, in a form and manner prescribed by the commissioner, due
9370 to changed circumstances, hardship or for other good cause. The panel
9371 may grant or deny any such request. The determination to deny such

9372 request shall not be subject to appeal under section 4-183 of the general
9373 statutes.

9374 (j) Not later than July 1, 2029, the Certificate of Need Program, in
9375 consultation with relevant stakeholders, shall submit a report, in
9376 accordance with the provisions of section 11-4a of the general statutes,
9377 to the joint standing committee of the General Assembly having
9378 cognizance of matters relating to public health regarding the expedited
9379 pathway, including (1) the average time from application submission to
9380 final decision, (2) the number of applications processed through the
9381 expedited process in comparison to the standard process, (3) the number
9382 of applications filed under the expedited pathway that have been
9383 transferred to the standard pathway and the reasons for such transfer,
9384 and (4) any recommendations for process changes to the expedited
9385 pathway.

9386 (k) Any deadlines in this section may be extended by mutual
9387 agreement of the program and the applicant.

9388 Sec. 233. (NEW) (*Effective October 1, 2026*) (a) For a certificate of need
9389 issued pursuant to an application filed on or after July 1, 2027, the
9390 certificate of need shall be valid (1) only for the proposal described in
9391 the application, and (2) for two years from the date of issuance by the
9392 panel. During the period of time that such certificate is valid and the
9393 thirty-day period following the expiration of the certificate, the holder
9394 of the certificate shall provide the Certificate of Need Program with such
9395 information as the program may request on the development of the
9396 proposal covered by the certificate.

9397 (b) Upon request from a certificate of need holder, the program may
9398 extend the duration of a certificate of need for such additional period of
9399 time as the program determines is reasonably necessary to
9400 expeditiously complete the proposal. Not later than five business days
9401 after receiving a request to extend the duration of a certificate of need,
9402 the program shall post such request on its Internet web site. Any person
9403 who wishes to comment on extending the duration of the certificate of

9404 need shall provide written comments to the program on the requested
9405 extension not later than thirty days after the date the program posts
9406 notice of the request for an extension of time on its Internet web site.

9407 (c) If the program determines that (1) commencement, construction
9408 or other preparation has not been substantially undertaken during a
9409 valid certificate of need period, or (2) the certificate of need holder has
9410 not made a good-faith effort to complete the proposal as approved, the
9411 program may withdraw, revoke or rescind the certificate of need
9412 pursuant to the requirements set forth in chapter 54 of the general
9413 statutes.

9414 (d) For a certificate of need issued pursuant to an application filed on
9415 or after July 1, 2027, the (1) certificate of need shall not be transferable
9416 or assignable, and (2) project that is the subject of the certificate of need
9417 shall not be transferred from a certificate holder to another person.

9418 Sec. 234. (NEW) (*Effective October 1, 2026*) (a) On and after July 1, 2027,
9419 the Certificate of Need Program shall conduct a cost and market impact
9420 review for any transaction involving the transfer of ownership or
9421 control of a hospital in which (1) an application for a certificate of need
9422 has been filed pursuant to subdivision (2) of subsection (a) of section 229
9423 of this act or a notice of material change has been filed with the Attorney
9424 General's office pursuant to section 19a-486i of the general statutes that
9425 involves the transfer of ownership of a hospital, as defined in section
9426 19a-639 of the general statutes, and (2) the purchaser is (A) a hospital, as
9427 defined in section 19a-490 of the general statutes, whether located
9428 within or outside the state, that had net patient revenue for fiscal year
9429 2025 in an amount greater than one billion dollars, (B) a hospital system,
9430 as defined in section 19a-486i of the general statutes, whether located
9431 within or outside the state, that had net patient revenue for fiscal year
9432 2025 in an amount greater than one billion dollars, or (C) any person
9433 that is organized or operated for profit.

9434 (b) The program shall develop a set of data requests to be used for
9435 applications filed on and after July 1, 2027, for all cost and market impact

9436 reviews. An applicant that is the subject of a cost and market impact
9437 review shall submit all data necessary for such review at the same time
9438 that the hospital initiates the application process for a certificate of need
9439 with the program or that it submits a notice of material change to the
9440 Attorney General under section 19a-486i of the general statutes,
9441 whichever is earlier. The program shall review the data submission for
9442 completeness not later than thirty days after submission. If the data
9443 submission is incomplete, the program shall notify the applicant that it
9444 is incomplete and identify which data elements are incomplete.

9445 (c) The program shall keep confidential all nonpublic information
9446 and documents obtained pursuant to this section and shall not disclose
9447 the information or documents to any person without the consent of the
9448 person that produced the information or documents, except in a
9449 preliminary report or final report issued in accordance with this section
9450 if the program believes that such disclosure should be made in the
9451 public interest after taking into account any privacy, trade secret or anti-
9452 competitive considerations. Such information and documents shall not
9453 be deemed a public record under section 1-210 of the general statutes
9454 and shall be exempt from disclosure.

9455 (d) The cost and market impact review conducted pursuant to this
9456 section shall examine factors relating to the businesses and relative
9457 market positions of the transacting parties as defined in subsection (d)
9458 of section 19a-639 of the general statutes, and may include, but need not
9459 be limited to: (1) The transacting parties' size and market share within
9460 its primary service area, by major service category and within its
9461 dispersed service areas; (2) the transacting parties' prices for services,
9462 including the transacting parties' relative prices compared to other
9463 health care providers for the same services in the same market; (3) the
9464 transacting parties' health status adjusted total medical expense,
9465 including the transacting parties' health status adjusted total medical
9466 expense compared to that of similar health care providers; (4) the quality
9467 of the services provided by the transacting parties, including patient
9468 experience; (5) the transacting parties' cost and cost trends in

9469 comparison to total health care expenditures state wide; (6) the
9470 availability and accessibility of services similar to those provided by
9471 each transacting party, or proposed to be provided as a result of the
9472 transfer of ownership of a hospital within each transacting party's
9473 primary service areas and dispersed service areas; (7) the impact of the
9474 proposed transfer of ownership of the hospital on competing options for
9475 the delivery of health care services within each transacting party's
9476 primary service area and dispersed service area including the impact on
9477 existing service providers; (8) the methods used by the transacting
9478 parties to attract patient volume and to recruit or acquire health care
9479 professionals or facilities; (9) the role of each transacting party in serving
9480 at-risk, underserved and government payer patient populations,
9481 including those with behavioral, substance use disorder and mental
9482 health conditions, within each transacting party's primary service area
9483 and dispersed service area; (10) the role of each transacting party in
9484 providing low margin or negative margin services within each
9485 transacting party's primary service area and dispersed service area; (11)
9486 consumer concerns, including, but not limited to, complaints or other
9487 allegations that a transacting party has engaged in any unfair method of
9488 competition or any unfair or deceptive act or practice; and (12) any other
9489 factors that the program determines to be in the public interest.

9490 (e) The program shall submit the preliminary report to the applicant
9491 and to the Attorney General not later than ninety days after the data
9492 submissions are deemed complete. The applicant shall respond, in
9493 writing, not later than fifteen days after receipt of such preliminary
9494 report with any comments regarding such report. Once the applicant
9495 has submitted such written comments or waived the opportunity to
9496 make such a submission, the program shall make the preliminary report
9497 and the applicant's comments public. The program shall issue a final
9498 report not later than one hundred twenty days after the application was
9499 deemed complete and make such final report part of the public
9500 certificate of need record of such application.

9501 (f) Nothing in this section shall prohibit a transfer of ownership of a

9502 hospital, provided any such proposed transfer shall not be completed
9503 (1) less than thirty days after the program has issued a final report on a
9504 cost and market impact review, if such review is required, or (2) while
9505 any action brought by the Attorney General pursuant to subsection (g)
9506 of this section is pending and before a final judgment on such action is
9507 issued by a court of competent jurisdiction.

9508 (g) After the program issues a final report on a transfer of ownership
9509 of a hospital under subsection (e) of this section, the Attorney General
9510 may: (1) Conduct an investigation to determine whether the transacting
9511 parties engaged or, as a result of completing the transfer of ownership
9512 of the hospital, are expected to engage in unfair methods of competition,
9513 anti-competitive behavior or other conduct in violation of chapter 624
9514 or 735a of the general statutes or any other state or federal law; and (2)
9515 if appropriate, take action under chapter 624 or 735a of the general
9516 statutes or any other state law to protect consumers in the health care
9517 market. The program's final report may be evidence in any such action.

9518 (h) For the purposes of this section, the provisions of chapter 735a of
9519 the general statutes may be directly enforced by the Attorney General.
9520 Nothing in this section shall be construed to modify, impair or
9521 supersede the operation of any state antitrust law or otherwise limit the
9522 authority of the Attorney General to (1) take any action against a
9523 transacting party as authorized by any law; or (2) protect consumers in
9524 the health care market under any law. Notwithstanding subdivision (1)
9525 of subsection (a) of section 42-110c of the general statutes, the
9526 transacting parties shall be subject to chapter 735a of the general
9527 statutes.

9528 (i) The program shall retain an independent consultant with expertise
9529 on the economic analysis of the health care market and health care costs
9530 and prices to conduct each cost and market impact review, as described
9531 in this section. The program shall submit bills for such services to the
9532 purchaser, as defined in subsection (d) of section 19a-639 of the general
9533 statutes. Such purchaser shall pay such bills not later than thirty days
9534 after receipt thereof. Such bills shall not exceed two hundred fifty

9535 thousand dollars per application. The provisions of chapter 57 of the
9536 general statutes, sections 4-212 to 4-219, inclusive, of the general statutes
9537 and section 4e-19 of the general statutes shall not apply to any
9538 agreement executed pursuant to this subsection.

9539 Sec. 235. (NEW) (*Effective October 1, 2026*) (a) On and after July 1, 2027,
9540 the director of the Certificate of Need Program shall investigate all
9541 inquiries concerning compliance with the provisions of sections 227 to
9542 237, inclusive, of this act.

9543 (b) The panel, or any agent authorized by the panel to conduct any
9544 inquiry, investigation or hearing under the provisions of sections 227 to
9545 237, inclusive, of this act, shall have authority to administer oaths and
9546 take testimony under oath relative to the matter of inquiry or
9547 investigation. At any hearing under this section, the panel or such
9548 authorized agent may subpoena witnesses and require the production
9549 of records, papers and documents pertinent to such inquiry. If any
9550 person disobeys such process or, having appeared in obedience thereto,
9551 refuses to answer any pertinent question put to such person by the panel
9552 or such panel's authorized agent or to produce any records and papers
9553 pursuant thereto, the panel or such panel's authorized agent may apply
9554 to the superior court for the judicial district of Hartford or for the judicial
9555 district wherein the person resides or the business that is the subject of
9556 the inquiry has been conducted, or to any judge of said court if the same
9557 is not in session, setting forth such disobedience to process or refusal to
9558 answer, and said court or such judge shall cite such person to appear
9559 before said court or such judge to answer such question or to produce
9560 such records and papers.

9561 (c) Any person or health care facility or institution that is required to
9562 acquire a certificate of need for any of the activities described in
9563 subsection (a) of section 229 of this act and negligently undertakes any
9564 of the activities described in said section without such certificate of need,
9565 any person, or health care facility or institution that is subject to any
9566 terms or conditions enumerated in a certificate of need decision or
9567 agreed settlement approved by the panel and negligently fails to comply

9568 with any such enumerated term or condition, and any person or entity
9569 that is required to submit a notice to the program pursuant to subsection
9570 (d) of section 229 of this act or section 237 of this act and negligently fails
9571 to submit such notice shall be subject to a civil penalty of up to one
9572 thousand dollars a day for each day such person, entity or institution
9573 conducts any of the described activities without certificate of need
9574 approval as required by section 229 of this act, or for each day any
9575 enumerated term or condition is not met or for each day that the notice
9576 was not timely submitted. Any civil penalty proceeding authorized by
9577 this section shall be initiated by the program, which shall also present
9578 allegations of such negligence at a hearing before the panel in
9579 accordance with subsections (b) to (f), inclusive, of this section.

9580 (d) If the program has reason to believe that a person or health care
9581 facility or institution has committed a violation for which a civil penalty
9582 is authorized pursuant to subsection (c) of this section or subsection (e)
9583 of section 19a-632 of the general statutes, the program shall notify such
9584 person or health care facility or institution by first class mail or personal
9585 service. The notice shall include: (1) A reference to the sections of the
9586 statute, regulation or settlement agreement involved; (2) a short and
9587 plain statement of the matters asserted or charged; (3) a statement of the
9588 amount of the civil penalty or penalties to be imposed; (4) the initial date
9589 of the imposition of the penalty; and (5) a statement of the party's right
9590 to a hearing.

9591 (e) The person or health care facility or institution to whom the notice
9592 is addressed shall have fifteen business days after the date of mailing of
9593 the notice to make written application to the program to (1) request a
9594 hearing to contest the imposition of the penalty, (2) request an extension
9595 of time to file the required data, or (3) comply with enumerated
9596 conditions of an agreed settlement. A failure to make a timely request
9597 for a hearing or an extension of time to file the required data or a denial
9598 of a request for an extension of time shall result in a final order for the
9599 imposition of the penalty. All hearings under this section shall be
9600 conducted pursuant to chapter 54 of the general statutes. The panel may

9601 mitigate or waive the penalty upon such terms and conditions as, in its
9602 discretion, it deems proper or necessary upon consideration of any
9603 extenuating factors or circumstances.

9604 (f) A final order of the panel assessing a civil penalty imposed after a
9605 hearing before the panel pursuant to subsection (d) of this section shall
9606 be subject to appeal as set forth in section 4-183 of the general statutes,
9607 except that any such appeal shall be taken to the superior court for the
9608 judicial district of New Britain. Such final order shall not be subject to
9609 appeal under any other provision of the general statutes. No challenge
9610 to any such final order shall be allowed as to any issue which could have
9611 been raised by an appeal of an earlier order, denial or other final
9612 decision by the panel.

9613 (g) If any person or health care facility or institution fails to pay any
9614 civil penalty under this section after the assessment of such penalty has
9615 become final, the amount of such penalty may be deducted from
9616 payments to such person or health care facility or institution from the
9617 Medicaid account.

9618 (h) In addition to any civil penalty imposed under this section, if the
9619 director of the program or the director's authorized agent has received
9620 information and has a reasonable belief that any person or health care
9621 facility or institution has violated or is violating any provision of
9622 sections 227 to 237, inclusive, of this act, or any policy and procedure or
9623 order of the panel, the director or such agent shall notify such person or
9624 health care facility or institution by first class mail or personal service.
9625 The notice shall include: (1) A reference to the sections of the general
9626 statutes, regulations of Connecticut state agencies or orders alleged or
9627 believed to have been violated; (2) a short and plain language statement
9628 of the matters asserted or charged; (3) a description of the activity
9629 alleged to have violated a statute or regulation identified pursuant to
9630 subdivision (1) of this subsection; (4) a statement concerning the right to
9631 a hearing of such person or health care facility or institution; and (5) a
9632 statement that such person or health care facility or institution may, not
9633 later than ten business days after receipt of such notice, make a written

9634 request for a hearing on the matters asserted, to be sent to the
9635 commissioner or such agent.

9636 (i) The person or health care facility or institution to whom such
9637 notice is provided pursuant to subsection (h) of this section may, not
9638 later than ten business days after receipt of the notice, make written
9639 application to the program to request a hearing to demonstrate that such
9640 violation has not occurred, a certificate of need was not required or each
9641 required certificate of need was obtained. A failure to make a timely
9642 request for a hearing shall result in the panel issuing a cease and desist
9643 order. Each hearing held under this subsection shall be conducted as a
9644 contested case pursuant to chapter 54 of the general statutes.

9645 (j) If the panel finds, by a preponderance of the evidence, following a
9646 hearing held under subsection (i) of this section that such person or
9647 health care facility or institution has violated or is violating any
9648 provision of sections 227 to 237, inclusive, of this act, or any regulation
9649 or order of the department, the panel shall issue a cease and desist order
9650 to such person or health care facility or institution that shall be
9651 considered a final decision subject to appeal to the Superior Court in
9652 accordance with section 4-183 of the general statutes.

9653 (k) Any cease and desist order issued under this section may be
9654 enforced by the Attorney General pursuant to section 19a-642 of the
9655 general statutes.

9656 (l) Any civil penalty proceeding and any investigation or cease and
9657 desist proceeding may be conducted simultaneously in a unified
9658 proceeding.

9659 Sec. 236. (NEW) (*Effective October 1, 2026*) The commissioner shall
9660 adopt regulations, in accordance with the provisions of chapter 54 of the
9661 general statutes, to implement the provisions of sections 227 to 237,
9662 inclusive, of this act. The commissioner may implement policies and
9663 procedures necessary to administer the provisions of said sections while
9664 in the process of adopting such policies and procedures as regulation,

9665 provided, prior to implementing such policies and procedures, the
9666 department shall convene a working group with relevant stakeholders
9667 to provide input on the development of such policies and procedures.
9668 The commissioner shall convene the working group not later than
9669 January 1, 2027. Policies and procedures implemented pursuant to this
9670 section shall be valid until the earlier of two years from the date of their
9671 implementation or the time final regulations are adopted.

9672 Sec. 237. (NEW) (*Effective October 1, 2026*) (a) On and after July 1, 2027,
9673 a hospital may temporarily pause a service for up to ninety days,
9674 provided, if a hospital intends to indefinitely terminate a service line or
9675 pause a service line for more than ninety days, the hospital shall notify
9676 the Certificate of Need Program, in writing, not less than ninety days
9677 prior to commencing such pause or termination. For purposes of this
9678 section, "service line" means a category of inpatient and outpatient
9679 services but does not include services provided by an emergency
9680 department.

9681 (b) Except as provided in subsection (d) of this section, not less than
9682 ninety days prior to commencing any termination of service by a
9683 hospital or any pause of a service intended to last more than ninety days,
9684 the hospital shall provide notice, either electronically or in writing, to
9685 the program that includes the following information:

9686 (1) A description of the service to be paused or terminated;

9687 (2) Current and historical utilization rates for such service;

9688 (3) A description of the anticipated impact of such pause or
9689 termination on individuals and health care facilities in the hospital's
9690 primary service area;

9691 (4) The date set for the pause or termination of service and, if
9692 applicable, the anticipated date of resumption of such service;

9693 (5) A detailed account of any community engagement and planning
9694 that has occurred prior to such notice or that is scheduled to occur prior

9695 to the pause or termination; and

9696 (6) Any other information the director may require.

9697 (c) The hospital shall also send a copy of such notice to the office of
9698 the Attorney General, the Department of Social Services, the Office of
9699 the Healthcare Advocate, and, if it relates to a behavioral health service
9700 or substance use disorder treatment service, the Department of Mental
9701 Health and Addiction Services and the Behavioral Health Advocate.

9702 (d) When the provision of ninety days' notice of the cessation of a
9703 service line is not practicable due to circumstances outside of the
9704 hospital's control, such as the death of the provider of such service or
9705 due to natural disaster, the hospital shall provide notice to the program
9706 as soon as practicable but in no case later than fourteen days after the
9707 initiation of the unanticipated cessation.

9708 (e) The program shall hold a public hearing concerning the proposed
9709 pause or termination of service, the impact on the hospital's primary
9710 service area and the proposed plans for ensuring continued access to
9711 high-quality, affordable health care in such service area. The hearing
9712 record and any submitted public comments shall inform the panel's
9713 review of the proposed plan and any imposed conditions pursuant to
9714 subsection (f) of this section.

9715 (f) Not later than sixty days prior to commencing the pause or
9716 termination of a service, the hospital shall submit a plan for ensuring
9717 access to such service following the hospital's pause or termination of
9718 such service. If the cessation of the service is due to an unplanned event
9719 outside the control of the hospital, as described in subsection (d) of this
9720 section, the hospital shall submit the plan for ensuring access to the
9721 service within fourteen days of the hospital's cessation of the service
9722 line. The plan shall include:

9723 (1) Information on utilization of such service prior to the proposed
9724 pause or termination;

9725 (2) Information on the location and service capacity of alternative
9726 sites that provide such service;

9727 (3) Travel times to alternative sites that provide such service;

9728 (4) An assessment of transportation needs after the pause or
9729 termination and a plan for meeting such needs;

9730 (5) A protocol that details mechanisms to maintain continuity of care
9731 for patients who receive such paused or terminated service;

9732 (6) A protocol that describes how patients in the hospital's primary
9733 service area will obtain such service at alternative sites that provide such
9734 service; and

9735 (7) A communication plan for ensuring all affected patients in the
9736 hospital's primary service area are aware of the pause or termination of
9737 such service, where they may obtain such service at an alternative site
9738 and the assistance available from the hospital to obtain such service to
9739 preserve continuity of care.

9740 (g) The program shall review the plan submitted by the hospital
9741 pursuant to subsection (f) of this section to determine if the plan ensures
9742 continued access to the service to be paused or terminated. The program
9743 shall complete its review of the plan and submit to the hospital and
9744 panel written recommendations regarding the approval, modification
9745 or imposition of conditions upon the plan not later than ten days after
9746 receiving the plan from the hospital. The panel shall hold a meeting on
9747 the plan not later than ten days after receipt of such recommendations.
9748 The hospital may submit a response to such recommendations at or
9749 prior to such meeting. Not later than ten days after such meeting, the
9750 panel shall approve the plan, require modifications to the plan or add
9751 conditions to the plan.

9752 (h) The panel's decision approving or modifying the plan shall
9753 constitute a final decision subject to appeal under section 4-183 of the
9754 general statutes.

9755 (i) The program shall monitor implementation of the hospital's plan
9756 for preserving access to a health care service following a pause of
9757 termination of such service under this section. If the hospital fails to
9758 implement any aspect of the plan as approved by the panel pursuant to
9759 subsection (g) of this section, the program may impose a performance
9760 improvement plan on the hospital. Failure to comply with the
9761 performance improvement plan and continued failure to perform under
9762 the plan may result in the imposition of civil penalties pursuant to
9763 section 235 of this act.

9764 Sec. 238. Subsection (a) of section 19a-612d of the general statutes is
9765 repealed and the following is substituted in lieu thereof (*Effective October*
9766 *1, 2026*):

9767 (a) The Commissioner of Health Strategy shall oversee the Health
9768 Systems Planning Unit and shall exercise independent decision-making
9769 authority over all certificate of need decisions for applications for a
9770 certificate of need filed on or before June 30, 2027.

9771 Sec. 239. Subsections (a) to (e), inclusive, of section 19a-638 of the
9772 general statutes are repealed and the following is substituted in lieu
9773 thereof (*Effective October 1, 2026*):

9774 (a) [A] On and before June 30, 2027, a certificate of need issued by the
9775 unit shall be required for:

9776 (1) The establishment of a new health care facility;

9777 (2) A transfer of ownership of a health care facility;

9778 (3) A transfer of ownership of a large group practice to any entity
9779 other than a (A) physician, or (B) group of two or more physicians,
9780 legally organized in a partnership, professional corporation or limited
9781 liability company formed to render professional services and not
9782 employed by or an affiliate of any hospital, medical foundation,
9783 insurance company or other similar entity;

- 9784 (4) The establishment of a freestanding emergency department;
- 9785 (5) The termination of inpatient or outpatient services offered by a
9786 hospital, including, but not limited to, the termination by a short-term
9787 acute care general hospital or children's hospital of inpatient and
9788 outpatient mental health and substance abuse services;
- 9789 (6) The establishment of an outpatient surgical facility, as defined in
9790 section 19a-493b, or as established by a short-term acute care general
9791 hospital;
- 9792 (7) The termination of surgical services by an outpatient surgical
9793 facility, as defined in section 19a-493b, or a facility that provides
9794 outpatient surgical services as part of the outpatient surgery department
9795 of a short-term acute care general hospital, provided termination of
9796 outpatient surgical services due to (A) insufficient patient volume, or (B)
9797 the termination of any subspecialty surgical service, shall not require
9798 certificate of need approval;
- 9799 (8) The termination of an emergency department by a short-term
9800 acute care general hospital;
- 9801 (9) The establishment of cardiac services, including inpatient and
9802 outpatient cardiac catheterization, interventional cardiology and
9803 cardiovascular surgery;
- 9804 (10) The acquisition of computed tomography scanners, magnetic
9805 resonance imaging scanners, positron emission tomography scanners or
9806 positron emission tomography-computed tomography scanners, by any
9807 person, physician, provider, short-term acute care general hospital or
9808 children's hospital, except (A) as provided for in subdivision (22) of
9809 subsection (b) of this section, and (B) a certificate of need issued by the
9810 unit shall not be required where such scanner is a replacement for a
9811 scanner that was previously acquired through certificate of need
9812 approval or a certificate of need determination, including a replacement
9813 scanner that has dual modalities or functionalities if the applicant
9814 already offers similar imaging services for each of the scanner's

9815 modalities or functionalities that will be utilized;

9816 (11) The acquisition of nonhospital based linear accelerators, except a
9817 certificate of need issued by the unit shall not be required where such
9818 accelerator is a replacement for an accelerator that was previously
9819 acquired through certificate of need approval or a certificate of need
9820 determination;

9821 (12) An increase in the licensed bed capacity of a health care facility,
9822 except as provided in subdivision (23) of subsection (b) of this section;

9823 (13) The acquisition of equipment utilizing technology that has not
9824 previously been utilized in the state;

9825 (14) An increase of two or more operating rooms within any three-
9826 year period, commencing on and after October 1, 2010, by an outpatient
9827 surgical facility, as defined in section 19a-493b, or by a short-term acute
9828 care general hospital; and

9829 (15) The termination of inpatient or outpatient services offered by a
9830 hospital or other facility or institution operated by the state that
9831 provides services that are eligible for reimbursement under Title XVIII
9832 or XIX of the federal Social Security Act, 42 USC 301, as amended.

9833 (b) [A] On and before June 30, 2027, a certificate of need issued by the
9834 unit shall not be required for:

9835 (1) Health care facilities owned and operated by the federal
9836 government;

9837 (2) The establishment of offices by a licensed private practitioner,
9838 whether for individual or group practice, except when a certificate of
9839 need is required in accordance with the requirements of section 19a-
9840 493b or subdivision (3), (10) or (11) of subsection (a) of this section;

9841 (3) A health care facility operated by a religious group that
9842 exclusively relies upon spiritual means through prayer for healing;

- 9843 (4) Residential care homes, as defined in subsection (c) of section 19a-
9844 490, and nursing homes and rest homes, as defined in subsection (o) of
9845 section 19a-490;
- 9846 (5) An assisted living services agency, as defined in section 19a-490;
- 9847 (6) Home health agencies, as defined in section 19a-490;
- 9848 (7) Hospice services, as described in section 19a-122b;
- 9849 (8) Outpatient rehabilitation facilities;
- 9850 (9) Outpatient chronic dialysis services;
- 9851 (10) Transplant services;
- 9852 (11) Free clinics, as defined in section 19a-630;
- 9853 (12) School-based health centers and expanded school health sites, as
9854 such terms are defined in section 19a-6r, community health centers, as
9855 defined in section 19a-490a, not-for-profit outpatient clinics licensed in
9856 accordance with the provisions of chapter 368v and federally qualified
9857 health centers;
- 9858 (13) A program licensed or funded by the Department of Children
9859 and Families, provided such program is not a psychiatric residential
9860 treatment facility;
- 9861 (14) Any nonprofit facility, institution or provider that has a contract
9862 with, or is certified or licensed to provide a service for, a state agency or
9863 department for a service that would otherwise require a certificate of
9864 need. The provisions of this subdivision shall not apply to a short-term
9865 acute care general hospital or children's hospital, or a hospital or other
9866 facility or institution operated by the state that provides services that are
9867 eligible for reimbursement under Title XVIII or XIX of the federal Social
9868 Security Act, 42 USC 301, as amended;
- 9869 (15) A health care facility operated by a nonprofit educational

9870 institution exclusively for students, faculty and staff of such institution
9871 and their dependents;

9872 (16) An outpatient clinic or program operated exclusively by or
9873 contracted to be operated exclusively by a municipality, municipal
9874 agency, municipal board of education or a health district, as described
9875 in section 19a-241;

9876 (17) A residential facility for persons with intellectual disability
9877 licensed pursuant to section 17a-227 and certified to participate in the
9878 Title XIX Medicaid program as an intermediate care facility for
9879 individuals with intellectual disabilities;

9880 (18) Replacement of existing computed tomography scanners,
9881 magnetic resonance imaging scanners, positron emission tomography
9882 scanners, positron emission tomography-computed tomography
9883 scanners, or nonhospital based linear accelerators, if such equipment
9884 was acquired through certificate of need approval or a certificate of need
9885 determination, provided a health care facility, provider, physician or
9886 person notifies the unit of the date on which the equipment is replaced
9887 and the disposition of the replaced equipment, including if a
9888 replacement scanner has dual modalities or functionalities and the
9889 applicant already offers similar imaging services for each of the
9890 equipment's modalities or functionalities that will be utilized;

9891 (19) Acquisition of cone-beam dental imaging equipment that is to be
9892 used exclusively by a dentist licensed pursuant to chapter 379;

9893 (20) The partial or total elimination of services provided by an
9894 outpatient surgical facility, as defined in section 19a-493b, except as
9895 provided in subdivision (6) of subsection (a) of this section and section
9896 19a-639e;

9897 (21) The termination of services for which the Department of Public
9898 Health has requested the facility to relinquish its license;

9899 (22) Acquisition of any equipment by any person that is to be used

9900 exclusively for scientific research that is not conducted on humans;

9901 (23) On or before ~~June 30, 2026~~ June 30, 2027, an increase in the
9902 licensed bed capacity of a mental health facility, provided (A) the mental
9903 health facility demonstrates to the unit, in a form and manner prescribed
9904 by the unit, that it accepts reimbursement for any covered benefit
9905 provided to a covered individual under: (i) An individual or group
9906 health insurance policy providing coverage of the type specified in
9907 subdivisions (1), (2), (4), (11) and (12) of section 38a-469; (ii) a self-
9908 insured employee welfare benefit plan established pursuant to the
9909 federal Employee Retirement Income Security Act of 1974, as amended
9910 from time to time; or (iii) HUSKY Health, as defined in section 17b-290,
9911 and (B) if the mental health facility does not accept or stops accepting
9912 reimbursement for any covered benefit provided to a covered
9913 individual under a policy, plan or program described in clause (i), (ii) or
9914 (iii) of subparagraph (A) of this subdivision, a certificate of need for such
9915 increase in the licensed bed capacity shall be required; [.]

9916 (24) The establishment at harm reduction centers through the pilot
9917 program established pursuant to section 17a-673c; or

9918 (25) On or before ~~June 30, 2028~~ June 30, 2027, a birth center, as
9919 defined in section 19a-490, that is enrolled as a provider in the
9920 Connecticut medical assistance program, as defined in section 17b-245g.

9921 (c) (1) Any person [.] or health care facility or institution that is unsure
9922 whether a certificate of need is required under this section, or (2) any
9923 health care facility that proposes to relocate pursuant to section 19a-
9924 639c, shall send a letter to the unit that describes the project and requests
9925 that the unit make a determination as to whether a certificate of need is
9926 required. In the case of a relocation of a health care facility, the letter
9927 shall include information described in section 19a-639c. A person [.] or
9928 health care facility or institution making such request shall provide the
9929 unit with any information the unit requests as part of its determination
9930 process. The unit shall provide a determination within thirty days of
9931 receipt of such request.

9932 (d) The Commissioner of Health Strategy may implement policies
9933 and procedures necessary to administer the provisions of this section
9934 while in the process of adopting such policies and procedures as
9935 regulation, provided the commissioner holds a public hearing prior to
9936 implementing the policies and procedures and posts notice of intent to
9937 adopt regulations on the office's Internet web site and the eRegulations
9938 System not later than twenty days after the date of implementation.
9939 Policies and procedures implemented pursuant to this section shall be
9940 valid until the time final regulations are adopted.

9941 (e) On or before [June 30, 2026] June 30, 2027, a mental health facility
9942 seeking to increase licensed bed capacity without applying for a
9943 certificate of need, as permitted pursuant to subdivision (23) of
9944 subsection (b) of this section, shall notify the Office of Health Strategy,
9945 in a form and manner prescribed by the commissioner, regarding (1)
9946 such facility's intent to increase licensed bed capacity, (2) the address of
9947 such facility, and (3) a description of all services that are being or will be
9948 provided at such facility.

9949 Sec. 240. Subsections (a) to (e), inclusive, of section 19a-639 of the 2026
9950 supplement to the general statutes are repealed and the following is
9951 substituted in lieu thereof (*Effective October 1, 2026*):

9952 (a) In any deliberations involving a certificate of need application
9953 filed on or before June 30, 2027, pursuant to section 19a-638, the unit
9954 shall take into consideration and make written findings concerning each
9955 of the following guidelines and principles:

9956 (1) Whether the proposed project is consistent with any applicable
9957 policies and standards adopted in regulations by the Office of Health
9958 Strategy;

9959 (2) The relationship of the proposed project to the state-wide health
9960 care facilities and services plan;

9961 (3) Whether there is a clear public need for the health care facility or
9962 services proposed by the applicant;

9963 (4) Whether the applicant has satisfactorily demonstrated how the
9964 proposal will impact the financial strength of the health care system in
9965 the state or that the proposal is financially feasible for the applicant;

9966 (5) Whether the applicant has satisfactorily demonstrated how the
9967 proposal will improve quality, accessibility and cost effectiveness of
9968 health care delivery in the region, including, but not limited to,
9969 provision of or any change in the access to services for Medicaid
9970 recipients and indigent persons;

9971 (6) The applicant's past and proposed provision of health care
9972 services to relevant patient populations and payer mix, including, but
9973 not limited to, access to services by Medicaid recipients and indigent
9974 persons;

9975 (7) Whether the applicant has satisfactorily identified the population
9976 to be served by the proposed project and satisfactorily demonstrated
9977 that the identified population has a need for the proposed services;

9978 (8) The utilization of existing health care facilities and health care
9979 services in the service area of the applicant;

9980 (9) Whether the applicant has satisfactorily demonstrated that the
9981 proposed project shall not result in an unnecessary duplication of
9982 existing or approved health care services or facilities;

9983 (10) Whether an applicant, who has failed to provide or reduced
9984 access to services by Medicaid recipients or indigent persons, has
9985 demonstrated good cause for doing so, which shall not be demonstrated
9986 solely on the basis of differences in reimbursement rates between
9987 Medicaid and other health care payers;

9988 (11) Whether the applicant has satisfactorily demonstrated that the
9989 proposal will not negatively impact the diversity of health care
9990 providers and patient choice in the geographic region; and

9991 (12) Whether the applicant has satisfactorily demonstrated that any

9992 consolidation resulting from the proposal will not adversely affect
9993 health care costs or accessibility to care.

9994 (b) [In] On or before June 30, 2027, in deliberations as described in
9995 subsection (a) of this section, there shall be a presumption in favor of
9996 approving the certificate of need application for a transfer of ownership
9997 of a large group practice, as described in subdivision (3) of subsection
9998 (a) of section 19a-638, when an offer was made in response to a request
9999 for proposal or similar voluntary offer for sale.

10000 (c) The unit, as it deems necessary, may revise or supplement the
10001 guidelines and principles, set forth in subsection (a) of this section,
10002 through regulation.

10003 (d) (1) For purposes of this subsection and subsection (e) of this
10004 section:

10005 (A) "Affected community" means a municipality where a hospital is
10006 physically located or a municipality whose inhabitants are regularly
10007 served by a hospital;

10008 (B) "Hospital" has the same meaning as provided in section 19a-490;

10009 (C) "New hospital" means a hospital as it exists after the approval of
10010 an agreement pursuant to section 19a-486b or a certificate of need
10011 application for a transfer of ownership of a hospital;

10012 (D) "Purchaser" means a person who is acquiring, or has acquired,
10013 any assets of a hospital through a transfer of ownership of a hospital;

10014 (E) "Transacting party" means a purchaser and any person who is a
10015 party to a proposed agreement for transfer of ownership of a hospital;

10016 (F) "Transfer" means to sell, transfer, lease, exchange, option, convey,
10017 give or otherwise dispose of or transfer control over, including, but not
10018 limited to, transfer by way of merger or joint venture not in the ordinary
10019 course of business; and

10020 (G) "Transfer of ownership of a hospital" means a transfer that
10021 impacts or changes the governance or controlling body of a hospital,
10022 including, but not limited to, all affiliations, mergers or any sale or
10023 transfer of net assets of a hospital and for which a certificate of need
10024 application or a certificate of need determination letter is filed on or after
10025 December 1, 2015.

10026 (2) In any deliberations involving a certificate of need application
10027 filed on or before June 30, 2027, pursuant to section 19a-638 that involves
10028 the transfer of ownership of a hospital, the unit shall, in addition to the
10029 guidelines and principles set forth in subsection (a) of this section and
10030 those prescribed through regulation pursuant to subsection (c) of this
10031 section, take into consideration and make written findings concerning
10032 each of the following guidelines and principles:

10033 (A) Whether the applicant fairly considered alternative proposals or
10034 offers in light of the purpose of maintaining health care provider
10035 diversity and consumer choice in the health care market and access to
10036 affordable quality health care for the affected community; and

10037 (B) Whether the plan submitted pursuant to section 19a-639a
10038 demonstrates, in a manner consistent with this chapter, how health care
10039 services will be provided by the new hospital for the first three years
10040 following the transfer of ownership of the hospital, including any
10041 consolidation, reduction, elimination or expansion of existing services
10042 or introduction of new services.

10043 (3) The unit shall deny any certificate of need application involving a
10044 transfer of ownership of a hospital unless the commissioner finds that
10045 the affected community will be assured of continued access to high
10046 quality and affordable health care after accounting for any proposed
10047 change impacting hospital staffing.

10048 (4) The unit may deny any certificate of need application involving a
10049 transfer of ownership of a hospital subject to a cost and market impact
10050 review pursuant to section 19a-639f if the commissioner finds that (A)

10051 the affected community will not be assured of continued access to high
10052 quality and affordable health care after accounting for any consolidation
10053 in the hospital and health care market that may lessen health care
10054 provider diversity, consumer choice and access to care, and (B) any
10055 likely increases in the prices for health care services or total health care
10056 spending in the state may negatively impact the affordability of care.

10057 (5) The unit may place any conditions on the approval of a certificate
10058 of need application involving a transfer of ownership of a hospital
10059 consistent with the provisions of this chapter. Before placing any such
10060 conditions, the unit shall weigh the value of such conditions in
10061 promoting the purposes of this chapter against the individual and
10062 cumulative burden of such conditions on the transacting parties and the
10063 new hospital. For each condition imposed, the unit shall include a
10064 concise statement of the legal and factual basis for such condition and
10065 the provision or provisions of this chapter that it is intended to promote.
10066 Each condition shall be reasonably tailored in time and scope. The
10067 transacting parties or the new hospital shall have the right to make a
10068 request to the unit for an amendment to, or relief from, any condition
10069 based on changed circumstances, hardship or for other good cause.

10070 (6) In any deliberations involving a certificate of need application
10071 filed pursuant to section 19a-638 that involves the transfer of ownership
10072 of a hospital and is subject to a cost and market impact review, the unit
10073 may consider (A) the preliminary report and response to the
10074 preliminary report, (B) the final report, and (C) any written comments
10075 from the parties regarding the reports issued or submitted as part of the
10076 review. The unit shall not place the preliminary report in the public
10077 record until the transacting parties have had an opportunity to respond
10078 to the findings of the preliminary report pursuant to subsection (f) of
10079 section 19a-639f.

10080 (e) (1) If the certificate of need application filed on or before June 30,
10081 2027, (A) involves the transfer of ownership of a hospital, (B) the
10082 purchaser is a hospital, as defined in section 19a-490, whether located
10083 within or outside the state, that had net patient revenue for fiscal year

2013 in an amount greater than one billion five hundred million dollars or a hospital system, as defined in section 19a-486i, whether located within or outside the state, that had net patient revenue for fiscal year 2013 in an amount greater than one billion five hundred million dollars, or any person that is organized or operated for profit, and (C) such application is approved, the unit shall hire an independent consultant to serve as a post-transfer compliance reporter for a period of three years after completion of the transfer of ownership of the hospital. Such reporter shall, at a minimum: (i) Meet with representatives of the purchaser, the new hospital and members of the affected community served by the new hospital not less than quarterly; and (ii) report to the unit not less than quarterly concerning (I) efforts the purchaser and representatives of the new hospital have taken to comply with any conditions the unit placed on the approval of the certificate of need application and plans for future compliance, and (II) community benefits and uncompensated care provided by the new hospital. The purchaser shall give the reporter access to its records and facilities for the purposes of carrying out the reporter's duties. The purchaser shall hold a public hearing in the municipality in which the new hospital is located not less than annually during the reporting period to provide for public review and comment on the reporter's reports and findings.

(2) If the reporter finds that the purchaser has breached a condition of the approval of the certificate of need application, the unit may, in consultation with the purchaser, the reporter and any other interested parties it deems appropriate, implement a performance improvement plan designed to remedy the conditions identified by the reporter and continue the reporting period for up to one year following a determination by the unit that such conditions have been resolved.

(3) The purchaser shall provide funds, in an amount determined by the unit not to exceed two hundred thousand dollars annually, for the hiring of the post-transfer compliance reporter.

Sec. 241. Section 19a-639a of the general statutes is repealed and the following is substituted in lieu thereof (*Effective October 1, 2026*):

10117 (a) [An] On or before June 30, 2027, an application for a certificate of
10118 need shall be filed with the unit in accordance with the provisions of this
10119 section and any regulations adopted by the Office of Health Strategy.
10120 The application shall address the guidelines and principles set forth in
10121 (1) subsection (a) of section 19a-639, and (2) regulations adopted by the
10122 department. The applicant shall include with the application a
10123 nonrefundable application fee based on the cost of the project. The
10124 amount of the fee shall be as follows: (A) One thousand dollars for a
10125 project that will cost not greater than fifty thousand dollars; (B) two
10126 thousand dollars for a project that will cost greater than fifty thousand
10127 dollars but not greater than one hundred thousand dollars; (C) three
10128 thousand dollars for a project that will cost greater than one hundred
10129 thousand dollars but not greater than five hundred thousand dollars;
10130 (D) four thousand dollars for a project that will cost greater than five
10131 hundred thousand dollars but not greater than one million dollars; (E)
10132 five thousand dollars for a project that will cost greater than one million
10133 dollars but not greater than five million dollars; (F) eight thousand
10134 dollars for a project that will cost greater than five million dollars but
10135 not greater than ten million dollars; and (G) ten thousand dollars for a
10136 project that will cost greater than ten million dollars.

10137 (b) Prior to the filing of a certificate of need application pursuant to
10138 subsection (a) of this section, the applicant shall (1) publish notice that
10139 an application is to be submitted to the unit (A) in a newspaper having
10140 a substantial circulation in the area where the project is to be located,
10141 and (B) on the applicant's Internet web site in a clear and conspicuous
10142 location that is easily accessible by members of the public, (2) request
10143 the publication of notice (A) in at least two sites within the affected
10144 community that are commonly accessed by the public, such as a town
10145 hall or library, and (B) on any existing Internet web site of the
10146 municipality or local health department, and (3) submit such notice to
10147 the unit for posting on such unit's Internet web site. Such newspaper
10148 notice shall be published for not less than three consecutive days, with
10149 the final date of consecutive publication occurring not later than twenty
10150 days prior to the date of filing of the certificate of need application, and

10151 contain a brief description of the nature of the project and the street
10152 address where the project is to be located. Postings in the affected
10153 community and on the applicant's Internet web site shall remain until
10154 the decision on the application is rendered. The unit shall not invalidate
10155 any notice due to changes or removal of the notice from a community
10156 Internet web site of which the applicant has no control. An applicant
10157 shall file the certificate of need application with the unit not later than
10158 ninety days after publishing notice of the application in a newspaper in
10159 accordance with the provisions of this subsection. The unit shall not
10160 accept the applicant's certificate of need application for filing unless the
10161 application is accompanied by the application fee prescribed in
10162 subsection (a) of this section and proof of compliance with the
10163 publication requirements prescribed in this subsection.

10164 (c) (1) Not later than five business days after receipt of a properly filed
10165 certificate of need application under this section, the unit shall publish
10166 notice of the application on its Internet web site. Not later than thirty
10167 days after the date of filing of the application, the unit may request such
10168 additional information as the unit determines necessary to complete the
10169 application. In addition to any information requested by the unit, if the
10170 application involves the transfer of ownership of a hospital, as defined
10171 in section 19a-639, the applicant shall submit to the unit (A) a plan
10172 demonstrating how health care services will be provided by the new
10173 hospital for the first three years following the transfer of ownership of
10174 the hospital, including any consolidation, reduction, elimination or
10175 expansion of existing services or introduction of new services, and (B)
10176 the names of persons currently holding a position with the hospital to
10177 be purchased or the purchaser, as defined in section 19a-639, as an
10178 officer, director, board member or senior manager, whether or not such
10179 person is expected to hold a position with the hospital after completion
10180 of the transfer of ownership of the hospital and any salary, severance,
10181 stock offering or any financial gain, current or deferred, such person is
10182 expected to receive as a result of, or in relation to, the transfer of
10183 ownership of the hospital.

10184 (2) The applicant shall, not later than sixty days after the date of the
10185 unit's request, submit any requested information and any information
10186 required under this subsection to the unit. If an applicant fails to submit
10187 such information to the unit within the sixty-day period, the unit shall
10188 consider the application to have been withdrawn.

10189 (3) The unit shall make reasonable efforts to limit the requests for
10190 additional information to two such requests and, in all cases, cease all
10191 requests for additional information not later than six months after
10192 receiving the application.

10193 (d) Upon deeming an application filed under this section complete,
10194 the unit shall provide notice of this determination to the applicant and
10195 to the public in accordance with regulations adopted by the department.
10196 In addition, the unit shall post such notice on its Internet web site and
10197 notify the applicant not later than five days after deeming the
10198 application complete. The date on which the unit posts such notice on
10199 its Internet web site shall begin the review period. Except as provided
10200 in this subsection, (1) the review period for an application deemed
10201 complete shall be ninety days from the date on which the unit posts such
10202 notice on its Internet web site; and (2) the unit shall issue a decision on
10203 an application deemed complete prior to the expiration of the ninety-
10204 day review period in matters without a public hearing. The review
10205 period for an application deemed complete that involves a transfer of a
10206 large group practice, as described in subdivision (3) of subsection (a) of
10207 section 19a-638, when the offer was made in response to a request for
10208 proposal or similar voluntary offer for sale, shall be sixty days from the
10209 date on which the unit posts notice on its Internet web site. Upon request
10210 or for good cause shown, the unit may extend the review period for a
10211 period of time not to exceed sixty days. If the review period is extended,
10212 the unit shall issue a decision on the completed application prior to the
10213 expiration of the extended review period. If the unit holds a public
10214 hearing concerning a completed application in accordance with
10215 subsection (e) or (f) of this section, the unit shall issue a decision on the
10216 completed application not later than sixty days after the date the unit

10217 closes the public hearing record.

10218 (e) Except as provided in this subsection, the unit shall hold a public
10219 hearing on a [properly filed and completed] certificate of need
10220 application properly filed and completed under this section if three or
10221 more individuals or an individual representing an entity with five or
10222 more people submits a request, in writing, that a public hearing be held
10223 on the application. For a [properly filed and completed] certificate of
10224 need application properly filed and completed under this section
10225 involving a transfer of ownership of a large group practice, as described
10226 in subdivision (3) of subsection (a) of section 19a-638, when an offer was
10227 made in response to a request for proposal or similar voluntary offer for
10228 sale, a public hearing shall be held if twenty-five or more individuals or
10229 an individual representing twenty-five or more people submits a
10230 request, in writing, that a public hearing be held on the application. Any
10231 request for a public hearing shall be made to the unit not later than thirty
10232 days after the date the unit deems the application to be complete.

10233 (f) (1) The unit shall hold a public hearing with respect to each
10234 certificate of need application filed pursuant to section 19a-638, after
10235 December 1, 2015, and on or before June 30, 2027, that concerns any
10236 transfer of ownership involving a hospital. Such hearing shall be held in
10237 the municipality in which the hospital that is the subject of the
10238 application is located.

10239 (2) The unit may hold a public hearing with respect to any certificate
10240 of need application submitted under this [chapter] section. The unit
10241 shall provide not less than two weeks' advance notice to the applicant,
10242 in writing, and to the public by publication in a newspaper having a
10243 substantial circulation in the area served by the health care facility or
10244 provider. In conducting its activities under this chapter, the unit may
10245 hold hearings with respect to applications of a similar nature at the same
10246 time. The applicant shall post a copy of the unit's hearing notice on the
10247 applicant's Internet web site in a clear and conspicuous location that is
10248 easily accessible by members of the public. Such applicant shall request
10249 the publication of notice in at least two sites within the affected

10250 community that are commonly accessed by the public, such as a town
10251 hall or library, as well as on any existing Internet web site of the
10252 municipality or local health department. The unit shall not invalidate
10253 any notice due to changes or removal of the notice from a community
10254 Internet web site of which the applicant has no control.

10255 (g) For applications submitted on or after October 1, 2023, and on or
10256 before June 30, 2027, the unit may retain an independent consultant with
10257 expertise in the specific area of health care that is the subject of the
10258 application filed by an applicant if the review and analysis of an
10259 application cannot reasonably be conducted by the unit without the
10260 expertise of an industry analyst or other actuarial consultant. The unit
10261 shall submit bills for independent consultant services to the applicant.
10262 Such applicant shall pay such bills not later than thirty days after receipt
10263 of such bills. Such bills shall be a reasonable amount per application.
10264 The provisions of chapter 57 and sections 4-212 to 4-219, inclusive, and
10265 4e-19 shall not apply to any retainer agreement executed pursuant to
10266 this subsection.

10267 [(h) The Commissioner of Health Strategy may implement policies
10268 and procedures necessary to administer the provisions of this section
10269 while in the process of adopting such policies and procedures as
10270 regulation, provided the commissioner holds a public hearing prior to
10271 implementing the policies and procedures and posts notice of intent to
10272 adopt regulations on the office's Internet web site and the eRegulations
10273 System not later than twenty days after the date of implementation.
10274 Policies and procedures implemented pursuant to this section shall be
10275 valid until the time final regulations are adopted.]

10276 Sec. 242. Section 19a-639b of the general statutes is repealed and the
10277 following is substituted in lieu thereof (*Effective October 1, 2026*):

10278 (a) A certificate of need issued under section 19a-638a shall be valid
10279 only for the project described in the application. A certificate of need
10280 issued under said section shall be valid for two years from the date of
10281 issuance by the unit. During the period of time that such certificate is

10282 valid and the thirty-day period following the expiration of the
10283 certificate, the holder of the certificate shall provide the unit with such
10284 information as the unit may request on the development of the project
10285 covered by the certificate.

10286 (b) [Upon] On or before June 30, 2027, upon request from a certificate
10287 holder, the unit may extend the duration of a certificate of need for such
10288 additional period of time as the unit determines is reasonably necessary
10289 to expeditiously complete the project. Not later than five business days
10290 after receiving a request to extend the duration of a certificate of need,
10291 the unit shall post such request on its web site. Any person who wishes
10292 to comment on extending the duration of the certificate of need shall
10293 provide written comments to the unit on the requested extension not
10294 later than thirty days after the date the unit posts notice of the request
10295 for an extension of time on its web site. The unit shall hold a public
10296 hearing on any request to extend the duration of a certificate of need
10297 made under this subsection if three or more individuals or an individual
10298 representing an entity with five or more people submits a request, in
10299 writing, that a public hearing be held on the request to extend the
10300 duration of a certificate of need.

10301 (c) [In] On or before June 30, 2027, in the event that the unit
10302 determines that: (1) Commencement, construction or other preparation
10303 has not been substantially undertaken during a valid certificate of need
10304 period; or (2) the certificate holder has not made a good-faith effort to
10305 complete the project as approved, the unit may withdraw, revoke or
10306 rescind the certificate of need.

10307 (d) [A] On or before June 30, 2027, a certificate of need shall not be
10308 transferable or assignable nor shall a project be transferred from a
10309 certificate holder to another person.

10310 (e) The Commissioner of Health Strategy may implement policies
10311 and procedures necessary to administer the provisions of this section
10312 while in the process of adopting such policies and procedures as
10313 regulation, provided the commissioner holds a public hearing prior to

10314 implementing the policies and procedures and posts notice of intent to
10315 adopt regulations on the office's Internet web site and the eRegulations
10316 System not later than twenty days after the date of implementation.
10317 Policies and procedures implemented pursuant to this section shall be
10318 valid until the time final regulations are adopted.

10319 Sec. 243. Subsection (a) of section 19a-639c of the general statutes is
10320 repealed and the following is substituted in lieu thereof (*Effective October*
10321 *1, 2026*):

10322 (a) [Any] On or before June 30, 2027, any health care facility that
10323 proposes to relocate a facility shall submit a letter to the unit, as
10324 described in subsection (c) of section 19a-638. In addition to the
10325 requirements prescribed in said subsection (c), in such letter the health
10326 care facility shall demonstrate to the satisfaction of the unit that the
10327 population served by the health care facility and the payer mix will not
10328 substantially change as a result of the facility's proposed relocation. If
10329 the facility is unable to demonstrate to the satisfaction of the unit that
10330 the population served and the payer mix will not substantially change
10331 as a result of the proposed relocation, the health care facility shall apply
10332 for certificate of need approval pursuant to subdivision (1) of subsection
10333 (a) of section 19a-638, in order to effectuate the proposed relocation. The
10334 unit shall provide a determination not later than thirty days after receipt
10335 of such letter.

10336 Sec. 244. Subsections (a) to (c), inclusive, of section 19a-639e of the
10337 general statutes are repealed and the following is substituted in lieu
10338 thereof (*Effective October 1, 2026*):

10339 (a) Unless otherwise required to file a certificate of need application
10340 pursuant to the provisions of subsection (a) of section 19a-638, any
10341 health care facility that proposes on or before June 30, 2027, to terminate
10342 a service that was authorized pursuant to a certificate of need issued
10343 under [this chapter] section 19a-638a shall file a modification request
10344 with the unit not later than sixty days prior to the proposed date of the
10345 termination of the service. The unit may request additional information

10346 from the health care facility as necessary to process the modification
10347 request. In addition, the unit shall hold a public hearing on any request
10348 from a health care facility to terminate a service pursuant to this section
10349 if three or more individuals or an individual representing an entity with
10350 five or more people submits a request, in writing, that a public hearing
10351 be held on the health care facility's proposal to terminate a service.

10352 (b) Unless otherwise required to file a certificate of need application
10353 pursuant to the provisions of subsection (a) of section 19a-638, any
10354 health care facility that proposes on or before June 30, 2027, to terminate
10355 all services offered by such facility, that were authorized pursuant to
10356 one or more certificates of need issued under [this chapter] section 19a-
10357 639a, shall provide notification to the unit not later than sixty days prior
10358 to the termination of services and such facility shall surrender its
10359 certificate of need not later than thirty days prior to the termination of
10360 services.

10361 (c) Unless otherwise required to file a certificate of need application
10362 pursuant to the provisions of subsection (a) of section 19a-638, any
10363 health care facility that proposes on or before June 30, 2027, to terminate
10364 the operation of a facility or service for which a certificate of need was
10365 not obtained shall notify the unit not later than sixty days prior to
10366 terminating the operation of the facility or service.

10367 Sec. 245. Subsections (a) and (b) of section 19a-639f of the general
10368 statutes are repealed and the following is substituted in lieu thereof
10369 (*Effective October 1, 2026*):

10370 (a) The Health Systems Planning Unit of the Office of Health Strategy
10371 shall conduct a cost and market impact review in each case where (1) an
10372 application for a certificate of need filed on or before June 30, 2027,
10373 pursuant to section 19a-638 involves the transfer of ownership of a
10374 hospital, as defined in section 19a-639, and (2) the purchaser in a
10375 transaction occurring on or before June 30, 2027, is a hospital, as defined
10376 in section 19a-490, whether located within or outside the state, that had
10377 net patient revenue for fiscal year 2013 in an amount greater than one

10378 billion five hundred million dollars, or a hospital system, as defined in
10379 section 19a-486i, whether located within or outside the state, that had
10380 net patient revenue for fiscal year 2013 in an amount greater than one
10381 billion five hundred million dollars or any person that is organized or
10382 operated for profit.

10383 (b) Not later than twenty-one days after receipt of a properly filed
10384 certificate of need application involving the transfer of ownership of a
10385 hospital filed on or after December 1, 2015, and on or before June 30,
10386 2027, as described in subsection (a) of this section, the unit shall initiate
10387 such cost and market impact review by sending the transacting parties
10388 a written notice that shall contain a description of the basis for the cost
10389 and market impact review as well as a request for information and
10390 documents. Not later than thirty days after receipt of such notice, the
10391 transacting parties shall submit to the unit a written response. Such
10392 response shall include, but need not be limited to, any information or
10393 documents requested by the unit concerning the transfer of ownership
10394 of the hospital. The unit shall have the powers with respect to the cost
10395 and market impact review as provided in section 19a-633.

10396 Sec. 246. Section 19a-641 of the general statutes is repealed and the
10397 following is substituted in lieu thereof (*Effective October 1, 2026*):

10398 Any health care facility or institution and any state health care facility
10399 or institution aggrieved by any final decision of said unit issued on an
10400 application filed on or before June 30, 2027, under the provisions of
10401 sections 19a-630 to 19a-639e, inclusive, may appeal from such decision
10402 in accordance with the provisions of section 4-183, except venue shall be
10403 in the judicial district in which it is located. Such appeal shall have
10404 precedence in respect to order of trial over all other cases except writs
10405 of habeas corpus, actions brought by or on behalf of the state, including
10406 information on the relation of private individuals, and appeals from
10407 awards or decisions of administrative law judges.

10408 Sec. 247. Subsection (b) of section 9 of house bill 5003 of the current
10409 session, as amended by House Amendment Schedule "A", is repealed

10410 and the following is substituted in lieu thereof (*Effective July 1, 2027*):

10411 (b) (1) (A) Not later than fifteen days prior to (i) the termination or
10412 nonrenewal of any service contract, (ii) the start of a successor service
10413 contract for services previously performed by the awarding authority's
10414 own employees, or (iii) the sale or transfer of any property where
10415 employees were employed at any time during the ninety-day period
10416 preceding such sale or transfer of such property, the awarding authority
10417 shall, where applicable, give advance notice to a terminated contractor,
10418 the employees of such terminated contractor and the exclusive
10419 bargaining representative of any of the terminated contractor's
10420 employees, of the termination or nonrenewal of such service contract,
10421 successor service contract for such services or the sale or transfer of such
10422 property. Such notice shall be provided in writing to each affected
10423 employee and be posted in a conspicuous place at the worksite. The
10424 awarding authority shall provide the terminated contractor, employees
10425 of such terminated contractor and the exclusive bargaining
10426 representative of any of the terminated contractor's employees with the
10427 name, telephone number and address of the successor employer or
10428 employers, if known.

10429 (B) The terminated contractor shall, not later than three days after
10430 receipt of such notice, provide the successor employer with the name,
10431 date of hire and employment occupation classification of each employee
10432 employed by the terminated contractor at the site or sites covered by the
10433 service contract or contract to sell or transfer property as of the date the
10434 terminated contractor receives such notice.

10435 (2) On the date (A) the service contract terminates, (B) the successor
10436 service contract for services previously performed by the awarding
10437 authority's own employees begins, or (C) the sale or transfer of property
10438 occurs, the terminated contractor shall provide the successor employer
10439 with updated information concerning the name, date of hire and
10440 employment occupation classification of each employee employed by
10441 the terminated contractor at the site or sites covered by the service
10442 contract or the contract to sell or transfer property, to ensure that such

10443 information is current up to the actual date of (i) service contract
10444 termination, (ii) successor service contract start, or (iii) the sale or
10445 transfer of property.

10446 (3) If the awarding authority fails to notify the terminated contractor
10447 of the identity of the successor employer, as required by subdivision (1)
10448 of this subsection, the terminated contractor shall provide the
10449 information described in subdivision (2) of this subsection to the
10450 awarding authority not later than three days after receiving notice from
10451 the awarding authority pursuant to subdivision (1) of this subsection.
10452 The awarding authority shall be responsible for providing such
10453 information to the successor employer as soon as the successor
10454 employer has been selected.

10455 (4) (A) Except as provided in [subparagraphs (D) and (E)]
10456 subparagraph (D) of this subdivision, a successor employer shall retain,
10457 for at least ninety days from the date of first performance of services (i)
10458 under the successor service contract, or (ii) following the date of the sale
10459 or transfer of a property, all of the employees who were continuously
10460 employed by the terminated contractor at the site or sites covered by the
10461 service contract or the contract to sell or transfer property during the
10462 ninety-day period immediately preceding the termination or
10463 nonrenewal of such service contract, start of the successor service
10464 contract or sale or transfer of such property, including any periods of
10465 layoff or leave with recall rights.

10466 (B) Except as provided in [subparagraphs (D) and (E)] subparagraph
10467 (D) of this subdivision, if the successor service contract is terminated
10468 prior to the expiration of such ninety-day period, then any successor
10469 employer awarded a subsequent successor service contract shall be
10470 bound by the requirements set forth in this subsection to retain, for a
10471 new ninety-day period commencing with the onset of the subsequent
10472 successor service contract, all of the employees who were previously
10473 employed by any one or more of the terminated contractors at the site
10474 or sites covered by the service contract or contract to sell or transfer
10475 property continuously during the ninety-day period immediately

10476 preceding the date of the most recently terminated service contract,
10477 including any periods of layoff or leave with recall rights.

10478 (C) At least five days prior to the termination of a service contract, or
10479 at least fifteen days prior to the commencement of the first performance
10480 of service (i) under a successor service contract, or (ii) following the date
10481 of the sale or transfer of a property, whichever is later, the successor
10482 employer shall hand-deliver a written offer of employment in
10483 substantially the form set forth below to each such employee in such
10484 employee's native language or any other language in which such
10485 employee is fluent:

10486 "IMPORTANT INFORMATION REGARDING YOUR
10487 EMPLOYMENT

10488 To: (Name of employee)

10489 We have received information that you are employed by (name of
10490 terminated contractor) and are currently performing work at
10491 (address of worksite) (name of terminated contractor's) contract to
10492 perform (describe services under contract) at (address of worksite)
10493 will terminate as of (last day of predecessor contract or date of the
10494 sale or transfer of property) and it will no longer be providing those
10495 services as of that date.

10496 We are (name of successor employer) and have been hired to
10497 provide services similar to those of or have purchased or acquired the
10498 property of (name of terminated contractor) at (address of
10499 worksite). We are offering you a job with us for a ninety-day transition
10500 period starting (first day of successor contract or date of the start of
10501 services following the sale or transfer of property) to perform the same
10502 type of work that you have already been doing for (name of
10503 terminated contractor) under the following terms:

10504 Payrate (per hour): \$....

10505 Hours per shift:

10506 Total hours per week:

10507 Benefits:

10508 You must respond to this offer within the next ten days. If you want
10509 to continue working at (address of worksite) you must let us know
10510 by (no later than ten days after the date of this letter). If we do not
10511 receive your response by the end of business that day, we will not hire
10512 you and you will lose your job. We can be reached at (successor
10513 employer telephone number).

10514 Connecticut state law gives you the following rights:

10515 1. You have the right with certain exceptions, to be hired by our
10516 company for the first ninety days that we begin to provide services at
10517 (address of worksite).

10518 2. During this ninety-day period, you cannot be fired without just
10519 cause.

10520 3. If you believe that you have been fired or laid off in violation of this
10521 law, you have the right to sue us or file a complaint with the Labor
10522 Commissioner and be awarded back pay, attorneys' fees and court costs.

10523 From: (Name of successor employer)

10524 (Address of successor employer)

10525 (Telephone number of successor employer)"

10526 Each offer of employment shall state the time within which such
10527 employee must accept such offer but in no case shall that time be less
10528 than ten days from the date of the offer of employment.

10529 [(D) The provisions of subparagraphs (A) and (B) of this subdivision
10530 shall not be construed to require a successor employer to retain any
10531 employee whose attendance and performance records, while working
10532 under the terminated service contract, would lead a reasonably prudent

10533 employer to terminate the employee.]

10534 [(E)] (D) For the purchase or acquisition of property by a successor
10535 employer, the provisions of subparagraphs (A) and (B) of this
10536 subdivision shall only apply when the services to be performed at the
10537 site or sites covered by the contract to sell or transfer property are
10538 substantially the same as services previously provided by the
10539 terminated contractor's employees.

10540 (5) If at any time a successor employer determines that fewer
10541 employees are required to perform (A) the successor service contract, or
10542 (B) services at the purchased or acquired property than were required
10543 by the terminated contractor, the successor employer shall be required
10544 to retain such employees by seniority within each job classification,
10545 based upon the employees' total length of service at the affected site or
10546 sites.

10547 (6) During such ninety-day period, the successor employer shall
10548 maintain a preferential hiring list of employees eligible for retention
10549 pursuant to subdivision (4) of this subsection, who were not initially
10550 retained by the successor employer, from which the successor contractor
10551 shall hire additional employees, if necessary.

10552 (7) Except as provided under subdivision (5) of this subsection,
10553 during such ninety-day period, the successor employer shall not
10554 discharge without just cause an employee retained pursuant to this
10555 section. For purposes of this subdivision, "just cause" shall be
10556 determined solely by the performance or conduct of the particular
10557 employee.

10558 (8) After such ninety-day period, the successor employer shall
10559 provide each employee retained pursuant to this section a performance
10560 evaluation. If the performance of such employee is satisfactory during
10561 the ninety-day period, the successor employer shall offer the employee
10562 continued employment under the terms and conditions established by
10563 the successor employer, or as required by law.

10564 (9) The provisions of this subsection shall not be construed to prevent
10565 a terminated contractor from taking disciplinary action against an
10566 employee, to the extent permissible by law or such employee's collective
10567 bargaining agreement, including, but not limited to, termination, prior
10568 to (A) the start of the successor service contract, or (B) the successor
10569 employer assuming control of the site or sites covered by the contract to
10570 sell or transfer property, if such employee's attendance or performance
10571 records, while working under the terminated contract, would lead a
10572 reasonably prudent employer to take similar disciplinary action.

10573 Sec. 248. (NEW) (*Effective from passage*) Not later than January 1, 2027,
10574 and annually thereafter, the Commissioner of Social Services shall
10575 report, in accordance with the provisions of section 11-4a of the general
10576 statutes, to the joint standing committees of the General Assembly
10577 having cognizance of matters relating to appropriations and the budgets
10578 of state agencies and public health regarding the collection of moneys
10579 for deposit in the hospital supplemental payment account and the use
10580 of funds in such account during the preceding calendar year.

10581 Sec. 249. (*Effective from passage*) (a) There is established a working
10582 group to study and provide recommendations for the establishment of
10583 a payroll tax program for employees in this state. Such study shall
10584 examine, but need not be limited to: (1) Considerations of mandatory or
10585 optional participation in such program, such as (A) whether such
10586 program should be (i) mandatory for employees and employers, (ii)
10587 optional for employees and mandatory for employers, (iii) optional for
10588 employers and mandatory for employees, or (iv) optional for employees
10589 and employers, (B) the role of union negotiations to determine program
10590 participation, and (C) the feasibility of allowing employees who have
10591 opted in to such program to opt out of such program; (2) payroll tax
10592 rates and tax credits for different wage levels; (3) statutory wage
10593 reductions for participation in such program; (4) methods to mitigate
10594 lower Social Security benefits that result from participation in such
10595 program, such as (A) payment of a state-administered retirement or
10596 income benefit for program participants, and (B) retirement account

10597 contributions paid by employers on behalf of employees, or paid by
10598 employees; (5) methods to mitigate any reductions in employer-
10599 provided retirement benefits resulting from lower reported salary, such
10600 as adjustments to pension calculations and employer retirement account
10601 contributions; (6) any administrative requirements of the Department of
10602 Revenue Services in implementing such program; (7) any
10603 administrative requirements of employers participating in such
10604 program; and (8) assuming mandatory participation of employees and
10605 employers, any financial impact that such program may have on state
10606 revenue, employee net wages and employer payroll expenses.

10607 (b) The working group shall consist of the following members:

10608 (1) Two appointed by the president pro tempore of the Senate, one of
10609 whom shall be a chairperson of the working group, and one of whom
10610 shall be a representative of a labor organization;

10611 (2) Two appointed by the speaker of the House of Representatives,
10612 one of whom shall be a chairperson of the working group, and one of
10613 whom shall be an executive from a payroll services company doing
10614 business in this state;

10615 (3) One appointed by the majority leader of the Senate, who shall be
10616 an attorney with experience in legal issues related to pensions in this
10617 state;

10618 (4) One appointed by the majority leader of the House of
10619 Representatives, who shall be an attorney with experience in tax law in
10620 this state;

10621 (5) One appointed by the minority leader of the Senate, who shall be
10622 a payroll administrator from an employer in this state that employs
10623 more than one hundred employees;

10624 (6) One appointed by the minority leader of the House of
10625 Representatives, who shall be a representative from a state-wide
10626 business association in this state;

10627 (7) The Commissioner of Revenue Services, or the commissioner's
10628 designee;

10629 (8) One representative of the office of the Governor;

10630 (9) The Secretary of the Office of Policy and Management, or the
10631 secretary's designee;

10632 (10) The State Treasurer, or the State Treasurer's designee; and

10633 (11) The House and Senate chairpersons of the joint standing
10634 committee of the General Assembly having cognizance of matters
10635 relating to finance, revenue and bonding, or their designees.

10636 (c) All initial appointments to the working group shall be made not
10637 later than thirty days after the effective date of this section. Any vacancy
10638 shall be filled by the appointing authority.

10639 (d) The chairpersons of the working group shall jointly schedule the
10640 first meeting of the working group, which shall be held not later than
10641 sixty days after the effective date of this section.

10642 (e) The administrative staff of the joint standing committee of the
10643 General Assembly having cognizance of matters relating to finance,
10644 revenue and bonding shall serve as administrative staff of the working
10645 group. The Office of Legislative Research shall assist the working group
10646 in conducting research related to the development of a payroll tax
10647 program, and the Office of Fiscal Analysis shall assist the working group
10648 in calculating costs associated with the development and
10649 implementation of any such payroll tax program.

10650 (f) Not later than January 1, 2027, the working group shall submit a
10651 report on its findings and recommendations to the joint standing
10652 committee of the General Assembly having cognizance of matters
10653 relating to finance, revenue and bonding, in accordance with the
10654 provisions of section 11-4a of the general statutes. The working group
10655 shall terminate on the date that it submits such report or January 1, 2027,

10656 whichever is later.

10657 Sec. 250. (NEW) (*Effective from passage*) There is established an account
10658 to be known as the "innocence project revolving loan account", which shall
10659 be a separate, nonlapsing account. The account shall contain any
10660 moneys required by law to be deposited in the account. Moneys in the
10661 account shall be expended by the Judicial Branch for the purposes of the
10662 provision of loans to claimants who may meet the qualifications for
10663 compensation pursuant to section 54-102uu of the general statutes.

10664 Sec. 251. (*Effective from passage*) The sum of \$400,000 of the amount
10665 appropriated in section 1 of public act 25-168, to the Judicial
10666 Department, for Legal Aid, for the fiscal year ending June 30, 2026, and
10667 the sum of \$500,000 of the amount appropriated in section 1 of public
10668 act 25-168, to the Judicial Department, for Legal Aid, for the fiscal year
10669 ending June 30, 2027, shall be transferred to the innocence project
10670 revolving loan account established in section 250 of this act.

10671 Sec. 252. Subdivision (3) of subsection (a) of section 9-369b of the
10672 general statutes is repealed and the following is substituted in lieu
10673 thereof (*Effective October 1, 2026*):

10674 (3) (A) (i) For purposes of this [subdivision] subparagraph,
10675 "community notification system" means a communication system
10676 maintained by a municipality that is available to all residents of such
10677 municipality and permits any resident to opt to receive notifications of
10678 community events or news from such municipality via electronic mail,
10679 text, telephone or other electronic or automated means.

10680 [(B)] (ii) At the direction of the chief elected official of a municipality
10681 or, with respect to a referendum called for by a regional school district,
10682 the request of the chairperson of the regional school board of education
10683 having jurisdiction over such municipality included in such regional
10684 school district, a municipality that maintains a community notification
10685 system may use such system to send or publish a notice informing all
10686 residents enrolled in such system of an upcoming referendum

10687 pertaining to such municipality or regional school district, as applicable.
10688 Such notice shall be limited to [(i)] (I) the time and location of such
10689 referendum, [(ii)] (II) a statement of the question as it is to appear on the
10690 ballot at the referendum, and [(iii)] (III) if applicable, the explanatory
10691 text or other material approved in accordance with subdivision (1) or (2)
10692 of this subsection. Any such notice shall not advocate the approval or
10693 disapproval of the proposal or question or attempt to influence or aid
10694 the success or defeat of the referendum.

10695 (iii) An Internet web site maintained by a municipality or a regional
10696 school district shall not be deemed a community notification system for
10697 the purposes of this subparagraph, but may contain a notice with the
10698 information described in subparagraph (A)(ii) of this subdivision.

10699 (B) The superintendent of schools for a school district may
10700 disseminate a written notice through the schools within such school
10701 district for the purpose of informing the parents or legal guardians of
10702 students enrolled in such schools of an upcoming referendum
10703 pertaining to such school district. Such written notice shall be limited to
10704 (i) the time and location of such referendum, (ii) a statement of the
10705 question as it is to appear on the ballot at the referendum, and (iii) if
10706 applicable, the explanatory text or other material approved in
10707 accordance with subdivision (1) or (2) of this subsection. Any such
10708 notice shall not advocate the approval or disapproval of the proposal or
10709 question or attempt to influence or aid the success or defeat of the
10710 referendum.

10711 (C) Other than a notice authorized by this subdivision, no person may
10712 use or authorize the use of municipal funds to send an unsolicited
10713 communication to a group of residents regarding a referendum via
10714 electronic mail, text, telephone or other electronic or automated means
10715 for the purpose of reminding or encouraging such residents to vote in a
10716 referendum, provided such prohibition shall not apply to a regularly
10717 published newsletter or similar publication.

10718 [(D) An Internet web site maintained by a municipality or a regional

10719 school district shall not be deemed a community notification system for
10720 the purposes of this subdivision, but may contain a notice with the
10721 information described in subparagraph (B) of this subdivision.]

10722 Sec. 253. (*Effective from passage*) Section 64 of house bill 5003 of the
10723 current session, as amended by House Amendment Schedule "A" shall
10724 take effect July 1, 2027.

10725 Sec. 254. (NEW) (*Effective July 1, 2026*) (a) For purposes of this section:

10726 (1) "Academic year" means the period of time beginning July first and
10727 ending on the succeeding June thirtieth.

10728 (2) "Authority" has the same meaning as provided in section 32-600
10729 of the general statutes.

10730 (3) "Excess net profits" means the remainder of net profits, as defined
10731 in subdivision (5) of this subsection, on an annual basis, from the
10732 operation of the PeoplesBank Arena in excess of four million dollars.

10733 (4) "Facility management agreement" means the agreement between
10734 the authority and a qualified operator, dated August 16, 2024, relating
10735 to the management of the PeoplesBank Arena.

10736 (5) "Net profits" has the same meaning as provided in the facility
10737 management agreement, as amended from time to time.

10738 (6) "PeoplesBank Arena" means the civic center and coliseum
10739 complex in the city of Hartford known as PeoplesBank Arena in
10740 Hartford and includes the adjoining parking garage owned by the
10741 authority that is located on Church Street in the city of Hartford.

10742 (7) "Qualified operator" means an entity, including any affiliate
10743 thereof, that executed the facility management agreement with the
10744 authority.

10745 (8) "Qualified agreement" means an agreement between a qualified
10746 operator and The University of Connecticut in which the qualified

10747 operator agrees to host, and The University of Connecticut commits to
10748 participate in, a minimum of twenty UConn athletic events each
10749 academic year at the PeoplesBank Arena for a term that commences not
10750 later than July 1, 2027, and ends not earlier than September 1, 2045,
10751 provided the minimum number of such athletic events may be reduced
10752 in any given academic year with the unanimous consent of the qualified
10753 operator, The University of Connecticut, the authority and the Secretary
10754 of the Office of Policy and Management.

10755 (9) "UConn athletic events" means University of Connecticut's men's
10756 and women's intercollegiate basketball games and men's intercollegiate
10757 hockey games.

10758 (b) Notwithstanding any provision of the general statutes, The
10759 University of Connecticut may enter into a qualified agreement with a
10760 qualified operator, which, in part, allows the qualified operator to claim
10761 a credit against the taxes imposed by chapter 219 of the general statutes.
10762 A qualified operator may claim a credit in the latter of (1) each of the
10763 first five academic years identified in the qualified agreement, or (2) the
10764 academic year commencing July 1, 2027, and the four successive
10765 academic years. The amount of the credit allowable for each of the first
10766 five academic years shall not exceed two million dollars for any
10767 academic year and the aggregate amount of the credits allowed under
10768 this section shall not exceed ten million dollars. If a qualified operator is
10769 eligible to claim a credit for an academic year under this section, such
10770 qualified operator shall claim the credit on its tax return due under
10771 section 12-414 of the general statutes, for the monthly period ending July
10772 thirty-first during such academic year.

10773 (c) (1) Any qualified agreement shall include a provision that requires
10774 a qualified operator to repay a prorated portion of any credit that such
10775 operator claimed under this section if such qualified operator fails to
10776 host twenty or more UConn athletic events at the PeoplesBank Arena
10777 during any academic year, due to a breach of the qualified agreement
10778 by such qualified operator. Any amount of any such credit that a
10779 qualified operator is required to repay shall be reported by such

10780 qualified operator on the tax return due under chapter 219 of the general
10781 statutes for the first monthly period ending after the issuance of a
10782 repayment voucher by the authority in accordance with the provisions
10783 of subsection (f) of this section. Such repayment shall constitute a final
10784 tax due to the state, subject to collection in accordance with the
10785 provisions of section 12-35 of the general statutes. A qualified agreement
10786 shall include a provision that requires any repayment attributable to
10787 future academic years to be accelerated to the current academic year,
10788 proportionate to the number of missed UConn athletic events of the
10789 twenty required UConn athletic events for an academic year, if, and
10790 when, the authority determines that the qualified operator is in breach
10791 of the qualified agreement and is unable or unwilling to host the
10792 minimum number of UConn athletic events in such future academic
10793 years.

10794 (2) A qualified agreement shall provide for the division of net profit
10795 or loss between the qualified operator and The University of
10796 Connecticut on an annual basis as follows: (A) The qualified operator
10797 shall be responsible for any net loss from the operation of the
10798 PeoplesBank Arena; and (B) The University of Connecticut shall be
10799 entitled to the share of net profit attributable to the first four million
10800 dollars of net profit, and any excess net profits, from the operation of the
10801 PeoplesBank Arena, in accordance with the schedule prescribed in
10802 subdivision (3) of this subsection.

10803 (3) A qualified agreement shall require a qualified operator to pay to
10804 The University of Connecticut the following percentages of net profit
10805 attributable to the first four million dollars of net profit, and to pay any
10806 excess net profits, from the operation of the PeoplesBank Arena:

10807 (A) For the first academic year in which the qualified operator is
10808 eligible to claim a credit under this section, ten per cent of the first four
10809 million dollars of net profit and five per cent of any excess net profits;

10810 (B) For the second academic year in which the qualified operator is
10811 eligible to claim a credit under this section, twenty per cent of the first

10812 four million dollars of net profit and ten per cent of any excess net
10813 profits;

10814 (C) For the third academic year in which the qualified operator is
10815 eligible to claim a credit under this section, thirty per cent of the first
10816 four million dollars of net profit and fifteen per cent of any excess net
10817 profits;

10818 (D) For the fourth academic year in which the qualified operator is
10819 eligible to claim a credit under this section, forty per cent of the first four
10820 million dollars of net profit and twenty per cent of any excess net profits;

10821 (E) For the fifth academic year in which the qualified operator is
10822 eligible to claim a credit under this section, fifty per cent of the first four
10823 million dollars of net profit and twenty-five per cent of any excess net
10824 profits;

10825 (F) For each academic year thereafter for the term of the qualified
10826 agreement, fifty per cent of the first four million dollars of net profit and
10827 twenty-five per cent of any excess net profits;

10828 (G) Provided that for academic years one to five, inclusive, of the
10829 qualified agreement, if the qualified operator fails to receive the
10830 applicable credit on or before the first day of the academic year, the
10831 amount of net profit subject to the foregoing percentages shall be
10832 prorated to reflect the portion of such academic year occurring on and
10833 after the qualified operator's receipt of such credit; and

10834 (H) Provided that for academic years six and thereafter for the term
10835 of the qualified agreement, the amount of net profit subject to the
10836 foregoing percentages shall be prorated only in the event the qualified
10837 operator has failed to receive ten million dollars in aggregate credits.

10838 (d) Any qualified agreement shall be executed not later than
10839 December 31, 2026, except that any amendment to such qualified
10840 agreement may be executed after December 31, 2026, provided any such
10841 qualified agreement or amendment thereto shall be subject to prior

10842 approval by the Secretary of the Office of Policy and Management and
10843 the authority.

10844 (e) If the amount of the credit allowed pursuant to this section
10845 exceeds a qualified operator's liability for the tax imposed under chapter
10846 219 of the general statutes, the Commissioner of Revenue Services shall
10847 treat such excess as an overpayment and shall refund the amount of
10848 such excess, without interest, to such qualified operator. The credit
10849 allowed under this section shall be claimed after all other credits have
10850 been claimed.

10851 (f) The Commissioner of Revenue Services may require confirmation,
10852 or other documentation, from the authority, confirming the qualified
10853 operator's eligibility for a tax credit claimed pursuant to subsection (b)
10854 of this section. If a qualified operator is required to repay any portion of
10855 a tax credit claimed pursuant to subsection (b) of this section, the
10856 authority shall issue a repayment voucher to such qualified operator not
10857 later than thirty days after the end of the academic year in which such
10858 repayment obligation arises. The authority shall provide a copy of any
10859 such repayment voucher to the Commissioner of Revenue Services and
10860 the Secretary of the Office of Policy and Management, and any other
10861 information requested by said commissioner or secretary.

10862 Sec. 255. Section 32-616b of the general statutes is repealed and the
10863 following is substituted in lieu thereof (*Effective July 1, 2026*):

10864 (a) Notwithstanding any provision of the general statutes, the
10865 authority may enter into one or more agreements for a project to
10866 renovate and reconstruct the XL Center. Any such agreement shall be
10867 entered into not later than December 31, 2025, except amendments
10868 thereto may be entered into after said date. Any such agreement or
10869 amendment shall be subject to the approval of the Secretary of the Office
10870 of Policy and Management.

10871 (b) Any such agreement shall provide that the authority, the state, or
10872 a combination thereof, shall contribute not more than one hundred

10873 twenty-five million dollars and the contractor shall contribute not less
10874 than twenty million dollars toward the costs of any renovation or
10875 reconstruction of the XL Center occurring after January 1, 2023. The
10876 value of any credit claimed in accordance with section 254 of this act
10877 shall not be applied toward such contribution amounts of the authority,
10878 the state or the contractor.

10879 Sec. 256. Subsection (a) of section 4-30a of the 2026 supplement to the
10880 general statutes is repealed and the following is substituted in lieu
10881 thereof (*Effective from passage*):

10882 (a) (1) (A) For the fiscal years commencing on or after July 1, 2017,
10883 and ending on or before June 30, 2024, all revenue in excess of three
10884 billion one hundred fifty million dollars received by the state each fiscal
10885 year from estimated and final payments of the personal income tax
10886 imposed under chapter 229 and the affected business entity tax imposed
10887 under section 12-699 shall be transferred by the Treasurer to a special
10888 fund to be known as the Budget Reserve Fund. On and after July 1, 2018,
10889 the threshold amount shall be adjusted annually by the compound
10890 annual growth rate of personal income in the state over the preceding
10891 five calendar years, using data reported by the United States Bureau of
10892 Economic Analysis.

10893 (B) For the fiscal year ending June 30, 2025, the threshold amount
10894 prescribed by subparagraph (A) of this subdivision shall be four billion
10895 seventy-nine million three hundred thousand dollars.

10896 (C) For the fiscal year ending June 30, 2026, the threshold amount
10897 prescribed by subparagraph (A) of this subdivision shall be [four billion
10898 seven hundred twenty-eight million six hundred thousand] five billion
10899 five hundred forty-two million three hundred thousand dollars.

10900 (D) For the fiscal year ending June 30, 2027, the threshold amount
10901 prescribed by subparagraph (A) of this subdivision shall be five billion
10902 two million five hundred thousand dollars. On and after July 1, [2026]
10903 2027, the threshold amount shall be adjusted annually by the compound

10904 annual growth rate of personal income in the state over the preceding
10905 five calendar years, using data reported by the United States Bureau of
10906 Economic Analysis.

10907 (2) The General Assembly may amend the threshold amount
10908 determined under subdivision (1) of this subsection, by vote of at least
10909 three-fifths of the members of each house of the General Assembly, due
10910 to changes in state or federal tax law or policy or significant adjustments
10911 to economic growth or tax collections.

10912 Sec. 257. Section 42 of public act 25-168 is repealed and the following
10913 is substituted in lieu thereof (*Effective from passage*):

10914 Not later than June 30, 2026, the Comptroller shall transfer [two
10915 hundred forty-four] one hundred fourteen million dollars of the
10916 resources of the General Fund for the fiscal year ending June 30, 2026, to
10917 be accounted for as revenue of the General Fund for the fiscal year
10918 ending June 30, 2027.

10919 Sec. 258. (*Effective from passage*) Not later than June 30, 2026, the
10920 Comptroller shall transfer two hundred thirty-three million seven
10921 hundred thousand dollars of the resources of the General Fund for the
10922 fiscal year ending June 30, 2026, to be accounted for as revenue of the
10923 General Fund for the fiscal year ending June 30, 2027.

10924 Sec. 259. (*Effective from passage*) Not later than June 30, 2026, the
10925 Comptroller shall transfer fifty million dollars of the resources of the
10926 General Fund for the fiscal year ending June 30, 2026, to the Federal Cuts
10927 Response Fund established pursuant to section 1 of special act 26-1.

10928 Sec. 260. Section 43 of public act 25-168 is repealed and the following
10929 is substituted in lieu thereof (*Effective from passage*):

10930 The following amounts shall be transferred from the resources of the
10931 General Fund to the Municipal Revenue Sharing Fund: (1) For the fiscal
10932 year ending June 30, 2026, [one hundred one million] eighty-seven
10933 million nine hundred thousand dollars, and (2) for the fiscal year ending

10934 June 30, 2027, [ninety] seventy-five million dollars.

10935 Sec. 261. (NEW) (*Effective from passage*) Notwithstanding the
10936 provisions of section 12-494 of the general statutes, for the fiscal years
10937 ending June 30, 2026, and June 30, 2027, the Comptroller shall not make
10938 the revenue transfer described in subsection (d) of section 12-494 of the
10939 general statutes.

10940 Sec. 262. Section 12-407e of the general statutes is repealed and the
10941 following is substituted in lieu thereof (*Effective from passage*):

10942 (a) [(1) From the third Sunday in August until the Saturday next
10943 succeeding, inclusive, during the period beginning July 1, 2004, and
10944 ending June 30, 2015, the provisions of this chapter shall not apply to
10945 sales of any article of clothing or footwear intended to be worn on or
10946 about the human body the cost of which article to the purchaser is less
10947 than three hundred dollars.

10948 (2) On and after July 1, 2015, from] From the third Sunday in August
10949 until the Saturday next succeeding, inclusive, the provisions of this
10950 chapter shall not apply to sales of any article of clothing or footwear,
10951 including cleated shoes, intended to be worn on or about the human
10952 body or to any backpack, the cost of which article or backpack to the
10953 purchaser is less than [one] three hundred dollars.

10954 (b) For the purposes of this section, clothing or footwear shall not
10955 include (1) any special clothing or footwear primarily designed for
10956 athletic activity or protective use and which is not normally worn except
10957 when used for the athletic activity or protective use for which it was
10958 designed, and (2) jewelry, handbags, luggage other than backpacks,
10959 umbrellas, wallets, watches and similar items carried on or about the
10960 human body but not worn on the body in the manner characteristic of
10961 clothing intended for exemption under this section.

10962 Sec. 263. (NEW) (*Effective from passage and applicable to income and*
10963 *taxable years commencing on or after January 1, 2026*) (a) As used in this
10964 section:

- 10965 (1) "Commissioner" means the Commissioner of Revenue Services;
- 10966 (2) "Department" means the Department of Revenue Services;
- 10967 (3) "Income year" means the income year or taxable year, as
10968 determined under chapter 207, 208 or 229 of the general statutes, as the
10969 case may be;
- 10970 (4) "Qualified small business" means an employer in the state that (A)
10971 is subject to tax under chapter 207, 208 or 229 of the general statutes, (B)
10972 employs fewer than fifty employees in the state on the date of its
10973 application under subsection (c) of this section, and (C) has adopted an
10974 individual coverage health reimbursement arrangement, as described in
10975 Section 9831(d) of the Internal Revenue Code, in lieu of a traditional
10976 employer-provided health insurance plan;
- 10977 (5) "Qualified contribution" means a contribution by a qualified small
10978 business toward a covered employee's individual coverage health
10979 reimbursement arrangement during the income year; and
- 10980 (6) "Covered employee" means an employee for whom the qualified
10981 small employer made a qualified contribution toward an individual
10982 coverage health reimbursement arrangement during the income year.
- 10983 (b) (1) There is established an individual coverage health
10984 reimbursement arrangement tax credit for qualified small businesses
10985 whereby a qualified small business may be allowed a tax credit against
10986 the taxes imposed under chapter 207, 208 or 229 of the general statutes,
10987 other than the liability imposed by section 12-707 of the general statutes.
- 10988 (2) The amount of the credit allowed for an income year shall be equal
10989 to the lesser of: (A) The sum of qualified contributions made by the
10990 qualified small business during the income year, or (B) one thousand
10991 dollars per covered employee. Any tax credit not used in the income
10992 year during which it was earned shall expire and shall not be
10993 refundable.

10994 (3) A credit under this section may be allowed to a qualified small
10995 business for the first income year during which the business offered an
10996 individual coverage health reimbursement arrangement and the
10997 immediately succeeding income year. No credit shall be allowed for any
10998 other income year.

10999 (c) (1) Any qualified small business planning to claim a credit under
11000 the provisions of this section shall apply to the commissioner, in such
11001 form and manner prescribed by the commissioner, to reserve an
11002 allocation for a credit based upon the qualified contributions the
11003 business intends to make. Such application shall indicate the amount of
11004 qualified contributions that the business intends to make in the first
11005 income year during which it offers an individual coverage health
11006 reimbursement arrangement and the immediately succeeding income
11007 year. The application shall contain such information as the
11008 commissioner deems necessary to administer the provisions of this
11009 section.

11010 (2) The commissioner shall approve applications for the reservation
11011 of a credit on a first-come, first-served basis and shall notify the
11012 qualified small business in writing not later than thirty days after the
11013 date of receipt of an application of the commissioner's approval or
11014 rejection of the application. If the commissioner approves the
11015 application of the qualified small business, the commissioner shall issue
11016 a certification letter indicating the amount of the tax credit that has been
11017 reserved for such business during each of the two income years for
11018 which it is eligible to claim the credit. A qualified small business may
11019 not claim a credit under this section in excess of the amount reserved by
11020 the commissioner.

11021 (3) The total amount of tax credits reserved under this section shall
11022 not exceed five million dollars for any income year.

11023 (d) If the qualified small business is an S corporation or an entity
11024 treated as a partnership for federal income tax purposes, the tax credit
11025 may be claimed by the shareholders or partners of the qualified small

11026 business. If the qualified small business is a single member limited
11027 liability company that is disregarded as an entity separate from its
11028 owner, the tax credit may be claimed by the limited liability company's
11029 owner.

11030 Sec. 264. Section 12-330ll of the 2026 supplement to the general
11031 statutes is repealed and the following is substituted in lieu thereof
11032 (*Effective October 1, 2026, and applicable to sales occurring on or after October*
11033 *1, 2026*):

11034 (a) As used in this section and sections 12-330mm and 12-330nn:

11035 (1) "Cannabis" has the same meaning as provided in section 21a-420;

11036 [(2) "Cannabis concentrate" has the same meaning as provided in
11037 section 21a-420;

11038 (3) "Cannabis edible product" means a product containing cannabis
11039 or cannabis concentrate, combined with other ingredients, that is
11040 intended for use or consumption through ingestion, including
11041 sublingual or oral absorption;

11042 (4) "Cannabis plant material" has the same meaning as provided in
11043 section 21a-279a;]

11044 [(5)] (2) "Cannabis retailer" means "retailer", as defined in section 21a-
11045 420;

11046 [(6)] (3) "Consumer" has the same meaning as provided in section 21a-
11047 420;

11048 [(7)] (4) "Cultivator" has the same meaning as provided in section 21a-
11049 420;

11050 [(8)] (5) "Delivery service" has the same meaning as provided in
11051 section 21a-420;

11052 [(9)] (6) "Dispensary facility" has the same meaning as provided in

11053 section 21a-420;

11054 [(10)] (7) "Food and beverage manufacturer" has the same meaning as
11055 provided in section 21a-420;

11056 [(11)] (8) "Hybrid retailer" has the same meaning as provided in
11057 section 21a-420;

11058 [(12)] (9) "Micro-cultivator" has the same meaning as provided in
11059 section 21a-420;

11060 [(13)] (10) "Municipality" has the same meaning as provided in
11061 section 21a-420;

11062 [(14)] (11) "Palliative use" has the same meaning as provided in
11063 section 21a-408;

11064 [(15)] (12) "Producer" has the same meaning as provided in section
11065 21a-420;

11066 [(16)] (13) "Product manufacturer" has the same meaning as provided
11067 in section 21a-420;

11068 [(17)] (14) "Product packager" has the same meaning as provided in
11069 section 21a-420; and

11070 [(18)] "Social Equity Council" has the same meaning as provided in
11071 section 21a-420;

11072 (19) "Total THC" has the same meaning as provided in section 21a-
11073 240; and]

11074 [(20)] (15) "Transporter" has the same meaning as provided in section
11075 21a-420.

11076 (b) (1) For the privilege of making any sales of cannabis in this state,
11077 a tax is hereby imposed on each cannabis retailer, hybrid retailer or
11078 micro-cultivator at the [following rates:] rate of ten and seventy-five-

- 11079 hundredths per cent of the gross receipts from the sale of cannabis.
- 11080 [(A) Cannabis plant material, at the rate of six hundred twenty-five-
- 11081 thousandths of one cent per milligram of total THC, as reflected on the
- 11082 product label;
- 11083 (B) Cannabis edible products, at the rate of two and seventy-five-
- 11084 hundredths cents per milligram of total THC, as reflected on the product
- 11085 label; and
- 11086 (C) Cannabis, other than cannabis plant material or cannabis edible
- 11087 products, at the rate of nine-tenths of one cent per milligram of total
- 11088 THC, as reflected on the product label.]
- 11089 (2) The tax under this section:
- 11090 (A) Shall be collected from the consumer, except as provided under
- 11091 subparagraphs (B) and (D) of this subdivision, by the cannabis retailer,
- 11092 hybrid retailer or micro-cultivator at the time of sale and such tax
- 11093 reimbursement, termed "tax" in this section, shall be paid by the
- 11094 consumer to the cannabis retailer, hybrid retailer or micro-cultivator.
- 11095 Each cannabis retailer, hybrid retailer or micro-cultivator shall collect
- 11096 from the consumer the full amount of the tax imposed by this section or
- 11097 an amount equal to the average equivalent thereof to the nearest amount
- 11098 practicable. Such tax shall be a debt from the consumer to the cannabis
- 11099 retailer, hybrid retailer or micro-cultivator, when so added to the
- 11100 original sales price, and shall be recoverable at law in the same manner
- 11101 as other debts except as provided in section 12-432a; [.]
- 11102 (B) Shall not apply to the sale of cannabis for palliative use;
- 11103 (C) Shall not apply to the transfer of cannabis to a transporter for
- 11104 transport to any other cultivator, micro-cultivator, food and beverage
- 11105 manufacturer, product manufacturer, product packager, dispensary
- 11106 facility, cannabis retailer, hybrid retailer or producer;
- 11107 (D) Shall not apply to the sale of cannabis by a delivery service to a

11108 consumer;

11109 (E) Shall be in addition to the taxes imposed under section 12-330mm
11110 and chapter 219; and

11111 (F) When so collected, shall be deemed to be a special fund in trust
11112 for the state until remitted to the state.

11113 (c) On or before the last day of each month in which a cannabis
11114 retailer, hybrid retailer or micro-cultivator may legally sell cannabis
11115 other than cannabis for palliative use, each such cannabis retailer,
11116 hybrid retailer or micro-cultivator shall file a return with the
11117 Department of Revenue Services. Such return shall be in such form and
11118 contain such information as the Commissioner of Revenue Services
11119 prescribes as necessary for administration of the tax under this section
11120 and shall be accompanied by a payment of the amount of the tax shown
11121 to be due thereon. Each cannabis retailer, hybrid retailer and micro-
11122 cultivator shall file such return electronically with the department and
11123 make such payment by electronic funds transfer in the manner provided
11124 by chapter 228g, to the extent possible.

11125 (d) If any cannabis retailer, hybrid retailer or micro-cultivator fails to
11126 pay the amount of tax reported due on its return within the time
11127 specified under this section, there shall be imposed a penalty equal to
11128 twenty-five per cent of such amount due and unpaid, or two hundred
11129 fifty dollars, whichever is greater. Such amount shall bear interest at the
11130 rate of one per cent per month or fraction thereof, from the due date of
11131 such tax until the date of payment. Subject to the provisions of section
11132 12-3a, the commissioner may waive all or part of the penalties provided
11133 under this section when it is proven to the commissioner's satisfaction
11134 that the failure to pay any tax was due to reasonable cause and was not
11135 intentional or due to neglect. Any penalty that is waived shall be applied
11136 as a credit against tax liabilities owed by the cannabis retailer, hybrid
11137 retailer or micro-cultivator.

11138 (e) Each person, other than a cannabis retailer, hybrid retailer or

11139 micro-cultivator, who is required, on behalf of such cannabis retailer,
11140 hybrid retailer or micro-cultivator, to collect, truthfully account for and
11141 pay over a tax imposed on such cannabis retailer, hybrid retailer or
11142 micro-cultivator under this section and who wilfully fails to collect,
11143 truthfully account for and pay over such tax or who wilfully attempts in
11144 any manner to evade or defeat the tax or the payment thereof, shall, in
11145 addition to other penalties provided by law, be liable for a penalty equal
11146 to the total amount of the tax evaded, or not collected, or not accounted
11147 for and paid over, including any penalty or interest attributable to such
11148 wilful failure to collect or truthfully account for and pay over such tax
11149 or such wilful attempt to evade or defeat such tax, provided such
11150 penalty shall only be imposed against such person in the event that such
11151 tax, penalty or interest cannot otherwise be collected from such cannabis
11152 retailer, hybrid retailer or micro-cultivator. The amount of such penalty
11153 with respect to which a person may be personally liable under this
11154 section shall be collected in accordance with the provisions of section
11155 12-555a and any amount so collected shall be allowed as a credit against
11156 the amount of such tax, penalty or interest due and owing from the
11157 cannabis retailer, hybrid retailer or micro-cultivator. The dissolution of
11158 the cannabis retailer, hybrid retailer or micro-cultivator shall not
11159 discharge any person in relation to any personal liability under this
11160 section for wilful failure to collect or truthfully account for and pay over
11161 such tax or for a wilful attempt to evade or defeat such tax prior to
11162 dissolution, except as otherwise provided in this section. For purposes
11163 of this section, "person" includes any individual, corporation, limited
11164 liability company or partnership and any officer or employee of any
11165 corporation, including a dissolved corporation, and a member of or
11166 employee of any partnership or limited liability company who, as such
11167 officer, employee or member, is under a duty to file a tax return under
11168 this section on behalf of a cannabis retailer, hybrid retailer or micro-
11169 cultivator or to collect or truthfully account for and pay over a tax
11170 imposed under this section on behalf of such cannabis retailer, hybrid
11171 retailer or micro-cultivator.

11172 (f) The provisions of sections 12-548, 12-551 to 12-554, inclusive, and

11173 12-555a shall apply to the provisions of this section in the same manner
11174 and with the same force and effect as if the language of said sections had
11175 been incorporated in full into this section and had expressly referred to
11176 the tax under this section, except to the extent that any provision is
11177 inconsistent with a provision in this section.

11178 (g) The commissioner shall not issue a refund of any tax paid by a
11179 cannabis retailer, hybrid retailer or micro-cultivator under this section.

11180 (h) The commissioner may adopt regulations, in accordance with the
11181 provisions of chapter 54, to implement the provisions of this section and
11182 sections 12-330mm and 12-330nn. Notwithstanding the provisions of
11183 sections 4-168 to 4-172, inclusive, prior to adopting any such regulations,
11184 the commissioner shall issue policies and procedures, which shall have
11185 the force and effect of law, to implement the [taxes] tax imposed under
11186 this section and sections 12-330mm and 12-330nn. At least fifteen days
11187 prior to the effective date of any policy or procedure issued pursuant to
11188 this subsection, the commissioner shall post such policy or procedure
11189 on the department's Internet web site and submit such policy or
11190 procedure to the Secretary of the State for posting on the eRegulations
11191 System. Any such policy or procedure shall no longer be effective upon
11192 the adoption of such policy or procedure as a final regulation in
11193 accordance with the provisions of chapter 54 or forty-eight months of
11194 July 1, 2021, whichever is earlier.

11195 (i) The tax received by the state under this section shall be deposited
11196 as follows:

11197 (1) For the fiscal years ending June 30, 2022, and June 30, 2023, in the
11198 cannabis regulatory and investment account established under section
11199 21a-420f of the general statutes, revision of 1958, revised to January 1,
11200 2025;

11201 (2) For the fiscal years ending June 30, 2024, and June 30, 2025, sixty
11202 per cent of such tax received in the Cannabis Social Equity and
11203 Innovation Fund established under section 21a-420f of the general

11204 statutes, revision of 1958, revised to January 1, 2025, twenty-five per cent
11205 of such tax received in the Cannabis Prevention and Recovery Services
11206 Fund established under section 21a-420f of the general statutes, revision
11207 of 1958, revised to January 1, 2025, and fifteen per cent in the General
11208 Fund;

11209 (3) For the fiscal year ending June 30, 2026, sixty per cent of such tax
11210 received in the social equity and innovation account established under
11211 section 21a-420f, twenty-five per cent of such tax received in the
11212 Cannabis Prevention and Recovery Services Fund established under
11213 section 21a-420f and fifteen per cent in the General Fund;

11214 (4) For the fiscal years ending June 30, 2027, and June 30, 2028, [sixty-
11215 five] seventy per cent of such tax received in the social equity and
11216 innovation account established under section 21a-420f, twenty-five per
11217 cent of such tax received in the Cannabis Prevention and Recovery
11218 Services Fund established under section 21a-420f and [ten] five per cent
11219 in the General Fund; and

11220 (5) For the fiscal year ending June 30, 2029, and each fiscal year
11221 thereafter, seventy-five per cent of such tax received in the social equity
11222 and innovation account established under section 21a-420f and twenty-
11223 five per cent of such tax received in the Cannabis Prevention and
11224 Recovery Services Fund established under section 21a-420f.

11225 Sec. 265. Subsection (b) of section 12-217 of the 2026 supplement to
11226 the general statutes is repealed and the following is substituted in lieu
11227 thereof (*Effective from passage*):

11228 (b) (1) For purposes of determining net income under this section, the
11229 deduction allowed for depreciation shall be determined as provided
11230 under the Internal Revenue Code of 1986, or any subsequent
11231 corresponding internal revenue code of the United States, as from time
11232 to time amended, provided in making such determination, the
11233 provisions of Section 168(k) of said code and, for income years
11234 commencing on or after January 1, 2026, the provisions of Section 168(n)

11235 of said code, shall not apply.

11236 (2) (A) For purposes of determining net income under this section for
11237 taxable years ending after December 31, 2008, and to the extent any
11238 income from the discharge of indebtedness, under Section 108 of the
11239 Internal Revenue Code, as amended by Section 1231 of the American
11240 Recovery and Reinvestment Act of 2009, in connection with any
11241 reacquisition, after December 31, 2008, and [before] prior to January 1,
11242 2011, of an applicable debt instrument or instruments, as those terms are
11243 defined in said Section 108, as amended by said Section 1231, is not
11244 properly includable in gross income for federal income tax purposes for
11245 the taxable year, any deferral of the recognition of any such income shall
11246 not be allowed.

11247 (B) To the extent that any income from the discharge of indebtedness
11248 in connection with any reacquisition, after December 31, 2008, and
11249 [before] prior to January 1, 2011, of an applicable debt instrument or
11250 instruments, as those terms are defined in Section 108 of the Internal
11251 Revenue Code, as amended by Section 1231 of the American Recovery
11252 and Reinvestment Act of 2009, is properly includable in gross income
11253 for federal income tax purposes for the taxable year, any such income
11254 shall be deductible in computing net income under this section for a
11255 taxable year ending after December 31, 2008, to the extent that the
11256 deferral of recognition of such income from such discharge was not
11257 allowed pursuant to subparagraph (A) of this subdivision in computing
11258 net income for a preceding taxable year.

11259 (C) For income years commencing on or after January 1, 2018, eighty
11260 per cent of any deduction claimed under Section 179 of the Internal
11261 Revenue Code for federal income tax purposes shall be disallowed. To
11262 the extent such a deduction is disallowed for purposes of computing the
11263 tax under this chapter, twenty-five per cent of the disallowed portion of
11264 the deduction shall be allowed as a deduction in each of the four
11265 succeeding income years.

11266 (D) For purposes of determining net income under this section:

11267 (i) For income years commencing on or after January 1, 2022, the
11268 deduction under Section 70302(f) of P.L. 119-21 is disallowed;

11269 (ii) For income years commencing on or after January 1, 2025, and
11270 prior to January 1, 2026, the deduction under Section 174A of the
11271 Internal Revenue Code is disallowed; and

11272 (iii) For income years commencing on or after January 1, 2022, and
11273 prior to January 1, 2026, any research or experimental expenditures paid
11274 or incurred for said income years shall be deducted as permitted under
11275 Section 174 of the Internal Revenue Code, as in effect on July 3, 2025.

11276 Sec. 266. (*Effective from passage*) (a) The provisions of section 12-242d
11277 of the general statutes shall not apply to any additional tax due as a
11278 result of (1) the changes made to subdivision (1) of subsection (b) of
11279 section 12-217 of the general statutes pursuant to section 265 of this act,
11280 for income years commencing on or after January 1, 2026, but prior to
11281 the effective date of section 265 of this act, or (2) the enactment of
11282 subparagraph (D) of subdivision (2) of subsection (b) of section 12-217
11283 of the general statutes pursuant to section 265 of this act, for income
11284 years commencing on or after January 1, 2022, but prior to January 1,
11285 2026.

11286 (b) Notwithstanding the provisions of sections 12-3a and 12-229 of
11287 the general statutes, the Commissioner of Revenue Services shall waive
11288 any penalty or interest imposed on the portion of any underpayment for
11289 an income year commencing on or after January 1, 2022, but prior to
11290 January 1, 2026, that results from any additional tax due as a result of
11291 the enactment of subparagraph (D) of subdivision (2) of subsection (b)
11292 of section 12-217 of the general statutes pursuant to section 265 of this
11293 act. The waiver under this subsection shall not apply to such additional
11294 tax that remains underpaid after the later of (1) November 15, 2026, or
11295 (2) the due date, without regard to any extension of time to file, of the
11296 return on which such additional tax is reported. Taxpayers shall submit
11297 information, in a form and manner prescribed by the commissioner, that
11298 evidences their eligibility for a waiver under this subsection.

11299 Sec. 267. (NEW) (*Effective from passage and applicable to taxable years*
11300 *commencing on or after January 1, 2026*) (a) For purposes of this section:

11301 (1) "Research and development expenses" means research or
11302 experimental expenditures deductible under Section 174 of the Internal
11303 Revenue Code of 1986, as in effect on May 28, 1993, determined
11304 without regard to Section 280C(c) of said code or to any elections made
11305 by a taxpayer to amortize such expenditures that were otherwise
11306 deductible on its federal income tax return; and basic research
11307 payments, as defined in Section 41 of said code; that (A) are paid or
11308 incurred for such research and experimentation and basic research
11309 conducted in the state, and (B) are not funded by a grant, contract or
11310 governmental entity or a person other than the taxpayer;

11311 (2) "Commissioner" means the Commissioner of Economic and
11312 Community Development;

11313 (3) "Qualified small business" means a partnership or an S
11314 corporation, as both terms are defined in section 12-699 of the general
11315 statutes, that (A) has gross income for the previous taxable year that
11316 does not exceed seventy million dollars, and (B) has not, in the
11317 determination of the commissioner, exceeded such gross income
11318 threshold through transactions with a related person, as defined in
11319 section 12-217w of the general statutes; and

11320 (4) "Biotechnology business" means a qualified small business
11321 engaged in the business of applying technologies, such as recombinant
11322 DNA techniques, biochemistry, molecular and cellular biology,
11323 genetics and genetic engineering, biological cell fusion techniques, and
11324 new bioprocesses, using living organisms, or parts of organisms, to
11325 produce or modify products, to improve plants or animals, to develop
11326 microorganisms for specific uses, to identify targets for small molecule
11327 pharmaceutical development, or to transform biological systems into
11328 useful processes and products.

11329 (b) (1) The Department of Economic and Community Development

11330 shall administer a system of tax credit vouchers, within available
11331 appropriations, to allow qualified small businesses to earn and utilize
11332 credits for research and development expenses.

11333 (2) For taxable years commencing on or after January 1, 2026, there
11334 shall be allowed a credit for qualified small businesses against the tax
11335 imposed under chapter 229 of the general statutes, other than the
11336 liability imposed by section 12-707 of the general statutes. Such credit
11337 shall be equal to six per cent of the research and development expenses
11338 paid or incurred by a qualified small business for a taxable year and
11339 shall only be allowed to the extent a qualified small business has
11340 applied for and received a tax credit voucher pursuant to this section.

11341 (c) (1) Any qualified small business may apply to the commissioner,
11342 in a form and manner and at a time prescribed by the commissioner, to
11343 reserve an allocation for a credit based on the amount of research and
11344 development expenses such business intends to pay or incur for a
11345 taxable year. The application shall contain such information as the
11346 commissioner deems necessary to administer the provisions of this
11347 section.

11348 (2) If the commissioner determines that such business is likely to
11349 pay or incur research and development expenses for a taxable year, the
11350 commissioner may issue a notice to such business, reserving a credit
11351 under this section based on the amount the business intends to pay or
11352 incur. In determining whether to issue such a notice, the commissioner
11353 shall prioritize qualified small businesses that, in the commissioner's
11354 opinion, exhibit a likelihood for growth in the state or will best
11355 contribute to the economic ecosystem of the state.

11356 (3) No qualified small business may reserve more than one million
11357 five hundred thousand dollars of credits under this section for any
11358 taxable year. The aggregate amount of credits that may be reserved
11359 under this section shall not exceed twenty-five million dollars for any
11360 taxable year.

11361 (d) (1) Not later than ninety days after the end of a taxable year, any
11362 qualified small business that received a notice under subsection (c) of
11363 this section shall submit verification, in a form and manner prescribed
11364 by the commissioner, of the research and development expenses
11365 actually paid or incurred by such business for such taxable year. If the
11366 commissioner determines, after reviewing such verification, that the
11367 qualified small business paid or incurred such expenses for the taxable
11368 year, the commissioner shall issue a tax credit voucher to such
11369 business in an amount equal to six per cent of such expenses, provided
11370 such amount shall not exceed the amount reserved for such business
11371 under subsection (c) of this section.

11372 (2) The commissioner shall notify the Commissioner of Revenue
11373 Services and the Secretary of the Office of Policy and Management of
11374 each tax credit voucher issued under subdivision (1) of this subsection.

11375 (e) If the qualified small business is an S corporation or an entity
11376 treated as a partnership for federal income tax purposes, the credit
11377 may be claimed by the shareholders or partners of such business. If the
11378 qualified small business is a single member liability company that is
11379 disregarded as an entity separate from its owner, the credit may be
11380 claimed by such business's owner, provided such owner is subject to
11381 the tax imposed under chapter 229 of the general statutes.

11382 (f) To the extent the credit exceeds a taxpayer's liability under
11383 chapter 229 of the general statutes, the taxpayer may apply to the
11384 Commissioner of Revenue Services to exchange the credit, at the same
11385 time the taxpayer files the return upon which such credit is claimed,
11386 for a credit refund equal to ninety per cent of the excess if the credit
11387 was earned by a biotechnology business and sixty-five per cent of the
11388 excess if the credit was earned by a qualified small business other than
11389 a biotechnology business.

11390 (g) The credit allowed under this section shall be claimed before any
11391 other credit allowable against the tax imposed under chapter 229 of the
11392 general statutes.

11393 (h) The commissioner may adopt regulations, in accordance with the
11394 provisions of chapter 54 of the general statutes, to carry out the
11395 provisions of this section.

11396 Sec. 268. Section 12-217jj of the 2026 supplement to the general
11397 statutes is repealed and the following is substituted in lieu thereof
11398 (*Effective from passage*):

11399 (a) As used in this section:

11400 (1) "Commissioner" means the Commissioner of Revenue Services.

11401 (2) "Department" means the Department of Economic and
11402 Community Development.

11403 (3) (A) "Qualified production" means entertainment content created
11404 in whole or in part within the state, including motion pictures, except as
11405 otherwise provided in this subparagraph; documentaries; long-form,
11406 specials, mini-series, series, sound recordings, videos and music videos
11407 and interstitials television programming; interactive television;
11408 relocated television production; interactive games; videogames;
11409 commercials; any format of digital media, including an interactive web
11410 site, created for distribution or exhibition to the general public; and any
11411 trailer, pilot, video teaser or demo created primarily to stimulate the
11412 sale, marketing, promotion or exploitation of future investment in either
11413 a product or a qualified production via any means and media in any
11414 digital media format, film or videotape, provided such program meets
11415 all the underlying criteria of a qualified production. For state fiscal years
11416 ending on or after June 30, 2014, "qualified production" shall not include
11417 a motion picture that has not been designated as a state-certified
11418 qualified production prior to July 1, 2013, and no tax credit voucher for
11419 such motion picture may be issued for such motion picture, except, for
11420 state fiscal years ending on or after June 30, 2015, "qualified production"
11421 shall include a motion picture for which twenty-five per cent or more of
11422 the principal photography shooting days are in this state at a facility that
11423 receives not less than twenty-five million dollars in private investment

11424 and opens for business on or after July 1, 2013, and a tax credit voucher
11425 may be issued for such motion picture.

11426 (B) "Qualified production" shall not include any ongoing television
11427 program created primarily as news, weather or financial market reports;
11428 a production featuring current events, other than a relocated television
11429 production, sporting events, an awards show or other gala event; a
11430 production whose sole purpose is fundraising; a long-form production
11431 that primarily markets a product or service; a production used for
11432 corporate training or in-house corporate advertising or other similar
11433 productions; or any production for which records are required to be
11434 maintained under 18 USC 2257, as amended from time to time, with
11435 respect to sexually explicit content.

11436 (4) "Eligible production company" means a corporation, partnership,
11437 limited liability company, or other business entity engaged in the
11438 business of producing qualified productions on a one-time or ongoing
11439 basis, and qualified by the Secretary of the State to engage in business
11440 in the state.

11441 (5) "Production expenses or costs" means all expenditures clearly and
11442 demonstrably incurred in the state in the preproduction, production or
11443 postproduction costs of a qualified production, including:

11444 (A) Expenditures incurred in the state in the form of either
11445 compensation or purchases including production work, production
11446 equipment not eligible for the infrastructure tax credit provided in
11447 section 12-217kk, production software, postproduction work,
11448 postproduction equipment, postproduction software, set design, set
11449 construction, props, lighting, wardrobe, makeup, makeup accessories,
11450 special effects, visual effects, audio effects, film processing, music,
11451 sound mixing, editing, location fees, soundstages and any and all other
11452 costs or services directly incurred in connection with a state-certified
11453 qualified production;

11454 (B) Expenditures for distribution, including preproduction,

11455 production or postproduction costs relating to the creation of trailers,
11456 marketing videos, commercials, point-of-purchase videos and any and
11457 all content created on film or digital media, including the duplication of
11458 films, videos, CDs, DVDs and any and all digital files now in existence
11459 and those yet to be created for mass consumer consumption; the
11460 purchase, by a company in the state, of any and all equipment relating
11461 to the duplication or mass market distribution of any content created or
11462 produced in the state by any digital media format which is now in use
11463 and those formats yet to be created for mass consumer consumption;
11464 and

11465 (C) "Production expenses or costs" does not include the following: (i)
11466 On and after January 1, 2008, compensation in excess of fifteen million
11467 dollars paid to any individual or entity representing an individual, for
11468 services provided in the production of a qualified production and on or
11469 after January 1, 2010, compensation subject to Connecticut personal
11470 income tax in excess of twenty million dollars paid in the aggregate to
11471 any individuals or entities representing individuals, for star talent
11472 provided in the production of a qualified production; (ii) media buys,
11473 promotional events or gifts or public relations associated with the
11474 promotion or marketing of any qualified production; (iii) deferred,
11475 leveraged or profit participation costs relating to any and all personnel
11476 associated with any and all aspects of the production, including, but not
11477 limited to, producer fees, director fees, talent fees and writer fees; (iv)
11478 costs relating to the transfer of the production tax credits; (v) any
11479 amounts paid to persons or businesses as a result of their participation
11480 in profits from the exploitation of the qualified production; and (vi) any
11481 expenses or costs relating to an independent certification, as required by
11482 subsection (h) of this section, or as the department may otherwise
11483 require, pertaining to the amount of production expenses or costs set
11484 forth by an eligible production company in its application for a
11485 production tax credit.

11486 (6) "Sound recording" means a recording of music, poetry or spoken-
11487 word performance, but does not include the audio portions of dialogue

11488 or words spoken and recorded as part of a motion picture, video,
11489 theatrical production, television news coverage or athletic event.

11490 (7) "State-certified qualified production" means a qualified
11491 production produced by an eligible production company that (A) is in
11492 compliance with regulations adopted pursuant to subsection (l) of this
11493 section, (B) is authorized to conduct business in this state, and (C) has
11494 been approved by the department as qualifying for a production tax
11495 credit under this section.

11496 (8) "Interactive web site" means a web site, the production expenses
11497 or costs of which (A) exceed five hundred thousand dollars per income
11498 year, and (B) is primarily (i) interactive games or end user applications,
11499 or (ii) animation, simulation, sound, graphics, story lines or video
11500 created or repurposed for distribution over the Internet. An interactive
11501 web site does not include a web site primarily used for institutional,
11502 private, industrial, retail or wholesale marketing or promotional
11503 purposes, or which contains obscene content.

11504 (9) "Post-certification remedy" means the recapture, disallowance,
11505 recovery, reduction, repayment, forfeiture, decertification or any other
11506 remedy that would have the effect of reducing or otherwise limiting the
11507 use of a tax credit provided by this section.

11508 (10) "Compensation" means base salary or wages and does not
11509 include bonus pay, stock options, restricted stock units or similar
11510 arrangements.

11511 (11) "Relocated television production" means:

11512 (A) An ongoing television program all of the prior seasons of which
11513 were filmed outside this state, and may include current events shows,
11514 except those referenced in subparagraph (B)(i) of this subdivision.

11515 (B) An eligible production company's television programming in this
11516 state that (i) is not a general news program, sporting event or game
11517 broadcast, and (ii) is created at a qualified production facility that has

11518 had a minimum investment of twenty-five million dollars made by such
11519 eligible production company on or after January 1, 2012, at which
11520 facility the eligible production company creates ongoing television
11521 programming as defined in subparagraph (A) of this subdivision, and
11522 creates at least two hundred new jobs in Connecticut on or after January
11523 1, 2012. For purposes of this subdivision, "new job" means a full-time
11524 job, as defined in section 12-217ii, that did not exist in this state prior to
11525 January 1, 2012, and is filled by a new employee, and "new employee"
11526 includes a person who was employed outside this state by the eligible
11527 production company prior to January 1, 2012, but does not include a
11528 person who was employed in this state by the eligible production
11529 company or a related person, as defined in section 12-217ii, with respect
11530 to the eligible production company during the prior twelve months.

11531 (C) A relocated television production may be a state-certified
11532 qualified production for not more than ten successive income years,
11533 after which period the eligible production company shall be ineligible
11534 to resubmit an application for certification.

11535 (b) (1) The Department of Economic and Community Development
11536 shall administer a system of tax credit vouchers within the resources,
11537 requirements and purposes of this section for eligible production
11538 companies producing a state-certified qualified production in the state.

11539 (2) Any eligible production company incurring production expenses
11540 or costs shall be eligible for a credit (A) for income years commencing
11541 on or after January 1, 2010, but prior to January 1, 2018, against the tax
11542 imposed under chapter 207 or this chapter, (B) for income years
11543 commencing on or after January 1, 2018, but prior to January 1, 2022,
11544 against the tax imposed under chapter 207 or 211 or this chapter, and
11545 (C) for income years commencing on or after January 1, 2022, against the
11546 tax imposed under chapter 207, 211, 219 or this chapter, as follows: (i)
11547 For any such company incurring such expenses or costs of not less than
11548 one hundred thousand dollars, but not more than five hundred
11549 thousand dollars, a credit equal to ten per cent of such expenses or costs,
11550 (ii) for any such company incurring such expenses or costs of more than

11551 five hundred thousand dollars, but not more than one million dollars, a
11552 credit equal to fifteen per cent of such expenses or costs, and (iii) for any
11553 such company incurring such expenses or costs of more than one million
11554 dollars, a credit equal to thirty per cent of such expenses or costs.

11555 (c) No eligible production company incurring an amount of
11556 production expenses or costs that qualifies for such credit shall be
11557 eligible for such credit unless on or after January 1, 2010, such company
11558 conducts (1) not less than fifty per cent of principal photography days
11559 within the state, or (2) expends not less than fifty per cent of
11560 postproduction costs within the state, or (3) expends not less than one
11561 million dollars of postproduction costs within the state. The provisions
11562 of this subsection shall not apply to an eligible production company that
11563 produces an interactive Internet web site created for distribution or
11564 exhibition to the general public.

11565 (d) For income years commencing on or after January 1, 2010, no
11566 expenses or costs incurred outside the state and used within the state
11567 shall be eligible for a credit, and one hundred per cent of such expenses
11568 or costs shall be counted toward such credit when incurred within the
11569 state and used within the state.

11570 (e) (1) On and after July 1, 2006, and for income years commencing
11571 on or after January 1, 2006, any credit allowed pursuant to this section
11572 may be sold, assigned or otherwise transferred, in whole or in part, to
11573 one or more taxpayers, provided (A) no credit, after issuance, may be
11574 sold, assigned or otherwise transferred, in whole or in part, more than
11575 three times, (B) in the case of a credit allowed for the income year
11576 commencing on or after January 1, 2011, but prior to January 1, 2012,
11577 any entity that is not subject to tax under chapter 207 or this chapter may
11578 transfer not more than fifty per cent of such credit in any one income
11579 year, and (C) in the case of a credit allowed for an income year
11580 commencing on or after January 1, 2012, any entity that is not subject to
11581 tax under chapter 207 or this chapter may transfer not more than
11582 twenty-five per cent of such credit in any one income year.

11583 (2) Notwithstanding the provisions of subdivision (1) of this
11584 subsection, any entity that is not subject to tax under this chapter or
11585 chapter 207 shall not be subject to the limitations on the transfer of
11586 credits provided in subparagraphs (B) and (C) of said subdivision (1),
11587 provided such entity owns not less than fifty per cent, directly or
11588 indirectly, of a business entity, as defined in section 12-284b.

11589 (3) Notwithstanding the provisions of subdivision (1) of this
11590 subsection, any qualified production that is created in whole or in
11591 significant part, as determined by the Commissioner of Economic and
11592 Community Development, at a qualified production facility shall not be
11593 subject to the limitations of subparagraph (B) or (C) of said subdivision
11594 (1). For purposes of this subdivision, "qualified production facility"
11595 means a facility (A) located in this state, (B) intended for film, television
11596 or digital media production, and (C) that has had a minimum
11597 investment of three million dollars, or less if the Commissioner of
11598 Economic and Community Development determines such facility
11599 otherwise qualifies.

11600 (4) (A) For the income year commencing on or after January 1, 2018,
11601 but prior to January 1, 2019, any credit that is sold, assigned or otherwise
11602 transferred, in whole or in part, to one or more taxpayers pursuant to
11603 subdivision (1) of this subsection may be claimed against the tax
11604 imposed under chapter 211 only if there is common ownership of at least
11605 fifty per cent between such taxpayer and the eligible production
11606 company that sold, assigned or otherwise transferred such credit. Such
11607 taxpayer may only claim ninety-two per cent of the amount of such
11608 credit entered by the department on the production tax credit voucher.

11609 (B) For income years commencing on or after January 1, 2019, any
11610 credit that is sold, assigned or otherwise transferred, in whole or in part,
11611 to one or more taxpayers pursuant to subdivision (1) of this subsection,
11612 which credit is claimed against the tax imposed under chapter 211, shall
11613 be subject to the following limits:

11614 (i) The taxpayer may only claim ninety-five per cent of the amount of

11615 such credit entered by the department on the production tax credit
11616 voucher; and

11617 (ii) If there is common ownership of at least fifty per cent between
11618 such taxpayer and the eligible production company that sold, assigned
11619 or otherwise transferred such credit, such taxpayer may only claim
11620 ninety-two per cent of the amount of such credit entered by the
11621 department on the production tax credit voucher.

11622 (5) (A) For income years commencing on or after January 1, 2022, but
11623 prior to January 1, 2024, and on or after January 1, [2026] 2028, any credit
11624 that is claimed against the tax imposed under chapter 219 shall be
11625 subject to the following limits:

11626 (i) Any credit that is sold, assigned or otherwise transferred, in whole
11627 or in part, to one or more taxpayers pursuant to subdivision (1) of this
11628 subsection may be claimed against the tax imposed under chapter 219
11629 only if there is common ownership of at least fifty per cent between such
11630 taxpayer and the eligible production company that sold, assigned or
11631 otherwise transferred such credit; and

11632 (ii) The eligible production company or taxpayer claiming the credit
11633 against the tax imposed under chapter 219 may only claim seventy-eight
11634 per cent of the amount of such credit entered by the department on the
11635 production tax credit voucher.

11636 (B) For income years commencing on or after January 1, 2024, but
11637 prior to January 1, [2026] 2028, any credit that is claimed against the tax
11638 imposed under chapter 219 shall be subject to the following limits:

11639 (i) Any credit that is sold, assigned or otherwise transferred, in whole
11640 or in part, to one or more taxpayers pursuant to subdivision (1) of this
11641 subsection may be claimed against the tax imposed under chapter 219
11642 only if there is common ownership of at least fifty per cent between such
11643 taxpayer and the eligible production company that sold, assigned or
11644 otherwise transferred such credit; and

11645 (ii) The eligible production company or taxpayer claiming the credit
11646 against the tax imposed under chapter 219 may only claim ninety-two
11647 per cent of the amount of such credit entered by the department on the
11648 production tax credit voucher.

11649 (f) (1) On and after July 1, 2006, and for income years commencing on
11650 or after January 1, 2006, but prior to January 1, 2015, all or part of any
11651 such credit allowed under this section may be claimed against the tax
11652 imposed under chapter 207 or this chapter for the income year in which
11653 the production expenses or costs were incurred, or in the three
11654 immediately succeeding income years.

11655 (2) For production tax credit vouchers issued on or after July 1, 2015,
11656 but prior to January 1, 2018, all or part of any such credit may be claimed
11657 against the tax imposed under chapter 207 or this chapter, for the
11658 income year in which the production expenses or costs were incurred,
11659 or in the five immediately succeeding income years.

11660 (3) For production tax credit vouchers issued on or after July 1, 2018,
11661 but prior to January 1, 2022, all or part of any such credit may be claimed
11662 against the tax imposed under chapter 207 or 211 or this chapter, for the
11663 income year in which the production expenses or costs were incurred,
11664 or in the five immediately succeeding income years.

11665 (4) For production tax credit vouchers issued on or after January 1,
11666 2022, all or part of any such credit may be claimed against the tax
11667 imposed under chapter 207, 211, 219 or this chapter, for the income year
11668 in which the production expenses or costs were incurred, or in the five
11669 immediately succeeding income years.

11670 (g) Any production tax credit allowed under this section shall be
11671 nonrefundable.

11672 (h) (1) An eligible production company shall apply to the department
11673 for a tax credit voucher on an annual basis, but not later than ninety days
11674 after the first production expenses or costs are incurred in the
11675 production of a qualified production, and shall provide with such

11676 application such information as the department may require to
11677 determine such company's eligibility to claim a credit under this section.
11678 No production expenses or costs may be listed more than once for
11679 purposes of the tax credit voucher pursuant to this section or section 12-
11680 217kk, and if a production expense or cost has been included in a claim
11681 for a credit, such production expense or cost may not be included in any
11682 subsequent claim for a credit.

11683 (2) Not later than ninety days after the end of the annual period, or
11684 after the completion of the independent certification, an eligible
11685 production company shall apply to the department for a production tax
11686 credit voucher, and shall provide with such application (A) a report that
11687 includes the number of full-time jobs and the number of part-time jobs
11688 created by the eligible production company during the annual period, a
11689 description of each such job and an explanation of what the eligible
11690 production company considers to be job creation for purposes of the
11691 report, and (B) such information and independent certification as the
11692 department may require pertaining to the amount of such company's
11693 production expenses or costs. Such independent certification shall be
11694 provided by an audit professional chosen from a list compiled by the
11695 department. If the department determines that such company is eligible
11696 to be issued a production tax credit voucher, the department shall enter
11697 on the voucher the amount of production expenses or costs that has been
11698 established to the satisfaction of the department and the amount of such
11699 company's credit under this section. The department shall provide a
11700 copy of such voucher to the commissioner, upon request.

11701 (3) The department shall charge a reasonable and nonrefundable
11702 administrative fee sufficient to cover the department's costs to analyze
11703 applications submitted under this section.

11704 (i) If an eligible production company sells, assigns or otherwise
11705 transfers a credit under this section to another taxpayer, the transferor
11706 and transferee shall jointly submit written notification of such transfer
11707 to the department not later than thirty days after such transfer. If such
11708 transferee sells, assigns or otherwise transfers a credit under this section

11709 to a subsequent transferee, such transferee and such subsequent
11710 transferee shall jointly submit written notification of such transfer to the
11711 department not later than thirty days after such transfer. The
11712 notification after each transfer shall include the credit voucher number,
11713 the date of transfer, the amount of such credit transferred, the tax credit
11714 balance before and after the transfer, the tax identification numbers for
11715 both the transferor and the transferee, and any other information
11716 required by the department. Failure to comply with this subsection will
11717 result in a disallowance of the tax credit until there is full compliance on
11718 the part of the transferor and the transferee, and for a second or third
11719 transfer, on the part of all subsequent transferors and transferees. The
11720 department shall provide a copy of the notification of assignment to the
11721 commissioner upon request.

11722 (j) Any eligible production company that submits information to the
11723 department that it knows to be fraudulent or false shall, in addition to
11724 any other penalties provided by law, be liable for a penalty equal to the
11725 amount of such company's credit entered on the production tax credit
11726 voucher issued under this section.

11727 (k) No tax credits transferred pursuant to this section shall be subject
11728 to a post-certification remedy, and the department and the
11729 commissioner shall have no right, except in the case of possible material
11730 misrepresentation or fraud, to conduct any further or additional review,
11731 examination or audit of the expenditures or costs for which such tax
11732 credits were issued. The sole and exclusive remedy of the department
11733 and the commissioner shall be to seek collection of the amount of such
11734 tax credits from the entity that committed the fraud or
11735 misrepresentation.

11736 (l) The department, in consultation with the commissioner, may
11737 adopt regulations, in accordance with the provisions of chapter 54, as
11738 may be necessary for the administration of this section.

11739 Sec. 269. Section 472 of public act 25-168, as amended by section 203
11740 of public act 25-174, is repealed and the following is substituted in lieu

11741 thereof (*Effective July 1, 2026*):

11742 The Secretary of the Office of Policy and Management shall grant
11743 additional municipal aid, from Other Expenses, as follows: [(1)] To the
11744 city of New Haven, \$500,000 for the fiscal year ending June 30, 2026. [;
11745 and (2) to the towns of Ledyard and Montville, \$800,000 to each town
11746 for the fiscal year ending June 30, 2027.]

11747 Sec. 270. (*Effective July 1, 2026*) Notwithstanding the provisions of
11748 section 25 of public act 25-168, for the fiscal year ending June 30, 2027,
11749 the grants paid to the towns of Ledyard and Montville from the moneys
11750 available in the Mashantucket Pequot and Mohegan Fund established
11751 pursuant to section 3-55i of the general statutes shall be as follows: To
11752 the town of Ledyard, \$2,191,000; and to the town of Montville,
11753 \$2,246,162.

11754 Sec. 271. (NEW) (*Effective January 1, 2027, and applicable to taxable years*
11755 *commencing on or after January 1, 2027*) (a) As used in this section:

11756 (1) "Activities of daily living" means basic personal everyday
11757 activities, including, but not limited to, ambulating, feeding, dressing,
11758 personal hygiene, continence and toileting.

11759 (2) "Eligible expenditure" means (A) the improvement or alteration to
11760 the family caregiver's or eligible family member's primary residence to
11761 permit the eligible family member to live in the residence and to remain
11762 mobile, safe and independent, (B) the family caregiver's purchase or
11763 lease of equipment, including, but not limited to, durable medical
11764 equipment that is necessary to assist an eligible family member in
11765 carrying out one or more activities of daily living, and (C) other paid or
11766 incurred expenses by the family caregiver that assist the family
11767 caregiver in providing care to an eligible family member, including, but
11768 not limited to expenditures related to (i) hiring a home health aide, (ii)
11769 respite care, (iii) adult day care, (iv) personal care attendants, (v) health
11770 care equipment, and (vi) technology. "Eligible expenditure" does not
11771 include general household maintenance activities, including, but not

11772 limited to, painting, plumbing, electrical repairs and exterior
11773 maintenance.

11774 (3) "Eligible family member" means a person who (A) requires
11775 assistance with at least two activities of daily living, as certified in
11776 writing by a licensed health care provider, as defined in section 19a-106a
11777 of the general statutes, (B) qualifies as a dependent, spouse, parent or
11778 other relation by blood or marriage to the family caregiver, and (C) lives
11779 in a private residential home and not in a long-term care facility, as
11780 defined in section 19a-535e of the general statutes.

11781 (4) "Family caregiver" means a person who (A) provides care and
11782 support for an eligible family member, (B) has a federal adjusted gross
11783 income of less than fifty thousand dollars for an individual who files a
11784 return under the federal income tax as an unmarried individual, a
11785 married individual filing separately or a head of household, and less
11786 than one hundred thousand dollars for individuals who file a return
11787 under the federal income tax as married individuals filing jointly, and
11788 (C) has personally incurred uncompensated expenses directly related to
11789 the care of an eligible family member.

11790 (b) (1) There shall be allowed, for the taxable years commencing on
11791 or after January 1, 2027, a credit against the tax imposed by chapter 229
11792 of the general statutes, other than the liability imposed by section 12-707
11793 of the general statutes, for eligible expenditures incurred by a family
11794 caregiver for the care and support of an eligible family member.

11795 (2) The amount of the credit allowed shall be fifty per cent of the
11796 eligible expenditures incurred by such family caregiver in a taxable year
11797 and shall not exceed two thousand dollars for any taxable year. If two
11798 or more family caregivers claim the credit authorized by this section for
11799 the same eligible family member, the maximum allowable credit shall
11800 be allocated in equal amounts between each of the family caregivers.

11801 (c) (1) The Department of Revenue Services shall administer a system
11802 of tax credit vouchers within the resources, requirements and purposes

11803 of this section. A family caregiver may apply to the Commissioner of
11804 Revenue Services, in a form and manner prescribed by the
11805 commissioner, for a tax credit voucher in an amount as provided in this
11806 section. The application shall contain such information the
11807 commissioner deems necessary to administer the provisions of this
11808 section.

11809 (2) The commissioner shall approve applications on a first-come,
11810 first-served basis and shall notify an applicant in writing not later than
11811 thirty days after the date of receipt of an application of the
11812 commissioner's approval or rejection of the application.

11813 (3) The total amount of tax credit vouchers that may be issued under
11814 this section shall not exceed one million eight hundred thousand dollars
11815 in any one taxable year.

11816 (d) Any credit allowed under this section shall be nonrefundable.

11817 Sec. 272. Section 12-412 of the 2026 supplement to the general statutes
11818 is amended by adding subdivision (128) as follows (*Effective July 1, 2026,*
11819 *and applicable to sales occurring on or after July 1, 2026*):

11820 (NEW) (128) Nonelectronic school supplies, such as backpacks,
11821 lunchboxes, notebooks, pens and pencils, crayons, rulers and paper.

11822 Sec. 273. Section 12-7e of the 2026 supplement to the general statutes
11823 is repealed and the following is substituted in lieu thereof (*Effective July*
11824 *1, 2026*):

11825 Commencing July 1, 2025, the Commissioner of Revenue Services
11826 shall track and record the source of the revenue received by the state
11827 each fiscal year from the tax imposed under chapters 207, 208, 219 and
11828 229, for the purpose of accurately and fairly attributing to each
11829 municipality revenue received from each such tax. The commissioner
11830 shall determine the sourcing method for the revenue from the tax
11831 imposed under said chapters, provided the revenue from the taxes
11832 imposed under chapters 207, 208 and 219 is sourced to each

11833 municipality in which the taxpayer has an office or facility in the state
11834 and the revenue from the tax imposed under chapter 229 from earned
11835 income shall be sourced, to the extent possible, to the municipality in
11836 which the employer's office or facility is located, for the employees who
11837 work primarily at such location. Taxpayers paying a tax specified in this
11838 subsection shall provide disaggregated information and such other data
11839 the commissioner requests to carry out the provisions of this section. On
11840 or before October 31, 2026, and annually thereafter, the commissioner
11841 shall post on the Department of Revenue Services' Internet web site a
11842 list of all municipalities and the amount of revenue from each such tax
11843 attributed to the municipality for the applicable fiscal year.

11844 Sec. 274. (*Effective from passage*) (a) As used in this section:

11845 (1) "Augmented productivity" means the portion of gross revenue
11846 that exceeds an employer's three-year historical average, provided such
11847 increase is achieved through the integration of collaborative technology
11848 while maintaining a stable workforce;

11849 (2) "Collaborative technology" means any hardware, software or
11850 algorithmic system, including artificial intelligence, designed to be
11851 operated by or to assist an employee in the performance of such
11852 employee's duties, where the technology serves as a multiplier of the
11853 employee's individual productivity rather than as a stand-alone
11854 replacement of the employee;

11855 (3) "Productivity gap" means the measurable increase in revenue-per-
11856 employee hours that occurs when Connecticut payroll is reduced
11857 materially while gross revenue remains stable or increases; and

11858 (4) "Stable workforce" means a Connecticut-domiciled workforce
11859 where the total headcount and aggregate payroll expenses for such
11860 workforce remain at or above ninety-five per cent of the three-year
11861 historical average of the employer.

11862 (b) (1) Not later than January 1, 2027, the Secretary of the Office of
11863 Policy and Management shall, in consultation with the Commissioner

11864 of Revenue Services, the Labor Commissioner and the Chief Workforce
11865 Officer, submit a plan to the General Assembly, in accordance with the
11866 provisions of section 11-4a of the general statutes, to ensure that
11867 technological advancements serve to augment worker capability rather
11868 than render it obsolete and productivity gains lead to a more skilled
11869 workforce, by developing (A) a mechanism to reinvest capital when
11870 business output and labor costs become materially decoupled, (B) steps
11871 to be actively taken by the state to minimize such decoupling by
11872 fostering collaborative productivity models that increase output
11873 without a corresponding decline in the workforce, and (C) a workforce
11874 and productivity gap contribution from employers.

11875 (2) The workforce and productivity gap contribution plan shall
11876 include:

11877 (A) A formula for a surcharge to be assessed annually for each income
11878 or taxable year in which an employer maintains a productivity gap.
11879 Such surcharge shall reflect the financial delta between an employer's
11880 baseline productivity levels and its reduced payroll expenses for the
11881 applicable income or taxable year, and shall be structured to ensure that
11882 efficiency gains realized through the displacement of employees are
11883 recaptured by the state on an ongoing basis to mitigate the resulting
11884 economic impact;

11885 (B) An augmented productivity tax exemption that ensures that any
11886 augmented productivity achieved by an employer is permanently
11887 exempt from taxation by the state;

11888 (C) Administrative procedures for the reporting and collection of
11889 such surcharge, based on Connecticut-specific payroll and tax data; and

11890 (D) The establishment of a workforce and economic stability account,
11891 in which the surcharges collected shall be deposited and shall be used
11892 exclusively for the purposes of workforce retraining, technical
11893 education and career transition programs for displaced employees.

11894 Sec. 275. (*Effective July 1, 2027, and applicable to income years commencing*

11895 on or after January 1, 2027) (a) As used in this section, "eligible production
11896 company", "production expenses or costs" and "state-certified qualified
11897 production" have the same meanings as provided in section 12-217jj of
11898 the general statutes.

11899 (b) (1) For the income years commencing January 1, 2027, and prior
11900 to January 1, 2029, any eligible production company that is eligible for a
11901 credit under subsection (b) of section 12-217jj of the general statutes may
11902 apply to the Department of Economic and Community Development, in
11903 the manner provided under subsection (h) of said section, for a
11904 production tax credit voucher for an additional credit as provided under
11905 this section.

11906 (2) The additional credit for an eligible production company under
11907 this section shall be for production expenses or costs incurred for a state-
11908 certified qualified production for which principal photography
11909 shooting occurs in the city of Bridgeport, Hartford or New Haven, or
11910 any combination thereof, for at least one day, and shall be as follows:
11911 (A) For any such company incurring such expenses or costs of not less
11912 than one hundred thousand dollars, but not more than five hundred
11913 thousand dollars, a credit equal to thirty per cent of such expenses or
11914 costs; (B) for any such company incurring such expenses or costs of more
11915 than five hundred thousand dollars, but not more than one million
11916 dollars, a credit equal to thirty-five per cent of such expenses or costs;
11917 and (C) for any such company incurring such expenses or costs of more
11918 than one million dollars, a credit equal to fifty per cent of such expenses
11919 or costs.

11920 (3) The aggregate amount of all production tax credit vouchers issued
11921 by the Department of Economic and Community Development for the
11922 additional credit under this section shall not exceed one million five
11923 hundred thousand dollars for income years commencing on or after
11924 January 1, 2027, and prior to January 1, 2029.

11925 (c) For production tax credit vouchers issued pursuant to this section,
11926 all or part of any such credit may be claimed against the tax imposed

11927 under chapter 207, 208, 211 or 219 of the general statutes, for the income
11928 year in which the production expenses or costs were incurred, or in the
11929 five immediately succeeding income years, and may be sold, assigned
11930 or otherwise transferred, in whole or in part, in accordance with
11931 subsection (e) of 12-217jj of the general statutes.

11932 Sec. 276. (*Effective from passage*) Not later than June 30, 2026, the
11933 Comptroller shall transfer one hundred million dollars of the resources
11934 of the Special Transportation Fund for the fiscal year ending June 30,
11935 2026, to be accounted for as revenue of the Special Transportation Fund
11936 for the fiscal year ending June 30, 2027.

11937 Sec. 277. Subparagraph (B) of subdivision (20) of subsection (a) of
11938 section 12-701 of the 2026 supplement to the general statutes is repealed
11939 and the following is substituted in lieu thereof (*Effective July 1, 2026, and*
11940 *applicable to taxable years commencing on or after January 1, 2026*):

11941 (B) There shall be subtracted therefrom:

11942 (i) To the extent properly includable in gross income for federal
11943 income tax purposes, any income with respect to which taxation by any
11944 state is prohibited by federal law;

11945 (ii) To the extent allowable under section 12-718, exempt dividends
11946 paid by a regulated investment company;

11947 (iii) To the extent properly includable in gross income for federal
11948 income tax purposes, the amount of any refund or credit for
11949 overpayment of income taxes imposed by this state, or any other state
11950 of the United States or a political subdivision thereof, or the District of
11951 Columbia;

11952 (iv) To the extent properly includable in gross income for federal
11953 income tax purposes and not otherwise subtracted from federal
11954 adjusted gross income pursuant to clause (x) of this subparagraph in
11955 computing Connecticut adjusted gross income, any tier 1 railroad
11956 retirement benefits;

11957 (v) To the extent any additional allowance for depreciation under
11958 Section 168(k) of the Internal Revenue Code for property placed in
11959 service after September 27, 2017, was added to federal adjusted gross
11960 income pursuant to subparagraph (A)(ix) of this subdivision in
11961 computing Connecticut adjusted gross income, twenty-five per cent of
11962 such additional allowance for depreciation in each of the four
11963 succeeding taxable years;

11964 (vi) To the extent properly includable in gross income for federal
11965 income tax purposes, any interest income from obligations issued by or
11966 on behalf of the state of Connecticut, any political subdivision thereof,
11967 or public instrumentality, state or local authority, district or similar
11968 public entity created under the laws of the state of Connecticut;

11969 (vii) To the extent properly includable in determining the net gain or
11970 loss from the sale or other disposition of capital assets for federal income
11971 tax purposes, any gain from the sale or exchange of obligations issued
11972 by or on behalf of the state of Connecticut, any political subdivision
11973 thereof, or public instrumentality, state or local authority, district or
11974 similar public entity created under the laws of the state of Connecticut,
11975 in the income year such gain was recognized;

11976 (viii) Any interest on indebtedness incurred or continued to purchase
11977 or carry obligations or securities the interest on which is subject to tax
11978 under this chapter but exempt from federal income tax, to the extent that
11979 such interest on indebtedness is not deductible in determining federal
11980 adjusted gross income and is attributable to a trade or business carried
11981 on by such individual;

11982 (ix) Ordinary and necessary expenses paid or incurred during the
11983 taxable year for the production or collection of income which is subject
11984 to taxation under this chapter but exempt from federal income tax, or
11985 the management, conservation or maintenance of property held for the
11986 production of such income, and the amortizable bond premium for the
11987 taxable year on any bond the interest on which is subject to tax under
11988 this chapter but exempt from federal income tax, to the extent that such

11989 expenses and premiums are not deductible in determining federal
11990 adjusted gross income and are attributable to a trade or business carried
11991 on by such individual;

11992 (x) (I) For taxable years commencing prior to January 1, 2019, for a
11993 person who files a return under the federal income tax as an unmarried
11994 individual whose federal adjusted gross income for such taxable year is
11995 less than fifty thousand dollars, or as a married individual filing
11996 separately whose federal adjusted gross income for such taxable year is
11997 less than fifty thousand dollars, or for a husband and wife who file a
11998 return under the federal income tax as married individuals filing jointly
11999 whose federal adjusted gross income for such taxable year is less than
12000 sixty thousand dollars or a person who files a return under the federal
12001 income tax as a head of household whose federal adjusted gross income
12002 for such taxable year is less than sixty thousand dollars, an amount
12003 equal to the Social Security benefits includable for federal income tax
12004 purposes;

12005 (II) For taxable years commencing prior to January 1, 2019, for a
12006 person who files a return under the federal income tax as an unmarried
12007 individual whose federal adjusted gross income for such taxable year is
12008 fifty thousand dollars or more, or as a married individual filing
12009 separately whose federal adjusted gross income for such taxable year is
12010 fifty thousand dollars or more, or for a husband and wife who file a
12011 return under the federal income tax as married individuals filing jointly
12012 whose federal adjusted gross income from such taxable year is sixty
12013 thousand dollars or more or for a person who files a return under the
12014 federal income tax as a head of household whose federal adjusted gross
12015 income for such taxable year is sixty thousand dollars or more, an
12016 amount equal to the difference between the amount of Social Security
12017 benefits includable for federal income tax purposes and the lesser of
12018 twenty-five per cent of the Social Security benefits received during the
12019 taxable year, or twenty-five per cent of the excess described in Section
12020 86(b)(1) of the Internal Revenue Code;

12021 (III) For the taxable year commencing January 1, 2019, and each

12022 taxable year thereafter, for a person who files a return under the federal
12023 income tax as an unmarried individual whose federal adjusted gross
12024 income for such taxable year is less than seventy-five thousand dollars,
12025 or as a married individual filing separately whose federal adjusted gross
12026 income for such taxable year is less than seventy-five thousand dollars,
12027 or for a husband and wife who file a return under the federal income tax
12028 as married individuals filing jointly whose federal adjusted gross
12029 income for such taxable year is less than one hundred thousand dollars
12030 or a person who files a return under the federal income tax as a head of
12031 household whose federal adjusted gross income for such taxable year is
12032 less than one hundred thousand dollars, an amount equal to the Social
12033 Security benefits includable for federal income tax purposes; and

12034 (IV) For the taxable year commencing January 1, 2019, and each
12035 taxable year thereafter, for a person who files a return under the federal
12036 income tax as an unmarried individual whose federal adjusted gross
12037 income for such taxable year is seventy-five thousand dollars or more,
12038 or as a married individual filing separately whose federal adjusted gross
12039 income for such taxable year is seventy-five thousand dollars or more,
12040 or for a husband and wife who file a return under the federal income tax
12041 as married individuals filing jointly whose federal adjusted gross
12042 income from such taxable year is one hundred thousand dollars or more
12043 or for a person who files a return under the federal income tax as a head
12044 of household whose federal adjusted gross income for such taxable year
12045 is one hundred thousand dollars or more, an amount equal to the
12046 difference between the amount of Social Security benefits includable for
12047 federal income tax purposes and the lesser of twenty-five per cent of the
12048 Social Security benefits received during the taxable year, or twenty-five
12049 per cent of the excess described in Section 86(b)(1) of the Internal
12050 Revenue Code;

12051 (xi) To the extent properly includable in gross income for federal
12052 income tax purposes, any amount rebated to a taxpayer pursuant to
12053 section 12-746;

12054 (xii) To the extent properly includable in the gross income for federal

12055 income tax purposes of a designated beneficiary, any distribution to
12056 such beneficiary from any qualified state tuition program, as defined in
12057 Section 529(b) of the Internal Revenue Code, established and
12058 maintained by this state or any official, agency or instrumentality of the
12059 state;

12060 (xiii) To the extent allowable under section 12-701a, contributions to
12061 accounts established pursuant to any qualified state tuition program, as
12062 defined in Section 529(b) of the Internal Revenue Code, established and
12063 maintained by this state or any official, agency or instrumentality of the
12064 state;

12065 (xiv) To the extent properly includable in gross income for federal
12066 income tax purposes, the amount of any Holocaust victims' settlement
12067 payment received in the taxable year by a Holocaust victim;

12068 (xv) To the extent properly includable in the gross income for federal
12069 income tax purposes of a designated beneficiary, as defined in section
12070 3-123aa, interest, dividends or capital gains earned on contributions to
12071 accounts established for the designated beneficiary pursuant to the
12072 Connecticut Homecare Option Program for the Elderly established by
12073 sections 3-123aa to 3-123ff, inclusive;

12074 (xvi) To the extent properly includable in gross income for federal
12075 income tax purposes, any income received from the United States
12076 government as retirement pay for a retired member of (I) the Armed
12077 Forces of the United States, as defined in Section 101 of Title 10 of the
12078 United States Code, [or] (II) the National Guard, as defined in Section
12079 101 of Title 10 of the United States Code, or (III) the commissioned corps
12080 of the Public Health Service, as defined in Section 101 of Title 10 of the
12081 United States Code;

12082 (xvii) To the extent properly includable in gross income for federal
12083 income tax purposes for the taxable year, any income from the discharge
12084 of indebtedness in connection with any reacquisition, after December
12085 31, 2008, and before January 1, 2011, of an applicable debt instrument or

12086 instruments, as those terms are defined in Section 108 of the Internal
12087 Revenue Code, as amended by Section 1231 of the American Recovery
12088 and Reinvestment Act of 2009, to the extent any such income was added
12089 to federal adjusted gross income pursuant to subparagraph (A)(xi) of
12090 this subdivision in computing Connecticut adjusted gross income for a
12091 preceding taxable year;

12092 (xviii) To the extent not deductible in determining federal adjusted
12093 gross income, the amount of any contribution to a manufacturing
12094 reinvestment account established pursuant to section 32-9zz in the
12095 taxable year that such contribution is made;

12096 (xix) To the extent properly includable in gross income for federal
12097 income tax purposes, (I) for the taxable year commencing January 1,
12098 2015, ten per cent of the income received from the state teachers'
12099 retirement system, (II) for the taxable years commencing January 1,
12100 2016, to January 1, 2020, inclusive, twenty-five per cent of the income
12101 received from the state teachers' retirement system, and (III) for the
12102 taxable year commencing January 1, 2021, and each taxable year
12103 thereafter, fifty per cent of the income received from the state teachers'
12104 retirement system or, for a taxpayer whose federal adjusted gross
12105 income does not exceed the applicable threshold under clause (xx) of
12106 this subparagraph, the percentage pursuant to said clause of the income
12107 received from the state teachers' retirement system, whichever
12108 deduction is greater;

12109 (xx) To the extent properly includable in gross income for federal
12110 income tax purposes, except for retirement benefits under clause (iv) of
12111 this subparagraph and retirement pay under clause (xvi) of this
12112 subparagraph, for a person who files a return under the federal income
12113 tax as an unmarried individual whose federal adjusted gross income for
12114 such taxable year is less than seventy-five thousand dollars, or as a
12115 married individual filing separately whose federal adjusted gross
12116 income for such taxable year is less than seventy-five thousand dollars,
12117 or as a head of household whose federal adjusted gross income for such
12118 taxable year is less than seventy-five thousand dollars, or for a husband

12119 and wife who file a return under the federal income tax as married
 12120 individuals filing jointly whose federal adjusted gross income for such
 12121 taxable year is less than one hundred thousand dollars, (I) for the taxable
 12122 year commencing January 1, 2019, fourteen per cent of any pension or
 12123 annuity income, (II) for the taxable year commencing January 1, 2020,
 12124 twenty-eight per cent of any pension or annuity income, (III) for the
 12125 taxable year commencing January 1, 2021, forty-two per cent of any
 12126 pension or annuity income, and (IV) for the taxable years commencing
 12127 January 1, 2022, and January 1, 2023, one hundred per cent of any
 12128 pension or annuity income;

12129 (xxi) To the extent properly includable in gross income for federal
 12130 income tax purposes, except for retirement benefits under clause (iv) of
 12131 this subparagraph and retirement pay under clause (xvi) of this
 12132 subparagraph, any pension or annuity income for the taxable year
 12133 commencing on or after January 1, 2024, and each taxable year
 12134 thereafter, in accordance with the following schedule, for a person who
 12135 files a return under the federal income tax as an unmarried individual
 12136 whose federal adjusted gross income for such taxable year is less than
 12137 one hundred thousand dollars, or as a married individual filing
 12138 separately whose federal adjusted gross income for such taxable year is
 12139 less than one hundred thousand dollars, or as a head of household
 12140 whose federal adjusted gross income for such taxable year is less than
 12141 one hundred thousand dollars:

T1112	Federal Adjusted Gross Income	Deduction
T1113	Less than \$75,000	100.0%
T1114	\$75,000 but not over \$77,499	85.0%
T1115	\$77,500 but not over \$79,999	70.0%
T1116	\$80,000 but not over \$82,499	55.0%
T1117	\$82,500 but not over \$84,999	40.0%
T1118	\$85,000 but not over \$87,499	25.0%
T1119	\$87,500 but not over \$89,999	10.0%
T1120	\$90,000 but not over \$94,999	5.0%
T1121	\$95,000 but not over \$99,999	2.5%

T1122	\$100,000 and over	0.0%

12142 (xxii) To the extent properly includable in gross income for federal
 12143 income tax purposes, except for retirement benefits under clause (iv) of
 12144 this subparagraph and retirement pay under clause (xvi) of this
 12145 subparagraph, any pension or annuity income for the taxable year
 12146 commencing on or after January 1, 2024, and each taxable year
 12147 thereafter, in accordance with the following schedule for married
 12148 individuals who file a return under the federal income tax as married
 12149 individuals filing jointly whose federal adjusted gross income for such
 12150 taxable year is less than one hundred fifty thousand dollars:

T1123	Federal Adjusted Gross Income	Deduction
T1124	Less than \$100,000	100.0%
T1125	\$100,000 but not over \$104,999	85.0%
T1126	\$105,000 but not over \$109,999	70.0%
T1127	\$110,000 but not over \$114,999	55.0%
T1128	\$115,000 but not over \$119,999	40.0%
T1129	\$120,000 but not over \$124,999	25.0%
T1130	\$125,000 but not over \$129,999	10.0%
T1131	\$130,000 but not over \$139,999	5.0%
T1132	\$140,000 but not over \$149,999	2.5%
T1133	\$150,000 and over	0.0%

12151 (xxiii) The amount of lost wages and medical, travel and housing
 12152 expenses, not to exceed ten thousand dollars in the aggregate, incurred
 12153 by a taxpayer during the taxable year in connection with the donation
 12154 to another person of an organ for organ transplantation occurring on or
 12155 after January 1, 2017;

12156 (xxiv) To the extent properly includable in gross income for federal
 12157 income tax purposes, the amount of any financial assistance received
 12158 from the Crumbling Foundations Assistance Fund or paid to or on

12159 behalf of the owner of a residential building pursuant to sections 8-442
12160 and 8-443;

12161 (xxv) To the extent properly includable in gross income for federal
12162 income tax purposes, the amount calculated pursuant to subsection (b)
12163 of section 12-704g for income received by a general partner of a venture
12164 capital fund, as defined in 17 CFR 275.203(l)-1, as amended from time to
12165 time;

12166 (xxvi) To the extent any portion of a deduction under Section 179 of
12167 the Internal Revenue Code was added to federal adjusted gross income
12168 pursuant to subparagraph (A)(xiv) of this subdivision in computing
12169 Connecticut adjusted gross income, twenty-five per cent of such
12170 disallowed portion of the deduction in each of the four succeeding
12171 taxable years;

12172 (xxvii) To the extent properly includable in gross income for federal
12173 income tax purposes, for a person who files a return under the federal
12174 income tax as an unmarried individual whose federal adjusted gross
12175 income for such taxable year is less than seventy-five thousand dollars,
12176 or as a married individual filing separately whose federal adjusted gross
12177 income for such taxable year is less than seventy-five thousand dollars,
12178 or as a head of household whose federal adjusted gross income for such
12179 taxable year is less than seventy-five thousand dollars, or for a husband
12180 and wife who file a return under the federal income tax as married
12181 individuals filing jointly whose federal adjusted gross income for such
12182 taxable year is less than one hundred thousand dollars, for the taxable
12183 year commencing January 1, 2023, twenty-five per cent of any
12184 distribution from an individual retirement account other than a Roth
12185 individual retirement account;

12186 (xxviii) To the extent properly includable in gross income for federal
12187 income tax purposes, for a person who files a return under the federal
12188 income tax as an unmarried individual whose federal adjusted gross
12189 income for such taxable year is less than one hundred thousand dollars,
12190 or as a married individual filing separately whose federal adjusted gross

12191 income for such taxable year is less than one hundred thousand dollars,
 12192 or as a head of household whose federal adjusted gross income for such
 12193 taxable year is less than one hundred thousand dollars, (I) for the taxable
 12194 year commencing January 1, 2024, fifty per cent of any distribution from
 12195 an individual retirement account other than a Roth individual
 12196 retirement account, (II) for the taxable year commencing January 1, 2025,
 12197 seventy-five per cent of any distribution from an individual retirement
 12198 account other than a Roth individual retirement account, and (III) for
 12199 the taxable year commencing January 1, 2026, and each taxable year
 12200 thereafter, any distribution from an individual retirement account other
 12201 than a Roth individual retirement account. The subtraction under this
 12202 clause shall be made in accordance with the following schedule:

T1134	Federal Adjusted Gross Income	Deduction
T1135	Less than \$75,000	100.0%
T1136	\$75,000 but not over \$77,499	85.0%
T1137	\$77,500 but not over \$79,999	70.0%
T1138	\$80,000 but not over \$82,499	55.0%
T1139	\$82,500 but not over \$84,999	40.0%
T1140	\$85,000 but not over \$87,499	25.0%
T1141	\$87,500 but not over \$89,999	10.0%
T1142	\$90,000 but not over \$94,999	5.0%
T1143	\$95,000 but not over \$99,999	2.5%
T1144	\$100,000 and over	0.0%

12203 (xxix) To the extent properly includable in gross income for federal
 12204 income tax purposes, for married individuals who file a return under
 12205 the federal income tax as married individuals filing jointly whose
 12206 federal adjusted gross income for such taxable year is less than one
 12207 hundred fifty thousand dollars, (I) for the taxable year commencing
 12208 January 1, 2024, fifty per cent of any distribution from an individual
 12209 retirement account other than a Roth individual retirement account, (II)
 12210 for the taxable year commencing January 1, 2025, seventy-five per cent
 12211 of any distribution from an individual retirement account other than a

12212 Roth individual retirement account, and (III) for the taxable year
 12213 commencing January 1, 2026, and each taxable year thereafter, any
 12214 distribution from an individual retirement account other than a Roth
 12215 individual retirement account. The subtraction under this clause shall
 12216 be made in accordance with the following schedule:

T1145	Federal Adjusted Gross Income	Deduction
T1146	Less than \$100,000	100.0%
T1147	\$100,000 but not over \$104,999	85.0%
T1148	\$105,000 but not over \$109,999	70.0%
T1149	\$110,000 but not over \$114,999	55.0%
T1150	\$115,000 but not over \$119,999	40.0%
T1151	\$120,000 but not over \$124,999	25.0%
T1152	\$125,000 but not over \$129,999	10.0%
T1153	\$130,000 but not over \$139,999	5.0%
T1154	\$140,000 but not over \$149,999	2.5%
T1155	\$150,000 and over	0.0%

12217 (xxx) To the extent properly includable in gross income for federal
 12218 income tax purposes, for the taxable year commencing January 1, 2022,
 12219 the amount or amounts paid or otherwise credited to any eligible
 12220 resident of this state under (I) the 2020 Earned Income Tax Credit
 12221 enhancement program from funding allocated to the state through the
 12222 Coronavirus Relief Fund established under the Coronavirus Aid, Relief,
 12223 and Economic Security Act, P.L. 116-136, and (II) the 2021 Earned
 12224 Income Tax Credit enhancement program from funding allocated to the
 12225 state pursuant to Section 9901 of Subtitle M of Title IX of the American
 12226 Rescue Plan Act of 2021, P.L. 117-2;

12227 (xxxi) For the taxable year commencing January 1, 2023, and each
 12228 taxable year thereafter, for a taxpayer licensed under the provisions of
 12229 chapter 420f or 420h, the amount of ordinary and necessary expenses
 12230 that would be eligible to be claimed as a deduction for federal income
 12231 tax purposes under Section 162(a) of the Internal Revenue Code but that

12232 are disallowed under Section 280E of the Internal Revenue Code
12233 because marijuana is a controlled substance under the federal
12234 Controlled Substance Act;

12235 (xxxii) To the extent properly includable in gross income for federal
12236 income tax purposes, for the taxable year commencing on or after
12237 January 1, 2025, and each taxable year thereafter, any common stock
12238 received by the taxpayer during the taxable year under a share plan, as
12239 defined in section 12-217ss;

12240 (xxxiii) To the extent properly includable in gross income for federal
12241 income tax purposes, the amount of any student loan reimbursement
12242 payment received by a taxpayer pursuant to section 10a-19m;

12243 (xxxiv) Contributions to an ABLE account established pursuant to
12244 sections 3-39k to 3-39q, inclusive, not to exceed five thousand dollars for
12245 each individual taxpayer or ten thousand dollars for taxpayers filing a
12246 joint return;

12247 (xxxv) To the extent properly includable in gross income for federal
12248 income tax purposes, the amount of any payment received pursuant to
12249 subsection (c) of section 3-122a;

12250 (xxxvi) For an account holder, as defined in section 12-724b, who files
12251 a return under the federal income tax as an unmarried individual, a
12252 married individual filing separately or a head of household, whose
12253 federal adjusted gross income for the taxable year is less than one
12254 hundred twenty-five thousand dollars or who files a return under the
12255 federal income tax as married individuals filing jointly whose federal
12256 adjusted gross income for the taxable year is less than two hundred fifty
12257 thousand dollars:

12258 (I) To the extent not deductible in determining federal adjusted gross
12259 income, for the taxable year commencing January 1, 2027, an amount
12260 equal to the contributions deposited during the taxable years
12261 commencing January 1, 2026, and January 1, 2027, in a first-time
12262 homebuyer savings account established pursuant to subsection (c) of

12263 section 12-724b, less any amounts withdrawn during said taxable years
12264 by the account holder from such account under subparagraph (D) of
12265 subdivision (2) of subsection (f) of section 12-724b. The amount claimed
12266 under this subclause shall not exceed two thousand five hundred
12267 dollars for each such taxable year for an unmarried individual, a
12268 married individual filing separately or a head of household and five
12269 thousand dollars for each such taxable year for married individuals
12270 filing jointly;

12271 (II) To the extent not deductible in determining federal adjusted gross
12272 income, for the taxable year commencing January 1, 2028, and each
12273 taxable year thereafter, an amount equal to the contributions deposited
12274 during the taxable year in a first-time homebuyer savings account
12275 established pursuant to subsection (c) of section 12-724b, less any
12276 amounts withdrawn during the taxable year by the account holder from
12277 such account pursuant to subparagraph (D) of subdivision (2) of
12278 subsection (f) of section 12-724b. The amount allowed to be claimed
12279 under this subclause for the taxable year shall not exceed two thousand
12280 five hundred dollars for an unmarried individual, a married individual
12281 filing separately or a head of household and five thousand dollars for
12282 married individuals filing jointly; and

12283 (III) To the extent properly includable in gross income for federal
12284 income tax purposes, for the taxable year commencing January 1, 2027,
12285 and each taxable year thereafter, an amount equal to the sum of all
12286 interest accrued on a first-time homebuyer savings account, established
12287 pursuant to subsection (c) of section 12-724b, during the taxable year;
12288 and

12289 (xxxvii) To the extent properly includable in gross income for federal
12290 income tax purposes, for the taxable year commencing January 1, 2027,
12291 and each taxable year thereafter, for an account holder who is a qualified
12292 beneficiary of a first-time homebuyer savings account, as those terms
12293 are defined in section 12-724b, and who files a return under the federal
12294 income tax as an unmarried individual, a married individual filing
12295 separately or a head of household, whose federal adjusted gross income

12296 for the taxable year is less than one hundred twenty-five thousand
 12297 dollars or who files a return under the federal income tax as married
 12298 individuals filing jointly whose federal adjusted gross income for the
 12299 taxable year is less than two hundred fifty thousand dollars, an amount
 12300 equal to any withdrawal from such account that is used to pay or
 12301 reimburse such qualified beneficiary for eligible costs, as defined in
 12302 section 12-724b, incurred by the qualified beneficiary.

12303 Sec. 278. Section 460 of public act 25-168 is amended to read as follows
 12304 (*Effective July 1, 2026*):

12305 The appropriations in section 1 of [this act] public act 25-168, as
 12306 amended by section 1 of this act, are supported by the GENERAL FUND
 12307 revenue estimates as follows:

T1156		2025-2026	2026-2027
T1157	TAXES		
T1158	Personal Income		
T1159	Withholding	\$9,287,200,000	[\$9,645,100,000] <u>\$9,864,000,000</u>
T1160	Estimates and Finals	3,343,700,000	[3,434,700,000] <u>4,098,300,000</u>
T1161	Sales and Use	5,103,100,000	[5,230,300,000] <u>5,436,500,000</u>
T1162	Corporations	1,659,500,000	[1,656,300,000] <u>1,352,600,000</u>
T1163	Pass-Through Entities	2,115,300,000	[2,170,300,000] <u>2,435,600,000</u>
T1164	Public Service	319,400,000	[322,200,000] <u>347,500,000</u>
T1165	Inheritance and Estate	176,000,000	[235,700,000] <u>200,700,000</u>
T1166	Insurance Companies	323,900,000	[328,600,000] <u>384,400,000</u>
T1167	Cigarettes	228,100,000	[215,800,000] <u>203,800,000</u>
T1168	Real Estate Conveyance	295,200,000	[299,300,000] <u>338,300,000</u>

T1169	Alcoholic Beverages	79,100,000	[79,500,000] <u>76,600,000</u>
T1170	Admissions and Dues	39,700,000	[40,200,000] <u>44,800,000</u>
T1171	Health Provider Tax	916,900,000	[1,293,200,000] <u>121,600,000</u>
T1172	Miscellaneous	21,900,000	[21,300,000] <u>19,900,000</u>
T1173	TOTAL TAXES	23,909,000,000	[24,972,500,000] <u>24,924,600,000</u>
T1174			
T1175	Refunds of Taxes	(1,966,800,000)	[(2,040,800,000)] <u>(2,073,800,000)</u>
T1176	Earned Income Tax Credit	(235,400,000)	(240,500,000)
T1177	R & D Credit Exchange	(9,800,000)	[(10,100,000)] <u>(14,800,000)</u>
T1178	NET GENERAL FUND REVENUE	21,697,000,000	[22,681,100,000] <u>22,595,500,000</u>
T1179			
T1180	OTHER REVENUE		
T1181	Transfers - Special Revenue	376,300,000	[385,700,000] <u>381,700,000</u>
T1182	Indian Gaming Payments	334,600,000	[349,900,000] <u>380,100,000</u>
T1183	Licenses, Permits, Fees	362,900,000	[335,600,000] <u>340,200,000</u>
T1184	Sales of Commodities	17,300,000	[17,600,000] <u>18,000,000</u>
T1185	Rents, Fines and Escheats	203,200,000	[198,300,000] <u>251,400,000</u>
T1186	Investment Income	301,500,000	[251,400,000] <u>236,400,000</u>
T1187	Miscellaneous	189,100,000	[194,100,000] <u>167,100,000</u>
T1188	Refunds of Payments	(89,700,000)	[(92,100,000)] <u>(108,900,000)</u>
T1189	NET TOTAL OTHER REVENUE	1,695,200,000	[1,640,500,000] <u>1,666,000,000</u>
T1190			
T1191	OTHER SOURCES		

T1192	Federal Grants	1,853,200,000	[2,035,300,000] <u>2,211,800,000</u>
T1193	Transfer From Tobacco Settlement	91,800,000	[90,200,000] <u>86,000,000</u>
T1194	Transfers (To)/From Other Funds	(261,353,800)	[89,300,000] <u>306,300,000</u>
T1195	Transfer to Budget Reserve Fund - Volatility Cap	(730,400,000)	[(622,700,000)] <u>(1,531,400,000)</u>
T1196	NET TOTAL OTHER SOURCES	953,246,200	[1,592,100,000] <u>1,072,700,000</u>
T1197			
T1198	TOTAL GENERAL FUND REVENUE	24,345,446,200	[25,913,700,000] <u>25,334,200,000</u>

12308 Sec. 279. Section 461 of public act 25-168 is amended to read as follows

12309 (*Effective July 1, 2026*):

12310 The appropriations in section 2 of [this act] public act 25-168, as

12311 amended by section 2 of this act, are supported by the SPECIAL

12312 TRANSPORTATION FUND revenue estimates as follows:

T1199		2025-2026	2026-2027
T1200	TAXES		
T1201	Motor Fuels	\$502,000,000	[\$494,400,000] <u>\$504,500,000</u>
T1202	Oil Companies	293,800,000	[300,200,000] <u>358,400,000</u>
T1203	Sales and Use	879,150,000	[902,250,000] <u>916,800,000</u>
T1204	Sales Tax DMV	118,100,000	[119,300,000] <u>110,800,000</u>
T1205	Highway Use Tax	61,700,000	[62,600,000] <u>61,700,000</u>
T1206	Refund of Taxes	(10,300,000)	(10,600,000)
T1207	TOTAL TAXES	1,844,450,000	[1,868,150,000] <u>1,941,600,000</u>
T1208			
T1209	OTHER SOURCES		

T1210	Motor Vehicle Receipts	282,100,000	[283,400,000] <u>272,300,000</u>
T1211	Licenses, Permits, Fees	134,900,000	[137,200,000] <u>141,100,000</u>
T1212	Interest Income	47,000,000	[41,500,000] <u>64,400,000</u>
T1213	Federal Grants	-	-
T1214	Transfers (To)/From Other Funds	11,500,000	[117,500,000] <u>217,500,000</u>
T1215	Refunds of Payments	(10,900,000)	[(11,100,000)] <u>(12,300,000)</u>
T1216	NET TOTAL OTHER SOURCES	464,600,000	[568,500,000] <u>683,000,000</u>
T1217			
T1218	TOTAL SPECIAL TRANSPORTATION FUND REVENUE	2,309,050,000	[2,436,650,000] <u>2,624,600,000</u>

12313 Sec. 280. Section 462 of public act 25-168 is amended to read as follows
 12314 (*Effective July 1, 2026*):

12315 The appropriations in section 3 of [this act] public act 25-168, as
 12316 amended by section 3 of this act, are supported by the
 12317 MASHANTUCKET PEQUOT AND MOHEGAN FUND revenue
 12318 estimates as follows:

T1219		2025-2026	2026-2027
T1220	Transfers from General Fund	\$52,600,000	[\$52,600,000] <u>\$54,300,000</u>
T1221	TOTAL MASHANTUCKET PEQUOT AND MOHEGAN FUND REVENUE	52,600,000	[52,600,000] <u>54,300,000</u>

12319 Sec. 281. Section 463 of public act 25-168 is amended to read as follows
 12320 (*Effective July 1, 2026*):

12321 The appropriations in section 4 of [this act] public act 25-168, as
 12322 amended by section 4 of this act, are supported by the BANKING FUND

12323 revenue estimates as follows:

T1222		2025-2026	2026-2027
T1223	Fees and Assessments	\$36,400,000	[\$36,600,000] <u>33,700,000</u>
T1224	TOTAL BANKING FUND REVENUE	36,400,000	[36,600,000] <u>33,700,000</u>

12324 Sec. 282. Section 464 of public act 25-168 is amended to read as follows
 12325 (*Effective July 1, 2026*):

12326 The appropriations in section 5 of [this act] public act 25-168, as
 12327 amended by section 5 of this act, are supported by the INSURANCE
 12328 FUND revenue estimates as follows:

T1225		2025-2026	2026-2027
T1226	Fees and Assessments	\$126,400,000	[\$128,900,000] <u>\$118,600,000</u>
T1227	TOTAL INSURANCE FUND REVENUE	126,400,000	[128,900,000] <u>118,600,000</u>

12329 Sec. 283. Section 465 of public act 25-168 is amended to read as follows
 12330 (*Effective July 1, 2026*):

12331 The appropriations in section 6 of [this act] public act 25-168, as
 12332 amended by section 6 of this act, are supported by the CONSUMER
 12333 COUNSEL AND PUBLIC UTILITY CONTROL FUND revenue
 12334 estimates as follows:

T1228		2025-2026	2026-2027
T1229	Fees and Assessments	\$37,800,000	[\$38,500,000] <u>\$38,400,000</u>
T1230	TOTAL CONSUMER COUNSEL AND PUBLIC UTILITY CONTROL FUND REVENUE	37,800,000	[38,500,000] <u>38,400,000</u>

12335 Sec. 284. Section 466 of public act 25-168 is amended to read as follows
 12336 (*Effective July 1, 2026*):

12337 The appropriations in section 7 of [this act] public act 25-168, as
 12338 amended by section 7 of this act, are supported by the WORKERS'
 12339 COMPENSATION FUND revenue estimates as follows:

T1231		2025-2026	2026-2027
T1232	Fees and Assessments	\$27,300,000	[\$27,500,000] \$28,000,000
T1233	TOTAL WORKERS' COMPENSATION FUND REVENUE	27,300,000	[27,500,000] 28,000,000

12340 Sec. 285. Section 468 of public act 25-168 is amended to read as follows
 12341 (*Effective July 1, 2026*):

12342 The appropriations in section 9 of [this act] public act 25-168 are
 12343 supported by the TOURISM FUND revenue estimates as follows:

T1234		2025-2026	2026-2027
T1235	Room Occupancy Tax	\$15,500,000	[\$16,000,000] \$17,600,000
T1236	Use of Funds From Prior Years	2,500,000	3,000,000
T1237	Use of Prior Year's Balance		300,000
T1238	TOTAL TOURISM FUND REVENUE	18,000,000	[19,000,000] 20,900,000

12344 Sec. 286. Section 471 of public act 25-168 is amended to read as follows
 12345 (*Effective July 1, 2026*):

12346 The appropriations in section 12 of [this act] public act 25-168, as
 12347 amended by section 9 of this act, are supported by the MUNICIPAL
 12348 REVENUE SHARING FUND revenue estimates as follows:

T1239		2025-2026	2026-2027

T1240	Sales and Use Tax	\$459,250,000	[\$470,550,000] <u>\$482,400,000</u>
T1241	Transfers (To)/From Other Funds	101,000,000	[90,000,000] <u>75,000,000</u>
T1242	TOTAL MUNICIPAL REVENUE SHARING FUND REVENUE	560,250,000	[560,550,000] <u>557,400,000</u>

12349 Sec. 287. Section 469 of public act 25-168 is amended to read as follows
 12350 (*Effective July 1, 2026*):

12351 The appropriations in section 10 of [this act] public act 25-168 are
 12352 supported by the CANNABIS PREVENTION AND RECOVERY
 12353 SERVICES FUND revenue estimates as follows:

T1243		2025-2026	2026-2027
T1244	Cannabis Excise Tax	\$5,900,000	[\$6,200,000] <u>7,400,000</u>
T1245	TOTAL CANNABIS PREVENTION AND RECOVERY SERVICES FUND REVENUE	5,900,000	[6,200,000] <u>7,400,000</u>

12354 Sec. 288. Section 470 of public act 25-168 is amended to read as follows
 12355 (*Effective July 1, 2026*):

12356 The appropriations in section 11 of [this act] public act 25-168 are
 12357 supported by the CANNABIS REGULATORY FUND revenue estimates
 12358 as follows:

T1246		2025-2026	2026-2027
T1247	[Cannabis Excise Tax] <u>Transfers (To)/From Other Funds</u>	\$10,300,000	\$10,500,000
T1248	TOTAL CANNABIS REGULATORY FUND REVENUE	10,300,000	10,500,000

12359 Sec. 289. (*Effective July 1, 2026*) The State Bond Commission shall have
 12360 power, in accordance with the provisions of this section and sections 290
 12361 to 295, inclusive, of this act, from time to time to authorize the issuance
 12362 of bonds of the state in one or more series and in principal amounts in

12363 the aggregate not exceeding \$231,200,000.

12364 Sec. 290. (*Effective July 1, 2026*) The proceeds of the sale of bonds
12365 described in sections 286 to 295, inclusive, of this act, to the extent
12366 hereinafter stated, shall be used for the purpose of acquiring, by
12367 purchase or condemnation, undertaking, constructing, reconstructing,
12368 improving or equipping, or purchasing land or buildings or improving
12369 sites for the projects hereinafter described, including payment of
12370 architectural, engineering, demolition or related costs in connection
12371 therewith, or of payment of the cost of long-range capital programming
12372 and space utilization studies as hereinafter stated:

12373 (a) For the Department of Administrative Services: Site acquisition,
12374 planning activities and construction costs to replace the current fleet
12375 garage in Wethersfield, not exceeding \$20,000,000.

12376 (b) For the Department of Emergency Services and Public Protection:
12377 Purchase, construction and maintenance of a new mesonet system, not
12378 exceeding \$1,500,000.

12379 (c) For the Department of Correction:

12380 (1) Security upgrades, including, but not limited to, new doors,
12381 information technology upgrades, security cameras and other work to
12382 ensure the safety of the department's employees and inmates, not
12383 exceeding \$10,000,000;

12384 (2) Electronic health records systems, including digital medical care
12385 request systems, devices and access points, not exceeding \$10,000,000.

12386 (d) For the Department of Energy and Environmental Protection:
12387 Natural diversity data base mapping enhancements and other
12388 information technology resources to streamline the department's
12389 permitting and environmental review processes, not exceeding
12390 \$5,000,000.

12391 (e) For the Department of Children and Families: Internet web site

12392 with a public, online dashboard to provide real-time information
12393 concerning the department's state-wide program of services described
12394 in section 17a-3 of the general statutes, not exceeding \$1,500,000.

12395 (f) For the Connecticut State Colleges and Universities, Naugatuck
12396 Valley Community College: Construction of Kinney Hall, not exceeding
12397 \$63,200,000.

12398 (g) For the Technical Education and Career System:

12399 (1) Design and construction of Vinal Technical High School, not
12400 exceeding \$50,000,000;

12401 (2) A new technology center, not exceeding \$70,000,000.

12402 Sec. 291. (*Effective July 1, 2026*) All provisions of section 3-20 of the
12403 general statutes or the exercise of any right or power granted thereby
12404 which are not inconsistent with the provisions of sections 289 to 295,
12405 inclusive, of this act are hereby adopted and shall apply to all bonds
12406 authorized by the State Bond Commission pursuant to sections 289 to
12407 295, inclusive, of this act and temporary notes issued in anticipation of
12408 the money to be derived from the sale of any such bonds so authorized
12409 may be issued in accordance with said section 3-20 and from time to
12410 time renewed. Such bonds shall mature at such time or times not
12411 exceeding twenty years from their respective dates as may be provided
12412 in or pursuant to the resolution or resolutions of the State Bond
12413 Commission authorizing such bonds.

12414 Sec. 292. (*Effective July 1, 2026*) None of the bonds described in
12415 sections 289 to 295, inclusive, of this act shall be authorized except upon
12416 a finding by the State Bond Commission that there has been filed with
12417 it a request for such authorization, which is signed by the Secretary of
12418 the Office of Policy and Management or by or on behalf of such state
12419 officer, department or agency and stating such terms and conditions as
12420 said commission, in its discretion, may require.

12421 Sec. 293. (*Effective July 1, 2026*) For the purposes of sections 289 to 295,

12422 inclusive, of this act, "state moneys" means the proceeds of the sale of
12423 bonds authorized pursuant to said sections 289 to 295, inclusive, or of
12424 temporary notes issued in anticipation of the moneys to be derived from
12425 the sale of such bonds. Each request filed as provided in section 292 of
12426 this act for an authorization of bonds shall identify the project for which
12427 the proceeds of the sale of such bonds are to be used and expended and,
12428 in addition to any terms and conditions required pursuant to said
12429 section 292, shall include the recommendation of the person signing
12430 such request as to the extent to which federal, private or other moneys
12431 then available or thereafter to be made available for costs in connection
12432 with any such project should be added to the state moneys available or
12433 becoming available hereunder for such project. If the request includes a
12434 recommendation that some amount of such federal, private or other
12435 moneys should be added to such state moneys, then, if and to the extent
12436 directed by the State Bond Commission at the time of authorization of
12437 such bonds, such amount of such federal, private or other moneys then
12438 available, or thereafter to be made available for costs in connection with
12439 such project, may be added to any state moneys available or becoming
12440 available hereunder for such project and shall be used for such project.
12441 Any other federal, private or other moneys then available or thereafter
12442 to be made available for costs in connection with such project shall,
12443 upon receipt, be used by the State Treasurer, in conformity with
12444 applicable federal and state law, to meet the principal of outstanding
12445 bonds issued pursuant to sections 289 to 295, inclusive, of this act, or to
12446 meet the principal of temporary notes issued in anticipation of the
12447 money to be derived from the sale of bonds theretofore authorized
12448 pursuant to said sections 1 to 7, inclusive, for the purpose of financing
12449 such costs, either by purchase or redemption and cancellation of such
12450 bonds or notes or by payment thereof at maturity. Whenever any of the
12451 federal, private or other moneys so received with respect to such project
12452 are used to meet the principal of such temporary notes or whenever
12453 principal of any such temporary notes is retired by application of
12454 revenue receipts of the state, the amount of bonds theretofore
12455 authorized in anticipation of which such temporary notes were issued,
12456 and the aggregate amount of bonds which may be authorized pursuant

12457 to section 289 of this act, shall each be reduced by the amount of the
12458 principal so met or retired. Pending use of the federal, private or other
12459 moneys so received to meet principal as hereinabove directed, the
12460 amount thereof may be invested by the State Treasurer in bonds or
12461 obligations of, or guaranteed by, the state or the United States or
12462 agencies or instrumentalities of the United States, shall be deemed to be
12463 part of the debt retirement funds of the state, and net earnings on such
12464 investments shall be used in the same manner as the moneys so
12465 invested.

12466 Sec. 294. (*Effective July 1, 2026*) Any balance of proceeds of the sale of
12467 said bonds authorized for any project described in section 290 of this act
12468 in excess of the cost of such project may be used to complete any other
12469 project described in said section 2, if the State Bond Commission shall
12470 so determine and direct. Any balance of proceeds of the sale of said
12471 bonds in excess of the costs of all the projects described in said section 2
12472 shall be deposited to the credit of the General Fund.

12473 Sec. 295. (*Effective July 1, 2026*) The bonds issued pursuant to this
12474 section and sections 289 to 294, inclusive, of this act shall be general
12475 obligations of the state and the full faith and credit of the state of
12476 Connecticut are pledged for the payment of the principal of and interest
12477 on said bonds as the same become due, and accordingly and as part of
12478 the contract of the state with the holders of said bonds, appropriation of
12479 all amounts necessary for punctual payment of such principal and
12480 interest is hereby made, and the State Treasurer shall pay such principal
12481 and interest as the same become due.

12482 Sec. 296. (*Effective July 1, 2026*) The State Bond Commission shall have
12483 power, in accordance with the provisions of this section and sections 297
12484 to 303, inclusive, of this act, from time to time to authorize the issuance
12485 of bonds of the state in one or more series and in principal amounts in
12486 the aggregate, not exceeding \$64,000,000.

12487 Sec. 297. (*Effective July 1, 2026*) The proceeds of the sale of the bonds
12488 described in sections 296 to 303, inclusive, of this act shall be used for

12489 the purpose of providing grants-in-aid and other financing for the
12490 projects, programs and purposes hereinafter stated:

12491 (a) For the Department of Economic and Community Development:

12492 (1) Grants-in-aid to municipalities and nonprofit providers of human
12493 or social services for capital expenditure projects to place or maintain
12494 war or veterans' memorials or monuments, not exceeding \$2,000,000;

12495 (2) Grant-in-aid to the town of East Haven for costs associated with
12496 the planning, design, acquisition, construction, reconstruction,
12497 renovation, expansion, improvement, furnishing and equipping one or
12498 more public safety facilities, including, but not limited to, the
12499 construction of one or more new facilities or the acquisition, renovation,
12500 conversion or improvement of one or more existing buildings for use as
12501 public safety facilities, together with any related site acquisition, site
12502 preparation, utilities, infrastructure improvements and appurtenances,
12503 not exceeding \$40,000,000;

12504 (3) Grant-in-aid to the town of East Haven to support infrastructure,
12505 transportation, traffic safety, environmental remediation or other public
12506 improvement projects located on the East Haven shoreline and in the
12507 neighborhood areas adjacent to Tweed-New Haven Airport, including,
12508 but not limited to, roadway and pedestrian safety improvements,
12509 stormwater and drainage infrastructure, streetscape enhancements,
12510 environmental mitigation projects and related public infrastructure
12511 improvements for the benefit of residents, businesses and visitors to
12512 said shoreline and neighborhoods, not exceeding \$5,000,000;

12513 (4) Grant-in-aid to the Tweed-New Haven Airport Authority for the
12514 design, construction, reconstruction and improvement of external roads
12515 servicing the Tweed-New Haven Airport and for property acquisition,
12516 easements or other real property interests necessary to facilitate ingress
12517 and egress to such airport, but not including the construction of a new
12518 passenger terminal facility, new parking spaces, access from any new
12519 parking spaces to Proto Drive in the town of East Haven or any

12520 connections to South End Road in said town, not exceeding \$5,000,000;

12521 (5) Grant-in-aid to the city of New Haven to support infrastructure,
12522 transportation, traffic safety, environmental remediation or other public
12523 improvement projects located in the East Shore and Annex
12524 neighborhoods of said city, including, but not limited to, roadway and
12525 pedestrian safety improvements, stormwater and drainage
12526 infrastructure, streetscape enhancements, environmental mitigation
12527 projects and related public infrastructure improvements for the benefit
12528 of residents, businesses and visitors to said neighborhoods, not
12529 exceeding \$5,000,000.

12530 (b) For the Office of Policy and Management: Grants-in-aid to
12531 municipalities for the purchase of nonlethal equipment and crisis
12532 response tools for municipal police departments to use for mental health
12533 crisis responses, not exceeding \$5,000,000.

12534 (c) For the Department of Education: Grants-in-aid to the American
12535 School for the Deaf for alterations, renovations and improvements to the
12536 buildings and grounds, not exceeding \$2,000,000.

12537 Sec. 298. (*Effective July 1, 2026*) All provisions of section 3-20 of the
12538 general statutes or the exercise of any right or power granted thereby
12539 that are not inconsistent with the provisions of sections 296 to 303,
12540 inclusive, of this act are hereby adopted and shall apply to all bonds
12541 authorized by the State Bond Commission pursuant to sections 296 to
12542 303, inclusive, of this act and temporary notes issued in anticipation of
12543 the money to be derived from the sale of any such bonds so authorized
12544 may be issued in accordance with said sections 8 to 15, inclusive, and
12545 from time to time renewed. Such bonds shall mature at such time or
12546 times not exceeding twenty years from their respective dates as may be
12547 provided in or pursuant to the resolution or resolutions of the State
12548 Bond Commission authorizing such bonds.

12549 Sec. 299. (*Effective July 1, 2026*) None of the bonds described in
12550 sections 296 to 303, inclusive, of this act shall be authorized except upon

12551 a finding by the State Bond Commission that there has been filed with
12552 it a request for such authorization, which is signed by the Secretary of
12553 the Office of Policy and Management or by or on behalf of such state
12554 officer, department or agency and stating such terms and conditions as
12555 said commission, in its discretion, may require.

12556 Sec. 300. (*Effective July 1, 2026*) For the purposes of sections 296 to 303,
12557 inclusive, of this act, "state moneys" means the proceeds of the sale of
12558 bonds authorized pursuant to said sections 296 to 303, inclusive, or of
12559 temporary notes issued in anticipation of the moneys to be derived from
12560 the sale of such bonds. Each request filed as provided in section 299 of
12561 this act for an authorization of bonds shall identify the project for which
12562 the proceeds of the sale of such bonds are to be used and expended and,
12563 in addition to any terms and conditions required pursuant to said
12564 section 11, include the recommendation of the person signing such
12565 request as to the extent to which federal, private or other moneys then
12566 available or thereafter to be made available for costs in connection with
12567 any such project should be added to the state moneys available or
12568 becoming available under said sections 296 to 303, inclusive, for such
12569 project. If the request includes a recommendation that some amount of
12570 such federal, private or other moneys should be added to such state
12571 moneys, then, if and to the extent directed by the State Bond
12572 Commission at the time of authorization of such bonds, such amount of
12573 such federal, private or other moneys then available or thereafter to be
12574 made available for costs in connection with such project may be added
12575 to any state moneys available or becoming available hereunder for such
12576 project and be used for such project. Any other federal, private or other
12577 moneys then available or thereafter to be made available for costs in
12578 connection with such project upon receipt shall, in conformity with
12579 applicable federal and state law, be used by the State Treasurer to meet
12580 the principal of outstanding bonds issued pursuant to said sections 8 to
12581 15, inclusive, or to meet the principal of temporary notes issued in
12582 anticipation of the money to be derived from the sale of bonds
12583 theretofore authorized pursuant to said sections 8 to 15, inclusive, for
12584 the purpose of financing such costs, either by purchase or redemption

12585 and cancellation of such bonds or notes or by payment thereof at
12586 maturity. Whenever any of the federal, private or other moneys so
12587 received with respect to such project are used to meet the principal of
12588 such temporary notes or whenever the principal of any such temporary
12589 notes is retired by application of revenue receipts of the state, the
12590 amount of bonds theretofore authorized in anticipation of which such
12591 temporary notes were issued, and the aggregate amount of bonds which
12592 may be authorized pursuant to section 296 of this act shall each be
12593 reduced by the amount of the principal so met or retired. Pending use
12594 of the federal, private or other moneys so received to meet the principal
12595 as directed in this section, the amount thereof may be invested by the
12596 State Treasurer in bonds or obligations of, or guaranteed by, the state or
12597 the United States or agencies or instrumentalities of the United States,
12598 shall be deemed to be part of the debt retirement funds of the state, and
12599 net earnings on such investments shall be used in the same manner as
12600 the moneys so invested.

12601 Sec. 301. (*Effective July 1, 2026*) The bonds issued pursuant to sections
12602 296 to 303, inclusive, of this act shall be general obligations of the state
12603 and the full faith and credit of the state of Connecticut are pledged for
12604 the payment of the principal of and interest on said bonds as the same
12605 become due, and accordingly and as part of the contract of the state with
12606 the holders of said bonds, appropriation of all amounts necessary for
12607 punctual payment of such principal and interest is hereby made, and
12608 the State Treasurer shall pay such principal and interest as the same
12609 become due.

12610 Sec. 302. (*Effective July 1, 2026*) In accordance with section 297 of this
12611 act, the state, through the state agencies specified in said section 297,
12612 may provide grants-in-aid and other financings to or for the agencies for
12613 the purposes and projects as described in said section 9. All financing
12614 shall be made in accordance with the terms of a contract at such time or
12615 times as shall be determined within authorization of funds by the State
12616 Bond Commission.

12617 Sec. 303. (*Effective July 1, 2026*) In the case of any grant-in-aid made

12618 pursuant to subsection (a), (b) or (c) of section 297 of this act that is made
12619 to any entity which is not a political subdivision of the state, the contract
12620 entered into pursuant to section 297 of this act shall provide that if the
12621 premises for which such grant-in-aid was made ceases, within ten years
12622 of the date of such grant, to be used as a facility for which such grant
12623 was made, an amount equal to the amount of such grant, minus ten per
12624 cent per year for each full year which has elapsed since the date of such
12625 grant, shall be repaid to the state and that a lien shall be placed on such
12626 land in favor of the state to ensure that such amount shall be repaid in
12627 the event of such change in use, provided if the premises for which such
12628 grant-in-aid was made are owned by the state, a municipality or a
12629 housing authority, no lien need be placed.

12630 Sec. 304. Section 10-287d of the 2026 supplement to the general
12631 statutes is repealed and the following is substituted in lieu thereof
12632 (*Effective July 1, 2026*):

12633 For the purposes of funding (1) grants to projects that have received
12634 approval of the Department of Administrative Services pursuant to
12635 section 10-287, subsection (a) of section 10-65 and section 10-76e, and (2)
12636 grants to assist school building projects to remedy safety and health
12637 violations and damage from fire and catastrophe, the State Treasurer is
12638 authorized and directed, subject to and in accordance with the
12639 provisions of section 3-20, to issue bonds of the state from time to time
12640 in one or more series in an aggregate amount not exceeding [fourteen
12641 billion nine hundred sixty-two million one hundred sixty thousand
12642 dollars, provided five hundred fifty million dollars of said authorization
12643 shall be effective July 1, 2026] fifteen billion twelve million one hundred
12644 sixty thousand dollars. Bonds of each series shall bear such date or dates
12645 and mature at such time or times not exceeding thirty years from their
12646 respective dates and be subject to such redemption privileges, with or
12647 without premium, as may be fixed by the State Bond Commission. They
12648 shall be sold at not less than par and accrued interest and the full faith
12649 and credit of the state is pledged for the payment of the interest thereon
12650 and the principal thereof as the same shall become due, and accordingly

12651 and as part of the contract of the state with the holders of said bonds,
12652 appropriation of all amounts necessary for punctual payment of such
12653 principal and interest is hereby made, and the State Treasurer shall pay
12654 such principal and interest as the same become due. The State Treasurer
12655 is authorized to invest temporarily in direct obligations of the United
12656 States, United States agency obligations, certificates of deposit,
12657 commercial paper or bank acceptances such portion of the proceeds of
12658 such bonds or of any notes issued in anticipation thereof as may be
12659 deemed available for such purpose.

12660 Sec. 305. Section 10a-110n of the general statutes is repealed. (*Effective*
12661 *July 1, 2026*)

12662 Sec. 306. Subdivision (10) of subsection (a) of section 10a-109d of the
12663 2026 supplement to the general statutes is repealed and the following is
12664 substituted in lieu thereof (*Effective July 1, 2026*):

12665 (10) To borrow money and issue securities to finance the acquisition,
12666 construction, reconstruction, improvement or equipping of any one
12667 project, or more than one, or any combination of projects, or to make
12668 loans or provide grants from the proceeds of such securities to any
12669 subsidiary or joint venture established pursuant to The University of
12670 Connecticut Health Center Joint Venture Initiative, or to refund
12671 securities issued after June 7, 1995, or to refund any such refunding
12672 securities or for any one, or more than one, or all of those purposes, or
12673 any combination of those purposes, and to provide for the security and
12674 payment of those securities and for the rights of the holders of them,
12675 except that the amount of any such borrowing, the special debt service
12676 requirements for which are secured by the state debt service
12677 commitment, exclusive of the amount of borrowing to refund securities,
12678 or to fund issuance costs or necessary reserves, may not exceed the
12679 aggregate principal amount of (A) for the fiscal years ending June 30,
12680 1996, to June 30, 2005, inclusive, one billion twelve million dollars, (B)
12681 for the fiscal years ending June 30, 2006, to June 30, 2031, inclusive, [four
12682 billion three hundred two million nine hundred thousand] four billion
12683 five hundred fifty-three million dollars, and (C) such additional amount

12684 or amounts: (i) Required from time to time to fund any special capital
 12685 reserve fund or other debt service reserve fund in accordance with the
 12686 financing transaction proceedings, and (ii) to pay or provide for the
 12687 costs of issuance and capitalized interest, if any; the aggregate amounts
 12688 of subparagraphs (A), (B) and (C) of this subdivision are established as
 12689 the authorized funding amount, and no borrowing within the
 12690 authorized funding amount for a project or projects may be effected
 12691 unless the project or projects are included in accordance with subsection
 12692 (a) of section 10a-109e;

12693 Sec. 307. Subsection (a) of section 10a-109e of the 2026 supplement to
 12694 the general statutes is repealed and the following is substituted in lieu
 12695 thereof (*Effective July 1, 2026*):

12696 (a) The university may administer, manage, schedule, finance,
 12697 further design and construct UConn 2000, to operate and maintain the
 12698 components thereof in a prudent and economical manner and to reserve
 12699 for and make renewals and replacements thereof when appropriate, it
 12700 being hereby determined and found to be in the best interest of the state
 12701 and the university to provide this independent authority to the
 12702 university along with providing assured revenues therefor as the
 12703 efficient and cost effective course to achieve the objective of avoiding
 12704 further decline in the physical infrastructure of the university and to
 12705 renew, modernize, enhance and maintain such infrastructure, the
 12706 particular project or projects, each being hereby approved as a project of
 12707 UConn 2000, and the presently estimated cost thereof being as follows:

T1249	UConn 2000 Project	Phase I	Phase II	Phase III
T1250		Fiscal Years	Fiscal Years	Fiscal Years
T1251		1996-1999	2000-2005	2005-2031
T1252				
T1253	Academic and Research			
T1254	Facilities			450,000,000
T1255				
T1256	Agricultural Biotechnology			

sSB 1		Amendment	
T1257	Facility	9,400,000	
T1258			
T1259	Agricultural Biotechnology		
T1260	Facility Completion	10,000,000	
T1261			
T1262	Alumni Quadrant		
T1263	Renovations	14,338,000	
T1264			
T1265	Arjona and Monteith		
T1266	(new classroom buildings)		66,100,000
T1267			
T1268	Avery Point Campus		
T1269	Undergraduate and		
T1270	Library Building		35,000,000
T1271			
T1272	Avery Point Marine		
T1273	Science Research Center –		
T1274	Phase I	34,000,000	
T1275			
T1276	Avery Point Marine		
T1277	Science Research Center –		
T1278	Phase II	16,682,000	
T1279			
T1280	Avery Point Renovation	5,600,000	15,000,000
T1281			
T1282	Babbidge Library	0	
T1283			
T1284	Balancing Contingency	5,506,834	
T1285			
T1286	Beach Hall Renovations		10,000,000
T1287			
T1288	Benton State Art Museum		
T1289	Addition	1,400,000	3,000,000
T1290			

sSB 1		Amendment	
T1291	Biobehavioral Complex		
T1292	Replacement		4,000,000
T1293			
T1294	Bishop Renovation		8,000,000
T1295			
T1296	Budds Building		
T1297	Renovation	2,805,000	
T1298			
T1299	Business School		
T1300	Renovation	4,803,000	
T1301			
T1302	Chemistry Building	53,700,000	
T1303			
T1304	Commissary Warehouse		1,000,000
T1305			
T1306	Deferred Maintenance/		
T1307	Code Compliance/		
T1308	ADA Compliance/		
T1309	Infrastructure		
T1310	Improvements &		
T1311	Renovation Lump Sum and		
T1312	Utility, Administrative		
T1313	and Support Facilities	39,332,000	863,500,000
T1314			
T1315	Deferred Maintenance &		
T1316	Renovation Lump Sum		
T1317	Balance	104,668,000	
T1318			
T1319	<u>Digital learning</u>		
T1320	<u>infrastructure</u>		
T1321	<u>improvements at a regional</u>		
T1322	<u>campus</u>		<u>3,000,000</u>
T1323			
T1324	East Campus North		

sSB 1		Amendment	
T1325	Renovations	11,820,000	
T1326			
T1327	Engineering Building		
T1328	(with Environmental		
T1329	Research Institute)		36,700,000
T1330			
T1331	Equine Center	1,000,000	
T1332			
T1333	Equipment, Library		
T1334	Collections &		
T1335	Telecommunications	60,500,000	[470,000,000]
T1336			<u>480,000,000</u>
T1337			
T1338	Equipment, Library		
T1339	Collections &		
T1340	Telecommunications		
T1341	Completion	182,118,146	
T1342			
T1343	Family Studies (DRM)		
T1344	Renovation		6,500,000
T1345			
T1346	Farm Buildings Repairs/		
T1347	Replacement		6,000,000
T1348			
T1349	Fine Arts Phase II		20,000,000
T1350			
T1351	Floriculture Greenhouse		3,000,000
T1352			
T1353	Gant Building Renovations		
T1354	and		
T1355	New Life Sciences Building		403,500,000
T1356			
T1357	Gant Plaza Deck	0	
T1358			

	<i>sSB 1</i>		<i>Amendment</i>
T1359	Gentry Completion		10,000,000
T1360			
T1361	Gentry Renovation	9,299,000	
T1362			
T1363	Grad Dorm Renovations	7,548,000	
T1364			
T1365	Gulley Hall Renovation	1,416,000	
T1366			
T1367	Harry A. Gampel Pavilion		
T1368	and		
T1369	Hugh S. Greer Field House		[164,000,000]
			<u>204,000,000</u>
T1370			
T1371	Hartford Relocation		
T1372	Acquisition/Renovation	56,762,020	70,000,000
T1373			
T1374	Hartford Relocation Design	1,500,000	
T1375			
T1376	Hartford Relocation		
T1377	Feasibility Study	500,000	
T1378			
T1379	Heating Plant Upgrade	10,000,000	
T1380			
T1381	Hilltop Dormitory New	30,000,000	
T1382			
T1383	Hilltop Dormitory		
T1384	Renovations	3,141,000	
T1385			
T1386	Ice Rink Enclosure	2,616,000	
T1387			
T1388	Incubator Facilities		10,000,000
T1389			
T1390	International House		
T1391	Conversion	800,000	

sSB 1		Amendment	
T1392			
T1393	Intramural, Recreational		
T1394	and Intercollegiate		
T1395	Facilities		31,000,000
T1396			
T1397	Jorgensen Renovation		7,200,000
T1398			
T1399	Koons Hall Renovation/		
T1400	Addition		7,000,000
T1401			
T1402	Lakeside Renovation		3,800,000
T1403			
T1404	<u>Lab renovations and</u>		
T1405	<u>equipment</u>		<u>20,000,000</u>
T1406			
T1407	Law School Renovations/		
T1408	Improvements		15,000,000
T1409			
T1410	Library Storage Facility		5,000,000
T1411			
T1412	Litchfield Agricultural		
T1413	Center - Phase I	1,000,000	
T1414			
T1415	Litchfield Agricultural		
T1416	Center - Phase II	700,000	
T1417			
T1418	Manchester Hall		
T1419	Renovation		6,000,000
T1420			
T1421	Mansfield Apartments		
T1422	Renovation	2,612,000	
T1423			
T1424	Mansfield Training School		
T1425	Improvements	27,614,000	29,000,000

sSB 1		Amendment	
T1426			
T1427	Natural History Museum		
T1428	Completion		4,900,000
T1429			
T1430	North Campus Renovation	2,654,000	
T1431			
T1432	North Campus Renovation		
T1433	Completion	21,049,000	
T1434			
T1435	North Hillside Road		
T1436	Completion		11,500,000
T1437			
T1438	North Superblock Site		
T1439	and Utilities	8,000,000	
T1440			
T1441	Northwest Quadrant		
T1442	Renovation	2,001,000	
T1443			
T1444	Northwest Quadrant		
T1445	Renovation	15,874,000	
T1446			
T1447	Observatory		1,000,000
T1448			
T1449	Old Central Warehouse		18,000,000
T1450			
T1451	Parking Garage #3		78,000,000
T1452			
T1453	Parking Garage – North	10,000,000	
T1454			
T1455	Parking Garage – South	15,000,000	
T1456			
T1457	Pedestrian Spinepath	2,556,000	
T1458			
T1459	Pedestrian Walkways	3,233,000	

T1460			
T1461	<u>Program to recruit eminent</u>		
T1462	<u>faculty and research staff</u>		
T1463	<u>established pursuant to</u>		
T1464	<u>section 10a-104c</u>		<u>46,100,000</u>
T1465			
T1466	Psychology Building		
T1467	Renovation/Addition		20,000,000
T1468			
T1469	Residential Life Facilities		162,000,000
T1470			
T1471	Roadways	10,000,000	
T1472			
T1473	School of Business	20,000,000	
T1474			
T1475	School of Pharmacy/		
T1476	Biology	3,856,000	
T1477			
T1478	School of Pharmacy/		
T1479	Biology Completion	61,058,000	
T1480			
T1481	Shippee/Buckley		
T1482	Renovations	6,156,000	
T1483			
T1484	Social Science K Building	20,964,000	
T1485			
T1486	South Campus Complex	13,127,000	
T1487			
T1488	Stamford Campus		
T1489	Improvements/Housing		13,000,000
T1490			
T1491	Stamford Downtown		
T1492	Relocation – Phase I	45,659,000	
T1493			

sSB 1		Amendment	
T1494	Stamford Downtown		
T1495	Relocation – Phase II	17,392,000	
T1496			
T1497	Storrs Hall Addition		4,300,000
T1498			
T1499	Student Health Services		12,000,000
T1500			
T1501	Student Union Addition	23,000,000	
T1502			
T1503	Support Facility		
T1504	(Architectural and		
T1505	Engineering Services)		2,000,000
T1506			
T1507	Technology Quadrant –		
T1508	Phase IA	38,000,000	
T1509			
T1510	Technology Quadrant –		
T1511	Phase IB	16,611,000	
T1512			
T1513	Technology Quadrant –		
T1514	Phase II	72,000,000	
T1515			
T1516	Technology Quadrant –		
T1517	Phase III	15,000,000	
T1518			
T1519	Torrey Life Science		
T1520	Renovation and Demolition	17,000,000	25,000,000
T1521			
T1522	Torrey Renovation		
T1523	Completion and Biology		
T1524	Expansion		42,000,000
T1525			
T1526	Torrington Campus		
T1527	Improvements		1,000,000

sSB 1		Amendment	
T1528			
T1529	Towers Renovation	17,794,000	
T1530			
T1531	UConn Products Store		1,000,000
T1532			
T1533	Undergraduate Education		
T1534	Center	650,000	
T1535			
T1536	Undergraduate Education		
T1537	Center	7,450,000	
T1538			
T1539	Underground Steam &		
T1540	Water Upgrade	3,500,000	
T1541			
T1542	Underground Steam &		
T1543	Water Upgrade		
T1544	Completion	9,000,000	
T1545			
T1546	University Programs		
T1547	Building - Phase I	8,750,000	
T1548			
T1549	University Programs		
T1550	Building - Phase II		
T1551	Visitors Center	300,000	
T1552			
T1553	Waring Building		
T1554	Conversion	7,888,000	
T1555			
T1556	Waterbury Downtown		
T1557	Campus		3,000,000
T1558			
T1559	Waterbury Property		
T1560	Purchase	325,000	
T1561			

sSB 1		Amendment
T1562	West Campus Renovations	14,897,000
T1563		
T1564	West Hartford Campus	
T1565	Renovations/	
T1566	Improvements	25,000,000
T1567		
T1568	White Building Renovation	2,430,000
T1569		
T1570	Wilbur Cross Building	
T1571	Renovation	3,645,000
T1572		
T1573	Young Building	
T1574	Renovation/Addition	17,000,000
T1575		
T1576	HEALTH CENTER	
T1577		
T1578	CLAC Renovation	
T1579	Biosafety Level 3 Lab	14,000,000
T1580		
T1581	<u>Deferred maintenance, code</u>	
T1582	<u>compliance and</u>	
T1583	<u>infrastructure</u>	
T1584	<u>improvements</u>	<u>90,000,000</u>
T1585		
T1586	Deferred Maintenance/	
T1587	Code Compliance/ADA	
T1588	Compliance/Infrastructure	
T1589	& Improvements	
T1590	Renovation Lump Sum	
T1591	and Utility, Administrative	
T1592	and Support Facilities	
T1593	- Health Center	86,000,000
T1594		
T1595	Dental School Renovation	5,000,000

T1596		
T1597	Equipment, Library	
T1598	Collections and	
T1599	Telecommunications -	
T1600	Health Center	[75,000,000]
T1601		<u>110,000,000</u>
T1602		
T1603	Library/Student Computer	
T1604	Center Renovation	5,000,000
T1605		
T1606	Main Building Renovation	125,000,000
T1607		
T1608	Medical School Academic	
T1609	Building Renovation	9,000,000
T1610		
T1611	Parking Garage - Health	
T1612	Center	8,400,000
T1613		
T1614	Research Tower	60,000,000
T1615		
T1616	Support Building	
T1617	Addition/Renovation	4,000,000
T1618		
T1619	<u>System telecommunications</u>	
T1620	<u>infrastructure upgrades,</u>	
T1621	<u>improvements and</u>	
T1622	<u>expansions</u>	<u>6,000,000</u>
T1623		
T1624	The University of	
T1625	Connecticut	
T1626	Health Center	
T1627	New Construction and	
T1628	Renovation	394,900,000
T1629		

	<u>sSB 1</u>			<u>Amendment</u>
T1630	Planning and Design Costs			25,000,000
T1631				
T1632	The University of			
T1633	Connecticut Health Center			
T1634	Joint Venture Initiative			390,000,000
T1635				
T1636	Total – Storrs and Regional			
T1637	Campus Project List			[3,200,000,000]
T1638				<u>3,319,100,000</u>
T1639				
T1640	Total – Health Center			
T1641	Project List			[1,201,300,000]
T1642				<u>1,332,300,000</u>
T1643				
T1644	TOTAL	382,000,000	868,000,000	[4,401,300,000]
T1645				<u>4,651,400,000</u>

12708 Sec. 308. Subdivision (1) of subsection (a) of section 10a-109g of the
12709 2026 supplement to the general statutes is repealed and the following is
12710 substituted in lieu thereof (*Effective July 1, 2026*):

12711 (a) (1) The university is authorized to provide by resolution, at one
12712 time or from time to time, for the issuance and sale of securities, in its
12713 own name on behalf of the state, pursuant to section 10a-109f. The board
12714 of trustees of the university is hereby authorized by such resolution to
12715 delegate to its finance committee such matters as it may determine
12716 appropriate other than the authorization and maximum amount of the
12717 securities to be issued, the nature of the obligation of the securities as
12718 established pursuant to subsection (c) of this section and the projects for
12719 which the proceeds are to be used. The finance committee may act on
12720 such matters unless and until the board of trustees elects to reassume
12721 the same. The amount of securities the special debt service requirements
12722 of which are secured by the state debt service commitment that the
12723 board of trustees is authorized to provide for the issuance and sale in

12724 accordance with this subsection shall be capped in each fiscal year in the
 12725 following amounts, provided, to the extent the board of trustees does
 12726 not provide for the issuance of all or a portion of such amount in a fiscal
 12727 year, all or such portion, as the case may be, may be carried forward to
 12728 any succeeding fiscal year and provided further, the actual amount for
 12729 funding, paying or providing for the items described in subparagraph
 12730 (C) of subdivision (10) of subsection (a) of section 10a-109d may be
 12731 added to the capped amount in each fiscal year:

T1646	Fiscal Year	Amount
T1647		
T1648	1996	\$112,542,000
T1649	1997	112,001,000
T1650	1998	93,146,000
T1651	1999	64,311,000
T1652	2000	130,000,000
T1653	2001	100,000,000
T1654	2002	100,000,000
T1655	2003	100,000,000
T1656	2004	100,000,000
T1657	2005	100,000,000
T1658	2006	79,000,000
T1659	2007	89,000,000
T1660	2008	115,000,000
T1661	2009	140,000,000
T1662	2010	0
T1663	2011	138,800,000
T1664	2012	157,200,000
T1665	2013	143,000,000
T1666	2014	204,400,000
T1667	2015	315,500,000
T1668	2016	312,100,000
T1669	2017	240,400,000
T1670	2018	200,000,000
T1671	2019	200,000,000

	sSB 1	Amendment
T1672	2020	197,200,000
T1673	2021	260,000,000
T1674	2022	215,500,000
T1675	2023	125,100,000
T1676	2024	84,700,000
T1677	2025	122,000,000
T1678	2026	276,000,000
T1679	2027	[192,000,000] <u>442,100,000</u>
T1680	2028	158,500,000
T1681	2029	156,500,000
T1682	2030	156,000,000
T1683	2031	25,000,000

12732 Sec. 309. Subdivision (3) of subsection (c) of section 9 of public act 12-
12733 189, as amended by section 102 of public act 13-239, section 212 of public
12734 act 15-1 of the June special session and section 157 of public act 16-4 of
12735 the May special session, is amended to read as follows (*Effective July 1,*
12736 *2026*):

12737 (3) For the Department of Housing: Grant-in-aid to the Connecticut
12738 Housing Finance Authority for the purposes of sections 8-265cc to 8-
12739 265ii, inclusive, and section 8-265kk of the general statutes, and to
12740 capitalize down payment assistance issued under the homeownership
12741 loan program established pursuant to sections 8-283 to 8-289, inclusive,
12742 of the general statutes, not exceeding \$38,000,000.

12743 Sec. 310. Section 306 of public act 22-118, as amended by section 83 of
12744 public act 23-205, is amended to read as follows (*Effective July 1, 2026*):

12745 The State Bond Commission shall have power, in accordance with the
12746 provisions of this section and sections 307 to 312, inclusive, of public act
12747 22-118, from time to time to authorize the issuance of bonds of the state
12748 in one or more series and in principal amounts in the aggregate not
12749 exceeding [~~\$135,800,000~~] \$60,800,000.

12750 Sec. 311. Subsection (b) of section 307 of public act 22-118, as amended
12751 by section 84 of public act 23-205, is repealed. (*Effective July 1, 2026*)

12752 Sec. 312. Subdivision (2) of subsection (c) of section 314 of public act
12753 22-118 is amended to read as follows (*Effective July 1, 2026*):

12754 (2) Grants-in-aid to support food systems or food resource
12755 organizations for capital improvements, not exceeding \$10,000,000.

12756 Sec. 313. Subdivision (1) of subsection (d) of section 314 of public act
12757 22-118, as amended by section 86 of public act 23-205, is amended to
12758 read as follows (*Effective July 1, 2026*):

12759 (1) Grants-in-aid to provide [matching] a portion of the funds
12760 necessary for municipalities, local and regional boards of education and
12761 school bus operators to [submit federal grant applications in order to]
12762 maximize federal, state or other sources of funding or financing for the
12763 purchase or lease of zero-emission school buses and electric vehicle
12764 charging or fueling infrastructure, not exceeding \$20,000,000;

12765 Sec. 314. Section 1 of public act 23-205, as amended by section 103 of
12766 public act 25-174, is amended to read as follows (*Effective July 1, 2026*):

12767 The State Bond Commission shall have power, in accordance with the
12768 provisions of this section and sections 2 to 7, inclusive, of public act 23-
12769 205, from time to time to authorize the issuance of bonds of the state in
12770 one or more series and in principal amounts in the aggregate not
12771 exceeding ~~[\$741,290,000]~~ \$745,890,000.

12772 Sec. 315. Subdivision (3) of subsection (d) of section 2 of public act 23-
12773 205 is amended to read as follows (*Effective July 1, 2026*):

12774 (3) Upgrades and modernization of the Capital Area System,
12775 including, but not limited to, planning, engineering and feasibility
12776 studies to support system decarbonization, including thermal energy
12777 network implementation and geothermal resource exploration, not
12778 exceeding \$19,000,000;

12779 Sec. 316. Subsection (j) of section 2 of public act 23-205 is amended to
12780 read as follows (*Effective July 1, 2026*):

12781 (j) For the Office of the Chief Medical Examiner: For design,
12782 alteration, renovation, additions and construction of facilities for the
12783 Office of the Chief Medical Examiner, including land acquisition, not
12784 exceeding ~~[\$28,000,000]~~ \$62,600,000.

12785 Sec. 317. Subdivision (1) of subsection (n) of section 2 of public act 23-
12786 205 is repealed. (*Effective July 1, 2026*)

12787 Sec. 318. Subdivision (5) of subsection (c) of section 13 of public act
12788 23-205 is repealed and the following is substituted in lieu thereof
12789 (*Effective July 1, 2026*):

12790 (5) Grants-in-aid to provide ~~[matching]~~ a portion of the funds
12791 necessary for municipalities, local and regional boards of education and
12792 school bus operators to ~~[submit federal grant applications in order to]~~
12793 maximize federal, state or other sources of funding or financing for the
12794 purchase or lease of zero-emission school buses and electric vehicle
12795 charging or fueling infrastructure, not exceeding \$10,000,000;

12796 Sec. 319. Subdivision (2) of subsection (e) of section 13 of public act
12797 23-205 is repealed and the following is substituted in lieu thereof
12798 (*Effective July 1, 2026*):

12799 (2) Grants-in-aid to local and regional boards of education and
12800 municipalities for the purchase, installation and maintenance of water
12801 bottle filling stations and automated external defibrillators at schools
12802 designated to receive services pursuant to Title I of the Federal
12803 Elementary and Secondary Education Act and at buildings owned or
12804 leased by a municipality, not exceeding \$3,500,000.

12805 Sec. 320. Section 20 of public act 23-205, as amended by section 46 of
12806 public act 24-151, is amended to read as follows (*Effective July 1, 2026*):

12807 The State Bond Commission shall have power, in accordance with the

12808 provisions of this section and sections 21 to 26, inclusive, of public act
12809 23-205, from time to time to authorize the issuance of bonds of the state
12810 in one or more series and in principal amounts in the aggregate not
12811 exceeding [~~\$514,345,000~~] \$484,345,000.

12812 Sec. 321. Subdivision (1) of subsection (k) of section 21 of public act
12813 23-205 is repealed. (*Effective July 1, 2026*)

12814 Sec. 322. Subdivision (5) of subsection (b) of section 32 of public act
12815 23-205 is repealed and the following is substituted in lieu thereof
12816 (*Effective July 1, 2026*):

12817 (5) Grants-in-aid to provide [~~matching~~] a portion of the funds
12818 necessary for municipalities, local and regional boards of education and
12819 school bus operators to [~~submit federal grant applications in order to~~]
12820 maximize federal, state or other sources of funding for the purchase or
12821 lease of zero-emission school buses and electric vehicle charging or
12822 fueling infrastructure, not exceeding \$10,000,000;

12823 Sec. 323. Subsections (a) and (b) of section 92 of public act 23-205, as
12824 amended by section 106 of public act 25-174, are amended to read as
12825 follows (*Effective July 1, 2026*):

12826 (a) For the purposes described in subsection (b) of this section, the
12827 State Bond Commission shall have the power from time to time to
12828 authorize the issuance of bonds of the state in one or more series and in
12829 principal amounts not exceeding in the aggregate [~~ninety~~] one hundred
12830 fifteen million dollars.

12831 (b) The proceeds of the sale of said bonds, to the extent of the amount
12832 stated in subsection (a) of this section, shall be used by the Connecticut
12833 Municipal Redevelopment Authority for the purpose of capitalization.

12834 Sec. 324. Subsection (b) of section 99 of public act 23-205 is amended
12835 to read as follows (*Effective July 1, 2026*):

12836 (b) The proceeds of the sale of such bonds, to the extent of the amount

12837 stated in subsection (a) of this section, shall be used by the [Connecticut
12838 Higher Education Supplemental Loan Authority] Office of Higher
12839 Education for the purpose of a [nursing student loan subsidy]
12840 Department of Correction nurse and social worker student loan
12841 reimbursement program.

12842 Sec. 325. Section 1 of public act 25-174 is amended to read as follows
12843 (*Effective July 1, 2026*):

12844 The State Bond Commission shall have power, in accordance with the
12845 provisions of this section and sections 2 to 7, inclusive, of [this act] public
12846 act 25-174, from time to time to authorize the issuance of bonds of the
12847 state in one or more series and in principal amounts in the aggregate,
12848 not exceeding [\$787,405,019] \$906,405,019.

12849 Sec. 326. Subdivision (3) of subsection (n) of section 2 of public act 25-
12850 174 is amended to read as follows (*Effective July 1, 2026*):

12851 (3) For the design and construction of a new Windham Technical
12852 High School, not exceeding [\$113,705,019] \$263,705,019.

12853 Sec. 327. Subsection (o) of section 2 of public act 25-174 is repealed.
12854 (*Effective July 1, 2026*)

12855 Sec. 328. Subdivision (2) of subsection (t) of section 2 of public act 25-
12856 174 is repealed. (*Effective July 1, 2026*)

12857 Sec. 329. Subdivision (8) of subsection (b) of section 13 of public act
12858 25-174 is amended to read as follows (*Effective July 1, 2026*):

12859 (8) Grants-in-aid to municipalities [for renovations and expansion of,
12860 and equipment for, solid waste facilities] to support solid waste
12861 reduction strategies, not exceeding \$15,000,000.

12862 Sec. 330. Section 20 of public act 25-174 is amended to read as follows
12863 (*Effective July 1, 2026*):

12864 The State Bond Commission shall have power, in accordance with the

12865 provisions of this section and sections 21 to 26, inclusive, of [this act]
12866 public act 25-174, from time to time to authorize the issuance of bonds
12867 of the state in one or more series and in principal amounts in the
12868 aggregate, not exceeding [\$552,500,000] \$546,500,000.

12869 Sec. 331. Subdivision (2) of subsection (c) of section 21 of public act
12870 25-174 is amended to read as follows (*Effective July 1, 2026*):

12871 (2) For the purchase of equipment, minor improvements and other
12872 associated costs for a new data center, not exceeding [\$16,000,000]
12873 \$48,000,000;

12874 Sec. 332. Subsection (i) of section 21 of public act 25-174 is amended
12875 to read as follows (*Effective July 1, 2026*):

12876 (i) For the Department of Developmental Services: Fire, safety and
12877 environmental improvements to regional facilities and intermediate
12878 care facilities for client and staff needs, including improvements in
12879 compliance with current codes, site improvements, handicapped access
12880 improvements, utilities, repair or replacement of roofs, air conditioning
12881 and other interior and exterior building renovations and additions at all
12882 state-owned facilities, not exceeding [\$7,000,000] \$12,000,000.

12883 Sec. 333. Subsection (l) of section 21 of public act 25-174 is repealed.
12884 (*Effective July 1, 2026*)

12885 Sec. 334. Section 45 of public act 25-174 is amended to read as follows
12886 (*Effective July 1, 2026*):

12887 The State Bond Commission shall have power, in accordance with the
12888 provisions of this section and sections 46 to 50, inclusive, of [this act]
12889 public act 25-174, from time to time to authorize the issuance of special
12890 tax obligation bonds of the state in one or more series and in principal
12891 amounts in the aggregate, not exceeding [\$1,580,954,214] \$1,589,954,214.

12892 Sec. 335. Subsection (c) of section 46 of public act 25-174 is amended
12893 to read as follows (*Effective July 1, 2026*):

12894 (c) For the Bureau of Administration: Department facilities, not
 12895 exceeding [\$127,060,000] \$136,060,000.

12896 Sec. 336. Section 55 of public act 25-174 is amended to read as follows
 12897 (*Effective July 1, 2026*):

12898 (a) For the purposes described in subsection (b) of this section, the
 12899 State Bond Commission shall have the power from time to time to
 12900 authorize the issuance of bonds of the state in one or more series and in
 12901 principal amounts not exceeding in the aggregate three hundred million
 12902 dollars, provided one hundred [fifty] fifty-two million dollars of said
 12903 authorization shall be effective July 1, 2026.

12904 (b) The proceeds of the sale of said bonds, to the extent of the amount
 12905 stated in subsection (a) of this section, shall be used by the Office of
 12906 Policy and Management for grants-in-aid to municipalities for the
 12907 purposes set forth in subsection (a) of section 13a-175a of the general
 12908 statutes, as amended by [this act] public act 25-174, for the fiscal years
 12909 ending June 30, 2026, and June 30, 2027. Such grant payments shall be
 12910 made annually as follows:

T1684	Municipalities	FY 2026	FY 2027
T1685			
T1686	Andover	2,620	2,620
T1687	Ansonia	85,419	85,419
T1688	Ashford	3,582	3,582
T1689	Avon	261,442	261,442
T1690	Barkhamsted	41,462	41,462
T1691	Beacon Falls	43,809	43,809
T1692	Berlin	1,593,642	1,593,642
T1693	Bethany	67,229	67,229
T1694	Bethel	282,660	282,660
T1695	Bethlehem	7,945	7,945
T1696	Bloomfield	3,201,687	3,201,687
T1697	Bolton	24,859	24,859
T1698	Bozrah	138,521	138,521
T1699	Branford	374,850	374,850
T1700	Bridgeport	13,531,564	13,531,564
T1701	Bridgewater	587	587

sSB 1		Amendment	
T1702	Bristol	4,856,624	4,856,624
T1703	Brookfield	118,281	118,281
T1704	Brooklyn	10,379	10,379
T1705	Burlington	15,300	15,300
T1706	Canaan	20,712	20,712
T1707	Canterbury	2,022	2,022
T1708	Canton	7,994	7,994
T1709	Chaplin	601	601
T1710	Cheshire	736,700	736,700
T1711	Chester	89,264	89,264
T1712	Clinton	191,674	191,674
T1713	Colchester	39,009	39,009
T1714	Colebrook	550	550
T1715	Columbia	26,763	26,763
T1716	Cornwall	-	-
T1717	Coventry	10,533	10,533
T1718	Cromwell	31,099	31,099
T1719	Danbury	15,027,544	15,027,544
T1720	Darien	-	-
T1721	Deep River	104,136	104,136
T1722	Derby	14,728	14,728
T1723	Durham	153,897	153,897
T1724	East Granby	1,096,577	1,096,577
T1725	East Haddam	1,696	1,696
T1726	East Hampton	18,943	18,943
T1727	East Hartford	8,052,926	8,052,926
T1728	East Haven	43,500	43,500
T1729	East Lyme	22,442	22,442
T1730	East Windsor	295,024	295,024
T1731	Eastford	54,564	54,564
T1732	Easton	2,660	2,660
T1733	Ellington	223,527	223,527
T1734	Enfield	256,875	256,875
T1735	Essex	74,547	74,547
T1736	Fairfield	96,747	96,747
T1737	Farmington	545,804	545,804
T1738	Franklin	23,080	23,080
T1739	Glastonbury	240,799	240,799
T1740	Goshen	2,648	2,648
T1741	Granby	35,332	35,332
T1742	Greenwich	89,022	89,022

	sSB 1	Amendment
T1743	Griswold	31,895
T1744	Groton (Town of)	2,362,532
T1745	Guilford	64,848
T1746	Haddam	3,554
T1747	Hamden	286,689
T1748	Hampton	-
T1749	Hartford	9,419,161
T1750	Hartland	955
T1751	Harwinton	21,506
T1752	Hebron	2,216
T1753	Kent	-
T1754	Killingly	1,228,578
T1755	Killingworth	5,148
T1756	Lebanon	30,427
T1757	Ledyard	421,085
T1758	Lisbon	3,683
T1759	Litchfield	3,432
T1760	Lyme	-
T1761	Madison	6,795
T1762	Manchester	2,981,068
T1763	Mansfield	6,841
T1764	Marlborough	7,313
T1765	Meriden	1,663,015
T1766	Middlebury	84,264
T1767	Middlefield	248,652
T1768	Middletown	3,966,295
T1769	Milford	2,257,853
T1770	Monroe	179,106
T1771	Montville	528,644
T1772	Morris	3,528
T1773	Naugatuck	341,656
T1774	New Britain	2,864,920
T1775	New Canaan	200
T1776	New Fairfield	1,149
T1777	New Hartford	139,174
T1778	New Haven	10,214,643
		<u>12,214,643</u>
T1779	New London	2,033,169
T1780	New Milford	1,298,881
T1781	Newington	1,785,740
T1782	Newtown	235,371

	sSB 1	Amendment
T1783	Norfolk	7,207
T1784	North Branford	301,074
T1785	North Canaan	359,719
T1786	North Haven	2,249,113
T1787	North Stonington	-
T1788	Norwalk	10,402,915
T1789	Norwich	187,132
T1790	Old Lyme	1,888
T1791	Old Saybrook	46,717
T1792	Orange	104,962
T1793	Oxford	84,313
T1794	Plainfield	144,803
T1795	Plainville	541,936
T1796	Plymouth	152,434
T1797	Pomfret	27,820
T1798	Portland	90,840
T1799	Preston	-
T1800	Prospect	70,942
T1801	Putnam	171,800
T1802	Redding	1,329
T1803	Ridgefield	561,986
T1804	Rocky Hill	221,199
T1805	Roxbury	602
T1806	Salem	4,699
T1807	Salisbury	83
T1808	Scotland	7,681
T1809	Seymour	281,186
T1810	Sharon	-
T1811	Shelton	584,121
T1812	Sherman	-
T1813	Simsbury	77,648
T1814	Somers	82,324
T1815	South Windsor	2,187,387
T1816	Southbury	20,981
T1817	Southington	1,427,348
T1818	Sprague	386,528
T1819	Stafford	437,917
T1820	Stamford	1,154,179
T1821	Sterling	24,398
T1822	Stonington	100,332
T1823	Stratford	5,784,708

sSB 1		Amendment	
T1824	Suffield	180,663	180,663
T1825	Thomaston	395,346	395,346
T1826	Thompson	76,733	76,733
T1827	Tolland	85,064	85,064
T1828	Torrington	605,345	605,345
T1829	Trumbull	189,309	189,309
T1830	Union	-	-
T1831	Vernon	151,598	151,598
T1832	Voluntown	2,002	2,002
T1833	Wallingford	3,481,872	3,481,872
T1834	Warren	288	288
T1835	Washington	158	158
T1836	Waterbury	9,935,497	9,935,497
T1837	Waterford	34,255	34,255
T1838	Watertown	642,281	642,281
T1839	West Hartford	805,784	805,784
T1840	West Haven	147,516	147,516
T1841	Westbrook	267,405	267,405
T1842	Weston	453	453
T1843	Westport	-	-
T1844	Wethersfield	21,785	21,785
T1845	Willington	20,018	20,018
T1846	Wilton	842,618	842,618
T1847	Winchester	306,204	306,204
T1848	Windham	454,575	454,575
T1849	Windsor	2,075,052	2,075,052
T1850	Windsor Locks	2,784,595	2,784,595
T1851	Wolcott	234,916	234,916
T1852	Woodbridge	29,920	29,920
T1853	Woodbury	56,908	56,908
T1854	Woodstock	68,767	68,767
T1855	Jewett City (Bor.)	4,195	4,195
T1856	Barkhamsted FD	2,500	2,500
T1857	Berlin - Kensington FD	11,389	11,389
T1858	Berlin - Worthington FD	941	941
T1859	Bloomfield Center FD	4,173	4,173
T1860	Bloomfield Blue Hills FD	103,086	103,086
T1861	Cromwell FD	1,832	1,832
T1862	Enfield FD 1	14,636	14,636
T1863	Enfield Thompsonville FD 2	3,160	3,160
T1864	Enfield Hazardville Fire #3	1,373	1,373

sSB 1		Amendment	
T1865	Enfield N Thompsonville FD 4	69	69
T1866	Enfield Shaker Pines FD 5	6,403	6,403
T1867	Groton City	164,635	164,635
T1868	Groton Sewer	1,688	1,688
T1869	Groton Old Mystic FD 5	1,695	1,695
T1870	Groton Poq. Bridge FD	22,300	22,300
T1871	Killingly Attawaugan FD	1,836	1,836
T1872	Killingly Dayville FD	42,086	42,086
T1873	Killingly Dyer Manor	1,428	1,428
T1874	E. Killingly FD	95	95
T1875	So. Killingly FD	189	189
T1876	Killingly Williamsville FD	6,710	6,710
T1877	Middletown South FD	207,080	207,080
T1878	Middletown Westfield FD	10,801	10,801
T1879	Middletown City Fire	33,838	33,838
T1880	New Htfd. Village FD #1	7,259	7,259
T1881	New Htfd South End FD	10	10
T1882	Plainfield Central Village FD	1,466	1,466
T1883	Plainfield - Moosup FD	2,174	2,174
T1884	Plainfield Plainfield FD	1,959	1,959
T1885	Plainfield Wauregan FD	5,136	5,136
T1886	Pomfret FD	1,032	1,032
T1887	Putnam: E. Putnam FD	10,109	10,109
T1888	Simsbury FD	2,638	2,638
T1889	Stafford Springs Service Dist.	15,246	15,246
T1890	Sterling FD	1,293	1,293
T1891	Stonington Mystic FD	600	600
T1892	Stonington Old Mystic FD	2,519	2,519
T1893	Stonington Pawcatuck FD	5,500	5,500
T1894	Stonington Quiambaug FD	72	72
T1895	Stonington Wequetequock FD	73	73
T1896	Trumbull Center	555	555
T1897	Trumbull Long Hill FD	1,105	1,105
T1898	Trumbull Nichols FD	3,435	3,435
T1899	W. Haven: West Shore FD	34,708	34,708
T1900	W. Haven: Allingtown FD	21,515	21,515
T1901	West Haven First Ctr FD 1	4,736	4,736
T1902	Windsor Wilson FD	214	214
T1903	Windsor FD	14	14
T1904	Windham First	8,929	8,929

T1905	Total	150,000,000	[150,000,000] <u>152,000,000</u>

12911 (c) All provisions of section 3-20 of the general statutes, or the exercise
 12912 of any right or power granted thereby, that are not inconsistent with the
 12913 provisions of this section are hereby adopted and shall apply to all
 12914 bonds authorized by the State Bond Commission pursuant to this
 12915 section, and temporary notes in anticipation of the money to be derived
 12916 from the sale of any such bonds so authorized may be issued in
 12917 accordance with said section 3-20 and from time to time renewed. Such
 12918 bonds shall mature at such time or times not exceeding twenty years
 12919 from their respective dates as may be provided in or pursuant to the
 12920 resolution or resolutions of the State Bond Commission authorizing
 12921 such bonds. None of said bonds shall be authorized except upon a
 12922 finding by the State Bond Commission that there has been filed with it
 12923 a request for such authorization which is signed by or on behalf of the
 12924 Secretary of the Office of Policy and Management and states such terms
 12925 and conditions as said commission, in its discretion, may require. Said
 12926 bonds issued pursuant to this section shall be general obligations of the
 12927 state and the full faith and credit of the state of Connecticut are pledged
 12928 for the payment of the principal of and interest on said bonds as the
 12929 same become due, and accordingly and as part of the contract of the
 12930 state with the holders of said bonds, appropriation of all amounts
 12931 necessary for punctual payment of such principal and interest is hereby
 12932 made, and the State Treasurer shall pay such principal and interest as
 12933 the same become due.

12934 Sec. 337. Section 132 of public act 25-174 is amended to read as follows
 12935 (*Effective July 1, 2026*):

12936 Not later than October 1, [2025] 2026, and [quarterly] semiannually
 12937 thereafter until the completion of the construction of the facilities for the
 12938 Office of the Chief Medical Examiner, the Department of Administrative
 12939 Services shall submit a report, in accordance with the provisions of
 12940 section 11-4a of the general statutes, to the joint standing committees of
 12941 the General Assembly having cognizance of matters relating to finance,

12942 revenue and bonding and government administration and elections,
12943 concerning the status of the design, alteration, renovation and
12944 construction of such facilities.

12945 Sec. 338. Section 134 of public act 25-174 is amended to read as follows
12946 (*Effective July 1, 2026*):

12947 Not later than October 1, [2025] 2026, and [quarterly] semiannually
12948 thereafter, the chancellor of the Connecticut State Colleges and
12949 Universities, in consultation with the Commissioner of Early
12950 Childhood, shall submit a report, in accordance with the provisions of
12951 section 11-4a of the general statutes, to the joint standing committee of
12952 the General Assembly having cognizance of matters relating to finance,
12953 revenue and bonding, describing the coordination of efforts between the
12954 Connecticut State Colleges and Universities and the Office of Early
12955 Childhood to construct, improve or equip child care centers on or near
12956 college and university campuses in the state.

12957 Sec. 339. Section 135 of public act 25-174 is amended to read as follows
12958 (*Effective July 1, 2026*):

12959 On or before January 1, 2027, and biennially thereafter, the Technical
12960 Education and Career System shall develop a five-year capital plan for
12961 such system and submit such plan, in accordance with the provisions of
12962 section 11-4a of the general statutes, to the joint standing [committee]
12963 committees of the General Assembly having cognizance of matters
12964 relating to education and finance, revenue and bonding.

12965 Sec. 340. (NEW) (*Effective from passage*) (a) As used in this section:

12966 (1) "Authority loans" has the same meaning as provided in section
12967 10a-223 of the general statutes; and

12968 (2) "Eligible graduate program" means an advanced academic or
12969 professional degree program that is (A) pursued after earning a
12970 bachelor's degree, and (B) determined by the Connecticut Higher
12971 Education Supplemental Loan Authority to be an eligible program in

12972 accordance with subsection (c) of this section.

12973 (b) The Connecticut Higher Education Supplemental Loan Authority
12974 shall establish, subject to available funding pursuant to subsection (d)
12975 of this section, a Supplemental Graduate Loan Program for the purpose
12976 of providing authority loans to students who are enrolled in eligible
12977 graduate programs and who meet the eligibility criteria as established
12978 by the authority.

12979 (c) The Connecticut Higher Education Supplemental Loan Authority
12980 shall determine eligible graduate programs and establish the eligibility
12981 criteria and administrative guidelines for the Supplemental Graduate
12982 Loan Program in accordance with the authority's written procedures
12983 adopted pursuant to subdivision (6) of subsection (f) of section 10a-224
12984 of the general statutes.

12985 (d) The Connecticut Higher Education Supplemental Loan Authority
12986 shall maintain a separate, nonlapsing account to hold funds for the
12987 Supplemental Graduate Student Loan Program. The account shall
12988 contain any moneys required by law to be deposited in the account,
12989 including, but not limited to, any state appropriation or proceeds from
12990 the sale of state bonds issued for the purpose of the program. Moneys
12991 in the account shall be used (1) for the purpose of the program and for
12992 reasonable and necessary expenses for the administration of the
12993 program, and (2) for the issuance of authority loans to students enrolled
12994 in eligible graduate programs.

12995 Sec. 341. (*Effective from passage*) (a) For the purposes described in
12996 subsection (b) of this section, the State Bond Commission shall have the
12997 power from time to time to authorize the issuance of bonds of the state
12998 in one or more series and in principal amounts not exceeding in the
12999 aggregate thirty million dollars.

13000 (b) The proceeds of the sale of such bonds, to the extent of the amount
13001 stated in subsection (a) of this section, shall be used by the Connecticut
13002 Higher Education Supplemental Loan Authority for the purpose of the

13003 Supplemental Graduate Student Loan Program established pursuant to
13004 section 340 of this act.

13005 (c) All provisions of section 3-20 of the general statutes, or the exercise
13006 of any right or power granted thereby, that are not inconsistent with the
13007 provisions of this section are hereby adopted and shall apply to all
13008 bonds authorized by the State Bond Commission pursuant to this
13009 section. Temporary notes in anticipation of the money to be derived
13010 from the sale of any such bonds so authorized may be issued in
13011 accordance with section 3-20 of the general statutes and from time to
13012 time renewed. Such bonds shall mature at such time or times not
13013 exceeding twenty years from their respective dates as may be provided
13014 in or pursuant to the resolution or resolutions of the State Bond
13015 Commission authorizing such bonds. None of such bonds shall be
13016 authorized except upon a finding by the State Bond Commission that
13017 there has been filed with it a request for such authorization that is signed
13018 by or on behalf of the Secretary of the Office of Policy and Management
13019 and states such terms and conditions as said commission, in its
13020 discretion, may require. Such bonds issued pursuant to this section shall
13021 be general obligations of the state and the full faith and credit of the state
13022 of Connecticut are pledged for the payment of the principal of and
13023 interest on such bonds as the same become due, and accordingly and as
13024 part of the contract of the state with the holders of such bonds,
13025 appropriation of all amounts necessary for punctual payment of such
13026 principal and interest is hereby made, and the State Treasurer shall pay
13027 such principal and interest as the same become due.

13028 Sec. 342. (NEW) (*Effective July 1, 2026*) The Department of Economic
13029 and Community Development shall administer a program to provide
13030 grants to municipalities and nonprofit providers of human or social
13031 services for capital expenditure projects to place or maintain war or
13032 veterans' memorials or monuments. The department shall develop
13033 eligibility criteria to be used in selecting among applicants for such
13034 grants, develop application forms and deadlines and post in a
13035 conspicuous location on the department's Internet web site a description

13036 of the grant program that includes, but is not limited to, such criteria,
13037 forms and deadlines.

13038 Sec. 343. (NEW) (*Effective July 1, 2026*) (a) For the purposes of this
13039 section:

13040 (1) "Eligible homeowner" means a person who (A) owns and occupies
13041 a residential property in the state as such individual's primary
13042 residence, (B) is sixty years of age or older or a person with a disability,
13043 and (C) has a household income at or below sixty per cent of the median
13044 household income for the area in which such individual resides, as
13045 determined by the Commissioner of Aging and Disability Services; and

13046 (2) "Accessibility modification" means physical alteration made to
13047 residential property to improve usability, safety and independence for
13048 a person who is elderly or a person with a disability.

13049 (b) The Department of Aging and Disability Services, in consultation
13050 with the Department of Housing, shall establish an aging-in-place
13051 program to provide grants-in-aid to an eligible homeowner for the
13052 purpose of making accessibility modifications that enable such
13053 homeowner to remain in such homeowner's primary residence. Any
13054 grant awarded under this section shall not exceed ten thousand dollars
13055 per eligible homeowner. The Department of Aging and Disability
13056 Services shall establish (1) the application form and process for such
13057 program, and (2) the criteria for accessibility modifications and for
13058 awarding grants.

13059 (c) The Department of Aging and Disability Services may adopt
13060 regulations, in accordance with the provisions of chapter 54 of the
13061 general statutes, to administer the program established pursuant to this
13062 section.

13063 Sec. 344. Section 10a-232 of the 2026 supplement to the general
13064 statutes is repealed and the following is substituted in lieu thereof
13065 (*Effective from passage*):

13066 (a) Revenue bonds or notes issued under the provisions of this
13067 chapter shall not be deemed to constitute a debt or liability of the state
13068 or of any political subdivision thereof or a pledge of the full faith and
13069 credit of the state or of any such political subdivision, but shall be
13070 payable solely from the revenues and funds herein provided therefor.
13071 All such revenue bonds or notes shall contain on the face thereof a
13072 statement to the effect that: (1) The state of Connecticut shall not be
13073 obligated to pay the same or the interest thereon and (2) the authority
13074 shall not be obligated to pay the same or the interest thereon except from
13075 revenues of the education loan program or programs or the portion
13076 thereof for which they are issued, and that neither the full faith and
13077 credit nor the taxing power of the state of Connecticut or of any political
13078 subdivision thereof is pledged to the payment of the principal of or the
13079 interest on such bonds or notes.

13080 (b) Notwithstanding the foregoing, (1) the constituent units of the
13081 state system of higher education may participate in one or more
13082 education loan programs with the authority and may incur
13083 indebtedness pursuant to authority loans, and (2) the authority may
13084 create and establish one or more reserve funds to be known as special
13085 capital reserve funds and may fund such special capital reserve funds
13086 with (A) any moneys appropriated and made available by the state for
13087 the purposes of such funds, (B) any proceeds of the sale of notes or
13088 bonds, to the extent provided in the resolution of the authority
13089 authorizing the issuance thereof, (C) any other moneys that may be
13090 made available to the authority for the purpose of such funds from any
13091 other source or sources, and (D) any surety policy or other similar
13092 instrument valued at par and payable or available to be drawn upon on
13093 or before any date by which debt service on the bonds secured thereby
13094 is required to be paid and issued by a financial institution that, at the
13095 time of issuance of such surety policy or similar instrument, is rated
13096 "AA" or better by any nationally recognized statistical rating
13097 organization and approved by the State Treasurer. The assets held in or
13098 credited to any special capital reserve fund established under this
13099 section, except as hereinafter provided, shall be used solely for the

13100 payment of the principal of notes and bonds of the authority secured by
13101 such capital reserve fund as the same become due, the purchase of such
13102 notes and bonds of the authority, the payment of interest on such notes
13103 and bonds of the authority or the payment of any redemption premium
13104 required to be paid when such bonds are redeemed prior to maturity or
13105 released by the authority; provided, the authority shall have power to
13106 require that moneys in any such fund shall not be withdrawn therefrom
13107 at any time in such amount as would reduce the amount of such funds
13108 to less than the maximum amount of principal and interest becoming
13109 due by reason of maturity or a required sinking fund installment in any
13110 succeeding calendar year on the bonds of the authority then outstanding
13111 and secured by such special capital reserve fund, or such lesser amount
13112 specified by the authority in its resolution authorizing the issuance of
13113 any such bonds, such amount being herein referred to as the "required
13114 minimum capital reserve", except for the purpose of paying such
13115 principal of, redemption premium and interest on such bonds of the
13116 authority secured by such special capital reserve becoming due and for
13117 the payment of which other moneys of the authority are not available.
13118 The authority may provide that it shall not issue bonds at any time if the
13119 required minimum capital reserve on outstanding bonds secured by a
13120 special capital reserve fund and the bonds then to be issued and secured
13121 by a special capital reserve fund will exceed the amount of such special
13122 capital reserve fund at the time of issuance, unless the authority, at the
13123 time of the issuance of such bonds, shall deposit in such special capital
13124 reserve fund from the proceeds of the bonds so to be issued, or
13125 otherwise, an amount which, together with the amount then in such
13126 special capital reserve fund, will be not less than the required minimum
13127 capital reserve. The authority may, as part of the contract of the
13128 authority with the owners of such bonds, provide that on or before
13129 December first, annually, there is deemed to be appropriated from the
13130 state General Fund such sums, if any, as shall be certified by the
13131 chairman of the authority to the Secretary of the Office of Policy and
13132 Management and the Treasurer of the state, as necessary to restore each
13133 such special capital reserve fund to the amount equal to the required
13134 minimum capital reserve of such fund, and such amounts shall be

13135 allotted and paid to the authority. For the purpose of evaluation of any
13136 such special capital reserve fund, obligations acquired as an investment
13137 for any such fund shall be valued at amortized cost. Nothing contained
13138 in this section shall preclude the authority from establishing and
13139 creating other debt service reserve funds in connection with the issuance
13140 of bonds or notes of the authority. Subject to any agreement or
13141 agreements with owners of outstanding notes and bonds of the
13142 authority, any amount or amounts allotted and paid to the authority
13143 pursuant to this section shall be repaid to the state from moneys of the
13144 authority at such time as such moneys are not required for any other of
13145 its corporate purposes and in any event shall be repaid to the state on
13146 the date one year after all bonds and notes of the authority theretofore
13147 issued on the date or dates such amount or amounts are allotted and
13148 paid to the authority or thereafter issued, together with interest on such
13149 bonds and notes, with interest on any unpaid installments of interest
13150 and all costs and expenses in connection with any action or proceeding
13151 by or on behalf of the owners thereof, are fully met and discharged.
13152 Notwithstanding any other provisions contained in this chapter, the
13153 aggregate amount of bonds outstanding at any time secured by such
13154 special capital reserve funds authorized to be created and established by
13155 this section shall not exceed [three] seven hundred fifty million dollars
13156 and no such bonds shall be issued to pay program costs unless the
13157 authority is of the opinion and determines that the revenues to be
13158 derived from the program shall be sufficient (i) to pay the principal of
13159 and interest on the bonds issued to finance the program, (ii) to establish,
13160 increase and maintain any reserves deemed by the authority to be
13161 advisable to secure the payment of the principal of and interest on such
13162 bonds, (iii) to pay the cost of maintaining and servicing the program and
13163 keeping it properly insured, and (iv) to pay such other costs of the
13164 program as may be required.

13165 Sec. 345. Subdivision (2) of section 8-265ccc of the 2026 supplement to
13166 the general statutes is repealed and the following is substituted in lieu
13167 thereof (*Effective July 1, 2026*):

13168 (2) The loan shall (A) be secured by a mortgage deed on the eligible
13169 borrower's residential buildings and all related improvements under
13170 development by the eligible borrower, (B) be made in accordance with
13171 the eligible financial institution's underwriting policy and standards,
13172 except that the loan may have a loan-to-value ratio in excess of typical
13173 underwriting standards, and (C) bear interest at a rate that does not
13174 exceed the [applicable] prime rate [of the Federal Home Loan Bank of
13175 Boston for short-term or long-term advances through the New England
13176 Fund program. For the purposes of this subdivision, "applicable rate"
13177 means the New England Fund rate that (i) is] published [on the Internet
13178 web site of the Federal Home Loan Bank of Boston] by The Wall Street
13179 Journal as of the date the interest rate is locked in by the eligible
13180 borrower and eligible financial institution. [, and (ii) has an advance
13181 term that most closely corresponds to the term of the loan being made
13182 by the participating eligible financial institution.]

13183 Sec. 346. Section 8-265eee of the 2026 supplement to the general
13184 statutes is repealed and the following is substituted in lieu thereof
13185 (*Effective July 1, 2026*):

13186 Under the program administered by the authority pursuant to
13187 subsection (a) of section 8-265bbb, the authority may, within available
13188 resources allocated by the State Bond Commission, make loans or issue
13189 grants-in-aid to eligible borrowers that are in addition to the loans made
13190 to such eligible borrowers by eligible financial institutions pursuant to
13191 section 8-265ccc. The loans made by the authority (1) may be (A)
13192 amortizing, (B) deferred, or (C) forgivable as to principal and interest,
13193 and (2) shall be [(1)] (A) subordinate to the loans made by eligible
13194 financial institutions, and [(2)] (B) subject to such terms as the authority
13195 may establish, including, but not limited to, loan amounts, interest rates
13196 and terms to maturity. The grants-in-aid issued by the authority shall be
13197 subject to such terms as the authority may establish.

13198 Sec. 347. Section 13a-175a of the 2026 supplement to the general
13199 statutes is repealed and the following is substituted in lieu thereof
13200 (*Effective July 1, 2026*):

13201 (a) For each fiscal year there shall be allocated twelve million five
13202 hundred thousand dollars out of the funds appropriated to the
13203 Department of Transportation, or from any other source, not otherwise
13204 prohibited by law, to be used by the towns for (1) [for] the construction,
13205 reconstruction, improvement and maintenance of highways, sections of
13206 highways, bridges and structures incidental to highways and bridges,
13207 including (A) construction, reconstruction, improvements and
13208 maintenance intended to increase resiliency against increased
13209 precipitation, flooding, sea level rise and extreme heat, and (B) the
13210 plowing of snow, the sanding of icy pavements, the trimming and
13211 removal of trees, the installation, replacement and maintenance of traffic
13212 signs, signals and markings, (2) [for] the purchase and maintenance of
13213 equipment used for the purposes described in subdivision (1) of this
13214 subsection, including, but not limited to, street sweepers, roadside
13215 mowing and vegetation management equipment, snow removal and
13216 de-icing equipment and equipment to clean catch basins, (3) traffic
13217 control and vehicular safety programs, traffic and parking planning and
13218 administration, and other purposes and programs related to highways,
13219 traffic and parking, and [(3) for] (4) the purposes of providing and
13220 operating essential public transportation services and related facilities.

13221 (b) Notwithstanding the provisions of subsection (a) of this section,
13222 the Secretary of the Office of Policy and Management, in the secretary's
13223 discretion, may approve the use of funds by a town for purposes other
13224 than those enumerated in said subsection.

13225 (c) Not later than September 1, 2022, and annually thereafter, each
13226 town or district that received funds pursuant to subsection (a) of this
13227 section in the preceding fiscal year shall submit a report to the
13228 Commissioner of Transportation, in the form and manner prescribed by
13229 the commissioner, detailing the amount of such funds expended in such
13230 fiscal year for each of the usages enumerated in said subsection or
13231 approved pursuant to subsection (b) of this section.

13232 (d) The Secretary of the Office of Policy and Management shall reduce
13233 the grant payable to a town or district in accordance with subsection (a)

13234 of this section by ten per cent in any fiscal year that the town or district
13235 fails to timely submit the report required by subsection (c) of this
13236 section. The secretary shall waive such reduction if the town or district
13237 submits such report after the due date and provides proof of such
13238 submission to the secretary.

13239 Sec. 348. Section 13b-78 of the general statutes is repealed and the
13240 following is substituted in lieu thereof (*Effective July 1, 2026*):

13241 (a) As used in this section, unless the context clearly indicates a
13242 different meaning or intent:

13243 (1) "Debt service requirements" has the same meaning as provided in
13244 section 13b-75;

13245 (2) "Federal program" means any program of financial assistance
13246 made by the United States Department of Transportation to the state,
13247 including, but not limited to, RRIF, TIFIA or programs established
13248 under RRIF or TIFIA;

13249 [(2)] (3) "Federal transportation bonds" means one or more special tax
13250 obligation bonds authorized to be issued pursuant to subsection (c) of
13251 this section;

13252 [(3)] (4) "Pledged revenues" has the same meaning as provided in
13253 section 13b-75;

13254 [(4)] (5) "RRIF" means the Railroad Rehabilitation and Improvement
13255 Financing program established by the Transportation Equity Act for the
13256 21st Century, P.L. 105-178, as amended from time to time;

13257 [(5)] (6) "RRIF loan agreement" means a loan agreement or other
13258 credit agreement by and between the state as the borrower and the
13259 United States Department of Transportation as the lender, pursuant to
13260 which a loan or other form of financial assistance is made by said
13261 department to the state in accordance with RRIF;

13262 [(6)] (7) "Special Transportation Fund" means the Special

13263 Transportation Fund established pursuant to section 13b-68;

13264 [(7)] (8) "State officials" means the Treasurer, the Commissioner of
13265 Transportation and the Secretary of the Office of Policy and
13266 Management;

13267 [(8)] (9) "TIFIA" means the Transportation Infrastructure Finance and
13268 Innovation Act, P.L. 105-178, as amended from time to time; and

13269 [(9)] (10) "TIFIA loan agreement" means a loan agreement or other
13270 credit agreement by and between the state as the borrower and the
13271 United States Department of Transportation as the lender, pursuant to
13272 which a loan or other form of financial assistance is made by said
13273 department to the state in accordance with TIFIA.

13274 (b) The state, acting through the state officials, may enter into loan
13275 agreements or other credit agreements, including, but not limited to,
13276 RRIF loan agreements and TIFIA loan agreements, with the United
13277 States Department of Transportation. The state officials (1) may execute
13278 and deliver any documents, certificates and instruments related to such
13279 agreements and the obligations issued thereunder, (2) shall determine
13280 the terms, conditions, covenants and other provisions of such
13281 agreements in the best interest of the state, and (3) may take all other
13282 actions, including, but not limited to, the preparation, execution and
13283 submission of loan applications, necessary to enter into such agreements
13284 or receive loans or other financial assistance from said department
13285 under any federal program.

13286 (c) Special tax obligation bonds may be issued pursuant to sections
13287 13b-74 to 13b-77, inclusive, to evidence and secure loans or other forms
13288 of financial assistance made [by the United States Department of
13289 Transportation] to the state under [one or more] any federal program.
13290 [programs, including, but not limited to, RRIF or programs established
13291 under TIFIA.] Such bonds may be secured by a trust indenture by and
13292 between the state and a corporate trustee in accordance with the
13293 provisions of subsection (g) of section 13b-76.

13294 (d) The debt service requirements and any other obligations with
13295 respect to any federal transportation bonds shall be secured by a lien on
13296 the pledged revenues as they are received by the state and credited to
13297 the Special Transportation Fund. Such lien shall be subordinate and
13298 junior in all respects to every lien on pledged revenues securing any
13299 special tax obligation bonds issued pursuant to sections 13b-74 to 13b-
13300 77, inclusive, that are not federal transportation bonds.

13301 (e) Whenever the General Assembly authorizes special tax obligation
13302 bonds pursuant to any bond act taking effect before, on or after the
13303 effective date of this section, such authorization shall be deemed to
13304 authorize the issuance of federal transportation bonds. Such federal
13305 transportation bonds shall be subject to the requirements, covenants and
13306 conditions applicable to special tax obligation bonds as set forth in
13307 sections 13b-74 to 13b-77, inclusive, except as otherwise provided in this
13308 section.

13309 (f) Notwithstanding the provisions of subsection (o) of section 13b-
13310 76, federal transportation bonds may be issued as taxable bonds,
13311 whereby the interest on such bonds may be includable in the gross
13312 income of the holders or owners of such bonds under the Internal
13313 Revenue Code of 1986, or any subsequent corresponding internal
13314 revenue code of the United States, as amended from time to time.

13315 (g) Notwithstanding the provisions of subsection (b) of section 13b-
13316 76, federal transportation bonds issued under any federal program may
13317 mature at such time or times as allowable under such federal program
13318 but not longer than the useful life of the projects being financed.

13319 Sec. 349. Subsections (b) and (c) of section 32-285a of the 2026
13320 supplement to the general statutes are repealed and the following is
13321 substituted in lieu thereof (*Effective from passage*):

13322 (b) (1) There is established a Community Investment Fund 2030
13323 Board, which shall be within the Department of Economic and
13324 Community Development. The board shall consist of the following

13325 members:

13326 (A) The speaker of the House of Representatives and the president
13327 pro tempore of the Senate;

13328 (B) The majority leader of the House of Representatives, the majority
13329 leader of the Senate, the minority leader of the House of Representatives
13330 and the minority leader of the Senate;

13331 (C) One appointed by the speaker of the House of Representatives
13332 and one appointed by the president pro tempore of the Senate, each of
13333 whom shall be a member of the Black and Puerto Rican Caucus of the
13334 General Assembly;

13335 (D) The two chairpersons of the general bonding subcommittee of the
13336 joint standing committee of the General Assembly having cognizance of
13337 matters relating to finance, revenue and bonding;

13338 (E) Two appointed by the Governor; and

13339 (F) The Secretary of the Office of Policy and Management, the
13340 Attorney General, the Treasurer, the Comptroller, the Secretary of the
13341 State and the Commissioners of Economic and Community
13342 Development, Administrative Services, Social Services and Housing, or
13343 their designees.

13344 (2) All initial appointments shall be made not later than sixty days
13345 after June 30, 2021. The terms of the members appointed by the
13346 Governor shall be coterminous with the term of the Governor or until
13347 their successors are appointed, whichever is later. Any vacancy in
13348 appointments shall be filled by the appointing authority. Any vacancy
13349 occurring other than by expiration of term shall be filled for the balance
13350 of the unexpired term.

13351 (3) Notwithstanding any provision of the general statutes, it shall not
13352 constitute a conflict of interest for a trustee, director, partner, officer,
13353 stockholder, proprietor, counsel or employee of any person to serve as

13354 a member of the board, provided such trustee, director, partner, officer,
13355 stockholder, proprietor, counsel or employee abstains and absents
13356 himself or herself from any deliberation, action and vote by the board in
13357 specific respect to such person. The members appointed by the
13358 Governor shall be deemed public officials and shall adhere to the code
13359 of ethics for public officials set forth in chapter 10.

13360 (4) The speaker of the House of Representatives and the president pro
13361 tempore of the Senate shall serve as the chairpersons of the board and
13362 shall schedule the first meeting of the board, which shall be held not
13363 later than January 1, 2022. The board shall meet at least quarterly.

13364 (5) Any member of the board serving pursuant to subparagraphs (A)
13365 to (E), inclusive, of subdivision (1) of this subsection who is unable to
13366 attend a meeting may, by notifying the administrator in writing,
13367 designate another person to act as a proxy in such member's absence.

13368 ~~[(5)]~~ (6) Eleven members of the board shall constitute a quorum for
13369 the transaction of any business.

13370 ~~[(6)]~~ (7) The members of the board shall serve without compensation,
13371 but shall, within the limits of available funds, be reimbursed for
13372 expenses necessarily incurred in the performance of their duties.

13373 ~~[(7)]~~ (8) The board shall have the following powers and duties: (A) To
13374 review eligible projects to be recommended to the Governor under
13375 subsection (c) of this section for approval; (B) to establish bylaws to
13376 govern its procedures; (C) to review and provide comments to the
13377 Department of Economic and Community Development on projects
13378 funded through the state's Economic Action Plan as provided under
13379 section 32-4p; and (D) to perform such other acts as may be necessary
13380 and appropriate to carry out its duties described in this section.

13381 ~~[(8)]~~ (9) The administrator shall hire such employee or employees as
13382 may be necessary to assist the board to carry out its duties described in
13383 this section.

13384 (c) (1) The Community Investment Fund 2030 Board shall establish
13385 an application and review process with guidelines and terms for funds
13386 provided from the bond proceeds under subsection (d) of this section
13387 for eligible projects. Such funds shall be used for costs related to an
13388 eligible project recommended by the board and approved by the
13389 Governor pursuant to this subsection but shall not be used to pay or to
13390 reimburse the administrator for administrative costs under this section.
13391 The Department of Economic and Community Development shall pay
13392 for administrative costs within available appropriations.

13393 (2) The chairpersons of the board shall notify the chief elected official
13394 of each municipality when the application and review process has been
13395 established and shall publicize the availability of any funds available
13396 under this section. Each such official or any community development
13397 corporation or nonprofit organization may submit an application to the
13398 board requesting funds for an eligible project. The board shall meet to
13399 consider applications submitted and determine which, if any, the board
13400 will recommend to the Governor for approval.

13401 (3) (A) The board shall give priority to eligible projects (i) that are
13402 proposed by a municipality that (I) has implemented local hiring
13403 preferences pursuant to section 7-112, or (II) has or will leverage
13404 municipal, private, philanthropic or federal funds for such project, (ii)
13405 that have a project labor agreement or employ or will employ ex-
13406 offenders or individuals with physical, intellectual or developmental
13407 disabilities, and (iii) on and after the date the ten-year plan developed
13408 under section 32-7z is submitted to the General Assembly, that are
13409 included in such plan. The board shall give additional priority to an
13410 application submitted by a municipality that includes a letter of support
13411 for the proposed eligible project from a member or members of the
13412 General Assembly in whose district the eligible project is or will be
13413 located.

13414 (B) In evaluating applications for an eligible project described in
13415 subparagraph (A)(ii) of subdivision (3) of subsection (a) of this section,
13416 the board shall (i) consider the impact of the eligible project on job

13417 creation or retention in the municipality, (ii) consider the impact of the
13418 eligible project on blighted properties in the municipality, and (iii)
13419 consider the overall impact of the eligible project on the community.

13420 (4) (A) Whenever the board deems it necessary or desirable, the
13421 chairpersons of the board shall submit to the Governor a list of the
13422 board's recommendations of eligible projects to be funded from bond
13423 proceeds under subsection (d) of this section. The board may
13424 recommend state funding for eligible projects, provided the total cost of
13425 such recommendations shall not exceed [one hundred seventy-five
13426 million dollars] the funds available in any fiscal year. Such list shall
13427 include, at a minimum for each eligible project described in
13428 subparagraph (A) of subdivision (3) of subsection (a) of this section, a
13429 description of such project, the municipality in which such project is
13430 located, the amount of funds sought for such project, any cost estimates
13431 for such project, any schematics or plans for such project, the total
13432 estimated project costs and the applicable fiscal year to which such
13433 disbursement will be attributed.

13434 (B) The Governor shall review the eligible projects on the list and may
13435 recommend changes to any eligible project on the list. The Governor
13436 shall determine the most appropriate method of funding for each
13437 eligible project and shall provide to the members of the board, in
13438 writing, such determination for each eligible project on the list and the
13439 reasons therefor. The board may reconsider at a future meeting any
13440 eligible project for which the Governor recommends a change. Each
13441 eligible project for which the Governor recommends the allocation of
13442 bond funds shall be considered at a State Bond Commission meeting not
13443 later than two months after the date such eligible project was submitted
13444 to the Governor pursuant to subparagraph (A) of this subdivision.

13445 (5) Funds for an eligible project approved under this section may be
13446 administered on behalf of the board by a state agency, as determined by
13447 the Secretary of the Office of Policy and Management, provided a
13448 memorandum of understanding between the administrator of the
13449 Community Investment Fund 2030 Board and the state, acting by and

13450 through the Secretary of the Office of Policy and Management, has been
13451 entered into with respect to such funds and project.

13452 (6) Not later than October 15, 2025, the board shall submit a report, in
13453 accordance with the provisions of section 11-4a, to the General
13454 Assembly, the Black and Puerto Rican caucus of the General Assembly,
13455 the Auditors of Public Accounts and the Governor, for the preceding
13456 fiscal year, that includes (A) a list of the eligible projects recommended
13457 by the board and approved by the Governor pursuant to this section, (B)
13458 the total amount of funds provided for such eligible projects, (C) for
13459 each such eligible project, a description of the project and the amounts
13460 and terms of the funds provided, (D) the status of the project and any
13461 balance remaining of the allocated funds, and (E) any other information
13462 the board deems relevant or necessary. The board shall submit such
13463 report annually for each fiscal year in which the funds specified in
13464 subparagraph (A) of subdivision (3) of this subsection are disbursed for
13465 eligible projects.

13466 (7) The Auditors of Public Accounts shall audit, on a biennial basis,
13467 all eligible projects funded under this section and shall report their
13468 findings to the Governor, the Secretary of the Office of Policy and
13469 Management and the General Assembly.

13470 Sec. 350. Section 32-7x of the general statutes is repealed and the
13471 following is substituted in lieu thereof (*Effective July 1, 2026*):

13472 (a) As used in this section, (1) "concentrated poverty census tract"
13473 means a United States census tract in which thirty per cent or more of
13474 the households within such census tract have incomes below the federal
13475 poverty level, according to the most recent five-year United States
13476 Census Bureau American Community Survey, and (2) "certified
13477 community development corporation" has the same meaning as
13478 provided in section 32-7s.

13479 (b) The Secretary of the Office of Policy and Management shall
13480 compile a list of concentrated poverty census tracts in the state and the

13481 municipalities in which such census tracts are located and shall, not later
13482 than July 31, 2023, submit such list to the General Assembly in
13483 accordance with the provisions of section 11-4a. The secretary shall post
13484 such list to the Internet web site of the Office of Policy and Management
13485 and shall review and update such list as necessary. Whenever the
13486 secretary updates such list, the secretary shall submit such updated list
13487 to the General Assembly in accordance with the provisions of section
13488 11-4a.

13489 (c) (1) The Commissioner of Economic and Community Development
13490 shall establish a grant program to fund eligible projects (1) within
13491 concentrated poverty census tracts, or (2) undertaken by a certified
13492 community development corporation. An eligible project shall seek to
13493 reduce concentrated poverty within such tracts and the effects of such
13494 poverty, including, but not limited to, the lower lifetime income of
13495 residents within such tracts, the lower lifetime income expectations of
13496 future generations within such tracts, increased crime and risk of
13497 incarceration for residents within such tracts and educational
13498 deficiencies within such tracts. An eligible project includes:

13499 (A) Construction, renovation or rehabilitation of mixed-income rental
13500 housing and owner-occupied housing, in order to retain individuals and
13501 families of different income levels and to increase the percentage of
13502 owner-occupied housing within such census tract or tracts;

13503 (B) The establishment or improvement of workforce development
13504 programs, including, but not limited to, programs that partner with
13505 organizations to identify unemployed or underemployed individuals
13506 and at-risk youth residing in such census tracts, identify workforce
13507 training opportunities and other resources for such individuals and link
13508 such individuals with the appropriate training and resources that will
13509 increase the skills and earning potential of such individuals; and

13510 (C) Construction, renovation or rehabilitation of public
13511 infrastructure, in order to support and improve the private investment
13512 opportunities, quality of life and public safety within such census tract

13513 or tracts.

13514 (2) Beginning on January 1, 2024, and not later than January 1, 2030,
13515 each municipality in which a concentrated poverty census tract is
13516 located may apply to the commissioner, in a form and manner
13517 prescribed by the commissioner, to receive a grant for an eligible project
13518 or any combination of eligible projects. An application may target one
13519 concentrated poverty census tract or more than one such census tract if
13520 such census tracts are geographically contiguous or within reasonable
13521 proximity of each other. An applicant shall not be prohibited from filing
13522 more than one application for different concentrated poverty census
13523 tracts or groups of such census tracts.

13524 (3) Beginning on July 1, 2026, and not later than January 1, 2030, a
13525 certified community development corporation may apply to the
13526 commissioner, in a form and manner prescribed by the commissioner,
13527 to receive a grant for an eligible project or any combination of eligible
13528 projects undertaken by such certified community development
13529 corporation.

13530 (d) (1) Not later than January 1, 2024, the commissioner shall establish
13531 criteria for the awarding of grants as described in subdivision (2) of this
13532 subsection, requirements for documents and information as described
13533 in subdivision (4) of this subsection and deadlines for submitting
13534 applications and revised and modified applications under subsection (e)
13535 of this section. The commissioner shall post such criteria, requirements
13536 and deadlines on the Internet web site of the Department of Economic
13537 and Community Development, notify each certified community
13538 development corporation and municipality in which a concentrated
13539 poverty census tract is located of such posting and promote the
13540 availability of the grant program established by this section in each such
13541 census tract.

13542 (2) Criteria for the awarding of grants pursuant to this section shall
13543 include, but need not be limited to:

13544 (A) The likelihood that a proposal will reduce adult or child poverty
13545 within a concentrated poverty census tract;

13546 (B) The likelihood that a proposal will reduce the likelihood that
13547 children currently residing within a concentrated poverty census tract
13548 will live in poverty after reaching adulthood;

13549 (C) The likelihood that a proposal will produce persistent and
13550 meaningful improvements in residents' wealth, financial security,
13551 employability or quality of life beyond the duration of the proposal;

13552 (D) The feasibility of the initiatives in a proposal and the
13553 demonstrated or perceived capacity to execute upon the scope of work
13554 in a proposal, including, but not limited to, adequate staffing levels of
13555 entities involved with the proposal; and

13556 (E) The interconnectivity and mutual reinforcement among all
13557 proposed initiatives in the same concentrated poverty census tract area
13558 or areas, such as providing workforce training programs to parents of
13559 children enrolled in a supported early childhood program.

13560 (3) On and after the date the ten-year plan developed under section
13561 32-7z is submitted to the General Assembly, priority shall be given to
13562 projects included in such plan.

13563 (4) Requirements for documents and information to be submitted by
13564 municipalities to evaluate applications shall include, but need not be
13565 limited to:

13566 (A) A description of how the proposal intends to address each type
13567 of eligible project described in subparagraphs (A) to (C), inclusive, of
13568 subdivision (1) of subsection (c) of this section, and whether there are
13569 existing projects or programs to address such eligible projects;

13570 (B) A description of each initiative within the proposal, which may
13571 include multiple simultaneous initiatives, and how each initiative will
13572 meet one of the criteria established pursuant to subdivision (2) of this

13573 subsection;

13574 (C) A description of sufficient efforts, as determined by the
13575 commissioner, to engage residents of the concentrated poverty census
13576 tract in formulating a proposal;

13577 (D) For an initiative that is an eligible project described in
13578 subparagraph (B) of subdivision (1) of subsection (c) of this section, a
13579 description of the municipality's consultations with the regional
13580 workforce development board that serves the municipality regarding
13581 the development of such project and efforts to coordinate such project
13582 with the board's activities;

13583 (E) A description of each organization that will participate in an
13584 eligible project described in subparagraph (B) of subdivision (1) of
13585 subsection (c) of this section, and information on each organization's
13586 commitment to provide continuous, sustained engagement with
13587 residents of such tract throughout the project;

13588 (F) A description of the entity or organization responsible for
13589 coordinating the implementation of each component of the application
13590 and overseeing the various projects and programs outlined in such
13591 application;

13592 (G) A description of plans for ongoing engagement with residents of
13593 such census tracts and solicitation of feedback on the progress of a
13594 proposal during its implementation; and

13595 (H) A description of plans to provide residents of such census tract
13596 with opportunities to become involved in implementation of a proposal.

13597 (e) (1) The department shall review and evaluate each application
13598 submitted not later than ninety days after the date of submission and
13599 shall work with the applicant municipality or certified community
13600 development corporation to revise the application if the department
13601 believes such revisions will improve or strengthen the application. The
13602 department shall assist an applicant in identifying and applying for

13603 funding under other programs in order to maximize the amount of
13604 funding available for an applicant, including seeking funding under
13605 section 4-66c. For a proposal for an eligible project described in
13606 subparagraph (A) of subdivision (1) of subsection (c) of this section, the
13607 commissioner shall evaluate such project in consultation with the
13608 Commissioner of Housing and the Commissioner of Housing shall
13609 assist the applicant with obtaining funding for such project through
13610 programs operated by the Department of Housing.

13611 (2) The commissioner shall submit to the Governor all applications
13612 that are deemed to satisfy the requirements of subsection (d) of this
13613 section. The Governor shall review such applications and may approve
13614 or disapprove an application or return an application to the
13615 commissioner for modifications. If an application is returned to the
13616 commissioner, the commissioner shall work with the applicant to
13617 modify the application and shall resubmit such application with
13618 modifications to the Governor. If the Governor approves an application,
13619 the Governor shall make a grant award from bond proceeds under
13620 section 32-7y, provided the Governor may use funds from other bond
13621 proceeds authorized for the general purposes described in
13622 subparagraphs (A) to (C), inclusive, of subdivision (1) of subsection (c)
13623 of this section for such grants. Grants awarded under this section shall
13624 be for a period of three years, and in an amount sufficient to carry out
13625 the objectives of the application, but not less than five hundred
13626 thousand dollars. Each application that the Governor approves shall be
13627 considered at a State Bond Commission meeting not later than two
13628 months after the date the application was approved by the Governor.

13629 (f) At the conclusion of the initial grant period, the commissioner
13630 shall evaluate the municipality's progress toward reducing the number
13631 of households within the applicable concentrated poverty census tract
13632 who have incomes below the federal poverty level to less than thirty per
13633 cent of the households of such census tract. Such evaluation shall
13634 consider, among other factors, any change in the percentage of
13635 households within such census tract who have incomes below the

13636 federal poverty level, and whether the actions taken pursuant to such
13637 grant during the initial grant period: (1) May reasonably result in a
13638 future reduction in the percentage of households within such census
13639 tract who have incomes below the federal poverty level, (2) have
13640 resulted in a reduction in child poverty within such census tract, (3) may
13641 reasonably result in a future reduction in child poverty within such
13642 census tract, or (4) may reasonably decrease the likelihood that children
13643 who are currently living within such census tract will have incomes
13644 below the federal poverty level after they reach adulthood. Upon a
13645 determination by the commissioner that reasonable progress has been
13646 made, the municipality shall be eligible for subsequent grants under this
13647 section, provided, at the conclusion of each subsequent grant period of
13648 three years, each applicant municipality shall be subject to an evaluation
13649 and determination under this subsection prior to being eligible to apply
13650 for a subsequent grant. An application for a subsequent grant and the
13651 awarding of a subsequent grant shall be in accordance with the
13652 provisions of subsections (c) to (e), inclusive, of this section.

13653 (g) Not later than August 1, 2024, and annually thereafter until and
13654 including August 1, 2029, the commissioner shall submit a report, in
13655 accordance with the provisions of section 11-4a, to the General
13656 Assembly, that includes the municipalities that submitted applications
13657 and that were awarded grants under this section in the prior fiscal year,
13658 a description of each purpose and eligible project a municipality
13659 awarded a grant under this section is seeking to accomplish or
13660 undertaking, a progress report, if applicable, for each such purpose or
13661 eligible project and any other information the commissioner deems
13662 relevant.

13663 Sec. 351. (*Effective July 1, 2026*) The Commissioner of Housing and the
13664 executive director of the Connecticut Housing Finance Authority shall
13665 seek a partnership with one or more municipalities or hospitals located
13666 in the state to increase workforce housing options. Not later than
13667 January 1, 2028, the commissioner and executive director shall submit,
13668 in accordance with the provisions of section 11-4a of the general statutes,

13669 a report detailing the status of any such partnership and any
13670 recommendations on other methods to increase such housing options to
13671 the joint standing committee of the General Assembly having
13672 cognizance of matters relating to finance, revenue and bonding.

13673 Sec. 352. (*Effective July 1, 2026*) (a) For the purposes described in
13674 subsection (b) of this section, the State Bond Commission shall have the
13675 power from time to time to authorize the issuance of bonds of the state
13676 in one or more series and in principal amounts not exceeding in the
13677 aggregate twenty million dollars.

13678 (b) The proceeds of the sale of such bonds, to the extent of the amount
13679 stated in subsection (a) of this section, shall be used by the Department
13680 of Economic and Community Development for the purpose of
13681 supporting tuition for medical students at the Frank H. Netter MD
13682 School of Medicine at Quinnipiac University.

13683 (c) All provisions of section 3-20 of the general statutes, or the exercise
13684 of any right or power granted thereby, that are not inconsistent with the
13685 provisions of this section are hereby adopted and shall apply to all
13686 bonds authorized by the State Bond Commission pursuant to this
13687 section. Temporary notes in anticipation of the money to be derived
13688 from the sale of any such bonds so authorized may be issued in
13689 accordance with section 3-20 of the general statutes and from time to
13690 time renewed. Such bonds shall mature at such time or times not
13691 exceeding twenty years from their respective dates as may be provided
13692 in or pursuant to the resolution or resolutions of the State Bond
13693 Commission authorizing such bonds. None of such bonds shall be
13694 authorized except upon a finding by the State Bond Commission that
13695 there has been filed with it a request for such authorization that is signed
13696 by or on behalf of the Secretary of the Office of Policy and Management
13697 and states such terms and conditions as said commission, in its
13698 discretion, may require. Such bonds issued pursuant to this section shall
13699 be general obligations of the state and the full faith and credit of the state
13700 of Connecticut are pledged for the payment of the principal of and
13701 interest on such bonds as the same become due, and accordingly and as

13702 part of the contract of the state with the holders of such bonds,
13703 appropriation of all amounts necessary for punctual payment of such
13704 principal and interest is hereby made, and the State Treasurer shall pay
13705 such principal and interest as the same become due.

13706 Sec. 353. (*Effective from passage*) (a) Not later than September 1, 2026,
13707 and prior to the final selection of a site for the replacement or relocation
13708 of the technical high school serving the Windham, Willimantic and
13709 Mansfield region, the Secretary of the Office of Policy and Management
13710 shall provide an opportunity for the chief elected official of the town of
13711 Windham, city of Willimantic and town of Mansfield and members of
13712 the General Assembly representing such town and city to submit
13713 written recommendation for alternative sites for consideration. The
13714 secretary shall evaluate any such alternative site located closer to the
13715 existing school than the site previously identified by the Office of Policy
13716 and Management for consideration.

13717 (b) Such evaluation shall (1) be conducted using uniform, objective
13718 criteria applied equally to each proposed site, including the site
13719 identified by the office and any alternative site submitted for
13720 consideration pursuant to the provisions of subsection (a) of this section,
13721 and (2) determine whether each site satisfies the minimum educational,
13722 operational and facility requirements for the project, including, but not
13723 limited to:

13724 (A) Sufficient acreage, configuration and developable area to
13725 accommodate instructional space, trade programs, parking, circulation,
13726 outdoor training needs and reasonable future expansion;

13727 (B) Physical site conditions, including wetlands, topography, ledge,
13728 soil conditions, environmental contamination, flood risk, drainage and
13729 other constraints affecting construction or use;

13730 (C) Access, transportation and safety considerations, including
13731 roadway access traffic capacity, bus circulation, pedestrian access,
13732 student transportation, proximity to public transit where available,

13733 sidewalks and any required off-site improvements;

13734 (D) Availability and adequacy of public utilities and infrastructure,
13735 including water, sewer, electric service, stormwater management and
13736 road improvements;

13737 (E) Estimated land acquisition, site preparation, infrastructure,
13738 construction and transportation costs;

13739 (F) The likely effect of each site on the project schedule, permitting
13740 design complexity and risk; and

13741 (G) The impact of each site on current and projected students,
13742 including travel time, transportation burden and access for students
13743 residing in the town of Windham, city of Willimantic or town of
13744 Mansfield.

13745 (c) The Secretary of the Office of Policy and Management shall
13746 prepare a written comparative analysis identifying, for each site: (1)
13747 Whether the site meets the minimum requirements for the project, (2)
13748 any conditions that limit or prevent use of the site, (3) the estimated cost
13749 and schedule impact of addressing such conditions, (4) whether such
13750 conditions are reasonably manageable within the normal course of
13751 project development or would materially impair the project, and (5) the
13752 basis for recommending or rejecting the site. The analysis shall
13753 distinguish between conditions that can be reasonably mitigated and
13754 conditions that render a site impracticable. Not later than November 1,
13755 2026, the secretary shall submit the results of such evaluation and
13756 analysis to the joint standing committee of the General Assembly having
13757 cognizance of matters relating to finance, revenue and bonding.

13758 (d) The Office of Policy and Management shall not proceed with final
13759 site selection for the replacement or relocation of the technical high
13760 school serving the Windham, Willimantic and Mansfield region, unless
13761 the evaluation demonstrates that no alternative site located closer to the
13762 existing school than the site previously identified by the office, is both
13763 feasible and capable of meeting program requirements without causing

13764 an unreasonable delay, cost increase or operational limitation.

13765 Sec. 354. (*Effective July 1, 2026*) (a) For the purposes described in
13766 subsection (b) of this section, the State Bond Commission shall have the
13767 power from time to time to authorize the issuance of bonds of the state
13768 in one or more series and in principal amounts not exceeding in the
13769 aggregate ten million dollars.

13770 (b) The proceeds of the sale of such bonds, to the extent of the amount
13771 stated in subsection (a) of this section, shall be used by the Office of
13772 Policy and Management for the purpose of providing a grant-in-aid to
13773 the town of Hamden, provided the mayor of the town of Hamden
13774 appears before the Municipal Finance Advisory Commission pursuant
13775 to the provisions of subsection (d) of this section.

13776 (c) All provisions of section 3-20 of the general statutes, or the exercise
13777 of any right or power granted thereby, that are not inconsistent with the
13778 provisions of this section are hereby adopted and shall apply to all
13779 bonds authorized by the State Bond Commission pursuant to this
13780 section. Temporary notes in anticipation of the money to be derived
13781 from the sale of any such bonds so authorized may be issued in
13782 accordance with section 3-20 of the general statutes and from time to
13783 time renewed. Such bonds shall mature at such time or times not
13784 exceeding twenty years from their respective dates as may be provided
13785 in or pursuant to the resolution or resolutions of the State Bond
13786 Commission authorizing such bonds. None of such bonds shall be
13787 authorized except upon a finding by the State Bond Commission that
13788 there has been filed with it a request for such authorization that is signed
13789 by or on behalf of the Secretary of the Office of Policy and Management
13790 and states such terms and conditions as said commission, in its
13791 discretion, may require. Such bonds issued pursuant to this section shall
13792 be general obligations of the state and the full faith and credit of the state
13793 of Connecticut are pledged for the payment of the principal of and
13794 interest on such bonds as the same become due, and accordingly and as
13795 part of the contract of the state with the holders of such bonds,
13796 appropriation of all amounts necessary for punctual payment of such

13797 principal and interest is hereby made, and the State Treasurer shall pay
13798 such principal and interest as the same become due.

13799 (d) (1) Notwithstanding section 7-395 of the general statutes, prior to
13800 receiving any grant-in-aid pursuant to subsection (b) of this section, the
13801 mayor of the town of Hamden shall submit a report to the Municipal
13802 Finance Advisory Commission established under section 7-394b of the
13803 general statutes and appear before the commission in accordance with
13804 the provisions of this section.

13805 (2) Not later than September 1, 2026, the mayor of the town of
13806 Hamden shall submit to the commission a report, in writing, that
13807 includes a plan for corrective actions to ensure the town will not require
13808 supplemental municipal aid in future fiscal years. Such plan shall
13809 include, but need not be limited to, (A) cost containment that may be
13810 adopted by the town, (B) adjustments to fiscal policies, (C) collaboration
13811 with one or more municipalities to obtain shared services, (D) ways to
13812 maximize federal funding, (E) the identification of possible efficiencies
13813 in the provision of services, and (F) the prioritization of core services
13814 identified by the town.

13815 (3) Not later than December 31, 2026, the mayor of the town of
13816 Hamden shall appear before the commission, at a time and place to be
13817 determined by the commission, to present such report and answer any
13818 questions from the commission.

13819 Sec. 355. (NEW) (*Effective October 1, 2026*) (a) As used in this section:

13820 (1) "Hospital" has the same meaning as provided in section 19a-490
13821 of the general statutes; and

13822 (2) "Hospital financial assistance" has the same meaning as provided
13823 in section 38a-1053 of the general statutes.

13824 (b) (1) Each hospital shall include, on or with each billing statement,
13825 submitted in paper copy or electronic form to a patient, a clear and
13826 conspicuous notice that:

13827 (A) Hospital financial assistance may be available for eligible
13828 patients; and

13829 (B) Any patient may apply for such assistance without a fee.

13830 (2) Such notice provided pursuant to subdivision (1) of this
13831 subsection shall be written in plain language in English and Spanish and
13832 made available, upon request, in any language consistent with state and
13833 federal law, and with subsection (d) of this section, and include the
13834 following information:

13835 (A) A telephone number the patient may call for additional
13836 information about the hospital's financial assistance policy and
13837 procedures for such patient to apply for financial assistance;

13838 (B) An Internet web site address where the patient may access
13839 information about the hospital's financial assistance policy and
13840 procedures for applying for financial assistance;

13841 (C) A summary of the hospital's financial assistance policy, or an
13842 Internet web site where the patient may access such summary;

13843 (D) Instructions for requesting a paper copy of the hospital's financial
13844 assistance policy; and

13845 (E) Instructions on where to access an application for financial
13846 assistance and instructions for filing such application.

13847 (3) In addition to the requirements of subdivisions (1) and (2) of this
13848 subsection, each hospital shall post such notice in a prominent location
13849 on such hospital's Internet web site.

13850 (c) Consistent with 26 CFR 1.501(r)-(4), as amended from time to
13851 time, each hospital shall have a written financial assistance policy that
13852 includes:

13853 (1) Eligibility criteria for financial assistance and whether such
13854 financial assistance includes services offered at a discount or free of

- 13855 charge;
- 13856 (2) The methodology used to calculate the amounts charged to
13857 patients;
- 13858 (3) Instructions for filing an application for financial assistance;
- 13859 (4) An explanation of whether the hospital uses a patient's prior
13860 financial assistance eligibility determination as a basis for establishing
13861 eligibility for current financial assistance, and, if so, the circumstances
13862 under which such prior determination is applied; and
- 13863 (5) A list of any health care providers, other than the hospital,
13864 delivering emergency or other medically necessary services in the
13865 hospital that specifies which health care providers are covered by such
13866 hospital's financial assistance policy.
- 13867 (d) Consistent with 26 CFR 1.501(r)-(4), as amended from time to
13868 time, each notice required pursuant to subsection (b) of this section shall
13869 have the following statement printed on the first page of such notice:
- 13870 "If a language is spoken by at least one thousand individuals or five
13871 per cent of the community served by the hospital facility or likely to be
13872 affected or encountered by the hospital facility, then the hospital shall
13873 translate the notice into such other language."
- 13874 (e) Nothing in this section shall be construed to:
- 13875 (1) Provide financial assistance that is in addition to financial
13876 assistance required by a hospital pursuant to state or federal law;
- 13877 (2) Create a private right of action; or
- 13878 (3) Limit a hospital's ability to collect payment from, or bill any
13879 patient for, services provided by the hospital, provided such collection
13880 or billing complies with state or federal law.
- 13881 Sec. 356. Section 38a-1053 of the 2026 supplement to the general

13882 statutes is amended by adding subsection (e) as follows (*Effective October*
13883 *1, 2026*):

13884 (NEW) (e) (1) On and after January 1, 2027, any hospital maintaining
13885 a financial assistance program shall deem any patient enrolled in the
13886 federal (A) Supplemental Nutrition Assistance Program, (B) Special
13887 Supplemental Food Program for Women, Infants and Children, or (C)
13888 Temporary Assistance for Needy Families Program to have satisfied the
13889 income-based eligibility requirements of such hospital's financial
13890 assistance program.

13891 (2) Verification of enrollment pursuant to the provisions of
13892 subdivision (1) of this subsection may be based on reasonable evidence,
13893 including, but not limited to, electronic verification, attestation or other
13894 documentation.

13895 (3) For any patient deemed eligible for a hospital's financial assistance
13896 program pursuant to this subsection, a hospital shall determine such
13897 patient's level of financial assistance in accordance with the hospital's
13898 financial assistance policy.

13899 (4) A hospital may require any such patient deemed eligible for the
13900 financial assistance program to provide additional information for such
13901 hospital to determine the amount of financial assistance to be provided
13902 to such patient, and, if applicable, such hospital may require that (A)
13903 such patient apply for the Medicaid or Medicare programs, or other
13904 government-funded health coverage, including, but not limited to,
13905 coverage offered through the Connecticut Health Insurance Exchange,
13906 established pursuant to section 38a-1081, as a condition of receiving
13907 such financial assistance.

13908 (5) Nothing in this subsection shall be construed to require any
13909 hospital to (A) provide financial assistance beyond the income levels or
13910 discount tiers established in such hospital's financial assistance policy,
13911 or (B) amend or modify such hospital's financial assistance policy.

13912 Sec. 357. Section 12-263p of the 2026 supplement to the general

13913 statutes, as amended by section 359 of public act 25-168, is repealed and
13914 the following is substituted in lieu thereof (*Effective July 1, 2026*):

13915 As used in sections 12-263p to 12-263x, inclusive, and section 294 of
13916 this act, unless the context otherwise requires:

13917 (1) "Commissioner" means the Commissioner of Revenue Services;

13918 (2) "Department" means the Department of Revenue Services;

13919 (3) "Taxpayer" means any health care provider subject to any tax or
13920 fee under section 12-263q or 12-263r;

13921 (4) "Health care provider" means an individual or entity that receives
13922 any payment or payments for health care items or services provided;

13923 (5) "Gross receipts" means the amount received, whether in cash or in
13924 kind, from patients, third-party payers and others for taxable health care
13925 items or services provided by the taxpayer in the state, including
13926 retroactive adjustments under reimbursement agreements with third-
13927 party payers, without any deduction for any expenses of any kind;

13928 (6) "Net revenue" means gross receipts less payer discounts, charity
13929 care and bad debts, to the extent the taxpayer previously paid tax under
13930 section 12-263q on the amount of such bad debts;

13931 (7) "Payer discounts" means the difference between a health care
13932 provider's published charges and the payments received by the health
13933 care provider from one or more health care payers for a rate or method
13934 of payment that is different than or discounted from such published
13935 charges. "Payer discounts" does not include charity care or bad debts;

13936 (8) "Charity care" means free or discounted health care services
13937 rendered by a health care provider to an individual who cannot afford
13938 to pay for such services, including, but not limited to, health care
13939 services provided to an uninsured patient who is not expected to pay all
13940 or part of a health care provider's bill based on income guidelines and
13941 other financial criteria set forth in the general statutes or in a health care

13942 provider's charity care policies on file at the office of such provider.
13943 "Charity care" does not include bad debts or payer discounts;

13944 (9) "Received" means "received" or "accrued", construed according to
13945 the method of accounting customarily employed by the taxpayer;

13946 (10) "Hospital" means any health care facility, as defined in section
13947 19a-630, that (A) is licensed by the Department of Public Health as a
13948 short-term general hospital or children's general hospital; (B) is
13949 maintained primarily for the care and treatment of patients with
13950 disorders other than mental diseases; (C) meets the requirements for
13951 participation in Medicare as a hospital; and (D) has in effect a utilization
13952 review plan, applicable to all Medicaid patients, that meets the
13953 requirements of 42 CFR 482.30, as amended from time to time, unless a
13954 waiver has been granted by the Secretary of the United States
13955 Department of Health and Human Services;

13956 (11) "Inpatient hospital services" means, in accordance with federal
13957 law, all services that are (A) ordinarily furnished in a hospital for the
13958 care and treatment of inpatients; (B) furnished under the direction of a
13959 physician or dentist; and (C) furnished in a hospital. "Inpatient hospital
13960 services" does not include skilled nursing facility services and
13961 intermediate care facility services furnished by a hospital with swing
13962 bed approval;

13963 (12) "Inpatient" means a patient who has been admitted to a medical
13964 institution as an inpatient on the recommendation of a physician or
13965 dentist and who (A) receives room, board and professional services in
13966 the institution for a twenty-four-hour period or longer, or (B) is expected
13967 by the institution to receive room, board and professional services in the
13968 institution for a twenty-four-hour period or longer, even if the patient
13969 does not actually stay in the institution for a twenty-four-hour period or
13970 longer;

13971 (13) "Outpatient hospital services" means, in accordance with federal
13972 law, preventive, diagnostic, therapeutic, rehabilitative or palliative

13973 services that are (A) furnished to an outpatient; (B) furnished by or
13974 under the direction of a physician or dentist; and (C) furnished by a
13975 hospital;

13976 (14) "Outpatient" means a patient of an organized medical facility or
13977 a distinct part of such facility, who is expected by the facility to receive,
13978 and who does receive, professional services for less than a twenty-four-
13979 hour period regardless of the hour of admission, whether or not a bed
13980 is used or the patient remains in the facility past midnight;

13981 (15) "Nursing home" means any licensed chronic and convalescent
13982 nursing home or a rest home with nursing supervision;

13983 (16) "Intermediate care facility for individuals with intellectual
13984 disabilities" or "intermediate care facility" means a residential facility for
13985 persons with intellectual disability that is certified to meet the
13986 requirements of 42 CFR 442, Subpart C, as amended from time to time,
13987 and, in the case of a private facility, licensed pursuant to section 17a-227;

13988 (17) "Medicare day" means a day of nursing home care service
13989 provided to an individual who is eligible for payment, in full or with a
13990 coinsurance requirement, under the federal Medicare program,
13991 including fee for service and managed care coverage;

13992 (18) "Nursing home resident day" means a day of nursing home care
13993 service provided to an individual and includes the day a resident is
13994 admitted and any day for which the nursing home is eligible for
13995 payment for reserving a resident's bed due to hospitalization or
13996 temporary leave and for the date of death. For purposes of this
13997 subdivision, a day of nursing home care service shall be the period of
13998 time between the census-taking hour in a nursing home on two
13999 successive calendar days. "Nursing home resident day" does not include
14000 a Medicare day or the day a resident is discharged;

14001 (19) "Intermediate care facility resident day" means a day of
14002 intermediate care facility residential care provided to an individual and
14003 includes the day a resident is admitted and any day for which the

14004 intermediate care facility is eligible for payment for reserving a
14005 resident's bed due to hospitalization or temporary leave and for the date
14006 of death. For purposes of this subdivision, a day of intermediate care
14007 facility residential care shall be the period of time between the census-
14008 taking hour in a facility on two successive calendar days. "Intermediate
14009 care facility resident day" does not include the day a resident is
14010 discharged;

14011 (20) "Nursing facility service revenue" means, in accordance with
14012 federal law, revenue for which a nursing home provides nursing home
14013 care services to an individual and that are covered services for Medicaid
14014 payment under section 17b-262-705 of the regulations of Connecticut
14015 state agencies, whether or not such services were provided to Medicaid
14016 recipients. "Nursing facility service revenue" does not include Medicare
14017 payments;

14018 (21) "Intermediate care facility service revenue" means, in accordance
14019 with federal law, revenue for which an intermediate care facility
14020 provides services to its residents and that are covered services for
14021 Medicaid payment under section 17b-262-303 of the regulations of
14022 Connecticut state agencies, whether or not such services were provided
14023 to Medicaid recipients. "Intermediate care facility service revenue" does
14024 not include Medicare payments;

14025 (22) "Medicaid" means the program operated by the Department of
14026 Social Services pursuant to section 17b-260 and authorized by Title XIX
14027 of the Social Security Act, as amended from time to time; [and]

14028 (23) "Medicare" means the program operated by the Centers for
14029 Medicare and Medicaid Services in accordance with Title XVIII of the
14030 Social Security Act, as amended from time to time; and

14031 (24) "Health system" has the same meaning as provided in section
14032 19a-508c.

14033 Sec. 358. Section 12-263q of the 2026 supplement to the general
14034 statutes, as amended by section 360 of public act 25-168, is repealed and

14035 the following is substituted in lieu thereof (*Effective July 1, 2026*):

14036 (a) (1) For each calendar quarter commencing on or after July 1, 2017,
14037 each hospital shall pay a tax on the total net revenue received by such
14038 hospital for the provision of inpatient hospital services and a tax on the
14039 total net revenue received by such hospital for the provision of
14040 outpatient hospital services.

14041 (A) (i) On and after July 1, 2017, through June 30, 2026, the rate of tax
14042 for the provision of inpatient hospital services shall be six per cent of
14043 each hospital's audited net revenue for fiscal year 2016 attributable to
14044 inpatient hospital services.

14045 (ii) On and after July 1, 2026, through June 30, 2031, the rate of tax for
14046 the provision of inpatient hospital services shall be [six] four per cent of
14047 each hospital's audited net revenue for the applicable federal fiscal year
14048 attributable to inpatient hospital services.

14049 (iii) On and after July 1, 2031, the tax rate for the provision of inpatient
14050 hospital services shall be three and one-half per cent of each hospital's
14051 audited net revenue for the applicable federal fiscal year attributable to
14052 inpatient hospital services.

14053 (B) (i) On and after July 1, 2017, and prior to July 1, 2019, the rate of
14054 tax for the provision of outpatient hospital services shall be nine
14055 hundred million dollars less the total tax imposed on all hospitals for
14056 the provision of inpatient hospital services, which sum shall be divided
14057 by the total audited net revenue for fiscal year 2016 attributable to
14058 outpatient hospital services, of all hospitals that are required to pay such
14059 tax, resulting in an effective rate of twelve and three thousand three
14060 hundred twenty-five ten thousandths (12.3325) per cent of each
14061 hospital's audited net revenue for fiscal year 2016 attributable to
14062 outpatient hospital services.

14063 (ii) On and after July 1, 2019, and prior to July 1, 2020, the rate of tax
14064 for the provision of outpatient hospital services shall be eight hundred
14065 ninety million dollars less the total tax imposed on all hospitals for the

14066 provision of inpatient hospital services, which sum shall be divided by
14067 the total audited net revenue for fiscal year 2016 attributable to
14068 outpatient hospital services, of all hospitals that are required to pay such
14069 tax, resulting in an effective rate of twelve and nine hundred forty-two
14070 ten thousandths (12.0942) per cent of each hospital's audited net revenue
14071 for fiscal year 2016 attributable to outpatient hospital services, subject to
14072 any hospital dissolutions or cessation of operations pursuant to
14073 subparagraph (D) of this subdivision or disallowed exemptions
14074 pursuant to subsections (b) and (c) of this section.

14075 (iii) On and after July 1, 2020, and prior to July 1, 2021, the rate of tax
14076 for the provision of outpatient hospital services shall be eight hundred
14077 eighty-two million dollars less the total tax imposed on all hospitals for
14078 the provision of inpatient hospital services, which sum shall be divided
14079 by the total audited net revenue for fiscal year 2016 attributable to
14080 outpatient hospital services, of all hospitals that are required to pay such
14081 tax, resulting in an effective rate of eleven and seven thousand five
14082 hundred three ten thousandths (11.7503) per cent of each hospital's
14083 audited net revenue for fiscal year 2016 attributable to outpatient
14084 hospital services, subject to any hospital dissolutions or cessation of
14085 operations pursuant to subparagraph (D) of this subdivision or
14086 disallowed exemptions pursuant to subsections (b) and (c) of this
14087 section.

14088 (iv) On and after July 1, 2021, and prior to July 1, 2025, the rate of tax
14089 for the provision of outpatient hospital services shall be eight hundred
14090 fifty million dollars less the total tax imposed on all hospitals for the
14091 provision of inpatient hospital services, which sum shall be divided by
14092 the total audited net revenue for fiscal year 2016 attributable to
14093 outpatient hospital services, of all hospitals that are required to pay such
14094 tax, resulting in an effective rate of eleven and nine hundred seventy-six
14095 ten thousandths (11.0976) per cent of each hospital's audited net revenue
14096 for fiscal year 2016 attributable to outpatient hospital services, subject to
14097 any hospital dissolutions or cessation of operations pursuant to
14098 subparagraph (D) of this subdivision or disallowed exemptions

14099 pursuant to subsections (b) and (c) of this section.

14100 (v) On and after July 1, 2025, and prior to July 1, 2026, the rate of tax
14101 for the provision of outpatient hospital services shall be eight hundred
14102 twenty million dollars less the total tax imposed on all hospitals for the
14103 provision of inpatient hospital services, which sum shall be divided by
14104 the total audited net revenue for fiscal year 2016 attributable to
14105 outpatient hospital services, of all hospitals that are required to pay such
14106 tax, resulting in an effective rate of ten and four thousand eight hundred
14107 fifty-eight ten thousandths (10.4858) per cent of each hospital's audited
14108 net revenue for fiscal year 2016 attributable to outpatient hospital
14109 services, subject to any hospital dissolutions or cessation of operations
14110 pursuant to subparagraph (D) of this subdivision or disallowed
14111 exemptions pursuant to subsections (b) and (c) of this section.

14112 (vi) (I) On and after July 1, 2026, the rate of tax for the provision of
14113 outpatient hospital services shall be equal to the amount specified under
14114 clause (vi)(II) of this subparagraph less the total tax imposed on all
14115 hospitals for the provision of inpatient hospital services, which sum
14116 shall be divided by the total audited net revenue for the applicable
14117 federal fiscal year attributable to outpatient hospital services as
14118 determined in accordance with section 362 of this act, of all hospitals
14119 that are required to pay such tax, subject to any hospital dissolutions or
14120 cessation of operations or changes in taxpayer status pursuant to
14121 subparagraph (D) of this subdivision or disallowed exemptions
14122 pursuant to subsections (b) and (c) of this section.

14123 (II) [For the state fiscal year commencing July 1, 2026, the amount
14124 shall be one billion one hundred ninety-five million dollars. For the state
14125 fiscal year commencing July 1, 2027, and each state fiscal year thereafter,
14126 such amount shall be increased by twenty-five million dollars from the
14127 prior state fiscal year.] For the state fiscal years commencing July 1, 2026,
14128 to the state fiscal year commencing July 1, 2030, inclusive, the amount
14129 shall be:

T1906	<u>Fiscal Year Commencing</u>	<u>Total Amount</u>

T1907	<u>July 1, 2026</u>	<u>\$974,000,000</u>
T1908	<u>July 1, 2027</u>	<u>\$997,756,916</u>
T1909	<u>July 1, 2028</u>	<u>\$1,022,172,694</u>
T1910	<u>July 1, 2029</u>	<u>\$1,047,265,629</u>
T1911	<u>July 1, 2030</u>	<u>\$1,073,054,525</u>

14130 For state fiscal years commencing on and after July 1, 2031, the amount
 14131 shall be one billion seventy-three million fifty-four thousand five
 14132 hundred twenty-five dollars, unless modified through any provision of
 14133 the general statutes.

14134 (C) (i) (I) For each state fiscal year commencing on or after July 1,
 14135 2019, and prior to July 1, 2026, the total audited net revenue for fiscal
 14136 year 2016 attributable to inpatient hospital services, of all hospitals that
 14137 are required to pay the tax under this section, shall be five billion ninety-
 14138 seven million eight hundred twenty thousand one hundred ninety-
 14139 seven dollars, subject to any hospital dissolutions or cessation of
 14140 operations pursuant to subparagraph (D) of this subdivision or
 14141 disallowed exemptions pursuant to subsections (b) and (c) of this
 14142 section.

14143 (II) For each state fiscal year commencing on or after July 1, 2026, the
 14144 total audited net revenue for the applicable federal fiscal year
 14145 attributable to inpatient hospital services, of all hospitals that are
 14146 required to pay the tax under this section, shall be the total amount of
 14147 net revenue attributable to inpatient hospital services reported to the
 14148 commissioner for the applicable federal fiscal year by all hospitals
 14149 subject to the tax or, if applicable, as adjusted by the commissioner, in
 14150 accordance with the provisions of subparagraph (A) of subdivision (4)
 14151 of this subsection, subject to any hospital dissolutions or cessation of
 14152 operations or changes in taxpayer status pursuant to subparagraph (D)
 14153 of this subdivision, disallowed exemptions pursuant to subsections (b)
 14154 and (c) of this section or the provisions of subdivision (4) of this
 14155 subsection. For purposes of this clause, the total audited net revenue
 14156 shall be calculated as though any children's general hospital subject to a
 14157 pending request for removal of exemption under subdivision (2) of

14158 subsection (b) of this section were subject to the tax, unless and until the
14159 Centers for Medicare and Medicaid Services denies such request.

14160 (ii) (I) For the state fiscal year commencing on or after July 1, 2019,
14161 and prior to July 1, 2020, the total audited net revenue for fiscal year
14162 2016 attributable to outpatient hospital services, of all hospitals that are
14163 required to pay the tax under this section shall be four billion eight
14164 hundred twenty-nine million eight hundred fifty-nine thousand three
14165 hundred ninety-nine dollars, subject to any hospital dissolutions or
14166 cessation of operations pursuant to subparagraph (D) of this
14167 subdivision or disallowed exemptions pursuant to subsections (b) and
14168 (c) of this section.

14169 (II) For each state fiscal year commencing on or after July 1, 2020, and
14170 prior to July 1, 2026, the total audited net revenue for fiscal year 2016
14171 attributable to outpatient hospital services, of all hospitals that are
14172 required to pay the tax under this section, shall be four billion nine
14173 hundred three million one hundred twenty-seven thousand one
14174 hundred thirty-three dollars, subject to any hospital dissolutions or
14175 cessation of operations pursuant to subparagraph (D) of this
14176 subdivision or disallowed exemptions pursuant to subsections (b) and
14177 (c) of this section.

14178 (III) For each state fiscal year commencing on or after July 1, 2026, the
14179 total audited net revenue for the applicable federal fiscal year
14180 attributable to outpatient hospital services, of all hospitals that are
14181 required to pay the tax under this section, shall be the total amount of
14182 net revenue attributable to outpatient hospital services reported to the
14183 commissioner for the applicable federal fiscal year by all hospitals
14184 subject to the tax or, if applicable, as adjusted by the commissioner, in
14185 accordance with the provisions of subparagraph (A) of subdivision (4)
14186 of this subsection, subject to any hospital dissolutions or cessation of
14187 operations or changes in taxpayer status pursuant to subparagraph (D)
14188 of this subdivision, disallowed exemptions pursuant to subsections (b)
14189 and (c) of this section or the provisions of subdivision (4) of this
14190 subsection.

14191 (D) (i) If a hospital or hospitals subject to the tax imposed under this
14192 subdivision merge, consolidate, are acquired or otherwise reorganize,
14193 the surviving hospital shall assume and be liable for the total tax
14194 imposed under this subdivision on the merged, consolidated, acquired
14195 or reorganized hospitals, including any outstanding liabilities from
14196 periods prior to such merger, consolidation, acquisition or
14197 reorganization.

14198 (ii) [If] On or before July 1, 2026, if a hospital ceases to operate as a
14199 hospital for any reason other than a merger, consolidation, acquisition
14200 or reorganization, or ceases for any reason to be subject to the tax
14201 imposed under this subdivision, the amount of tax due from each
14202 taxpayer under this subdivision shall not be recalculated to take into
14203 account such occurrence for the state fiscal year in which the hospital
14204 dissolves or ceases to operate. The amount of tax that would be due from
14205 the dissolved hospital after its dissolution or cessation of operations
14206 shall not be collected by the commissioner for the state fiscal year in
14207 which such hospital dissolves or ceases to operate. In the next
14208 succeeding state fiscal year after the hospital dissolves or ceases to
14209 operate and in each subsequent state fiscal year, the total audited net
14210 revenue for the applicable federal fiscal year shall be adjusted to exclude
14211 such hospital's audited net revenue for the applicable federal fiscal year
14212 and the effective rate of the tax due under this section shall be adjusted
14213 to ensure that the total amount of such tax to be collected under
14214 subparagraphs (A) and (B) of this subdivision is redistributed among
14215 the surviving hospitals in proportion to the reduced total audited net
14216 revenue for the applicable federal fiscal year attributable to inpatient
14217 hospital services and outpatient hospital services, of all hospitals.

14218 (iii) Commencing on July 1, 2026, if a hospital ceases to operate as a
14219 hospital for any reason other than a merger, consolidation, acquisition
14220 or reorganization, or ceases for any reason to be subject to the tax
14221 imposed under this subdivision, including if the tax exemption for
14222 children's general hospitals is not eliminated, the amount of tax
14223 attributable to such hospital under subparagraph (B)(vi) of this

14224 subdivision shall not be collected by the commissioner for the state fiscal
14225 year in which such event occurs or for any state fiscal year thereafter.
14226 For the state fiscal year in which such event occurs and for each state
14227 fiscal year thereafter, the total amount specified in subparagraph
14228 (B)(vi)(II) of this subdivision shall be deemed reduced, without further
14229 action, by the amount of tax attributable to such hospital under
14230 subparagraph (B)(vi) of this subdivision for such fiscal year such that
14231 the tax rate applicable to outpatient services for the remaining taxpaying
14232 hospitals shall not change.

14233 (E) (i) For each state fiscal year commencing on or after July 1, 2026,
14234 if the Commissioner of Social Services determines for any fiscal year that
14235 the effective rate of tax for the tax imposed on net revenue for the
14236 provision of inpatient hospital services exceeds the rate permitted under
14237 the provisions of 42 CFR 433.68(f), as amended from time to time, the
14238 amount of tax collected that exceeds the permissible amount shall be
14239 refunded to hospitals, in proportion to the amount of net revenue for
14240 the provision of inpatient hospital services upon which the hospitals
14241 were taxed. The effective rate of tax shall be calculated by comparing
14242 the amount of tax paid by hospitals on net revenue for the provision of
14243 inpatient hospital services in a state fiscal year with the amount of net
14244 revenue received by hospitals subject to the tax for the provision of
14245 inpatient hospital services for the equivalent fiscal year.

14246 (ii) On or before July 1, 2026, and annually thereafter, each hospital
14247 subject to the [tax] taxes imposed under this subdivision shall report to
14248 the Commissioner of Social Services, in the manner prescribed by and
14249 on forms provided by said commissioner, the amount of tax paid
14250 pursuant to this subsection by such hospital and the amount of net
14251 revenue received by such hospital for the provision of inpatient hospital
14252 services, in the state fiscal year commencing two years prior to each such
14253 reporting date. Not later than ninety days after said commissioner
14254 receives completed reports from all hospitals required to submit such
14255 reports, said commissioner shall notify the Commissioner of Revenue
14256 Services of the amount of any refund due each hospital to be in

14257 compliance with 42 CFR 433.68(f), as amended from time to time. Not
14258 later than thirty days after receiving such notice, the Commissioner of
14259 Revenue Services shall notify the Comptroller of the amount of each
14260 such refund and the Comptroller shall draw an order on the Treasurer
14261 for payment of each such refund. No interest shall be added to any
14262 refund issued pursuant to this subparagraph.

14263 (2) Except as provided in subdivision (3) of this subsection, each
14264 hospital subject to the tax imposed under subdivision (1) of this
14265 subsection shall be required to pay the total amount due in four
14266 quarterly payments consistent with section 12-263s, with the first
14267 quarter commencing with the first day of each state fiscal year and the
14268 last quarter ending on the last day of each state fiscal year. Hospitals
14269 shall make all payments required under this subsection in accordance
14270 with procedures established by and on forms provided by the
14271 commissioner.

14272 (3) (A) For the state fiscal year commencing July 1, 2017, each hospital
14273 required to pay tax on inpatient hospital services or outpatient hospital
14274 services shall make an estimated tax payment on December 15, 2017,
14275 which estimated payment shall be equal to one hundred thirty-three per
14276 cent of the tax due under chapter 211a for the period ending June 30,
14277 2017. If a hospital was not required to pay tax under chapter 211a on
14278 either inpatient hospital services or outpatient hospital services, such
14279 hospital shall make its estimated payment based on its unaudited net
14280 patient revenue.

14281 (B) Each hospital required to pay tax pursuant to this subdivision on
14282 inpatient hospital services or outpatient hospital services shall pay the
14283 remaining balance determined to be due in two equal payments, which
14284 shall be due on April 30, 2018, and July 31, 2018, respectively.

14285 (C) (i) (I) For each state fiscal year commencing on or after July 1,
14286 2017, and prior to July 1, 2026, each hospital required to pay tax on
14287 inpatient hospital services or outpatient hospital services shall calculate
14288 the amount of tax due on forms prescribed by the commissioner by

14289 multiplying the applicable rate set forth in subdivision (1) of this
14290 subsection by its audited net revenue for fiscal year 2016.

14291 (II) For each state fiscal year commencing on or after July 1, 2026, each
14292 hospital required to pay tax on inpatient hospital services or outpatient
14293 hospital services shall calculate the amount of tax due on forms
14294 prescribed by the commissioner under this section.

14295 (ii) For the state fiscal year commencing July 1, 2019, the payment
14296 made for the period ending September 30, 2019, by each hospital
14297 required to pay tax on inpatient hospital services or outpatient hospital
14298 services shall be considered an estimated payment for purposes of the
14299 tax due for said state fiscal year. Each hospital required to pay the tax
14300 under this section on inpatient hospital services or outpatient hospital
14301 services shall pay the remaining balance due in three equal payments,
14302 which shall be due on January 31, 2020, April 30, 2020, and July 31, 2020,
14303 respectively.

14304 (D) The commissioner shall apply any payment made by a hospital
14305 in connection with the tax under chapter 211a for the period ending
14306 September 30, 2017, as a partial payment of such hospital's estimated tax
14307 payment due on December 15, 2017, under subparagraph (A) of this
14308 subdivision. The commissioner shall return to a hospital any credit
14309 claimed by such hospital in connection with the tax imposed under
14310 chapter 211a for the period ending September 30, 2017, for assignment
14311 as provided under section 12-263s.

14312 (4) (A) (i) Each hospital required to pay tax on inpatient hospital
14313 services or outpatient hospital services shall submit to the commissioner
14314 such information as the commissioner requires in order to calculate the
14315 audited net inpatient revenue for fiscal year 2016, the audited net
14316 outpatient revenue for fiscal year 2016 and the audited net revenue for
14317 fiscal year 2016 of all such health care providers. Such information shall
14318 be provided to the commissioner not later than January 1, 2018. The
14319 commissioner shall make additional requests for information as
14320 necessary to fully audit each hospital's net revenue. Upon completion of

14321 the commissioner's examination, the commissioner shall notify, prior to
14322 February 28, 2018, each hospital of its audited net inpatient revenue for
14323 fiscal year 2016, audited net outpatient revenue for fiscal year 2016 and
14324 audited net revenue for fiscal year 2016.

14325 (ii) (I) Not later than [January 1, 2026, and January 1, 2029, and
14326 quadrennially thereafter] June 1, 2030, and quinquennially thereafter,
14327 each hospital required to pay tax on inpatient hospital services or
14328 outpatient hospital services shall submit to the commissioner such
14329 information as the commissioner requires in order to calculate, for the
14330 applicable federal fiscal year, the audited net inpatient revenue, the
14331 audited net outpatient revenue and the audited net revenue of all such
14332 hospitals. The amounts reported by each hospital shall be deemed
14333 accepted on the first day of the [state] federal fiscal year, provided the
14334 commissioner has not initiated an audit of the hospital before such first
14335 day.

14336 (II) If the commissioner initiates an audit of a hospital, such hospital
14337 shall comply with all additional requests by the commissioner for
14338 information necessary to enable the commissioner to fully audit the
14339 hospital within [fourteen] thirty days of the date the commissioner
14340 requests such information. If requested by a hospital, the commissioner
14341 may grant an extension of the deadline to comply with requests for
14342 information.

14343 (III) The commissioner shall issue any notice setting forth additional
14344 audited net revenue not later than the first day of the state fiscal year.
14345 Such additional audited net revenue shall be final [fourteen] thirty days
14346 after the date such notice is mailed to the taxpayer, except for any
14347 amounts as to which the taxpayer files a written protest with the
14348 commissioner. If a protest is filed, the commissioner shall reconsider the
14349 additional audited net revenue and, if the taxpayer or the taxpayer's
14350 authorized representative has requested a hearing, shall grant or deny
14351 such hearing. The commissioner shall mail notice of the commissioner's
14352 determination to the taxpayer, which notice shall briefly set forth the
14353 commissioner's findings of fact and the basis of the commissioner's

14354 decision in each case decided adversely, in whole or in part, to the
14355 taxpayer. The commissioner's action on the taxpayer's protest shall be
14356 final upon the expiration of one month from the date the commissioner
14357 mails the notice of the commissioner's determination to the taxpayer,
14358 unless the taxpayer seeks judicial review of such determination within
14359 such period.

14360 (IV) If any protest or appeal is pending on the first day of the next
14361 succeeding state fiscal year, the amounts reported by the protesting or
14362 appealing taxpayer shall be used to tentatively calculate the tax due
14363 under this section until such protest or appeal is finally resolved. If any
14364 amount is revised pursuant to such protest or appeal from the amount
14365 originally reported by a hospital, the commissioner shall recalculate for
14366 each hospital the amounts due under this section and shall issue
14367 assessments or refunds, as applicable, with respect to any affected
14368 calendar quarter.

14369 (V) A notice under this clause shall not be required for any hospital
14370 for which an audit has not been issued.

14371 (B) Any hospital that fails to provide the requested information by
14372 the dates specified in subparagraph (A) of this subdivision or fails to
14373 comply with a request for additional information made under this
14374 subdivision shall be subject to a penalty of one thousand dollars per day
14375 for each day the hospital fails to provide the requested information or
14376 additional information.

14377 (C) The commissioner may engage an independent auditor to assist
14378 in the performance of the commissioner's duties and responsibilities
14379 under this subdivision.

14380 (5) Net revenue derived from providing a health care item or service
14381 to a patient shall be taxed only one time under this section.

14382 (6) (A) For purposes of this section:

14383 (i) "Audited net inpatient revenue for fiscal year 2016" means the

14384 amount of revenue that the commissioner determines, in accordance
14385 with federal law, that a hospital received for the provision of inpatient
14386 hospital services during the 2016 federal fiscal year;

14387 (ii) "Audited net outpatient revenue for fiscal year 2016" means the
14388 amount of revenue that the commissioner determines, in accordance
14389 with federal law, that a hospital received for the provision of outpatient
14390 hospital services during the 2016 federal fiscal year;

14391 (iii) "Audited net revenue for fiscal year 2016" means net revenue, as
14392 reported in each hospital's audited financial statements, less the amount
14393 of revenue that the commissioner determines, in accordance with
14394 federal law, that a hospital received from other than the provision of
14395 inpatient hospital services and outpatient hospital services. The total
14396 audited net revenue for fiscal year 2016 shall be the sum of all audited
14397 net revenue for the 2016 fiscal year for all hospitals required to pay tax
14398 on inpatient hospital services and outpatient hospital services;

14399 (iv) "Audited net inpatient revenue for the applicable federal fiscal
14400 year" means the amount of revenue that a hospital reports to the
14401 commissioner that such hospital received for the provision of inpatient
14402 hospital services during the applicable federal fiscal year, subject to the
14403 provisions of subdivision (4) of subsection (a) of this section;

14404 (v) "Audited net outpatient revenue for the applicable federal fiscal
14405 year" means the amount of revenue that a hospital reports to the
14406 commissioner that such hospital received for the provision of outpatient
14407 hospital services during the applicable federal fiscal year, subject to the
14408 provisions of subdivision (4) of subsection (a) of this section;

14409 (vi) "Audited net revenue for the applicable federal fiscal year" means
14410 net revenue, as reported in each hospital's audited financial statements,
14411 less the amount of revenue a hospital received from other than the
14412 provision of inpatient hospital services and outpatient hospital services.
14413 The total audited net revenue shall be the sum of all audited net revenue
14414 for the applicable federal fiscal year for all hospitals required to pay tax

14415 on inpatient hospital services and outpatient hospital services; and

14416 (vii) "Applicable federal fiscal year" means (I) for state fiscal years
14417 commencing on or after July 1, 2017, and through June 30, 2026, federal
14418 fiscal year 2016, (II) for state fiscal years commencing on July 1, 2026,
14419 and prior to July 1, [2029] 2031, federal fiscal year 2024, [(II)] (III) for state
14420 fiscal years commencing on or after July 1, [2029] 2031, and prior to July
14421 1, [2033] 2036, federal fiscal year [2027] 2029, and [(III)] (IV) for the
14422 periods commencing with the state fiscal year commencing July 1, [2033]
14423 2036, and [quadrennially] quinquennially thereafter, the federal fiscal
14424 year that concluded in the calendar year that is two years prior to the
14425 start of such [quadrennial] quinquennial period.

14426 (B) For purposes of this section, if a hospital's audited financial
14427 statements for the applicable federal fiscal year does not report revenue
14428 for the entire fiscal year, such hospital's audited net revenue for the
14429 applicable federal fiscal year shall be calculated by projecting the
14430 amount of revenue such hospital would have received for the entire
14431 fiscal year based proportionally on the audited net revenue reported on
14432 its audited financial statements.

14433 (C) Audited net inpatient revenue and audited net outpatient
14434 revenue shall be based on information provided by each hospital
14435 required to pay tax on inpatient hospital services or outpatient hospital
14436 services.

14437 (b) (1) The Commissioner of Social Services shall seek approval from
14438 the Centers for Medicare and Medicaid Services to exempt from the net
14439 revenue tax imposed under subsection (a) of this section the following:
14440 (A) Specialty hospitals; (B) children's general hospitals; and (C)
14441 hospitals owned and operated exclusively by the state other than a
14442 short-term general hospital operated by the state as a receiver pursuant
14443 to chapter 920. Any hospital for which the Centers for Medicare and
14444 Medicaid Services grants an exemption shall be exempt from the net
14445 revenue tax imposed under subsection (a) of this section. Any hospital
14446 for which the Centers for Medicare and Medicaid Services denies an

14447 exemption shall be deemed to be a hospital for purposes of this section
14448 and shall be required to pay the net revenue tax imposed under
14449 subsection (a) of this section on inpatient hospital services and
14450 outpatient hospital services at the same effective rates set forth in
14451 subsection (a) of this section.

14452 (2) [The] Notwithstanding the provisions of subdivision (1) of this
14453 subsection, the Commissioner of Social Services shall seek approval
14454 from the Centers for Medicare and Medicaid Services to remove the
14455 exemption approved pursuant to subdivision (1) of this subsection for
14456 children's general hospitals from the net revenue tax imposed under
14457 subsection (a) of this section. If the Centers for Medicare and Medicaid
14458 Services approves the removal of such exemption, any children's
14459 general hospitals that were exempt prior to July 1, 2026, from the net
14460 revenue tax imposed under subsection (a) of this section shall be
14461 required, on and after July 1, 2026, to pay such tax on inpatient hospital
14462 services and outpatient hospital services at the [same effective] rates set
14463 forth in subsection (a) of this section. Children's general hospitals shall
14464 be required to pay the taxes on inpatient hospital services and
14465 outpatient hospital services commencing July 1, 2026, notwithstanding
14466 that federal approval has not yet been obtained, provided that such
14467 hospitals shall be entitled to a refund if such approval is not ultimately
14468 obtained.

14469 (3) Each hospital shall provide to the Commissioner of Social
14470 Services, upon request, such information as said commissioner may
14471 require to make any computations necessary to seek approval for
14472 exemption under this subsection.

14473 (4) As used in this subsection, (A) "specialty hospital" means a health
14474 care facility, as defined in section 19a-630, other than a facility licensed
14475 by the Department of Public Health as a short-term general hospital or
14476 a short-term children's hospital. "Specialty hospital" includes, but is not
14477 limited to, a psychiatric hospital or a chronic disease hospital, and (B)
14478 "children's general hospital" means a health care facility, as defined in
14479 section 19a-630, that is licensed by the Department of Public Health as a

14480 short-term children's hospital. "Children's general hospital" does not
14481 include a specialty hospital.

14482 (c) (1) (A) For each state fiscal year commencing on or after July 1,
14483 2017, and prior to July 1, 2020, the Commissioner of Social Services shall
14484 seek approval from the Centers for Medicare and Medicaid Services to
14485 exempt financially distressed hospitals from the net revenue tax
14486 imposed on outpatient hospital services. Any such hospital for which
14487 the Centers for Medicare and Medicaid Services grants an exemption
14488 shall be exempt from the net revenue tax imposed on outpatient hospital
14489 services under subsection (a) of this section. Any hospital for which the
14490 Centers for Medicare and Medicaid Services denies an exemption shall
14491 be required to pay the net revenue tax imposed on outpatient hospital
14492 services under subsection (a) of this section.

14493 (B) For purposes of this subdivision, "financially distressed hospital"
14494 means a hospital that has experienced over the five-year period from
14495 October 1, 2011, through September 30, 2016, an average net loss of more
14496 than five per cent of aggregate revenue. A hospital has an average net
14497 loss of more than five per cent of aggregate revenue if such a loss is
14498 reflected in the applicable years of financial reporting that have been
14499 made available by the Health Systems Planning Unit of the Office of
14500 Health Strategy for such hospital in accordance with section 19a-670.
14501 Upon said commissioner's receipt of a determination by the Centers for
14502 Medicare and Medicaid Services that a hospital is not exempt, the total
14503 audited net revenue from the provision of outpatient hospital services
14504 for fiscal year 2016 shall be increased by such hospital's audited net
14505 revenue from the provision of outpatient hospital services for fiscal year
14506 2016 and the effective rate of the tax due under this section shall be
14507 adjusted to ensure that the total amount of such tax to be collected under
14508 subsection (a) of this section is redistributed, commencing with the
14509 calendar quarter next succeeding the date of the determination by the
14510 Centers for Medicare and Medicaid Services.

14511 (2) (A) For each state fiscal year commencing on or after July 1, 2020,
14512 the Commissioner of Social Services shall seek approval from the

Centers for Medicare and Medicaid Services to exempt sole community hospitals from the net revenue tax imposed on outpatient hospital services. Any such hospital for which the Centers for Medicare and Medicaid Services grants an exemption shall be exempt from the net revenue tax imposed on outpatient hospital services under subsection (a) of this section. Any hospital for which the Centers for Medicare and Medicaid Services denies an exemption shall be required to pay the net revenue tax imposed on outpatient hospital services under subsection (a) of this section.

(B) For purposes of this subdivision, "sole community hospital" means a hospital that is classified by the Centers for Medicare and Medicaid Services for purposes of Medicare as a sole community hospital under 42 CFR 412.92. Upon said commissioner's receipt of a determination by the Centers for Medicare and Medicaid Services that a hospital is not exempt, the total audited net revenue from the provision of outpatient hospital services for the applicable federal fiscal year shall be increased by such hospital's audited net revenue from the provision of outpatient hospital services for the applicable federal fiscal year and the effective rate of the tax due under this section shall be adjusted to ensure that the total amount of such tax to be collected under subsection (a) of this section is redistributed, commencing with the calendar quarter next succeeding the date of the determination by the Centers for Medicare and Medicaid Services.

(3) Upon receipt of a determination by the Centers for Medicare and Medicaid Services under this subsection that a hospital is not exempt, said commissioner shall notify all hospitals subject to the tax under this section of such determination, the corresponding increase to the total audited net revenue for the applicable federal fiscal year and the change in any effective rate of the tax to be collected under subsection (a) of this section. Such notice shall be provided prior to the end of the calendar quarter next succeeding the date of the determination by the Centers for Medicare and Medicaid Services. If a state fiscal year has commenced when such determination is made, the adjusted audited net revenue for

14546 the applicable federal fiscal year and the change in any effective rate of
14547 the tax to be collected under subsection (a) of this section shall be
14548 prorated to take into account the amount of the tax already paid during
14549 the state fiscal year.

14550 (d) The commissioner shall issue guidance regarding the
14551 administration of the tax on inpatient hospital services and outpatient
14552 hospital services. Such guidance shall be issued upon completion of a
14553 study of the applicable federal law governing the administration of tax
14554 on inpatient hospital services and outpatient hospital services. The
14555 commissioner shall conduct such study in collaboration with the
14556 Commissioner of Social Services, the Secretary of the Office of Policy
14557 and Management, the Connecticut Hospital Association and the
14558 hospitals subject to the tax imposed on inpatient hospital services and
14559 outpatient hospital services.

14560 (e) (1) The commissioner shall determine, in consultation with the
14561 Commissioner of Social Services, the Secretary of the Office of Policy
14562 and Management, the Connecticut Hospital Association and the
14563 hospitals subject to the tax imposed on inpatient hospital services and
14564 outpatient hospital services, if there is any underreporting of revenue
14565 on hospitals' audited financial statements. Such consultation shall only
14566 be as authorized under section 12-15. The commissioner shall issue
14567 guidance, if necessary, to address any such underreporting.

14568 (2) If the commissioner determines, in accordance with this
14569 subsection, that a hospital underreported net revenue on its audited
14570 financial statements, the amount of underreported net revenue shall be
14571 added to the amount of net revenue reported on such hospital's audited
14572 financial statements so as to comply with federal law and the revised
14573 net revenue amount shall be used for purposes of calculating the
14574 amount of tax owed by such hospital under this section. For purposes
14575 of this subsection, "underreported net revenue" means any revenue of a
14576 hospital subject to the tax imposed under this section that is required to
14577 be included in net revenue from the provision of inpatient hospital
14578 services and net revenue from the provision of outpatient hospital

14579 services to comply with 42 CFR 433.56, as amended from time to time,
14580 42 CFR 433.68, as amended from time to time, and Section 1903(w) of
14581 the Social Security Act, as amended from time to time, but that was not
14582 reported on such hospital's audited financial statements. Underreported
14583 net revenue shall only include revenue of the hospital subject to such
14584 tax.

14585 (f) On or before November 15, 2026, and quarterly thereafter, the
14586 commissioner shall report to the Commissioner of Social Services and
14587 the Secretary of the Office of Policy and Management the amount of tax
14588 paid under this section by each hospital for the most recently completed
14589 calendar quarter and the amount of any delinquent tax, plus penalty
14590 and interest thereon, owed by a hospital and due under this section.

14591 (g) Nothing in this section shall affect the commissioner's obligations
14592 under section 12-15 regarding disclosure and inspection of returns and
14593 return information.

14594 (h) The provisions of section 17b-8 shall not apply to any exemption
14595 or exemptions sought by the Commissioner of Social Services from the
14596 Centers for Medicare and Medicaid Services under this section.

14597 (i) With respect to any calendar quarter commencing on or after July
14598 1, 2026, the rate of tax on the net revenue for the provision of inpatient
14599 hospital services set forth in subsection (a) of this section shall be
14600 automatically lowered to the extent necessary to ensure that such rate
14601 does not exceed the indirect hold harmless safe harbor rate that is
14602 approved by the Centers for Medicare and Medicaid Services in a
14603 written decision in response to a tax waiver submitted by the
14604 Commissioner of Social Services pursuant to subsection (b) of this
14605 section. The rates of tax on the net revenue for the provision of
14606 outpatient hospital services shall be automatically modified to ensure
14607 that the same amount of revenue is collected as set forth in subsection
14608 (a) of this section. If the hold harmless rate for the tax on net revenue for
14609 the provision of inpatient hospital services is less than the amount set
14610 forth in subsection (a) of this section, each hospital shall be required to

14611 file an amended return with the Commissioner of Revenue Services
14612 reporting the modified amount of inpatient and outpatient hospital tax
14613 due in accordance with this subsection.

14614 Sec. 359. (NEW) (*Effective from passage*) (a) There is established an
14615 account to be known as the "hospital supplemental payment account",
14616 which shall be a separate nonlapsing account. The account shall contain
14617 any moneys required by law to be deposited in the account. Moneys in
14618 the account shall be expended by the Commissioner of Social Services
14619 for the purpose of making payments to hospitals, hospital-affiliated
14620 medical groups and faculty practice plans, as such terms are defined in
14621 subsection (a) of section 17b-239e of the general statutes, during the
14622 fiscal years commencing on or after July 1, 2026, in accordance with
14623 subsection (c) of section 17b-239e of the general statutes.

14624 (b) All revenue received from the tax imposed under section 12-263q
14625 of the general statutes for a calendar quarter commencing on or after
14626 July 1, 2026, shall be deposited into the hospital supplemental payment
14627 account established by subsection (a) of this section.

14628 (c) In the event that the Secretary of the Office of Policy and
14629 Management determines that such account will have insufficient funds
14630 to make all payments due to hospitals under subsection (c) of section
14631 17b-239e of the general statutes during a fiscal year commencing on or
14632 after July 1, 2026:

14633 (1) The secretary shall consult with the Commissioners of Revenue
14634 Services and Social Services to determine, after considering any
14635 delinquent hospital's ability to pay and any resultant impact on patient
14636 health, the feasibility of collecting such unpaid taxes from the
14637 delinquent hospital;

14638 (2) If it is determined that it is feasible to collect all or a portion of the
14639 tax pursuant to the offset provisions of subdivision (4) of subsection (c)
14640 of section 12-263s of the general statutes or other collections methods,
14641 the Commissioner of Revenue Services shall take such collections

14642 actions; and

14643 (3) If, after taking the steps required by subdivisions (1) and (2) of this
14644 subsection, the secretary still determines that the account will have
14645 insufficient funds to make all payments due to hospitals under
14646 subsection (c) of section 17b-239e of the general statutes during a fiscal
14647 year commencing on or after July 1, 2026, the secretary shall certify the
14648 amount of the shortfall and shall request that the Finance Advisory
14649 Committee approve a transfer of such certified amount from the General
14650 Fund to the account established by this section. The Comptroller shall
14651 transfer the amount certified by the secretary and approved by the
14652 Finance Advisory Committee from the unappropriated resources of the
14653 General Fund to the account established by this section.

14654 Sec. 360. (*Effective July 1, 2026*) Not later than June 30, 2027, the
14655 Comptroller shall transfer the sum of ten million seven hundred
14656 thousand dollars from the resources of the hospital supplemental
14657 payment account established by section 359 of this act for the fiscal year
14658 ending June 30, 2027, to be accounted for as revenue of the General Fund
14659 for the fiscal year ending June 30, 2027.

14660 Sec. 361. Section 12-263aa of the 2026 supplement to the general
14661 statutes, as amended by section 364 of public act 25-168, is repealed and
14662 the following is substituted in lieu thereof (*Effective July 1, 2026*):

14663 (a) For the state fiscal years ending June 30, 2020, through June 30,
14664 2026, the tax imposed under section 12-263q on the provision of
14665 inpatient hospital services and outpatient hospital services shall cease
14666 to be imposed if the Centers for Medicare and Medicaid Services (1)
14667 determines that such tax is an impermissible tax under Section 1903(w)
14668 of the Social Security Act, as amended from time to time, or (2) does not
14669 approve the applicable Medicaid state plan amendments necessary for
14670 the state to receive federal financial participation under the Medicaid
14671 program for the payments set forth in subsection (i) of section 17b-239
14672 and subsection (c) of section 17b-239e. In the event of such a
14673 determination or disapproval, the General Assembly shall consider,

14674 during the next occurring regular or special session, whichever is
14675 sooner, such amendments to the general statutes as are necessary to
14676 comply with federal law regarding such tax.

14677 (b) For the state fiscal years beginning on or after July 1, 2026, the
14678 taxes imposed under section 12-263q on the provision of inpatient
14679 hospital services and outpatient hospital services as well as the
14680 supplemental payments to hospitals set forth in subsection (c) of section
14681 17b-239e shall revert in all respects to the structure and amounts set
14682 forth in said sections, as they existed on June 1, 2025, if any of the
14683 following occur: (1) The Centers for Medicare and Medicaid Services
14684 determines that either tax is impermissible under Section 1903(w) of the
14685 Social Security Act, as amended from time to time, or declines to issue
14686 any tax waiver that may be required; (2) the Centers for Medicare and
14687 Medicaid Services does not approve, without material modification, the
14688 applicable Medicaid state plan amendments necessary for the state to
14689 receive federal financial participation under the Medicaid program for
14690 the payments set forth in subsection (c) of section 17b-239e; or (3) any
14691 aspect of the amendments to the taxes on inpatient hospital services or
14692 outpatient services or changes to the amounts of supplemental
14693 payments to hospitals pursuant to the provisions of this act are found to
14694 be invalid. In the event of such a determination or disapproval, the
14695 General Assembly shall consider, during the next occurring regular or
14696 special session, whichever is sooner, such amendments to the general
14697 statutes as are necessary to comply with federal law regarding such tax
14698 and such payments. Notwithstanding the provisions of this subsection,
14699 reversion to the June 1, 2025, tax and payment structure shall not be
14700 required if the taxes on the provision of inpatient hospital services and
14701 outpatient hospital services are permissible under federal law and the
14702 Centers for Medicare and Medicaid Services approves state plan
14703 amendments or other federal authorities necessary to implement
14704 payment methodologies that, in the aggregate, produce a total state-
14705 wide level of payments under subsection (c) of section 17b-239e that is
14706 not materially less than the total state-wide level of payments
14707 contemplated under this act, and that results in the combined value of

14708 supplemental payments, disproportionate share hospital payments,
14709 faculty practice plan payments and hospital-affiliated medical group
14710 payments to each health system and its affiliates being as nearly
14711 equivalent as practicable to the payment levels contemplated under this
14712 act, with variation permitted only to the extent necessary to obtain
14713 federal approval or comply with federal law. For purposes of this
14714 subsection, "faculty practice plan", "hospital-affiliated medical group"
14715 and "health system" have the same meaning as provided in section 17b-
14716 239e.

14717 [(b)] (c) On and after July 1, 2026, the tax imposed under subdivision
14718 (2) of subsection (a) of section 12-263r shall cease to be imposed if the
14719 Centers for Medicare and Medicaid Services determines that such tax is
14720 an impermissible tax under Section 1903(w) of the Social Security Act,
14721 as amended from time to time. In the event of such a determination, the
14722 quarterly fee under subdivision (1) of subsection (a) of section 12-263r
14723 shall be reinstated and applicable to the calendar quarter during which
14724 such determination was made and each calendar quarter thereafter. If
14725 the state successfully appeals such determination, such quarterly fee
14726 shall cease and the tax under subdivision (2) of subsection (a) of section
14727 12-263r shall be reinstated and applicable to the calendar quarter
14728 commencing immediately after the date of the final decision of such
14729 appeal and each calendar quarter thereafter.

14730 Sec. 362. (*Effective from passage*) (a) (1) Not later than thirty days after
14731 the effective date of this section, each hospital required to pay tax on
14732 inpatient hospital services or outpatient hospital services for the fiscal
14733 year commencing on July 1, 2026, in accordance with section 12-263q of
14734 the general statutes, shall submit to the Commissioner of Revenue
14735 Services such information as the commissioner requires in order to
14736 calculate, for the federal fiscal year 2024, the audited net inpatient
14737 revenue, the audited net outpatient revenue and the audited net
14738 revenue of all such hospitals. The amounts reported by each hospital
14739 shall be deemed accepted on the first day of the state fiscal year,
14740 provided the commissioner has not initiated an audit of the hospital

14741 before such first day.

14742 (2) If the commissioner initiates an audit of a hospital, such hospital
14743 shall comply with all additional requests by the commissioner for
14744 information necessary to enable the commissioner to fully audit the
14745 hospital within thirty days of the date the commissioner requests such
14746 information. If requested by a hospital, the commissioner may grant an
14747 extension of the deadline to comply with requests for information.

14748 (3) The commissioner shall issue any notice setting forth additional
14749 audited net revenue not later than the first day of the state fiscal year.
14750 Such additional audited net revenue shall be final thirty days after the
14751 date such notice is mailed to the taxpayer, except for any amounts as to
14752 which the taxpayer files a written protest with the commissioner. If a
14753 protest is filed, the commissioner shall reconsider the additional audited
14754 net revenue and, if the taxpayer or the taxpayer's authorized
14755 representative has requested a hearing, shall grant or deny such hearing.
14756 The commissioner shall mail notice of the commissioner's determination
14757 to the taxpayer, which notice shall briefly set forth the commissioner's
14758 findings of fact and the basis of the commissioner's decision in each case
14759 decided adversely, in whole or in part, to the taxpayer. The
14760 commissioner's action on the taxpayer's protest shall be final upon the
14761 expiration of one month from the date the commissioner mails the notice
14762 of the commissioner's determination to the taxpayer, unless the
14763 taxpayer seeks judicial review of such determination within such
14764 period.

14765 (4) If any protest or appeal is pending on the first day of the next
14766 succeeding state fiscal year, the amounts reported by the protesting or
14767 appealing taxpayer shall be used to tentatively calculate the tax due
14768 under this section until such protest or appeal is finally resolved. If any
14769 amount is revised pursuant to such protest or appeal from the amount
14770 originally reported by a hospital, the commissioner shall recalculate for
14771 each hospital the amounts due under this section and shall issue
14772 assessments or refunds, as applicable, with respect to any affected
14773 calendar quarter.

14774 (5) A notice under this subsection shall not be required for any
14775 hospital for which an audit has not been issued.

14776 (b) Any hospital that fails to provide the requested information
14777 within thirty days of the date of the request by the commissioner or fails
14778 to comply with a request for additional information made under this
14779 section shall be subject to a penalty of one thousand dollars per day for
14780 each day the hospital fails to provide the requested information or
14781 additional information.

14782 (c) The commissioner may engage an independent auditor to assist in
14783 the performance of the commissioner's duties and responsibilities under
14784 this section.

14785 Sec. 363. Section 17b-239e of the 2026 supplement to the general
14786 statutes, as amended by section 362 of public act 25-168, is repealed and
14787 the following is substituted in lieu thereof (*Effective July 1, 2026*):

14788 (a) [For the purposes of] As used in this section [, "settlement
14789 agreement" has the same meaning as provided in section 12-263z.] and
14790 section 359 of this act:

14791 (1) "Faculty practice plan" means a medical group controlled or
14792 operated by a university or medical school whose primary affiliation is
14793 with a nongovernmental hospital;

14794 (2) "Faculty practice plan physician and mid-level services" means
14795 professional services provided by physicians or mid-level practitioners
14796 billed under the federal identification number assigned to the faculty
14797 practice plan;

14798 (3) "Health system" has the same meaning as provided in section 19a-
14799 508c;

14800 (4) "Hospital" has the same meaning as provided in section 12-263p;

14801 (5) "Hospital-affiliated medical group" means a medical foundation
14802 or medical group practice organized or controlled by a hospital or health

14803 system or any subsidiary thereof;

14804 (6) "Hospital-affiliated medical group physician and mid-level
14805 services" means professional services provided by physicians and mid-
14806 level practitioners billed under the federal employer identification
14807 number assigned to the hospital-affiliated medical group;

14808 (7) "Hospital-based physician and mid-level services" means
14809 professional services provided by physicians or mid-level practitioners
14810 billed under the federal employer identification number assigned to the
14811 hospital;

14812 (8) "Independent nongovernmental hospital" means a
14813 nongovernmental hospital that is not part of a health system that
14814 includes multiple hospitals and is not included with other hospitals in
14815 consolidated financial statements at the system level;

14816 (9) "Inpatient" has the same meaning as provided in section 12-263p;

14817 (10) "Inpatient hospital services" has the same meaning as provided
14818 in section 12-263p;

14819 (11) "Mid-level practitioner" means: (A) An advanced practice
14820 registered nurse licensed pursuant to chapter 378, or (B) a physician
14821 assistant licensed pursuant to chapter 370;

14822 (12) "Nongovernmental hospital" means a hospital that is not owned
14823 and operated exclusively by the state;

14824 (13) "Outpatient" has the same meaning as provided in section 12-
14825 263p;

14826 (14) "Outpatient hospital services" has the same meaning as provided
14827 in section 12-263p;

14828 (15) "Received" has the same meaning as provided in section 12-263p;
14829 and

14830 (16) "Settlement agreement" has the same meaning as provided in
14831 section 12-263z.

14832 (b) Subject to federal approval, from July 1, 2019, through June 30,
14833 2026, the Department of Social Services shall establish supplemental
14834 pools for certain hospitals in accordance with the terms of the settlement
14835 agreement, including any court order issued in accordance with the
14836 provisions of section 12-263z. Such pools shall include, but not be
14837 limited to, as applicable, general, small hospital, mid-sized hospital and
14838 large hospital supplemental pools.

14839 (c) (1) From July 1, 2019, through June 30, 2026, the department shall
14840 distribute supplemental payments to applicable hospitals in accordance
14841 with the settlement agreement, including any court order issued in
14842 accordance with the provisions of section 12-263z. The commissioner
14843 shall diligently pursue the federal approvals required for the
14844 supplemental pools and payments set forth in this section.

14845 (2) To the extent required by the settlement agreement, including any
14846 court order issued in accordance with the provisions of section 12-263z,
14847 the Department of Social Services shall pay Medicaid supplemental
14848 payments to nongovernmental licensed short-term general hospitals
14849 located in the state as follows: (A) For the fiscal years ending June 30,
14850 2020, and June 30, 2021, five hundred forty-eight million three hundred
14851 thousand dollars in each such fiscal year; and (B) for the fiscal years
14852 ending June 30, 2022, through June 30, 2026, five hundred sixty-eight
14853 million three hundred thousand dollars in each such fiscal year.

14854 (3) (A) For the fiscal [year] years commencing on or after July 1, 2026,
14855 the Department of Social Services shall pay Medicaid supplemental
14856 payments to nongovernmental [licensed short-term general hospitals
14857 located in the state in the amount of seven hundred eight million three
14858 hundred thousand dollars. For fiscal years commencing on or after July
14859 1, 2027, the total amount of such supplemental payments paid to such
14860 hospitals each fiscal year shall be increased twenty-five million dollars
14861 over the total amount of such supplemental payments paid to such

14862 hospitals in the immediately preceding fiscal year, provided such
14863 supplemental payments shall not be increased for any fiscal year unless
14864 the total amount collected for the immediately preceding fiscal year
14865 from the tax imposed on inpatient hospital services and outpatient
14866 hospital services under section 12-263q, across all hospitals subject to
14867 such tax, exceeds such amounts collected for the fiscal year prior to the
14868 immediately preceding fiscal year by at least twenty-five million
14869 dollars.] hospitals located in the state for inpatient hospital services,
14870 outpatient hospital services and hospital-based physician and mid-level
14871 services; hospital-affiliated medical groups; and faculty practice plans,
14872 as set forth in subparagraph (B) of this subdivision. The commissioner
14873 shall diligently pursue the federal approvals required for the
14874 supplemental pools and payments set forth in this subdivision and shall
14875 make such payments while federal approval is being pursued. During
14876 the pendency of any request for approval to remove the exemption for
14877 children's general hospitals under section 12-263q(b)(2), any children's
14878 general hospital that would be eligible for payments under this
14879 subdivision if such approval were granted shall be treated as eligible for
14880 such payments unless and until the Centers for Medicare and Medicaid
14881 Services denies such request.

14882 (B) (i) There is established a General Inpatient Supplemental Payment
14883 Pool. All nongovernmental hospitals that do not receive
14884 disproportionate share hospital payments shall participate in a pro rata
14885 distribution of the pool based on each hospital's proportionate share of
14886 total Medicaid inpatient revenue as reported to the Office of Health
14887 Strategy for federal fiscal year 2024. The total amount available for
14888 distribution under this subsection shall be: (I) For the state fiscal year
14889 commencing July 1, 2026, \$202,823,819; (II) for the state fiscal year
14890 commencing July 1, 2027, \$220,864,276; (III) for the state fiscal year
14891 commencing July 1, 2028, \$239,696,267; (IV) for the state fiscal year
14892 commencing July 1, 2029, \$258,122,646; and (V) for the state fiscal years
14893 commencing on or after July 1, 2030, \$277,597,027. To the extent a
14894 hospital that was eligible for distributions from this pool dissolves or is
14895 no longer a nongovernmental hospital, the available funds for each year

14896 shall be reduced by the amount that the hospital would have received
14897 absent the change in status.

14898 (ii) There is established a Small Hospital Inpatient Supplemental
14899 Payment Pool for nongovernmental hospitals that do not receive
14900 disproportionate share hospital payments and that have one hundred
14901 eighty or fewer licensed inpatient beds. Payments shall be made on a
14902 tiered basis according to total Medicaid inpatient revenue as reported
14903 by such hospital to the Office of Health Strategy for federal fiscal year
14904 2024. The supplemental payment amounts shall be: (I) For the state fiscal
14905 year commencing July 1, 2026, \$3,425,000 for each hospital with less than
14906 \$10,000,000 in Medicaid inpatient revenue and \$9,675,000 for each
14907 hospital with \$10,000,000 or more in Medicaid inpatient revenue; (II) for
14908 the state fiscal year commencing on July 1, 2027, \$3,600,000 for each
14909 hospital with less than \$10,000,000 in Medicaid inpatient revenue and
14910 \$10,150,000 for each hospital with \$10,000,000 or more in Medicaid
14911 inpatient revenue; (III) for the state fiscal year commencing on July 1,
14912 2028, \$3,775,000 for each hospital with less than \$10,000,000 in Medicaid
14913 inpatient revenue and \$10,650,000 for each hospital with \$10,000,000 or
14914 more in Medicaid inpatient revenue; (IV) for the state fiscal year
14915 commencing July 1, 2029, \$3,975,000 for each hospital with less than
14916 \$10,000,000 in Medicaid inpatient revenue and \$11,175,000 for each
14917 hospital with \$10,000,000 or more in Medicaid inpatient revenue; and
14918 (V) for state fiscal years on or after July 1, 2030, \$4,175,000 for each
14919 hospital with less than \$10,000,000 in Medicaid inpatient revenue and
14920 \$11,700,000 for each hospital with \$10,000,000 or more in Medicaid
14921 inpatient revenue.

14922 (iii) There is established a Mid-Sized Hospital Inpatient
14923 Supplemental Payment Pool for nongovernmental hospitals that do not
14924 receive disproportionate share hospital payments, have between one
14925 hundred eighty-one and four hundred ninety-nine licensed inpatient
14926 beds, and have Medicaid gross revenue between six per cent and
14927 eighteen per cent of total hospital revenue as reported by such hospital
14928 to the Office of Health Strategy for federal fiscal year 2024. Payments

14929 shall be tiered based on whether total Medicaid inpatient revenue is less
14930 than or greater than \$18,000,000 for federal fiscal year 2024. The
14931 supplemental payment amounts shall be: (I) For the state fiscal year
14932 commencing on July 1, 2026, \$9,250,000 for each hospital with less than
14933 \$18,000,000 in Medicaid inpatient revenue and \$19,000,000 for each
14934 hospital with \$18,000,000 or more in Medicaid inpatient revenue; (II) for
14935 the state fiscal year commencing on July 1, 2027, \$9,650,000 for each
14936 hospital with less than \$18,000,000 in Medicaid inpatient revenue and
14937 \$20,050,000 for each hospital with \$18,000,000 or more in Medicaid
14938 inpatient revenue; (III) for the state fiscal year commencing on July 1,
14939 2028, \$10,075,000 for each hospital with less than \$18,000,000 in
14940 Medicaid inpatient revenue and \$21,125,000 for each hospital with
14941 \$18,000,000 or more in Medicaid inpatient revenue; (IV) for the state
14942 fiscal year commencing on July 1, 2029, \$10,550,000 for each hospital
14943 with less than \$18,000,000 in Medicaid inpatient revenue and
14944 \$22,225,000 for each hospital with \$18,000,000 or more in Medicaid
14945 inpatient revenue; and (V) for state fiscal years commencing on or after
14946 July 1, 2030, \$11,025,000 for each hospital with less than \$18,000,000 in
14947 Medicaid inpatient revenue and \$23,350,000 for each hospital with
14948 \$18,000,000 or more in Medicaid inpatient revenue.

14949 (iv) There is established an Independent Mid-Sized Hospital
14950 Inpatient Supplemental Payment Pool for independent
14951 nongovernmental hospitals that meet the criteria set forth in clause (iii)
14952 of this subparagraph. Payments shall be tiered based on whether total
14953 Medicaid inpatient revenue is less than or greater than \$30,000,000 as
14954 reported by such hospital to the Office of Health Strategy for federal
14955 fiscal year 2024. The supplemental payment amounts shall be: (I) For the
14956 state fiscal year commencing on July 1, 2026, \$2,225,000 for each hospital
14957 with less than \$30,000,000 in Medicaid inpatient revenue and \$6,700,000
14958 for each hospital with \$30,000,000 or more in Medicaid inpatient
14959 revenue; (II) for the state fiscal year commencing on July 1, 2027,
14960 \$2,400,000 for each hospital with less than \$30,000,000 in Medicaid
14961 inpatient revenue and \$7,075,000 for each hospital with \$30,000,000 or
14962 more in Medicaid inpatient revenue; (III) for the state fiscal year

14963 commencing on July 1, 2028, \$2,575,000 for each hospital with less than
14964 \$30,000,000 in Medicaid inpatient revenue and \$7,475,000 for each
14965 hospital with \$30,000,000 or more in Medicaid inpatient revenue; (IV)
14966 for the state fiscal year commencing on July 1, 2029, \$2,725,000 for each
14967 hospital with less than \$30,000,000 in Medicaid inpatient revenue and
14968 \$7,950,000 for each hospital with \$30,000,000 or more in Medicaid
14969 inpatient revenue; and (V) for state fiscal years commencing on or after
14970 July 1, 2030, \$2,875,000 for each hospital with less than \$30,000,000 in
14971 Medicaid inpatient revenue and \$8,400,000 for each hospital with
14972 \$30,000,000 or more in Medicaid inpatient revenue. This pool shall be in
14973 addition to and not in lieu of the supplemental payment pool set forth
14974 in clause (iii) of this subparagraph.

14975 (v) There is established a Large Hospital Inpatient Supplemental
14976 Payment Pool for nongovernmental hospitals that do not receive
14977 disproportionate share hospital payments, have five hundred or more
14978 licensed inpatient beds, and have Medicaid inpatient revenue greater
14979 than \$150,000,000. Payments shall be tiered based on whether total
14980 Medicaid inpatient revenue is less than or greater than \$300,000,000 as
14981 reported by such hospital to the Office of Health Strategy by such
14982 hospital for federal fiscal year 2024. The supplemental payment
14983 amounts shall be: (I) For the state fiscal year commencing on July 1, 2026,
14984 \$63,000,000 for each hospital with less than \$300,000,000 in Medicaid
14985 inpatient revenue and \$117,000,000 for each hospital with \$300,000,000
14986 or more in Medicaid inpatient revenue; (II) for the state fiscal year
14987 commencing on July 1, 2027, \$65,900,000 for each hospital with less than
14988 \$300,000,000 in Medicaid inpatient revenue and \$127,100,000 for each
14989 hospital with \$300,000,000 or more in Medicaid inpatient revenue; (III)
14990 for the state fiscal year commencing on July 1, 2028, \$68,675,000 for each
14991 hospital with less than \$300,000,000 in Medicaid inpatient revenue and
14992 \$137,325,000 for each hospital with \$300,000,000 or more in Medicaid
14993 inpatient revenue; (IV) for the state fiscal year commencing on July 1,
14994 2029, \$71,800,000 for each hospital with less than \$300,000,000 in
14995 Medicaid inpatient revenue and \$148,200,000 for each hospital with
14996 \$300,000,000 or more in Medicaid inpatient revenue; and (V) for the state

14997 fiscal years commencing on or after July 1, 2030, \$74,850,000 for each
14998 hospital with less than \$300,000,000 in Medicaid inpatient revenue and
14999 \$159,150,000 for each hospital with \$300,000,000 or more in Medicaid
15000 inpatient revenue.

15001 (vi) There is established a General Outpatient Supplemental Payment
15002 Pool. All nongovernmental hospitals that do not receive
15003 disproportionate share hospital payments shall participate in a pro rata
15004 distribution based on total Medicaid outpatient revenue as reported by
15005 such hospitals to the Office of Health Strategy for federal fiscal year
15006 2024. The total amount available for distribution under this subsection
15007 shall be: (I) For the state fiscal year commencing July 1, 2026,
15008 \$194,995,425; (II) for the state fiscal year commencing July 1, 2027,
15009 \$221,565,186; (III) for the state fiscal year commencing July 1, 2028,
15010 \$248,852,236; (IV) for the state fiscal year commencing July 1, 2029,
15011 \$276,805,190; and (V) for state fiscal years commencing on or after July
15012 1, 2030, \$305,623,328. To the extent a hospital that was eligible for
15013 distributions from this pool dissolves or is no longer a nongovernmental
15014 hospital, the available funds for each year shall be reduced by the
15015 amount that the hospital would have received absent the change in
15016 status.

15017 (vii) There is established a Mid-Sized Hospital Outpatient
15018 Supplemental Payment Pool for nongovernmental hospitals that do not
15019 receive disproportionate share hospital payments with between 50,000
15020 and 90,000 annual emergency department visits and with Medicaid
15021 gross revenue between six per cent and eighteen per cent of total
15022 revenue as reported by such hospital to the Office of Health Strategy for
15023 federal fiscal year 2024. Payments shall be tiered based on whether total
15024 Medicaid outpatient revenue is less than or greater than \$30,000,000 for
15025 federal fiscal year 2024. The supplemental payment amounts shall be:
15026 (I) For the state fiscal year commencing on July 1, 2026, \$9,250,000 for
15027 each hospital with less than \$30,000,000 in Medicaid outpatient revenue
15028 and \$19,000,000 for each hospital with \$30,000,000 or more in Medicaid
15029 outpatient revenue; (II) for the state fiscal year commencing on July 1,

15030 2027, \$9,650,000 for each hospital with less than \$30,000,000 in Medicaid
15031 outpatient revenue and \$20,050,000 for each hospital with \$30,000,000 or
15032 more in Medicaid outpatient revenue; (III) for the state fiscal year
15033 commencing on July 1, 2028, \$10,075,000 for each hospital with less than
15034 \$30,000,000 in Medicaid outpatient revenue and \$21,125,000 for each
15035 hospital with \$30,000,000 or more in Medicaid outpatient revenue; (IV)
15036 for the state fiscal year commencing on July 1, 2029, \$10,550,000 for each
15037 hospital with less than \$30,000,000 in Medicaid outpatient revenue and
15038 \$22,225,000 for each hospital with \$30,000,000 or more in Medicaid
15039 outpatient revenue; and (V) for state fiscal years commencing on or after
15040 July 1, 2030, \$11,025,000 for each hospital with less than \$30,000,000 in
15041 Medicaid outpatient revenue and \$23,350,000 for each hospital with
15042 \$30,000,000 or more in Medicaid outpatient revenue.

15043 (viii) There is established an Independent Mid-Sized Hospital
15044 Outpatient Supplemental Payment Pool for independent
15045 nongovernmental hospitals meeting the criteria in clause (vii) of this
15046 subparagraph. Payments shall be tiered based on whether total
15047 Medicaid outpatient revenue is less than or greater than \$30,000,000 as
15048 reported by such hospital to the Office of Health Strategy for federal
15049 fiscal year 2024. The supplemental payment amounts shall be: (I) For the
15050 state fiscal year commencing on July 1, 2026, \$2,225,000 for each hospital
15051 with less than \$30,000,000 in Medicaid outpatient revenue and
15052 \$6,700,000 for each hospital with \$30,000,000 or more in Medicaid
15053 outpatient revenue; (II) for the state fiscal year commencing on July 1,
15054 2027, \$2,400,000 for each hospital with less than \$30,000,000 in Medicaid
15055 outpatient revenue and \$7,075,000 for each hospital with \$30,000,000 or
15056 more in Medicaid outpatient revenue; (III) for the state fiscal year
15057 commencing on July 1, 2028, \$2,575,000 for each hospital with less than
15058 \$30,000,000 in Medicaid outpatient revenue and \$7,475,000 for each
15059 hospital with \$30,000,000 or more in Medicaid outpatient revenue; (IV)
15060 for the state fiscal year commencing on July 1, 2029, \$2,725,000 for each
15061 hospital with less than \$30,000,000 in Medicaid outpatient revenue and
15062 \$7,950,000 for each hospital with \$30,000,000 or more in Medicaid
15063 outpatient revenue; and (V) for state fiscal years commencing on or after

15064 July 1, 2030, \$2,875,000 for each hospital with less than \$30,000,000 in
15065 Medicaid outpatient revenue and \$8,400,000 for each hospital with
15066 \$30,000,000 or more in Medicaid outpatient revenue. This pool shall be
15067 in addition to and not in lieu of the supplemental payment pool set forth
15068 in clause (vii) of this subparagraph.

15069 (ix) For state fiscal years commencing on or after July 1, 2026, the
15070 Commissioner of Social Services shall make disproportionate share
15071 hospital payments in accordance with section 1923 of the Social Security
15072 Act, 42 USC 1396r-4, as amended from time to time, and subject to the
15073 state's annual federal disproportionate share hospital payment
15074 allotment. Disproportionate share hospital payments shall be made to
15075 the following qualifying hospitals, subject to federal eligibility
15076 requirements and hospital-specific disproportionate share hospital
15077 payment limits based on uncompensated care costs: (I) Private acute
15078 care hospitals located in a municipality with a population greater than
15079 one hundred forty-five thousand and having a federal fiscal year 2024
15080 Medicaid charges as a percentage of total charges greater than twenty-
15081 five per cent. The disproportionate share hospital payment amounts for
15082 such hospital shall be: For the state fiscal year commencing July 1, 2026,
15083 \$45,792,235; for the state fiscal year commencing July 1, 2027,
15084 \$45,648,705; for the state fiscal year commencing July 1, 2028,
15085 \$45,516,217; for the state fiscal year commencing July 1, 2029,
15086 \$45,395,510; and for the state fiscal years commencing on or after July 1,
15087 2030, \$45,282,754; (II) for a private acute care hospital within a state-
15088 sponsored corporate structure located in a large urban municipality and
15089 having federal fiscal year 2024 Medicaid charges as a percentage of total
15090 charges between twenty per cent and twenty-five per cent, the
15091 disproportionate share hospital payment amounts for such hospital
15092 shall be: For the state fiscal year commencing July 1, 2026, \$7,706,981; for
15093 the state fiscal year commencing July 1, 2027, \$8,541,956; for the state
15094 fiscal year commencing July 1, 2028, \$9,393,031; for the state fiscal year
15095 commencing July 1, 2029, \$10,260,616; and for the state fiscal years
15096 commencing on or after July 1, 2030, \$11,146,556; and (III) for licensed
15097 freestanding private acute care children's hospitals having federal fiscal

15098 year 2024 Medicaid charges as a percentage of total charges greater than
15099 thirty-five per cent, the disproportionate share hospital payment
15100 amounts for such hospital shall be: For the state fiscal year commencing
15101 July 1, 2026, \$40,000,784; for the state fiscal year commencing July 1,
15102 2027, \$42,020,839; for the state fiscal year commencing July 1, 2028,
15103 \$44,092,385; for the state fiscal year commencing July 1, 2029,
15104 \$46,216,555; and for the state fiscal year commencing on or after July 1,
15105 2030, \$48,397,679. The disproportionate share hospital payments
15106 authorized under this subclause shall be supplemental to, and not in
15107 lieu of, the thirteen million one hundred thirty-eight thousand seven
15108 hundred thirty-seven dollars in disproportionate share hospital
15109 payment amounts otherwise appropriated, allotted or otherwise
15110 provided to the hospitals eligible under this subclause in the state
15111 budget for the state fiscal year commencing July 1, 2026, which amount
15112 shall serve as a funding baseline for each state fiscal year during the five-
15113 year period commencing July 1, 2026. Such baseline amount shall not be
15114 reduced, offset, supplanted or otherwise taken into account in
15115 determining the payments authorized under this subclause. All
15116 disproportionate share hospital payments made pursuant to this
15117 subsection shall remain subject to hospital-specific limits based on each
15118 hospital's uncompensated care costs, as required under federal law. For
15119 state fiscal years commencing on or after July 1, 2026, the Commissioner
15120 of Social Services shall adjust aggregate disproportionate share hospital
15121 payments for hospitals owned and operated exclusively by the state so
15122 that these amounts, when combined with payments pursuant to this
15123 subclause and with existing disproportionate share hospital payments
15124 to nongovernmental hospitals, do not exceed the state's federal
15125 disproportionate share hospital payment allotment for the applicable
15126 federal fiscal year.

15127 (x) For state fiscal years commencing on or after July 1, 2026, there
15128 shall be established a supplemental pool in the total amount of
15129 \$72,750,000 to be distributed to hospital-affiliated medical groups for
15130 hospital-affiliated medical group physician and mid-level practitioner
15131 services and to hospitals for hospital-based physician and mid-level

15132 practitioner services, who apply for funds in consultation with their
15133 controlling hospital or health system and are deemed eligible for such
15134 payments by the Department of Social Services on or before June 30,
15135 2026. Such payments shall be apportioned among eligible entities in
15136 proportion to the difference, referred to as the gap, between (I) the
15137 Medicaid payments received by the entity for physician and mid-level
15138 practitioner services for the state fiscal year ending June 30, 2025, and
15139 (II) the amount the entity would have received for such services if paid
15140 under the Medicare Physician Fee Schedule adopted by the Centers for
15141 Medicare and Medicaid Services for calendar year 2026, calculated in
15142 accordance with applicable federal law and regulations. The
15143 commissioner shall distribute the available funds so that each entity
15144 receives the same percentage of its gap, subject to the total amount
15145 available for such payments. For fiscal years commencing on or after
15146 July 1, 2027, the amount of payments set forth in this section shall be
15147 made in each subsequent fiscal year, unless modified through any
15148 provision of the general statutes. This section shall not apply to hospital-
15149 affiliated medical groups primarily affiliated with a children's hospital
15150 or to a children's hospital directly. To the extent an entity or group that
15151 was eligible for distributions from this pool dissolves or is no longer
15152 affiliated with a nongovernmental hospital, the available funds for each
15153 year shall be reduced by the amount that the entity or group would have
15154 received absent the change in status.

15155 (xi) For state fiscal years commencing on or after July 1, 2026, there
15156 shall be established a supplemental pool in the total amount of
15157 \$32,250,000 to be distributed to faculty practice plans, who apply for and
15158 are deemed eligible for such payments by the Department of Social
15159 Services on or before June 30, 2026, because they meet all of the
15160 following criteria for the state fiscal year ending June 30, 2025: (I) The
15161 faculty practice plan consists of more than 1,300 Medicaid enrolled
15162 physicians and mid-level practitioners; and (II) the faculty practice plan
15163 has annual Medicaid revenue attributable to physician and mid-level
15164 practitioner services exceeding fifty million dollars. Such payments
15165 shall be apportioned among eligible faculty practice plans in proportion

15166 to the difference, referred to as the gap, between the Medicaid payments
15167 received by the entity for physician and mid-level practitioner services
15168 for the state fiscal year ending June 30, 2025, and the amount the plan
15169 would have received for such services if paid under the Medicare
15170 Physician Fee Schedule adopted by the Centers for Medicare and
15171 Medicaid Services for calendar year 2026, calculated in accordance with
15172 applicable federal law and regulations. The Commissioner of Social
15173 Services shall distribute the available funds so that each entity receives
15174 the same percentage of its gap, subject to the total amount available for
15175 such payments. For fiscal years commencing on or after July 1, 2027, the
15176 amount of payments set forth in this section shall be made in each
15177 subsequent fiscal year, unless modified through any provision of the
15178 general statutes. To the extent a faculty practice plan that was eligible
15179 for distributions from this pool dissolves or is no longer affiliated with
15180 a nongovernmental hospital, the available funds for each year shall be
15181 reduced by the amount that the faculty practice plan would have
15182 received absent the change in status.

15183 (xii) If the Centers for Medicare and Medicaid Services does not
15184 approve the use of Medicaid payments for the state fiscal year ending
15185 June 30, 2025, or the Medicare Physician Fee Schedule for calendar year
15186 2026 for purposes of calculating the applicable upper payment limit gap
15187 as specified in clauses (x) and (xi) of this subparagraph, the
15188 Commissioner of Social Services may instead use the Medicaid
15189 payments or Medicare Physician Fee Schedule for the most recent
15190 calendar year approved by the Centers for Medicare and Medicaid
15191 Services for such purpose or any other methodology approved by the
15192 Centers for Medicare and Medicaid Services that results in the same
15193 total aggregate pool amounts, and, to the greatest extent feasible,
15194 comparable distribution set forth in clauses (x) and (xi) of this
15195 subparagraph, and such substitution shall not require further legislative
15196 action.

15197 (xiii) Supplemental payment amounts established in accordance with
15198 clauses (x) and (xi) of this subparagraph shall apply for the state fiscal

15199 year commencing July 1, 2026, and for each state fiscal year thereafter,
15200 notwithstanding any requirement to update, refresh or rebase the upper
15201 payment limit demonstration to comply with federal law or guidance.
15202 Any adjustment required to ensure compliance with applicable upper
15203 payment limit requirements shall be made solely in accordance with
15204 subparagraph (C) of subdivision (4) of this subsection.

15205 (xiv) Commencing upon the beginning of any state fiscal year in
15206 which the base year used to calculate the net patient revenue for the tax
15207 on the provision of inpatient hospital services and the tax on outpatient
15208 hospital services pursuant to subdivision (4) of subsection (a) of section
15209 12-263q occurs, the Commissioner of Social Services shall, after
15210 conferring with the Connecticut Hospital Association, revise, to the
15211 extent necessary, the supplemental payment pool structure, pool
15212 amounts, disproportionate share hospital payment amounts and
15213 distribution methodologies set forth in this subdivision so that the
15214 combined value of supplemental payments, disproportionate share
15215 hospital payments, hospital-based physician and mid-level practitioner
15216 payments, hospital-affiliated medical group payments and faculty
15217 practice plan payments to each health system and its affiliates is
15218 maintained in a manner as proportionate as practicable in relation to the
15219 updated all-payer revenue data used for such rebasing and anticipated
15220 total tax liability, with such variation as may be necessary to reflect
15221 updated provider status changes, federal approval requirements or
15222 compliance with federal law. In making such revisions, the
15223 commissioner shall consider the aggregate value of payments
15224 attributable to each health system and its affiliates, including payments
15225 made directly to hospitals, hospital-affiliated medical groups, faculty
15226 practice plans and hospital-based physician and mid-level practitioner
15227 services. For purposes of this clause, such aggregate value shall include
15228 the value of historical rate-based payment increases, which, solely for
15229 purposes of this clause, are assumed to be in the amount of three
15230 hundred seventy-five million four hundred forty-seven thousand three
15231 dollars, reallocated to reflect utilization for the applicable base year.

15232 (4) (A) All supplemental payments made pursuant to subdivision (3)
15233 of this subsection shall be made in compliance with applicable federal
15234 law governing Medicaid payments and federal financial participation,
15235 including, but not limited to: (i) Sections 1902(a)(30)(A), 1903 and 1923
15236 of the Social Security Act; and (ii) 42 CFR Part 447, including the
15237 Medicaid Upper Payment Limit regulations, as amended from time to
15238 time.

15239 (B) The Commissioner of Social Services shall calculate and monitor
15240 applicable aggregate and provider-specific upper payment limits for
15241 each class of providers to ensure compliance with federal requirements.
15242 Subject to approval by the Centers for Medicare and Medicaid Services,
15243 on or before June thirtieth of each fiscal year, the Department of Social
15244 Services shall calculate and submit the inpatient and outpatient hospital
15245 upper payment limit demonstrations for the upcoming fiscal year to the
15246 Centers for Medicare and Medicaid Services or, if not approved by the
15247 Centers for Medicare and Medicaid Services, the inpatient and
15248 outpatient hospital upper limit demonstrations for the current fiscal
15249 year. The Department of Social Services shall consult with the
15250 Connecticut Hospital Association at least fifteen days before submission
15251 to the Centers for Medicare and Medicaid Services.

15252 (C) (i) Notwithstanding any other provision of this subsection, if, at
15253 any time during a state fiscal year, the Commissioner of Social Services
15254 determines that one or more of the supplemental payments and other
15255 payments set forth in this subsection scheduled for a future quarter may
15256 exceed an applicable aggregate or provider-specific upper payment
15257 limit or violate any federal requirement in a manner that makes any
15258 extent of payments ineligible for federal financial participation or
15259 otherwise fails to maximize federal financial participation, as
15260 determined by the commissioner, the commissioner may, in
15261 consultation with the Secretary of the Office of Policy and Management
15262 and the Connecticut Hospital Association, to the extent feasible, revise
15263 the payment structure in a manner that ensures ongoing compliance
15264 with all applicable federal requirements and which, in aggregate,

15265 produces a total state-wide level of payments that is not materially less
15266 than the total state-wide level of payments contemplated under this
15267 subsection, and that result in the combined value of supplemental
15268 payments, disproportionate share hospital payments, faculty practice
15269 plan payments and hospital-affiliated medical group payments to each
15270 health system and its affiliates being as nearly equivalent as practicable
15271 to the payment levels contemplated under this subsection, with
15272 variation permitted only to the extent necessary to obtain federal
15273 approval, comply with federal law or maximize federal financial
15274 participation.

15275 (ii) If the Commissioner of Social Services determines that it is not
15276 possible to make the adjustments set forth in clause (i) of this
15277 subparagraph, then, notwithstanding subparagraph (A) of subdivision
15278 (4) of this subsection, if, at any time during a state fiscal year, the
15279 commissioner determines that supplemental payments scheduled for a
15280 future quarter may exceed an applicable aggregate or provider-specific
15281 upper payment limit or any other federal requirement that makes any
15282 portion of such payments ineligible for federal financial participation,
15283 the commissioner shall continue to make the scheduled supplemental
15284 payments to eligible providers and adjust such payments solely to the
15285 extent necessary to account for any portion of federal financial
15286 participation that is disallowed, deferred, or otherwise unavailable as a
15287 result of the upper payment limit determination.

15288 (iii) Any adjustment made pursuant to clause (ii) of this
15289 subparagraph, whether implemented prospectively through payment
15290 reductions or retrospectively through recoupment, shall be limited to
15291 the amount of federal financial participation that is disallowed or
15292 deferred due to upper payment limit requirements; and, in the case of
15293 hospital supplemental payments, be applied on a pro rata basis across
15294 the affected provider or service class or classes in proportion to each
15295 provider's share of the applicable supplemental payment pool for the
15296 relevant period. In no event shall the state reduce or recover amounts
15297 exceeding the federal share disallowed as a result of upper payment

15298 limit requirements.

15299 (5) Nothing in this subsection shall be construed to relieve the state
15300 of its obligation to ensure compliance with federal Medicaid
15301 requirements or to prevent the Commissioner of Social Services from
15302 adopting policies, procedures or regulations necessary to maintain
15303 federal approval of the state Medicaid plan.

15304 (6) Payments authorized under subdivision (3) of this subsection
15305 shall be based on each entity's characteristics as of January 1, 2025,
15306 absent dissolution or a change in status from a nongovernmental entity.
15307 Payments under this subsection shall continue to be made to any
15308 successor organization resulting from a merger, consolidation or
15309 acquisition, provided such successor organization remains a
15310 nongovernmental hospital eligible for Medicaid enrollment. In the event
15311 that an entity existing as of January 1, 2025, was acquired by more than
15312 one entity thereafter, payments that would be due to that entity will be
15313 equitably apportioned among the acquirors.

15314 [(B) The Department of Social Services shall not pay Medicaid
15315 supplemental payments in a manner that does not comply with
15316 applicable federal requirements and required federal approvals,
15317 including, but not limited to, payments that cause total hospital
15318 payments in an applicable category to exceed the upper payment limit,
15319 as defined in section 17b-239.]

15320 [(4)] (7) From July 1, 2019, through June 30, 2026, the Department of
15321 Social Services shall make supplemental payments to the applicable
15322 hospitals on or before the last day of the first month of each calendar
15323 quarter, except that payments scheduled to be made before December
15324 19, 2019, shall be made not later than thirty days after December 19,
15325 2019.

15326 [(5)] (8) If a nongovernmental licensed short-term general hospital
15327 located in the state merges or consolidates with or is acquired by another
15328 hospital, such that the hospital does not continue to maintain a separate

15329 short-term general hospital license, the supplemental payments that
15330 would have been paid to the hospital that no longer maintains such
15331 license shall be paid instead to the surviving hospital, beginning with
15332 the first calendar quarter that commences on or after the effective date
15333 of the merger, consolidation or acquisition. If a nongovernmental
15334 licensed short-term general hospital located in the state dissolves, ceases
15335 to operate or otherwise terminates licensed short-term general hospital
15336 services, the supplemental payments that would have been paid to such
15337 hospital shall not be paid to any other hospital for the remainder of the
15338 fiscal year in which such hospital dissolves, ceases operations or
15339 otherwise terminates such services and for any fiscal year thereafter.
15340 [Commencing with the fiscal year after the hospital dissolved, ceased to
15341 operate or otherwise terminated such services, the supplemental
15342 payments that would have been made to such hospital shall be
15343 redistributed to all other nongovernmental licensed short-term general
15344 hospitals located in the state in accordance with the distribution
15345 methodology set forth in the settlement agreement for each
15346 supplemental pool.]

15347 [(6)] (9) Both the state and federal share of supplemental payments
15348 set forth in this subsection shall be appropriated to the Department of
15349 Social Services. Such supplemental payments shall not be subject to
15350 rescissions or holdbacks. Nothing in this section shall affect the
15351 authority of the state to recover overpayments and collect unpaid
15352 liabilities, as authorized by law.

15353 [(d)] To the extent required by the settlement agreement, including
15354 any court order issued in accordance with the provisions of section 12-
15355 263z, the commissioner shall make the supplemental payments set forth
15356 in this section effective for the dates of service set forth in this section,
15357 including payment adjustments to reconcile, in accordance with this
15358 section, supplemental payments made to hospitals for the calendar
15359 quarter ending September 30, 2019, as interim payments. Such
15360 reconciliation shall ensure that, after accounting for such payment
15361 adjustments, the actual supplemental payments made to each hospital

15362 shall be the amounts due to each hospital pursuant to the settlement
15363 agreement, even if federal approvals are received after each applicable
15364 date that supplemental payments are required to be made, provided the
15365 supplemental payments remain subject to federal approval. If federal
15366 approval of such payments is not obtained, such payments may later be
15367 recovered by the commissioner by recoupment against other Medicaid
15368 payments due to a hospital or in any manner authorized by law.]

15369 Sec. 364. Section 19a-754f of the general statutes is repealed and the
15370 following is substituted in lieu thereof (*Effective July 1, 2026*):

15371 For the purposes of this section and sections 19a-754g to 19a-754k,
15372 inclusive:

15373 (1) "All-payer claims database" means the database established under
15374 section 19a-755a;

15375 (2) "Drug manufacturer" means the manufacturer of a drug that is:
15376 (A) Included in the information and data submitted by a health carrier
15377 pursuant to section 38a-479qqq, (B) studied or listed pursuant to
15378 subsection (c) or (d) of section 19a-754b, or (C) in a therapeutic class of
15379 drugs that the [Commissioner of Health Strategy] Secretary of the Office
15380 of Policy and Management determines, through public or private
15381 reports, has had a substantial impact on prescription drug expenditures,
15382 net of rebates, as a percentage of total health care expenditures;

15383 [(2) "Commissioner" means the Commissioner of Health Strategy;]

15384 (3) "Health care cost growth benchmark" means the annual
15385 benchmark established pursuant to section 19a-754g;

15386 (4) "Health care quality benchmark" means an annual benchmark
15387 established pursuant to section 19a-754g;

15388 (5) "Health care provider" has the same meaning as provided in
15389 subdivision (1) of subsection (a) of section 19a-17b;

15390 (6) "Hospital payment growth benchmark" means a benchmark value

15391 to measure annual hospital payment growth that is equal to the cost
15392 growth benchmark value established in section 19a-754g;

15393 (7) "Hospital payment growth methodology" means a methodology
15394 developed by the secretary to measure a hospital's annual change in
15395 standardized payment per unit of service, by market or service category,
15396 or both, while holding utilization constant and adjusting for, or
15397 otherwise taking into consideration, the factors set forth in subdivision
15398 (2) of subsection (a) of section 19a-754i to distinguish payment growth
15399 from changes in utilization, clinical risk, service volume, service mix and
15400 payer reimbursement practices;

15401 [(6)] (8) "Net cost of private health insurance" means the difference
15402 between premiums earned and benefits incurred, and includes insurers'
15403 costs of paying bills, advertising, sales commissions, and other
15404 administrative costs, net additions or subtractions from reserves, rate
15405 credits and dividends, premium taxes and profits or losses;

15406 [(7)] (9) "Office" means the Office of [Health Strategy established
15407 under section 19a-754a] Policy and Management;

15408 [(8)] (10) "Other entity" means a drug manufacturer, pharmacy
15409 benefits manager or other health care provider that is not considered a
15410 provider entity;

15411 [(9)] (11) "Payer" means a payer, including Medicaid, Medicare and
15412 governmental and nongovernment health plans, and includes any
15413 organization acting as payer that is a subsidiary, affiliate or business
15414 owned or controlled by a payer that, during a given calendar year, pays
15415 health care providers for health care services or pharmacies or provider
15416 entities for prescription drugs designated by the [Commissioner of
15417 Health Strategy] Secretary of the Office of Policy and Management;

15418 [(10)] (12) "Performance year" means the most recent calendar year
15419 for which data were submitted for the applicable health care cost growth
15420 benchmark, primary care spending target or health care quality
15421 benchmark;

15422 [(11)] (13) "Pharmacy benefits manager" has the same meaning as
15423 provided in subdivision (10) of section 38a-479ooo;

15424 [(12)] (14) "Primary care spending target" means the annual target
15425 established pursuant to section 19a-754g;

15426 [(13)] (15) "Provider entity" means an organized group of clinicians
15427 that come together for the purposes of contracting, or are an established
15428 billing unit that, at a minimum, includes primary care providers, and
15429 that collectively, during any given calendar year, has enough attributed
15430 lives to participate in total cost of care contracts, even if they are not
15431 engaged in a total cost of care contract;

15432 [(14)] (16) "Potential gross state product" means a forecasted measure
15433 of the economy that equals the sum of the (A) expected growth in
15434 national labor force productivity, (B) expected growth in the state's labor
15435 force, and (C) expected national inflation, minus the expected state
15436 population growth;

15437 (17) "Secretary" means the Secretary of the Office of Policy and
15438 Management;

15439 [(15)] (18) "Total health care expenditures" means the sum of all
15440 health care expenditures in this state from public and private sources
15441 for a given calendar year, including: (A) All claims-based spending paid
15442 to providers, net of pharmacy rebates, (B) all patient cost-sharing
15443 amounts, and (C) the net cost of private health insurance; and

15444 [(16)] (19) "Total medical expense" means the total cost of care for the
15445 patient population of a payer or provider entity for a given calendar
15446 year, where cost is calculated for such year as the sum of (A) all claims-
15447 based spending paid to providers by public and private payers, and net
15448 of pharmacy rebates, (B) all nonclaims payments for such year,
15449 including, but not limited to, incentive payments and care coordination
15450 payments, and (C) all patient cost-sharing amounts expressed on a per
15451 capita basis for the patient population of a payer or provider entity in
15452 this state.

15453 Sec. 365. Section 19a-754g of the 2026 supplement to the general
15454 statutes is repealed and the following is substituted in lieu thereof
15455 (*Effective July 1, 2026*):

15456 [(a) Not later than July 1, 2022, the commissioner shall publish (1) the
15457 health care cost growth benchmarks and annual primary care spending
15458 targets as a percentage of total medical expenses for the calendar years
15459 2021 to 2025, inclusive, and (2) the annual health care quality
15460 benchmarks for the calendar years 2022 to 2025, inclusive, on the office's
15461 Internet web site.]

15462 [(b) (1) (A)] (a) (1) Not later than July 1, 2025, and every five years
15463 thereafter, the [commissioner] secretary shall develop and adopt annual
15464 health care cost growth benchmarks and annual primary care spending
15465 targets for the succeeding five calendar years for provider entities and
15466 payers.

15467 [(B) In developing the health care cost growth benchmarks and
15468 primary care spending targets pursuant to this subdivision, the
15469 commissioner shall consider (i) any historical and forecasted changes in
15470 median income for individuals in the state and the growth rate of
15471 potential gross state product, (ii) the rate of inflation, and (iii) the most
15472 recent report prepared by the commissioner pursuant to subsection (b)
15473 of section 19a-754h.]

15474 (2) Notwithstanding the provisions of subdivision (1) of this
15475 subsection, not later than July 1, 2027, the secretary shall establish the
15476 annual cost growth benchmark as follows:

15477 (A) For calendar years 2028 to 2032, inclusive, the health care cost
15478 growth benchmark shall be equal to three and nine-tenths per cent.

15479 (B) For calendar year 2033, and every five years thereafter, the
15480 secretary shall develop and adopt annual health care cost growth
15481 benchmarks for the succeeding five calendar years for provider entities
15482 and payers that shall be equal to the sum of twenty per cent of the
15483 projected growth in median Connecticut household income and eighty

15484 per cent of the greater of: (i) Growth in Connecticut potential gross state
15485 product for such year, or (ii) the annual growth in the employment cost
15486 index for total compensation for private industry workers in the New
15487 England Census Region published by the United States Bureau of Labor
15488 Statistics, or any successor regional labor cost index designated by the
15489 secretary, for such year.

15490 [(C) (i)] (b) The [commissioner] secretary shall hold at least one
15491 informational public hearing prior to adopting the health care cost
15492 growth benchmarks and primary care spending targets for each
15493 succeeding five-year period described in this subdivision. The
15494 [commissioner] secretary may hold informational public hearings
15495 concerning any annual health care cost growth benchmark and primary
15496 care spending target set pursuant to subsection (a) of this section, [or
15497 subdivision (1) of subsection (b) of this section.] Such informational
15498 public hearings shall be held at a time and place designated by the
15499 [commissioner] secretary in a notice prominently posted by the
15500 [commissioner] secretary on the office's Internet web site and in a form
15501 and manner prescribed by the commissioner. The [commissioner]
15502 secretary shall make available on the office's Internet web site a
15503 summary of any such informational public hearing and include the
15504 [commissioner's] secretary's recommendations, if any, to modify or not
15505 to modify any such annual quality benchmark or target.

15506 [(ii) If the commissioner determines, after any informational public
15507 hearing held pursuant to this subparagraph, that a modification to any
15508 health care cost growth benchmark or annual primary care spending
15509 target is, in the commissioner's discretion, reasonably warranted, the
15510 commissioner may modify such benchmark or target.]

15511 (c) (1) Not later than July 1, 2027, the secretary, in consultation with
15512 an association of hospitals in the state, shall develop and adopt hospital
15513 payment growth methodology to measure a hospital's annual change in
15514 payment per unit. Such methodology shall be effective for performance
15515 year 2028, and shall, to the maximum extent feasible, adjust for or
15516 otherwise take into consideration the factors set forth in subdivision (2)

15517 of subsection (a) of section 19a-754i.

15518 (2) Before finalizing the methodology, the secretary shall provide
15519 each hospital with its hospital-specific preliminary results, the data and
15520 assumptions used to calculate such results and a period of not less than
15521 ninety days to validate, verify or challenge such methodology, data,
15522 assumptions and preliminary results. The secretary shall consider all
15523 timely corrections or challenges submitted by a hospital and shall
15524 amend the methodology or preliminary results as appropriate.

15525 (3) Not later than January 1, 2029, the secretary shall publish the final
15526 hospital payment growth methodology on the office's Internet web site,
15527 together with a written response to material comments received, a
15528 description of any changes made to the methodology following testing
15529 and validation and an explanation of how the methodology accounts for
15530 material changes in patient acuity, clinical complexity, severity of
15531 illness, case mix, service intensity, payer mix, service mix, coding
15532 guidance, payer claims adjudication practices and services provided.

15533 [(iii)] (4) The [commissioner] secretary shall annually [(I)] (A) review
15534 the current and projected rate of inflation, and [(II)] (B) include on the
15535 office's Internet web site the [commissioner's] secretary's findings of
15536 such review, including the reasons for making or not making a
15537 modification to any applicable health care cost growth benchmark. If the
15538 [commissioner] secretary determines that the rate of inflation requires
15539 modification of any health care cost growth benchmark adopted under
15540 this section, the [commissioner] secretary may modify such benchmark.
15541 In such event, the [commissioner] secretary shall not be required to hold
15542 an informational public hearing concerning such modified health care
15543 cost growth benchmark.

15544 [(D) The commissioner shall post each adopted health care cost
15545 growth benchmark and annual primary care spending target on the
15546 office's Internet web site.

15547 (E) Notwithstanding the provisions of subparagraphs (A) to (D),

15548 inclusive, of this subdivision, if the average annual health care cost
15549 growth benchmark for a succeeding five-year period described in this
15550 subdivision differs from the average annual health care cost growth
15551 benchmark for the five-year period preceding such succeeding five-year
15552 period by more than one-half of one per cent, the commissioner shall
15553 submit the annual health care cost growth benchmarks developed for
15554 such succeeding five-year period to the joint standing committee of the
15555 General Assembly having cognizance of matters relating to insurance
15556 for the committee's review and approval. The committee shall be
15557 deemed to have approved such annual health care cost growth
15558 benchmarks for such succeeding five-year period, except upon a vote to
15559 reject such benchmarks by the majority of committee members at a
15560 meeting of such committee called for the purpose of reviewing such
15561 benchmarks and held not later than thirty days after the commissioner
15562 submitted such benchmarks to such committee. If the committee votes
15563 to reject such benchmarks, the commissioner may submit to the
15564 committee modified annual health care cost growth benchmarks for
15565 such succeeding five-year period for the committee's review and
15566 approval in accordance with the provisions of this subparagraph. The
15567 commissioner shall not be required to hold an informational public
15568 hearing concerning such modified benchmarks. Until the joint standing
15569 committee of the General Assembly having cognizance of matters
15570 relating to insurance approves annual health care cost growth
15571 benchmarks for the succeeding five-year period, such benchmarks shall
15572 be deemed to be equal to the average annual health care cost growth
15573 benchmark for the preceding five-year period.]

15574 (d) In developing and adopting primary care spending targets
15575 pursuant to subdivision (1) of subsection (a) of this section, the secretary
15576 shall:

15577 (1) Use total medical expense as the denominator and include in
15578 primary care spending both claims-based and nonclaims-based
15579 payments attributable to primary care providers, primary care services
15580 and primary care infrastructure, including, but not limited to, primary

15581 care capitation, care management and care coordination payments, as
15582 determined by the secretary, and may exclude market-specific factors,
15583 such as long-term care, as determined by the secretary;

15584 (2) Establish separate market-specific primary care spending targets
15585 for the commercial market, Medicaid, Medicare and Medicare
15586 Advantage, to the extent feasible and practicable, and adjust the
15587 calculation and assessment of each payer and provider against the
15588 market-specific primary care spending target to account for material
15589 differences in age and sex distribution;

15590 (3) Adopt annual market-specific targets for the succeeding five
15591 calendar years that reflect progressive improvement toward a market-
15592 specific reference percentage determined by the secretary based on
15593 primary care access needs, workforce capacity, health equity and
15594 comparable market data, provided the cumulative increase in any such
15595 target over such five-year period shall not exceed five per cent of such
15596 adjusted baseline; and

15597 (4) Calculate the state-wide annual primary care spending target as
15598 the member-month weighted average of the market-specific targets
15599 established pursuant to this subdivision.

15600 [(2) (A)] (e) (1) Not later than July 1, 2025, and every five years
15601 thereafter, the [commissioner] secretary shall develop and adopt annual
15602 health care quality benchmarks for the succeeding five calendar years
15603 for provider entities and payers.

15604 [(B)] (2) In developing annual health care quality benchmarks
15605 pursuant to this subdivision, the [commissioner] secretary shall
15606 consider [(i)] (A) quality measures endorsed by nationally recognized
15607 organizations, including, but not limited to, the National Quality
15608 Forum, the National Committee for Quality Assurance, the Centers for
15609 Medicare and Medicaid Services, the National Centers for Disease
15610 Control and Prevention, the Joint Commission and expert organizations
15611 that develop health equity measures, and [(ii)] (B) measures that: [(I)] (i)

15612 Concern health outcomes, overutilization, underutilization and patient
15613 safety, [(II)] (ii) meet standards of patient-centeredness and ensure
15614 consideration of differences in preferences and clinical characteristics
15615 within patient subpopulations, and [(III)] (iii) concern community
15616 health or population health.

15617 [(C) (i)] (f) (1) The [commissioner] secretary shall hold at least one
15618 informational public hearing prior to adopting the health care quality
15619 benchmarks for each succeeding five-year period described in this
15620 subdivision. The [commissioner] secretary may hold informational
15621 public hearings concerning the quality measures the [commissioner]
15622 secretary proposes to adopt as health care quality benchmarks. Such
15623 informational public hearings shall be held at a time and place
15624 designated by the [commissioner] secretary in a notice prominently
15625 posted by the [commissioner] secretary on the office's Internet web site
15626 and in a form and manner prescribed by the [commissioner] secretary.
15627 The [commissioner] secretary shall make available on the office's
15628 Internet web site a summary of any such informational public hearing
15629 and include the recommendations, if any, to modify or not modify any
15630 such health care quality benchmark.

15631 [(ii)] (2) If the [commissioner] secretary determines, after any
15632 informational public hearing held pursuant to this subparagraph, that
15633 modifications to any health care quality benchmarks are, in the
15634 [commissioner's] secretary's discretion, reasonably warranted, the
15635 [commissioner] secretary may modify such quality benchmarks. The
15636 [commissioner] secretary shall not be required to hold an additional
15637 informational public hearing concerning such modified quality
15638 benchmarks.

15639 [(D)] (3) The [commissioner] secretary shall post each adopted health
15640 care quality benchmark on the office's Internet web site.

15641 [(c)] (g) The [commissioner] secretary may enter into such contractual
15642 agreements as may be necessary to carry out the purposes of this section,
15643 including, but not limited to, contractual agreements with actuarial,

15644 economic and other experts and consultants.

15645 (h) In implementing the provisions of this section, the secretary shall
15646 not later than July 1, 2028, perform the following functions:

15647 (1) Adopt and make available on the office's Internet web site a
15648 revised methodology for analyzing data from the all-payer claims
15649 database and for identifying entities that are significant contributors to
15650 health care cost growth. Such methodology shall use data analytics that
15651 examine the contribution of material changes in clinical risk payment
15652 methodologies that have a material change on cost growth measures;

15653 (2) Adopt and make available on the office's Internet web site a
15654 revised methodology for assessing compliance with the health care cost
15655 growth benchmark. Such methodology shall assess cost growth for each
15656 provider entity and hospital in the aggregate across governmental and
15657 private payers and shall adjust for clinical risk, and account for changes
15658 in payment methodologies that have a material change on cost growth
15659 measures; and

15660 (3) Nothing in this subsection shall prevent the secretary from
15661 reporting the cost growth performance of each provider at the market
15662 level.

15663 Sec. 366. Section 19a-754h of the general statutes is repealed and the
15664 following is substituted in lieu thereof (*Effective July 1, 2026*):

15665 (a) Not later than August [15, 2022, and] fifteenth annually,
15666 [thereafter,] each payer and hospital shall report to the [commissioner]
15667 secretary, in a form and manner prescribed by the [commissioner]
15668 secretary, for the preceding or prior years, if the [commissioner]
15669 secretary so requests based on material changes to data previously
15670 submitted, aggregated data, including aggregated self-funded data as
15671 applicable, necessary for the [commissioner] secretary to calculate total
15672 health care expenditures, primary care spending as a percentage of total
15673 medical expenses, [and] net cost of private health insurance, and
15674 performance toward the hospital payment growth benchmark, as

15675 applicable. The secretary shall seek to limit the burden of reporting
15676 requirements and rely on data sources available to the secretary before
15677 seeking data reporting from hospitals. Each payer shall also disclose, as
15678 requested by the [commissioner] secretary, payer data required for
15679 adjusting total medical expense calculations to reflect changes in the
15680 patient population.

15681 (b) Not later than March [31, 2023, and] thirty-first annually,
15682 [thereafter, the commissioner] the secretary shall prepare and post on
15683 the office's Internet web site, a report concerning the total health care
15684 expenditures utilizing the total aggregate medical expenses reported by
15685 payers pursuant to subsection (a) of this section, including, but not
15686 limited to, a breakdown of such population-adjusted total medical
15687 expenses by payer and provider entities. The report may include, but
15688 [shall] need not be limited to, information regarding the following:

15689 (1) Trends in major service category spending;

15690 (2) [Primary care spending as a percentage of total medical expenses]
15691 For each market and payer, both (A) the percentage of total medical
15692 expense devoted to primary care, and (B) primary care spending
15693 expressed on a per-member-per-month basis;

15694 (3) The net cost of private health insurance by payer by market
15695 segment, including individual, small group, large group, self-insured,
15696 student and Medicare Advantage markets; and

15697 (4) Any other factors the [commissioner] secretary deems relevant to
15698 providing context on such data, which shall include, but not be limited
15699 to, the following factors: (A) The impact of the rate of inflation and rate
15700 of medical inflation; (B) impacts, if any, on access to care; and (C)
15701 responses to public health crises or similar emergencies.

15702 (c) Not later than March 31, 2029, and annually thereafter, the
15703 secretary shall prepare and post on the office's Internet web site a report
15704 concerning each hospital's payment growth compared to the hospital
15705 payment growth benchmark in applicable markets, as determined by

15706 the secretary, using the hospital payment growth methodology for
15707 inpatient and outpatient services.

15708 [(c)] (d) The [commissioner] secretary shall annually submit a request
15709 to the federal Centers for Medicare and Medicaid Services for the
15710 unadjusted total medical expenses of Connecticut residents.

15711 [(d)] (e) Not later than August [15, 2023, and] fifteenth annually,
15712 [thereafter,] each payer or provider entity shall report to the
15713 [commissioner] secretary, in a form and manner prescribed by the
15714 [commissioner] secretary, for the preceding year, and for prior years if
15715 the [commissioner] secretary so requests based on material changes to
15716 data previously submitted, on the health care quality benchmarks
15717 adopted pursuant to section 19a-754g.

15718 [(e)] (f) Not later than March [31, 2024, and] thirty-first annually,
15719 [thereafter, the commissioner] the secretary shall prepare and post on
15720 the office's Internet web site, a report concerning health care quality
15721 benchmarks reported by payers and provider entities pursuant to
15722 subsection (d) of this section.

15723 [(f)] (g) The [commissioner] secretary may enter into such contractual
15724 agreements as may be necessary to carry out the purposes of this section,
15725 including, but not limited to, contractual agreements with actuarial,
15726 economic and other experts and consultants.

15727 (h) Not later than July 1, 2028, the secretary shall establish and
15728 coordinate a process by which payers and provider entities may review
15729 data submitted and provide information and feedback that may
15730 improve the accuracy of the data prior to release of the report required
15731 by subsection (b) of this section.

15732 Sec. 367. Section 19a-754i of the general statutes is repealed and the
15733 following is substituted in lieu thereof (*Effective July 1, 2026*):

15734 (a) (1) For each calendar year, beginning on January 1, 2023, the
15735 [commissioner] secretary shall, if the payer or provider entity subject to

15736 the cost growth benchmark, quality benchmarking or primary care
15737 spending target [so] requests [,] a meeting, meet with such payer or
15738 provider entity to review and validate the total medical expenses data
15739 collected pursuant to section 19a-754h for such payer or provider entity.
15740 The [commissioner] secretary shall review information provided by the
15741 payer or provider entity and, if deemed necessary, amend findings for
15742 such payer or provider prior to the identification of payer or provider
15743 entities that exceeded the health care cost growth benchmark or failed
15744 to meet the primary care spending target for the performance year as set
15745 forth in section 19a-754h. Not later than July 1, 2028, in assessing
15746 compliance with the health care cost growth benchmark and
15747 determining whether to identify a payer or provider entity as exceeding
15748 such benchmark, the secretary shall use the revised methodology
15749 adopted pursuant to subdivision (2) of subsection (c) of section 19a-
15750 754g, and shall not identify any payer or provider entity as exceeding
15751 such benchmark based solely on commercial payment growth, or on
15752 commercial trends viewed in isolation. In assessing compliance with the
15753 hospital payment growth benchmark and in determining whether to
15754 identify a hospital as exceeding such benchmark, the secretary shall use
15755 the hospital payment growth methodology, including consideration of
15756 the factors set forth in subdivision (2) of this subsection, and shall not
15757 identify any hospital as exceeding the hospital payment growth
15758 benchmark based solely on commercial payment growth, or on
15759 commercial trends viewed in isolation. Such assessment shall
15760 specifically consider unique circumstances applicable to pediatric
15761 providers. The [commissioner] secretary shall identify, not later than
15762 May first of such calendar year, each payer or provider entity that
15763 exceeded the health care cost growth benchmark or failed to meet the
15764 primary care spending target or quality benchmarks for the
15765 performance year.

15766 (2) Not later than July 1, 2028, the following factors shall, to the extent
15767 feasible and practicable, be considered in assessing compliance with the
15768 hospital payment growth benchmark:

15769 (A) Changes in patient acuity, clinical complexity, case mix, service
15770 intensity, severity of illness, social risk factors and shifts in services
15771 provided;

15772 (B) Regional labor market conditions, workforce shortages,
15773 inflationary pressures, pharmaceutical and medical supply costs, capital
15774 expenditures, governmental mandates and changes in federal or state
15775 law, regulation or reimbursement policy materially affecting hospital
15776 costs or payments;

15777 (C) Services, payment changes, utilization changes or cost increases
15778 attributable to public health emergencies, new technologies, new service
15779 lines, changes in coding guidance, payer claims adjudication practices,
15780 including downcoding, downgrading, bundling, denials, payment edits
15781 and other payer coding or reimbursement policies, changes in payer
15782 mix, supplemental or directed payments, graduate medical education
15783 payments, disproportionate share hospital payments, uncompensated
15784 care or other factors determined by the secretary to materially distort
15785 year-to-year comparisons; and

15786 (D) Payment growth separately and in the aggregate across
15787 governmental and nongovernmental payers and the extent to which
15788 governmental payer payment growth lags hospital input cost growth or
15789 contributes to nongovernmental payment growth.

15790 [(2)] (3) For each calendar year beginning on or after January 1, 2024,
15791 the [commissioner] secretary shall, if the payer or provider entity subject
15792 to the health care quality benchmarks for the performance year [so]
15793 requests [,] a meeting, meet with such payer or provider entity to review
15794 and validate the quality data collected pursuant to section 19a-754h for
15795 such payer or provider entity. The [commissioner] secretary shall
15796 review information provided by the payer or provider entity and, if
15797 deemed necessary, amend findings for such payer or provider prior to
15798 the identification of payer or provider entities that exceeded the health
15799 care quality benchmark as set forth in section 19a-754h. The
15800 [commissioner] secretary shall identify, not later than May first of such

15801 calendar year, each payer or provider entity that exceeded the health
15802 care quality benchmark for the performance year.

15803 [(3)] (4) Not later than thirty days after the [commissioner] secretary
15804 identifies each payer or provider entity pursuant to subdivisions (1) and
15805 (2) of this subsection, the [commissioner] secretary shall send a notice to
15806 each such payer or provider entity. Such notice shall be in a form and
15807 manner prescribed by the [commissioner] secretary, and shall disclose
15808 to each such payer or provider entity:

15809 (A) That the [commissioner] secretary has identified such payer or
15810 provider entity pursuant to subdivision [(1) or] (2) or (3) of this
15811 subsection; and

15812 (B) The factual basis for the [commissioner's] secretary's
15813 identification of such payer or provider entity pursuant to subdivision
15814 [(1) or] (2) or (3) of this subsection.

15815 (b) (1) For each calendar year beginning on and after January 1, 2023,
15816 if the [commissioner] secretary determines that the annual percentage
15817 change in total health care expenditures for the performance year
15818 exceeded the health care cost growth benchmark for such year, the
15819 [commissioner] secretary shall identify, not later than May first of such
15820 calendar year, any other entity that significantly contributed to
15821 exceeding such benchmark. Each identification [shall] may be based on:

15822 (A) The report prepared by the [commissioner] secretary pursuant to
15823 subsection (b) of section 19a-754h for such calendar year;

15824 (B) The report filed pursuant to section 38a-479ppp for such calendar
15825 year;

15826 (C) The information and data reported to the office pursuant to
15827 subsection (d) of section 19a-754b for such calendar year;

15828 (D) Information obtained from the all-payer claims database;
15829 [established under section 19a-755a;] and

15830 (E) Any other information that the [commissioner] secretary, in the
15831 [commissioner's] secretary's discretion, deems relevant for the purposes
15832 of this section.

15833 (2) The [commissioner] secretary shall account for costs, net of rebates
15834 and discounts, when identifying other entities pursuant to this section.

15835 (c) The secretary shall provide notice to all payers, provider entities,
15836 other entities and hospitals that have been identified as exceeding the
15837 health care cost growth benchmark or hospital benchmark, as
15838 applicable, for any given year. Beginning with the performance of a
15839 provider entity or hospital in calendar year 2029, unless otherwise set
15840 forth in specific elements of an approval or agreement with the state,
15841 such as a certificate of need approval, the secretary may, beginning in
15842 the calendar year in which 2029 performance is assessed, require any
15843 provider entity that is identified as exceeding the health care cost
15844 growth benchmark, or any hospital that is identified as exceeding the
15845 hospital payment growth benchmark, to file a cost growth benchmark
15846 plan with the secretary, in a form and manner prescribed by the
15847 secretary. The secretary shall provide written notice to such provider
15848 entity or hospital, including supporting data, that such provider entity
15849 or hospital is required to file a cost growth benchmark plan. Not later
15850 than forty-five days after receipt of such written notice, such provider
15851 entity or hospital shall:

15852 (1) File a complete cost growth benchmark plan with the secretary;

15853 (2) File an application to waive or extend the requirement to file a cost
15854 growth benchmark plan; or

15855 (3) File information based on the supporting data provided by the
15856 secretary to dispute the finding that the provider entity or hospital
15857 exceeded the cost growth benchmark in the given year, in a form and
15858 manner prescribed by the secretary.

15859 (d) The provider entity or hospital may file any documentation or
15860 supporting evidence with the secretary to support the provider entity's

15861 or hospital's application to waive or extend the requirement to file a cost
15862 growth benchmark plan. The secretary shall require the provider entity
15863 or hospital to submit any other relevant information the secretary deems
15864 necessary in considering the waiver or extension application, provided
15865 such information, except propriety information or information subject
15866 to state or federal confidentiality requirements, shall be made public at
15867 the discretion of the secretary.

15868 (e) The secretary may (1) deny the dispute of the findings that the
15869 provider entity or hospital has exceeded the cost growth benchmark or
15870 hospital payment growth benchmark, (2) accept the provider entity's or
15871 hospital's data and justification that the provider entity or hospital has
15872 not exceeded the relevant growth benchmark for such year, (3) waive
15873 the requirement for a provider entity or hospital to file a cost growth
15874 benchmark plan, or (4) delay the requirement for a provider entity or
15875 hospital to file a cost growth benchmark plan in response to a waiver or
15876 extension request filed under subsection (c) of this section in light of all
15877 information received from the provider entity or hospital, based on a
15878 consideration of the following factors:

15879 (A) The costs, price and utilization trends of the provider entity or
15880 hospital over time, and any demonstrated improvement to reduce
15881 health status total medical expenses;

15882 (B) Any ongoing strategies or investments that the provider entity or
15883 hospital is implementing to improve future long-term efficiency and
15884 reduce cost growth;

15885 (C) Whether the factors that led to increased costs for the provider
15886 entity or hospital can reasonably be considered to be unanticipated and
15887 outside of the control of the provider entity or hospital. Such factors may
15888 include, but need not be limited to, age and other health-status-adjusted
15889 factors and other cost inputs such as pharmaceutical expenses and
15890 medical device expenses, or any catastrophic event, whether manmade
15891 or natural;

- 15892 (D) The overall financial condition of the provider entity or hospital;
- 15893 (E) The annual growth in the inpatient hospital market basket
15894 published by the Centers for Medicare and Medicaid Services, or any
15895 successor hospital input price index designated by the secretary, for
15896 such year;
- 15897 (F) The annual growth in the Employment Cost Index for total
15898 compensation for private industry workers in the New England Census
15899 Region published by the United States Bureau of Labor Statistics, or any
15900 successor regional labor cost index designated by the secretary, for such
15901 year;
- 15902 (G) The performance across all markets in the aggregate; and
- 15903 (H) The factors identified in subdivision (2) of subsection (a) of
15904 section 19a-754i and any other factors the secretary considers relevant.
- 15905 (f) If the secretary declines to waive or extend the requirement for the
15906 provider entity or hospital to file a cost growth benchmark plan, the
15907 secretary shall provide written notice to the provider entity or hospital
15908 that its application for a waiver or extension was denied and the
15909 provider entity or hospital shall file a cost growth benchmark plan.
- 15910 (g) A provider entity or hospital shall file a cost growth benchmark
15911 plan: (1) Not later than forty-five days after receipt of a notice under
15912 subsection (c) of this section; (2) if the provider entity or hospital has
15913 requested a waiver or extension, not later than forty-five days after
15914 receipt of a notice that such waiver or extension has been denied; or (3)
15915 if the provider entity or hospital is granted an extension, on the date
15916 given on such extension. The provider entity or hospital shall generate
15917 the cost growth benchmark plan that shall identify the causes of the
15918 provider entity's or hospital's cost growth and include, but need not be
15919 limited to, specific strategies, adjustments and action steps the provider
15920 entity or hospital proposes to implement to improve cost performance.
15921 The cost growth benchmark plan shall include specific identifiable and
15922 measurable expected outcomes and a timetable for implementation that

15923 shall not exceed eighteen months.

15924 (h) The secretary shall approve any cost growth benchmark plan that
15925 the secretary determines is reasonably likely to address the underlying
15926 cause of the provider entity's or hospital's cost growth and has
15927 reasonable expectations for successful implementation.

15928 (i) If the secretary determines that the cost growth benchmark plan is
15929 unacceptable or incomplete, the secretary may provide consultation on
15930 the criteria that have not been met and may allow an additional time
15931 period, up to thirty calendar days, for resubmission, provided all
15932 aspects of the cost growth benchmark plan shall be proposed by the
15933 provider entity or hospital and the secretary shall not require specific
15934 elements for approval.

15935 (j) Upon approval of the cost growth benchmark plan, the secretary
15936 shall notify the provider entity or hospital to begin immediate
15937 implementation of the cost growth benchmark plan. The secretary shall
15938 provide public notice on the office's Internet web site stating that the
15939 provider entity or hospital is implementing a cost growth benchmark
15940 plan. All provider entities and hospitals implementing an approved cost
15941 growth benchmark plan may be subject to additional reasonable
15942 reporting requirements and compliance monitoring, as determined by
15943 the secretary.

15944 (k) Each provider entity and hospital shall, in good faith, work to
15945 implement the cost growth benchmark plan. At any point during the
15946 implementation of the cost growth benchmark plan, the provider entity
15947 or hospital may file one or more amendments to the cost growth
15948 benchmark plan, subject to approval of the secretary.

15949 (l) At the conclusion of the timetable established in the cost growth
15950 benchmark plan, the provider entity or hospital shall report to the
15951 secretary regarding the outcome of the cost growth benchmark plan. If
15952 the cost growth benchmark plan was found to be unsuccessful, the
15953 secretary shall (1) extend the implementation timetable of the existing

15954 cost growth benchmark plan; (2) approve any amendment to the cost
15955 growth benchmark plan as proposed by the provider entity or hospital;
15956 (3) require the provider entity or hospital to submit a new cost growth
15957 benchmark plan; (4) waive or delay the requirement to file any
15958 additional cost growth benchmark plans; or (5) implement the financial
15959 penalty under subsection (n) of this section.

15960 (m) Upon the successful completion of the cost growth benchmark
15961 plan, the identity of the provider entity or hospital shall be removed
15962 from the office's Internet web site.

15963 (n) If the secretary determines that a provider entity or hospital has
15964 (1) wilfully neglected to file a cost growth benchmark plan with the
15965 secretary not later than forty-five days after receipt of the notice
15966 required under subsection (c) of this section, (2) failed to file an
15967 acceptable cost growth benchmark plan in good faith with the secretary,
15968 (3) failed to implement the cost growth benchmark plan in good faith,
15969 or (4) knowingly failed to provide information required by this section
15970 to the secretary or knowingly falsified such information, the secretary
15971 may require the provider entity or hospital to submit for review a one-
15972 time community investment project with a focus on addressing
15973 population health to the Commissioner of Social Services. In the case of
15974 a hospital, such project shall be informed by the most recently
15975 completed community health needs assessment and have a focus on
15976 addressing population health. The value of the project shall be up to one
15977 hundred thousand dollars for a small hospital with fewer than one
15978 hundred eighty licensed beds, up to two hundred thousand dollars for
15979 a midsize hospital with one hundred eighty or more licensed beds and
15980 fewer than five hundred licensed beds, and up to four hundred
15981 thousand dollars for a large hospital with five hundred or more licensed
15982 beds. The secretary shall consider waiving the submission of a one-time
15983 community investment project by financially distressed provider
15984 entities or hospitals. For purposes of this subsection, "financially
15985 distressed provider entity or hospital" means a provider entity or
15986 hospital that has an operating margin of less than one per cent.

15987 Sec. 368. Section 19a-754j of the general statutes is repealed and the
15988 following is substituted in lieu thereof (*Effective July 1, 2026*):

15989 (a) (1) Not later than June [30, 2023, and] thirtieth annually,
15990 [thereafter, the commissioner] the secretary shall hold an informational
15991 public hearing to compare the growth in total health care expenditures
15992 in the performance year to the health care cost growth benchmark
15993 established pursuant to section 19a-754g for such year. Such hearing
15994 shall involve an examination of:

15995 (A) The report most recently prepared by the [commissioner]
15996 secretary pursuant to subsection (b) of section 19a-754h;

15997 (B) The expenditures of provider entities and payers, including, but
15998 not limited to, health care cost trends, primary care spending as a
15999 percentage of total medical expenses and the factors contributing to
16000 such costs and expenditures; and

16001 (C) Any other matters that the [commissioner] secretary, in the
16002 [commissioner's] secretary's discretion, deems relevant for the purposes
16003 of this section.

16004 (2) The [commissioner] secretary may require any payer or provider
16005 entity that, for the performance year, is found to be a significant
16006 contributor to health care cost growth in the state or has failed to meet
16007 the primary care spending target, to participate in such hearing. Each
16008 such payer or provider entity that is required to participate in such
16009 hearing shall provide testimony on issues identified by the
16010 [commissioner] secretary and provide additional information on actions
16011 taken to reduce such payer's or entity's contribution to future state-wide
16012 health care costs and expenditures or to increase such payer's or
16013 provider entity's primary care spending as a percentage of total medical
16014 expenses.

16015 (3) The [commissioner] secretary may require that any other entity
16016 that is found to be a significant contributor to health care cost growth in
16017 this state during the performance year participate in such hearing. Any

16018 other entity that is required to participate in such hearing shall provide
16019 testimony on issues identified by the [commissioner] secretary and
16020 provide additional information on actions taken to reduce such other
16021 entity's contribution to future state-wide health care costs. If such other
16022 entity is a drug manufacturer, and the [commissioner] secretary requires
16023 that such drug manufacturer participate in such hearing with respect to
16024 a specific drug or class of drugs, such hearing may, to the extent
16025 possible, include representatives from at least one brand-name
16026 manufacturer, one generic manufacturer and one innovator company
16027 that is less than ten years old.

16028 (4) Not later than [October 15, 2023, and] January fifteenth annually,
16029 [thereafter, the commissioner] the secretary shall prepare and submit a
16030 report, in accordance with section 11-4a, to the joint standing
16031 committees of the General Assembly having cognizance of matters
16032 relating to insurance and public health. Such report shall be based on
16033 the [commissioner's] secretary's analysis of the information submitted
16034 during the most recent informational public hearing conducted
16035 pursuant to this subsection and any other information that the
16036 [commissioner] secretary, in the [commissioner's] secretary's discretion,
16037 deems relevant for the purposes of this section, and shall:

16038 (A) Describe health care spending trends in this state, including, but
16039 not limited to, trends in primary care spending as a percentage of total
16040 medical expense, and the factors underlying such trends;

16041 (B) Include the findings from the report prepared pursuant to
16042 subsection (b) of section 19a-754h; and

16043 [(C) Describe a plan for monitoring any unintended adverse
16044 consequences resulting from the adoption of cost growth benchmarks
16045 and primary care spending targets and the results of any findings from
16046 the implementation of such plan; and]

16047 [(D)] (C) Disclose the [commissioner's] secretary's recommendations,
16048 if any, concerning strategies to increase the efficiency of the state's health

16049 care system, including, but not limited to, any recommended legislation
16050 concerning the state's health care system.

16051 (b) (1) Not later than June [30, 2024, and] thirtieth annually,
16052 [thereafter, the commissioner] the secretary shall hold an informational
16053 public hearing to compare the performance of payers and provider
16054 entities in the performance year to the quality benchmarks established
16055 for such year pursuant to section 19a-754g. Such hearing shall include
16056 an examination of:

16057 (A) The report most recently prepared by the [commissioner]
16058 secretary pursuant to subsection (e) of section 19a-754h; and

16059 (B) Any other matters that the [commissioner] secretary, in the
16060 [commissioner's] secretary's discretion, deems relevant for the purposes
16061 of this section.

16062 (2) The [commissioner] secretary may require any payer or provider
16063 entity that failed to meet any health care quality benchmarks in this state
16064 during the performance year to participate in such hearing. Each such
16065 payer or provider entity that is required to participate in such hearing
16066 shall provide testimony on issues identified by the [commissioner]
16067 secretary and provide additional information on actions taken to
16068 improve such payer's or provider entity's quality benchmark
16069 performance.

16070 (3) Not later than [October 15, 2024, and] January fifteenth annually,
16071 [thereafter, the commissioner] the secretary shall prepare and submit a
16072 report, in accordance with section 11-4a, to the joint standing
16073 committees of the General Assembly having cognizance of matters
16074 relating to insurance and public health. Such report shall be based on
16075 the [commissioner's] secretary's analysis of the information submitted
16076 during the most recent informational public hearing conducted
16077 pursuant to this subsection and any other information that the
16078 [commissioner] secretary, in the [commissioner's] secretary's discretion,
16079 deems relevant for the purposes of this section, and shall:

16080 (A) Describe health care quality trends in this state and the factors
16081 underlying such trends;

16082 (B) Include the findings from the report prepared pursuant to
16083 subsection (e) of section 19a-754h; and

16084 (C) Disclose the [commissioner's] secretary's recommendations, if
16085 any, concerning strategies to improve the quality of the state's health
16086 care system, including, but not limited to, any recommended legislation
16087 concerning the state's health care system.

16088 (c) Not later than March first annually, the secretary shall notify any
16089 payer, provider entity, hospital or other entity that exceeded the cost
16090 growth benchmark, primary care spending target, quality benchmarks
16091 or hospital payment growth benchmark, as applicable. Upon the request
16092 of such payer, provider entity, hospital or other entity, including a drug
16093 manufacturer identified as a significant contributor, the secretary shall
16094 make available to such payer, provider entity, hospital or other entity
16095 (1) the all-payer claims database data sets, analytic files and
16096 methodology used to determine such benchmarks or targets, as
16097 applicable, provided the payer, provider entity, hospital or other entity
16098 receives approval from the all-payer claims database release committee,
16099 (2) payment of any required fees, and (3) an executed data release
16100 agreement for raw data to the extent permitted by law and sufficient to
16101 enable such entity to assess, verify or challenge the secretary's
16102 determination. The all payer claims database release committee shall
16103 expedite any release requests made by an entity under this section. Not
16104 later than January 1, 2027, the secretary shall establish an expedited all-
16105 payer claims database data request process for payers, provider entities,
16106 hospitals and other entities identified as exceeding the cost growth
16107 benchmark, primary care spending target or hospital payment growth
16108 benchmark. Such process shall require the chairperson of such release
16109 committee, or the chairperson's designee, to meet with the secretary and
16110 approve or disapprove an application from an identified entity not later
16111 than ten days after such meeting. Not later than five days after any
16112 approval of an application, the secretary shall send a data use agreement

16113 to the identified entity. Not later than ten days after receiving an
16114 approved data use agreement from such identified entity, the secretary
16115 shall provide the data to such identified entity. Identified entities shall
16116 be exempt from payment of a data release fee. The secretary shall
16117 consider any timely challenge submitted by an identified entity. In
16118 making and publicly presenting a cost-driver assessment, the secretary
16119 shall use the revised methodology adopted pursuant to subdivision (1)
16120 of subsection (d) of section 19a-754g and examine the contribution of
16121 material changes in clinical risk and payment methodologies.

16122 Sec. 369. Section 19a-754k of the general statutes is repealed and the
16123 following is substituted in lieu thereof (*Effective July 1, 2026*):

16124 The [Commissioner of Health Strategy] Secretary of the Office of
16125 Policy and Management may adopt regulations, in accordance with
16126 chapter 54, to implement the provisions of [section 19a-754a and]
16127 sections 19a-754f to 19a-754j, inclusive.

16128 Sec. 370. (*Effective July 1, 2026*) (a) There is established a Medicaid
16129 Value-Based Payment Working Group for the purpose of
16130 collaboratively designing, evaluating readiness for, and recommending
16131 scalable, voluntary, value-based payment models for the Medicaid
16132 population that advance quality, cost efficiency, access, health system
16133 sustainability and health equity across the health care delivery system.

16134 (b) The working group shall include members appointed by the
16135 Commissioner of Social Services, including representatives of hospitals,
16136 physicians, federally qualified health centers, behavioral health care
16137 providers, health carriers or managed care organizations participating
16138 in the Medicaid program, consumer advocates and any other
16139 stakeholders deemed appropriate by the commissioner.

16140 (c) The working group shall evaluate and develop recommendations
16141 concerning:

16142 (1) Voluntary value-based payment arrangements for Medicaid
16143 providers, including, but not limited to, shared savings models,

16144 population-based payment models, quality incentive arrangements and
16145 other alternative payment methodologies;

16146 (2) Strategies to improve quality outcomes, promote access to care
16147 and address health disparities within the Medicaid population;

16148 (3) The operational, technological, workforce and infrastructure
16149 investments necessary to support participation in value-based payment
16150 arrangements, including consideration of up-front funding, technical
16151 assistance, data-sharing capabilities and administrative simplification;
16152 and

16153 (4) Opportunities to align Medicaid value-based payment initiatives
16154 with state and federal delivery system reform efforts.

16155 (d) Any value-based payment model developed pursuant to this
16156 section shall be voluntary for participating providers.

16157 (e) Not later than January 1, 2028, the working group shall submit
16158 recommendations, including opportunities for pilot implementation, to
16159 the joint standing committees of the General Assembly having
16160 cognizance of matters relating to public health and human services.

16161 Sec. 371. Section 54 of house bill 5003, as amended by House
16162 Amendment Schedule "A", is repealed. *(Effective from passage)*

16163 Sec. 372. Subsection (d) of section 31-53 of the 2026 supplement to the
16164 general statutes is repealed and the following is substituted in lieu
16165 thereof *(Effective January 1, 2027)*:

16166 (d) For the purpose of predetermining the prevailing rate of wage on
16167 an hourly basis and the amount of payment, contributions and member
16168 benefits paid or payable on behalf of each person to any employee
16169 welfare fund, as defined in subsection (i) of this section, in each town
16170 where such contract is to be performed, the Labor Commissioner shall
16171 adopt the rate of wages on an hourly basis in accordance with the
16172 provisions of this section and section 31-76c, and the amount, at the

16173 journeyman rate, of payment, contributions and member benefits,
16174 including health, pension, annuity and apprenticeship funds, as
16175 recognized by the United States Department of Labor and the Labor
16176 Commissioner paid or payable on behalf of each person to any
16177 employee welfare fund, as defined in subsection (i) of this section, as
16178 established in the collective bargaining agreements or understandings
16179 between employers or employer associations and bona fide labor
16180 organizations for the same work in the same trade or occupation in the
16181 town in which the applicable public works project, as defined in section
16182 31-56a, is being constructed. For each trade or occupation for which
16183 more than one collective bargaining agreement is in effect for the town
16184 in which such project is being constructed, the collective bargaining
16185 agreement of historical jurisdiction shall prevail. For each trade or
16186 occupation for which there is no collective bargaining agreement in
16187 effect for the town in which the public works project is being
16188 constructed, the Labor Commissioner shall adopt and use such
16189 appropriate and applicable prevailing wage rate determinations as have
16190 been made by the Secretary of Labor of the United States under the
16191 provisions of the Davis-Bacon Act, as amended.

16192 Sec. 373. Section 31-53 of the 2026 supplement to the general statutes
16193 is amended by adding subsection (j) as follows (*Effective October 1, 2026*):

16194 (NEW) (j) (1) Each employer subject to the provisions of this section,
16195 section 31-53c, subsection (f) of section 31-53d or section 31-54 shall
16196 complete a daily record of each person performing the work of any
16197 mechanic, laborer or worker at a work site. Such daily record shall
16198 include (A) the name and location of the project, (B) the current date, (C)
16199 the printed name or signature and, where applicable, the trade license
16200 number of each person performing the work of a mechanic, laborer or
16201 worker, and (D) the arrival and departure time to the work site of each
16202 person performing the work of a mechanic, laborer or worker.

16203 (2) An employer shall (A) keep, maintain and preserve such daily
16204 records, and (B) submit such daily records weekly to the contracting
16205 agency or the Department of Economic and Community Development,

16206 pursuant to section 31-53c, or to the developer of a covered project, as
16207 defined in section 31-53d, as applicable, by mail, electronic mail or other
16208 method accepted by such agency, the Department of Economic and
16209 Community Development or such developer.

16210 (3) Notwithstanding the provisions of section 1-210, the daily records
16211 required pursuant to this subsection shall be considered a public record
16212 and every person shall have the right to inspect and copy such daily log
16213 or sign-in sheet in accordance with the provisions of section 1-212.

16214 (4) Failure to file the daily records required pursuant to this
16215 subsection is a class C misdemeanor for which the employer may be
16216 fined up to five hundred dollars, imprisoned for up to three months, or
16217 both.

16218 Sec. 374. (*Effective from passage*) The Labor Commissioner shall study
16219 the rights of workers under economic pressure in this contentious day
16220 and age. Not later than January 1, 2028, the commissioner shall submit
16221 a report on the findings of the study and submit recommendations for
16222 legislation, in accordance with the provisions of section 11-4a of the
16223 general statutes, to the joint standing committee of the General
16224 Assembly having cognizance of matters relating to labor and public
16225 employees.

16226 Sec. 375. Section 10-512a of the 2026 supplement to the general
16227 statutes is repealed and the following is substituted in lieu thereof
16228 (*Effective July 1, 2026*):

16229 (a) For the fiscal year ending June 30, 2025, based on an estimate
16230 prepared by the Secretary of the Office of Policy and Management
16231 between June 15, 2025, to June 30, 2025, inclusive, of the amount of
16232 current unappropriated surplus for [such] said fiscal year, the amount
16233 of such estimated surplus, if any, up to a maximum of three hundred
16234 million dollars shall be transferred on or before June 30, 2025, by the
16235 Treasurer from the General Fund to the Early Childhood Education
16236 Endowment established under section 10-512.

16237 (b) For the fiscal year ending June 30, 2026, and each fiscal year
16238 thereafter, based on such estimated amount of current unappropriated
16239 surplus described in subsection (a) of this section, if any, the entire
16240 amount of such estimated surplus for each such fiscal year shall be
16241 transferred by the Treasurer from the General Fund to the Early
16242 Childhood Education Endowment on or before June thirtieth of such
16243 fiscal year, except that if the amount in the Budget Reserve Fund is
16244 estimated by the secretary to be less than eighteen per cent of the
16245 estimated net General Fund appropriations for the ensuing fiscal year,
16246 the amount of such transfer shall be reduced by the amount necessary
16247 to increase the amount in the Budget Reserve Fund to eighteen per cent
16248 of the estimated net General Fund appropriations for the ensuing fiscal
16249 year, or by the maximum amount of [the projected] such estimated
16250 surplus, whichever is less, and an amount equal to such reduction shall
16251 be transferred to the Budget Reserve Fund.

16252 (c) If the Comptroller determines that a deficit [will exist] exists for
16253 the preceding fiscal year, before the appropriation required by
16254 subdivision (1) of subsection (f) of section 4-30a is made, the amount
16255 necessary to fund such deficit shall be [deducted from the amount
16256 transferred in such preceding fiscal year pursuant to this section]
16257 transferred from the Early Childhood Education Endowment and
16258 credited to the General Fund effective June thirtieth of such preceding
16259 fiscal year, provided the amount of such transfer shall not exceed the
16260 amount transferred in such preceding fiscal year pursuant to subsection
16261 (a) or (b) of this section, as applicable. If the amount necessary to fund
16262 such deficit exceeds the amount transferred in such preceding fiscal
16263 year, no additional funds from the body of the endowment shall be
16264 [used] transferred to fund such deficit.

16265 Sec. 376. (*Effective from passage*) Notwithstanding the provisions of
16266 section 10-15 of the general statutes requiring public schools be
16267 maintained in each town for at least one hundred eighty days of actual
16268 school sessions during each year, the local board of education for the
16269 town of Waterbury may reduce the number of actual school sessions to

16270 one hundred seventy-six days for the school year commencing July 1,
16271 2025.

16272 Sec. 377. (*Effective July 1, 2026*) The sum of \$225,000 of the amount
16273 appropriated in section 1 of public act 25-168, as amended by section 1
16274 of this act, to the Department of Education, for Charter Schools, for the
16275 fiscal year ending June 30, 2027, shall be made available in said fiscal
16276 year and expended as follows: (1) \$75,000 of such amount shall be used
16277 to provide a planning grant for the OLAM Public Charter School in
16278 Stamford; (2) \$75,000 of such amount shall be used to provide a planning
16279 grant for the PROUD Academy in Ansonia; and (3) \$75,000 of such
16280 amount shall be used to provide a planning grant for the Taino CoLAB
16281 Academy in Waterbury.

16282 Sec. 378. Subsection (i) of section 10-217a of the 2026 supplement to
16283 the general statutes is repealed and the following is substituted in lieu
16284 thereof (*Effective July 1, 2026*):

16285 (i) Notwithstanding the provisions of this section, for the fiscal years
16286 ending June 30, 2008, to June 30, [2026] 2027, inclusive, the amount of
16287 the grants payable to local or regional boards of education in accordance
16288 with this section shall be reduced proportionately if the total of such
16289 grants in such year exceeds the amount appropriated for purposes of
16290 this section.

16291 Sec. 379. Section 224 of public act 25-174 is repealed and the following
16292 is substituted in lieu thereof (*Effective July 1, 2026*):

16293 For the fiscal year ending June 30, 2027, [twelve million] six million
16294 two hundred fifty thousand dollars of the Magnet Schools
16295 appropriation provided to the Department of Education for said fiscal
16296 year shall be distributed proportionally based on the share of students
16297 enrolled in interdistrict magnet school programs operated by entities
16298 that are (1) not a local or regional board of education, (2) the board of
16299 governors for an independent institution of higher education, as defined
16300 in subsection (a) of section 10a-173 of the general statutes, or the

16301 equivalent of such a board, on behalf of the independent institution of
16302 higher education, or (3) any other third-party, not-for-profit corporation
16303 approved by the Commissioner of Education.

16304 Sec. 380. Subsection (d) of section 10a-173 of the 2026 supplement to
16305 the general statutes, as amended by section 263 of public act 25-168, is
16306 repealed and the following is substituted in lieu thereof (*Effective July 1,*
16307 *2026*):

16308 (d) (1) The Roberta B. Willis Scholarship need-based grant shall be
16309 available to any eligible student at any public or independent institution
16310 of higher education. The amount of the annual funds to be allocated to
16311 each institution of higher education shall be determined by its actual
16312 full-time equivalent enrollment of eligible students with a student aid
16313 index during the fall semester of the fiscal year two years prior to the
16314 grant year of an amount not greater than two hundred per cent of the
16315 maximum student aid index eligible for a federal Pell grant award for
16316 the academic year one year prior to the grant year. Not later than July
16317 first, annually, each institution of higher education shall report such
16318 enrollment data to the Office of Higher Education. [Not later than
16319 October first, annually] For the annual allocation of funds for the need-
16320 based grant, the Office of Higher Education: [shall (1)]

16321 (A) Shall, not later than October first, annually, (i) publish such
16322 enrollment data on its Internet web site, [(2)] (ii) notify each institution
16323 of higher education of the proportion of the annual funds that such
16324 institution of higher education will receive for the following fiscal year,
16325 and [(3)] (iii) publish the proportions for each institution of higher
16326 education on its Internet web site. [Not]

16327 (B) Shall, not later than November first, annually, [the Office of
16328 Higher Education shall] notify each institution of higher education of
16329 the estimated amount of funds allocated to such institution for awards
16330 to eligible students during the following fiscal year.

16331 (C) May, on or after January first, annually, subject to the approval of

16332 the Secretary of the Office of Policy and Management, enter into a
16333 contractual agreement with each institution of higher education to
16334 commit the amount of funds allocated to such institution for awards to
16335 eligible students during the following fiscal year, provided the amount
16336 of such committed funds, in aggregate, does not exceed the need-based
16337 grant portion of the amount appropriated for the Roberta B. Willis
16338 Scholarship program pursuant to subsection (b) of this section for (i) the
16339 current fiscal year if no state budget has been adopted for the following
16340 fiscal year, or (ii) for the following fiscal year upon adoption of a state
16341 budget for such fiscal year.

16342 (2) Participating institutions of higher education shall make awards
16343 (A) to eligible full-time students in an amount up to four thousand five
16344 hundred dollars, and (B) to eligible part-time students in an amount that
16345 is prorated according to the number of credits each student will earn for
16346 completing the course or courses in which such student is enrolled, such
16347 that a student enrolled in a course or courses earning (i) at least nine but
16348 less than twelve credits is eligible for up to seventy-five per cent of the
16349 maximum award, and (ii) at least six but less than nine credits is eligible
16350 for up to fifty per cent of the maximum award. Each participating
16351 institution of higher education shall expend all of the moneys received
16352 under the Roberta B. Willis Scholarship program as direct financial
16353 assistance only for eligible educational costs.

16354 Sec. 381. (NEW) (*Effective July 1, 2026*) For the fiscal year ending June
16355 30, 2027, and each fiscal year thereafter, the Department of Education
16356 shall, within available appropriations, administer a teacher
16357 apprenticeship program.

16358 Sec. 382. (NEW) (*Effective July 1, 2026*) The Office of Higher Education
16359 shall establish a program to support the establishment of new promise
16360 programs throughout the state, with a goal of establishing eight new
16361 promise programs not later than January 1, 2031, prioritizing the
16362 establishment of promise programs that serve students in alliance
16363 districts, as defined in section 10-262u of the general statutes. The office
16364 shall coordinate with municipalities and regional coalitions interested

16365 in establishing new promise programs. The office shall support each
16366 new promise program through the provision of technical assistance to
16367 start such promise program, including, but not limited to, (1) initial
16368 funding strategies, (2) stakeholder engagement, including, but not
16369 limited to, with each local or regional board of education, legislative
16370 body and local nonprofit organization and business of the municipality
16371 or region in which such new promise program is located, (3) program
16372 design based on the local environment, (4) development of evaluation
16373 metrics, and (5) sustainability planning. The office shall hire a consultant
16374 with expertise in the development and operation of promise programs
16375 to implement the provisions of this section. As used in this section,
16376 "promise program" means a scholarship program that provides a
16377 scholarship in conjunction with services and resources, including, but
16378 not limited to, mentoring, peer support networks and internships, to
16379 scholarship recipients to ensure the postsecondary academic success of
16380 such recipients.

16381 Sec. 383. (NEW) (*Effective from passage*) (a) As used in this section,
16382 "parent organization" means a nonprofit organization whose (1) mission
16383 is to serve families of children with disabilities, and (2) governing board
16384 includes (A) a majority of members who are parents of children with
16385 disabilities, (B) professionals who work in fields related to special
16386 education and early intervention, and (C) individuals with disabilities
16387 or otherwise representative of the populations such organization serves.

16388 (b) The Commissioner of Education may enter into cooperative
16389 agreements with and award grants, in an amount specified by the
16390 commissioner, to one or more parent organizations in the state to
16391 establish parent training and information centers to carry out the duties
16392 specified in subsection (c) of this section. Upon establishing such
16393 program to enter into cooperative agreements with parent
16394 organizations, the commissioner shall post in a conspicuous location on
16395 its Internet web site (1) a description of such program, including, but not
16396 limited to, the amount of grants available under such program, (2) any
16397 eligibility requirements for parent organizations to be eligible for such

16398 program, and (3) the application form for such program.

16399 (c) Each parent training and information center established pursuant
16400 to subsection (b) of this section shall:

16401 (1) Receive, review and attempt to resolve any special education
16402 complaints from students and students' families, including, but not
16403 limited to, attempts to resolve such complaints in collaboration with
16404 schools and educators;

16405 (2) Provide information to the public, agencies, legislators and others
16406 regarding the issues and concerns of students receiving special
16407 education and make recommendations for resolving such issues and
16408 concerns;

16409 (3) Provide training and information to assist parents of children with
16410 disabilities to enable such children to meet developmental, functional
16411 and academic goals, including, but not limited to, parents who are low
16412 income or have limited English proficiency; and

16413 (4) Assist parents in communicating effectively with personnel
16414 responsible for providing special education and related services to their
16415 children.

16416 (d) The Department of Education shall disseminate information
16417 about any parent training and information center established pursuant
16418 to this section by (1) posting such information in a conspicuous location
16419 on its Internet web site, (2) including such information on special
16420 education guides and information published by the department, and (3)
16421 in any other form and manner determined by the department.

16422 (e) Each parent training and information center established pursuant
16423 to this section shall submit an annual report, in accordance with the
16424 provisions of section 11-4a of the general statutes, to the joint standing
16425 committee of the General Assembly having cognizance of matters
16426 relating to education. Such report shall include, but need not be limited
16427 to, (1) the number and demographics of families served by such center,

16428 (2) the effectiveness of strategies used to reach and serve such families,
16429 including, but not limited to, families who are low income or have
16430 limited English proficiency, and (3) the number of families such center
16431 assisted in resolving special education complaints.

16432 Sec. 384. Section 10-15o of the general statutes is repealed. (*Effective*
16433 *from passage*)

16434 Sec. 385. Section 36a-25 of the general statutes is repealed and the
16435 following is substituted in lieu thereof (*Effective July 1, 2026*):

16436 (a) There is established an Office of the Student Loan Ombudsman,
16437 which shall be within the [Department of Banking] Office of Higher
16438 Education for administrative purposes only, to provide timely
16439 assistance to any student loan borrower, as defined in section 36a-846,
16440 of any student education loan, as defined in section 36a-846. The
16441 [Banking Commissioner] Governor shall appoint a Student Loan
16442 Ombudsman who shall be selected from among individuals with
16443 expertise and experience in a field concerning student loans to head the
16444 office.

16445 (b) The Office of the Student Loan Ombudsman shall:

16446 (1) Receive, review and attempt to resolve any complaints from
16447 student loan borrowers, including, but not limited to, attempts to
16448 resolve such complaints in collaboration with institutions of higher
16449 education, student loan servicers, as defined in section 36a-846, and any
16450 other participants in student loan lending, including, but not limited to,
16451 The University of Connecticut, the Board of Regents for Higher
16452 Education, the Office of Higher Education or the Connecticut Higher
16453 Education Supplemental Loan Authority;

16454 (2) Compile and analyze data on student loan borrower complaints
16455 as described in subdivision (1) of this subsection;

16456 (3) Assist student loan borrowers to understand their rights and
16457 responsibilities under the terms of student education loans;

16458 (4) Provide information to the public, agencies, legislators and others
16459 regarding the problems and concerns of student loan borrowers and
16460 make recommendations for resolving those problems and concerns;

16461 (5) Analyze and monitor the development and implementation of
16462 federal, state and local laws, regulations and policies relating to student
16463 loan borrowers and recommend any changes the Student Loan
16464 Ombudsman deems necessary;

16465 (6) Review the complete student education loan history for any
16466 student loan borrower who has provided written consent for such
16467 review;

16468 (7) Disseminate information concerning the availability of the Office
16469 of the Student Loan Ombudsman to assist student loan borrowers and
16470 potential student loan borrowers, as well as public institutions of higher
16471 education, student loan servicers and any other participant in student
16472 education loan lending, with any student loan servicing concerns; and

16473 (8) Take any other actions necessary to fulfill the duties of the Office
16474 of the Student Loan Ombudsman and the Student Loan Ombudsman as
16475 set forth in this subsection.

16476 (c) (1) [On or before October 1, 2016, the] The Student Loan
16477 Ombudsman [, in consultation with the commissioner,] shall, within
16478 available appropriations, establish and maintain a student loan
16479 borrower education course that shall include educational presentations
16480 and materials regarding student education loans. Such program shall
16481 include, but not be limited to, key loan terms, documentation
16482 requirements, monthly payment obligations, income-based repayment
16483 options, loan forgiveness and disclosure requirements.

16484 (2) [Beginning on October 1, 2024, the] The Office of the Student Loan
16485 Ombudsman shall maintain the student loan borrower education course
16486 established pursuant to subdivision (1) of this subsection.

16487 [(d) (1) On or before January 1, 2016, and annually thereafter until

16488 January 1, 2023, the Banking Commissioner shall submit a report, in
16489 accordance with the provisions of section 11-4a, to the joint standing
16490 committees of the General Assembly having cognizance of matters
16491 relating to banking and higher education. The commissioner shall
16492 report on: (A) The implementation of this section; (B) the overall
16493 effectiveness of the Student Loan Ombudsman position; and (C)
16494 additional steps that need to be taken for the Department of Banking to
16495 gain regulatory control over the licensing and enforcement of student
16496 loan servicers.]

16497 [(2)] (d) Beginning on January 1, 2024, and annually thereafter, the
16498 Student Loan Ombudsman shall submit [the] a report [required under
16499 subdivision (1) of this subsection,] in accordance with the provisions of
16500 section 11-4a, to the joint standing committees of the General Assembly
16501 having cognizance of matters relating to banking and higher education.
16502 The ombudsman shall report on: [(A)] (1) The implementation of this
16503 section; [(B)] (2) the overall effectiveness of the Office of the Student
16504 Loan Ombudsman; and [(C)] (3) additional steps that need to be taken
16505 for the Department of Banking to gain regulatory control over the
16506 licensing and enforcement of student loan servicers.

16507 (e) (1) There is established an account to be known as the "student
16508 loan ombudsman account" which shall be a separate, nonlapsing
16509 account. [within the Banking Fund.] The account shall contain the
16510 moneys described in subdivision (2) of this subsection and any other
16511 moneys required by law to be deposited in the account. Moneys in the
16512 account shall be expended by the [Banking Commissioner] Student
16513 Loan Ombudsman for the purpose of administering the provisions of
16514 this section.

16515 (2) The account established under subdivision (1) of this subsection
16516 shall contain any licensing or investigation fees collected pursuant to
16517 subsection (b) of section 36a-847.

16518 Sec. 386. (*Effective July 1, 2026*) Not later than January 1, 2027, the
16519 Student Loan Ombudsman, appointed pursuant to section 36a-25 of the

16520 general statutes, shall report, in accordance with the provisions of
16521 section 11-4a of the general statutes, to the joint standing committees of
16522 the General Assembly having cognizance of matters relating to banking,
16523 higher education and appropriations and the budgets of state agencies
16524 concerning the activities of the Office of the Student Loan Ombudsman
16525 during the calendar years 2025 and 2026.

16526 Sec. 387. (NEW) (*Effective from passage*) (a) The Commissioner of Early
16527 Childhood shall annually develop a proposed spending plan for the
16528 fiscal year for funds released from the Early Childhood Education
16529 Endowment, pursuant to section 10-512b of the general statutes. Such
16530 proposed spending plan shall be in accordance with the provisions of
16531 section 10-512c of the general statutes and include a list of the amounts
16532 and expenditures of such funds and the policy goals of the
16533 commissioner for the expenditure of such funds, which shall include,
16534 but need not be limited to, a statement of how each amount and
16535 expenditure of such funds will meet such goals.

16536 (b) The commissioner shall present such proposed spending plan to
16537 the Early Childhood Education Endowment Advisory Board,
16538 established pursuant to section 10-512g of the general statutes, at the
16539 first meeting of the board on or after July first of the fiscal year for such
16540 proposed spending plan.

16541 Sec. 388. (NEW) (*Effective July 1, 2026*) (a) A local or regional board of
16542 education may, by a majority vote of such board, submit an application
16543 to the Commissioner of Education to participate in a fiscal intervention
16544 and oversight plan in accordance with this section. Such application
16545 shall be in a form and manner prescribed by the commissioner.

16546 (b) Upon receipt of an application by a local or regional board of
16547 education submitted pursuant to subsection (a) of this section, the
16548 Commissioner of Education, in consultation with the Secretary of the
16549 Office of Policy and Management, shall conduct an initial review of such
16550 board of education's financial condition, which may include, but need
16551 not be limited to, (1) meeting with local officials, (2) assessing such

16552 board's budget deficit and the underlying causes of such deficit, and (3)
16553 assessing the financial condition of the municipality or municipalities of
16554 such board.

16555 (c) After conducting an initial review pursuant to subsection (b) of
16556 this section, the Commissioner of Education shall develop a fiscal
16557 intervention and oversight plan for such board of education, which shall
16558 (1) account for any legal mandates, orders or settlements affecting such
16559 board's costs, and (2) include, but need not be limited to, requiring such
16560 board to appear before the Municipal Accountability Review Board
16561 established pursuant to section 7-576d of the general statutes to discuss
16562 such board's financial condition and compliance with such plan.

16563 (d) The Commissioner of Education shall submit any fiscal
16564 intervention and oversight plan developed pursuant to this section to
16565 the Municipal Accountability Review Board. The Municipal
16566 Accountability Review Board shall review such plan and may
16567 recommend revisions to such plan to support the long-term financial
16568 sustainability of such board of education and the municipality or
16569 municipalities served by such board of education. Such review shall
16570 include, but need not be limited to, confirming that such plan (1) ensures
16571 accuracy in the accounting of the expenses and liabilities of such board,
16572 (2) improves financial reporting systems of such board as necessary, (3)
16573 establishes and maintains transparency in such board of education's
16574 fiscal operations, (4) requires such board of education to notify the
16575 Department of Education of any contracts to which such board is a party
16576 and exceed one hundred thousand dollars, (5) requires the application
16577 of LEAN practices and principles, and (6) includes a comprehensive
16578 school facilities and administrative optimization initiative. The
16579 Municipal Accountability Review Board may require such board of
16580 education to appear before it to discuss such board of education's
16581 financial condition and compliance with such plan.

16582 (e) The Municipal Accountability Review Board shall submit any
16583 fiscal intervention and oversight plan developed pursuant to this
16584 section and reviewed by such board, with any revisions to such plan

16585 recommended by such board, to the Secretary of the Office of Policy and
16586 Management. The secretary shall approve such plan or require the
16587 Commissioner of Education to revise such plan. After approval or
16588 revision of such plan pursuant to this subsection, the commissioner shall
16589 submit such plan to the State Board of Education for approval. Such plan
16590 shall be implemented upon the approval of the State Board of
16591 Education.

16592 (f) Nothing in this section shall be construed to limit the authority of
16593 the State Board of Education over local and regional boards of education
16594 under state or federal law.

16595 Sec. 389. Subsection (a) of section 7-576d of the general statutes is
16596 repealed and the following is substituted in lieu thereof (*Effective July 1,*
16597 *2026*):

16598 (a) There is established a Municipal Accountability Review Board,
16599 which shall be in the Office of Policy and Management for
16600 administrative purposes only and which shall be comprised of the
16601 Secretary of the Office of Policy and Management, or the secretary's
16602 designee, who shall be the chairperson of such board, the State
16603 Treasurer, or the State Treasurer's designee, who shall be the
16604 cochairperson of such board, the Commissioner of Education, or the
16605 commissioner's designee, five members appointed by the Governor, one
16606 of whom shall be a municipal finance director, one of whom shall be a
16607 municipal bond or bankruptcy attorney, one of whom shall be a town
16608 manager, one of whom shall have significant experience in representing
16609 organized labor and who shall be selected from a list of three
16610 recommendations by the American Federation of State, County and
16611 Municipal Employees and one of whom shall have significant
16612 experience as a teacher or representing a teacher's organization and who
16613 shall be selected from a list of three joint recommendations by the
16614 Connecticut Education Association and the American Federation of
16615 Teachers-Connecticut, and one member appointed by the president pro
16616 tempore of the Senate, one member appointed by the speaker of the
16617 House of Representatives, one member appointed by the minority

16618 leader of the Senate and one member appointed by the minority leader
16619 of the House of Representatives. Each member appointed by the
16620 president pro tempore of the Senate, the speaker of the House of
16621 Representatives, the minority leader of the Senate and the minority
16622 leader of the House of Representatives shall have experience in
16623 business, finance or municipal management. All appointed members
16624 shall serve for terms of six years and until a successor is appointed
16625 except that two of the five initial appointments by the Governor shall
16626 each be for a term of three years with all subsequent appointments being
16627 for a term of six years. The filling of any vacancy shall be for the
16628 remainder of the applicable member's terms. If there are two or more
16629 designated tier II, III or IV municipalities, the Governor may appoint
16630 alternates for one or more of the appointments made by the Governor
16631 pursuant to this section. Such alternates shall have the same
16632 qualifications as the member for whom they serve as an alternate and
16633 the term of each such alternate shall coincide with the term of such
16634 member. The members of the board shall serve without compensation,
16635 but shall be reimbursed for expenses incurred in performance of their
16636 duties. Expenses of the board related to its work with designated tier III
16637 or IV municipalities, including any staff, consultants and other expenses
16638 adopted by the board, may, following consultation with such
16639 municipalities, be charged to such municipalities by the board and may
16640 be paid from the proceeds of any deficit obligation or debt restructuring
16641 bonds.

16642 Sec. 390. (*Effective from passage*) (a) The sum of \$183,000,000 is
16643 appropriated to the Department of Education, for Supplemental
16644 Education, for the fiscal year ending June 30, 2026, shall be made
16645 available in said fiscal year and expended as follows:

16646 (1) \$162,200,000 of such amount shall be used to supplement the
16647 amount appropriated in section 1 of public act 25-168 to the Department
16648 of Education, for Education Equalization Grants, and shall be
16649 distributed as supplemental education aid grants by the Department of
16650 Education in accordance with the provisions of section 391 of this act

16651 and as follows:

T1912		Grant for Fiscal
T1913		Year
T1914	Town	2026
T1915	Andover	40,096
T1916	Ansonia	939,494
T1917	Ashford	69,181
T1918	Avon	173,326
T1919	Barkhamsted	29,885
T1920	Beacon Falls	253,476
T1921	Berlin	581,191
T1922	Bethany	35,291
T1923	Bethel	200,953
T1924	Bethlehem	105,234
T1925	Bloomfield	160,957
T1926	Bolton	53,664
T1927	Bozrah	23,802
T1928	Branford	75,457
T1929	Bridgeport	15,015,199
T1930	Bridgewater	4,415
T1931	Bristol	4,528,816
T1932	Brookfield	27,584
T1933	Brooklyn	139,394
T1934	Burlington	280,369
T1935	Canaan	2,515
T1936	Canterbury	80,097
T1937	Canton	81,370
T1938	Chaplin	33,043
T1939	Cheshire	849,486
T1940	Chester	125,301
T1941	Clinton	103,842
T1942	Colchester	240,804
T1943	Colebrook	8,078
T1944	Columbia	46,324
T1945	Cornwall	644
T1946	Coventry	159,058
T1947	Cromwell	520,405
T1948	Danbury	2,952,103
T1949	Darien	60,986

sSB 1		Amendment
T1950	Deep River	33,522
T1951	Derby	219,809
T1952	Durham	65,865
T1953	East Granby	255,098
T1954	East Haddam	71,119
T1955	East Hampton	139,219
T1956	East Hartford	6,938,531
T1957	East Haven	541,052
T1958	East Lyme	121,530
T1959	East Windsor	113,382
T1960	Eastford	18,944
T1961	Easton	8,972
T1962	Ellington	206,833
T1963	Enfield	1,019,672
T1964	Essex	4,311
T1965	Fairfield	122,691
T1966	Farmington	74,160
T1967	Franklin	14,725
T1968	Glastonbury	134,346
T1969	Goshen	8,065
T1970	Granby	655,539
T1971	Greenwich	110,062
T1972	Griswold	735,679
T1973	Groton	500,801
T1974	Guilford	35,322
T1975	Haddam	153,075
T1976	Hamden	2,227,363
T1977	Hampton	21,168
T1978	Hartford	20,530,197
T1979	Hartland	21,434
T1980	Harwinton	253,904
T1981	Hebron	119,954
T1982	Kent	1,532
T1983	Killingly	311,488
T1984	Killingworth	44,145
T1985	Lebanon	91,572
T1986	Ledyard	240,652
T1987	Lisbon	57,990
T1988	Litchfield	123,294
T1989	Lyme	6,428
T1990	Madison	7,909

T1991	Manchester	5,247,464
T1992	Mansfield	262,244
T1993	Marlborough	59,042
T1994	Meriden	7,755,320
T1995	Middlebury	54,899
T1996	Middlefield	42,007
T1997	Middletown	2,656,038
T1998	Milford	193,465
T1999	Monroe	105,459
T2000	Montville	256,057
T2001	Morris	6,225
T2002	Naugatuck	1,438,012
T2003	New Britain	13,292,120
T2004	New Canaan	59,493
T2005	New Fairfield	69,622
T2006	New Hartford	172,353
T2007	New Haven	7,652,745
T2008	New London	1,926,108
T2009	New Milford	232,906
T2010	Newington	928,230
T2011	Newtown	89,914
T2012	Norfolk	1,108
T2013	North Branford	146,627
T2014	North Canaan	138,210
T2015	North Haven	87,989
T2016	North Stonington	53,206
T2017	Norwalk	1,959,389
T2018	Norwich	5,913,205
T2019	Old Lyme	29,897
T2020	Old Saybrook	12,132
T2021	Orange	20,310
T2022	Oxford	73,540
T2023	Plainfield	307,289
T2024	Plainville	745,435
T2025	Plymouth	196,042
T2026	Pomfret	53,420
T2027	Portland	527,951
T2028	Preston	59,050
T2029	Prospect	116,728
T2030	Putnam	166,806
T2031	Redding	19,287

sSB 1		Amendment
T2032	Ridgefield	19,656
T2033	Rocky Hill	1,259,142
T2034	Roxbury	4,951
T2035	Salem	50,502
T2036	Salisbury	1,447
T2037	Scotland	25,493
T2038	Seymour	238,227
T2039	Sharon	600
T2040	Shelton	317,310
T2041	Sherman	38,467
T2042	Simsbury	165,475
T2043	Somers	113,853
T2044	South Windsor	228,162
T2045	Southbury	732,698
T2046	Southington	416,967
T2047	Sprague	66,065
T2048	Stafford	191,030
T2049	Stamford	1,441,637
T2050	Sterling	63,492
T2051	Stonington	21,460
T2052	Stratford	1,119,920
T2053	Suffield	699,245
T2054	Thomaston	109,625
T2055	Thompson	150,694
T2056	Tolland	182,111
T2057	Torrington	2,752,854
T2058	Trumbull	68,341
T2059	Union	38,171
T2060	Vernon	3,276,608
T2061	Voluntown	42,345
T2062	Wallingford	425,723
T2063	Warren	3,475
T2064	Washington	7,401
T2065	Waterbury	14,775,836
T2066	Waterford	15,582
T2067	Watertown	1,454,776
T2068	West Hartford	2,824,592
T2069	West Haven	4,946,153
T2070	Westbrook	3,846
T2071	Weston	5,276
T2072	Westport	81,474

T2073	Wethersfield	1,009,684
T2074	Wilmington	69,132
T2075	Wilton	25,737
T2076	Winchester	160,499
T2077	Windham	3,759,271
T2078	Windsor	242,608
T2079	Windsor Locks	214,929
T2080	Wolcott	247,743
T2081	Woodbridge	26,948
T2082	Woodbury	250,602
T2083	Woodstock	99,811

16652 (2) \$5,550,000 of such amount shall be used to supplement the
16653 amount appropriated in section 1 of public act 25-168 to the Department
16654 of Education, for Magnet Schools, and shall be expended by the
16655 Department of Education for the purpose of increasing the per student
16656 grant amount to operators of interdistrict magnet school programs that
16657 are not local or regional boards of education in accordance with the
16658 provisions of section 10-264/ of the general statutes;

16659 (3) \$2,750,000 of such amount shall be used to supplement the
16660 amount appropriated in section 1 of public act 25-168 to the Department
16661 of Education, for Magnet Schools, and shall be expended by the
16662 Department of Education for the purpose of increasing the per student
16663 grant amount to local and regional boards of education that operate
16664 interdistrict magnet school programs in accordance with the provisions
16665 of section 10-264/ of the general statutes;

16666 (4) \$8,700,000 of such amount shall be used to supplement the
16667 amount appropriated in section 1 of public act 25-168 to the Department
16668 of Education, for Charter Schools, and shall be expended by the
16669 Department of Education for the purpose of providing grants to charter
16670 schools in accordance with the provisions of section 10-66ee of the
16671 general statutes;

16672 (5) \$800,000 of such amount shall be used to supplement the amount
16673 appropriated in section 1 of public act 25-168 to the Department of
16674 Education, for Vocational Agriculture, and shall be expended by the

16675 Department of Education for the purpose of providing grants to local or
16676 regional boards of education that operate an agricultural science and
16677 technology education center approved by the State Board of Education
16678 in accordance with the provisions of section 10-65 of the general statutes;
16679 and

16680 (6) \$3,000,000 of such amount shall be used by the Department of
16681 Education for administrative costs related to the distribution of
16682 supplemental education grants to local and regional boards of education
16683 and implementation of the oversight activities described in section 388
16684 of this act.

16685 (b) The funds appropriated in subsection (a) of this section to the
16686 Department of Education, for Supplemental Education, for the fiscal
16687 year ending June 30, 2026, shall not lapse and shall be available to the
16688 Department of Education for the same purpose for the fiscal year ending
16689 June 30, 2027.

16690 Sec. 391. (*Effective from passage*) (a) (1) For the fiscal year ending June
16691 30, 2026, the city of Hartford shall be paid a supplemental education aid
16692 grant in an amount equal to five million dollars of its grant amount
16693 listed in section 390 of this act. The amount paid to the city of Hartford
16694 shall be paid by the Comptroller, upon certification of the
16695 Commissioner of Education, to the treasurer of Hartford not later than
16696 June thirtieth of said fiscal year. All aid paid to the city of Hartford
16697 pursuant to the provisions of this subdivision shall be expended for
16698 educational purposes only and shall be expended upon the
16699 authorization of the board of education for Hartford. Such grant shall
16700 not be used to supplant local funding for educational purposes.

16701 (2) For the fiscal year ending June 30, 2027, each town shall be paid a
16702 supplemental education aid grant equal to the amount prescribed in
16703 section 390 of this act. The amount due each town shall be paid by the
16704 Comptroller, upon certification of the Commissioner of Education, to
16705 the treasurer of each town not later than June thirtieth of said fiscal year.
16706 All aid distributed to a town pursuant to the provisions of this

16707 subdivision shall be expended for educational purposes only and shall
 16708 be expended upon the authorization of the local or regional board of
 16709 education. Such grant shall not be used to supplant local funding for
 16710 educational purposes.

16711 (b) Such grant shall not be considered part of the budgeted
 16712 appropriation for education for the town for purposes of calculating the
 16713 minimum budget requirement for the town pursuant to section 10-262j
 16714 of the general statutes.

16715 Sec. 392. (*Effective July 1, 2027*) For the fiscal year ending June 30, 2028,
 16716 payments from the Education Equalization Grants account by the
 16717 Department of Education shall not be less than the appropriation for
 16718 said account for the fiscal year ending June 30, 2027, plus \$152,200,000.

16719 Sec. 393. (*Effective from passage*) There is established an account to be
 16720 known as the "temporary education aid for school districts account",
 16721 which shall be a separate, nonlapsing account. The account shall contain
 16722 any moneys required by law to be deposited in the account. Moneys in
 16723 the account shall be expended by the Department of Education for the
 16724 purposes of providing district relief and compensatory use learning aid
 16725 grants in accordance with the provisions of section 394 of this act.

16726 Sec. 394. (*Effective July 1, 2026*) (a) For the fiscal year ending June 30,
 16727 2027, each town shall be paid a district relief and compensatory use
 16728 learning aid grant equal to the amount prescribed in subsection (b) of
 16729 this section. The amount due each town shall be paid by the
 16730 Comptroller, upon certification of the Commissioner of Education, to
 16731 the treasurer of each town not later than October thirty-first of said fiscal
 16732 year.

16733 (b) District relief and compensatory use learning aid grant amounts.

T2084	Grant for Fiscal
T2085	Year
T2086	2027
	Town

sSB 1	Amendment
T2087 Andover	40,096
T2088 Ashford	69,181
T2089 Barkhamsted	29,885
T2090 Bethany	35,291
T2091 Bethel	200,953
T2092 Bloomfield	160,957
T2093 Bolton	53,664
T2094 Bozrah	23,802
T2095 Branford	75,457
T2096 Bridgewater	4,415
T2097 Brookfield	27,584
T2098 Brooklyn	139,394
T2099 Canaan	2,515
T2100 Canterbury	80,097
T2101 Canton	81,370
T2102 Chaplin	33,043
T2103 Clinton	103,842
T2104 Colchester	240,804
T2105 Colebrook	8,078
T2106 Columbia	46,324
T2107 Cornwall	644
T2108 Coventry	159,058
T2109 Deep River	33,522
T2110 Derby	219,809
T2111 Durham	65,865
T2112 East Haddam	71,119
T2113 East Hampton	139,219
T2114 East Haven	259,186
T2115 East Lyme	121,530
T2116 East Windsor	113,382
T2117 Eastford	18,944
T2118 Easton	3,113
T2119 Ellington	206,833
T2120 Enfield	173,274
T2121 Essex	4,311
T2122 Farmington	74,160
T2123 Franklin	14,725
T2124 Glastonbury	134,346
T2125 Goshen	8,065
T2126 Groton	500,801
T2127 Guilford	35,322

sSB 1		Amendment
T2128	Haddam	4,607
T2129	Hampton	21,168
T2130	Hartland	21,434
T2131	Hebron	119,954
T2132	Kent	138
T2133	Killingly	311,488
T2134	Killingworth	44,145
T2135	Lebanon	91,572
T2136	Ledyard	240,652
T2137	Lisbon	57,990
T2138	Lyme	6,428
T2139	Madison	7,909
T2140	Mansfield	262,244
T2141	Marlborough	59,042
T2142	Middlebury	54,899
T2143	Middlefield	42,007
T2144	Milford	193,465
T2145	Monroe	105,459
T2146	Montville	256,057
T2147	Morris	6,225
T2148	New Fairfield	69,622
T2149	New Milford	232,906
T2150	Newtown	89,914
T2151	Norfolk	1,108
T2152	North Branford	146,627
T2153	North Haven	87,989
T2154	North Stonington	53,206
T2155	Old Lyme	29,897
T2156	Orange	20,310
T2157	Oxford	73,540
T2158	Plainfield	307,289
T2159	Plymouth	196,042
T2160	Pomfret	53,420
T2161	Preston	59,050
T2162	Prospect	116,728
T2163	Putnam	166,806
T2164	Ridgefield	3,092
T2165	Roxbury	4,951
T2166	Salem	50,502
T2167	Salisbury	1,447
T2168	Scotland	25,493

	sSB 1	Amendment
T2169	Seymour	238,227
T2170	Sharon	600
T2171	Shelton	46,190
T2172	Simsbury	165,475
T2173	Somers	113,853
T2174	South Windsor	228,162
T2175	Southington	416,967
T2176	Sprague	42,205
T2177	Stafford	191,030
T2178	Sterling	63,492
T2179	Stonington	21,460
T2180	Stratford	92,255
T2181	Thomaston	109,625
T2182	Thompson	150,694
T2183	Tolland	182,111
T2184	Trumbull	68,341
T2185	Voluntown	42,345
T2186	Wallingford	425,723
T2187	Warren	3,475
T2188	Washington	7,401
T2189	Weston	5,276
T2190	Willington	69,132
T2191	Winchester	160,499
T2192	Windsor	242,608
T2193	Wolcott	247,743
T2194	Woodstock	99,811

16734 (c) All aid distributed to a town pursuant to the provisions of this
16735 section shall be expended for educational purposes only and shall be
16736 expended upon the authorization of the local or regional board of
16737 education. Such grant shall not be used to supplant local funding for
16738 educational purposes.

16739 (d) Such grant shall not be considered part of the budgeted
16740 appropriation for education for the town for purposes of calculating the
16741 minimum budget requirement for the town pursuant to section 10-262j
16742 of the general statutes.

16743 Sec. 395. (*Effective from passage*) Not later than June 15, 2026, the sum
16744 of ten million nine hundred forty-five thousand five hundred two

dollars shall be transferred from the Probate Court Administration Fund, established pursuant to section 45a-82 of the general statutes, to the temporary education aid for school districts account established pursuant to section 393 of this act.

Sec. 396. (*Effective from passage*) The Commissioner of Administrative Services, having reviewed applications for state grants for public school building projects in accordance with section 10-283 of the general statutes on the basis of priorities for such projects and standards for school construction established by the State Board of Education, and having prepared a listing of all such eligible projects ranked in order of priority, as determined by said commissioner together with the amount of the estimated grant with respect to each eligible project, and having submitted such listing of eligible projects, prior to December 15, 2025, to a committee of the General Assembly established under section 10-283a of the general statutes for the purpose of reviewing such listing, is hereby authorized to enter into grant commitments on behalf of the state in accordance with said section 10-283a with respect to the priority listing of such projects and in such estimated amounts as approved by said committee prior to February 1, 2026, as follows:

	School District	Estimated Project Costs	Estimated Grant
	School		
	Project Number		
	MILFORD		
	Jonathan Law High School		
	084-0217 EA	\$12,650,000	\$4,968,920
	NORWICH		
	Teachers' Memorial Global Studies		
	Magnet Middle School		
	104-0122 N	\$69,367,713	\$55,494,170
	SEYMOUR		
	Bungay Elementary School		
	124-0058 N	\$60,000,000	\$38,748,000

	sSB 1		Amendment
T2212	STAMFORD		
T2213	Julia Stark Elementary School		
T2214	135-0294 A/EC	\$14,347,081	\$8,608,249
T2215			
T2216	WATERBURY		
T2217	Roberto Clemente International Dual		
T2218	Language School		
T2219	151-0318 EA	\$38,755,850	\$30,589,992
T2220			
T2221	WESTPORT		
T2222	Long Lots Elementary School		
T2223	158-0101 N	\$110,472,124	\$12,229,264

16764 Sec. 397. Section 10-285a of the 2026 supplement to the general
16765 statutes is repealed and the following is substituted in lieu thereof
16766 (*Effective July 1, 2026*):

16767 (a) (1) The percentage of school building project grant money a local
16768 board of education may be eligible to receive, under the provisions of
16769 section 10-286, shall be assigned by the Commissioner of Administrative
16770 Services in accordance with the percentage calculated by the
16771 Commissioner of Education as follows: (A) For grants approved
16772 pursuant to section 10-283 for which application is made on and after
16773 July 1, 1991, and before July 1, 2011, (i) each town shall be ranked in
16774 descending order from one to one hundred sixty-nine according to such
16775 town's adjusted equalized net grand list per capita, as defined in section
16776 10-261; and (ii) based upon such ranking, a percentage of not less than
16777 twenty nor more than eighty shall be determined for each town on a
16778 continuous scale; (B) for grants approved pursuant to section 10-283 for
16779 which application is made on and after July 1, 2011, and before July 1,
16780 2017, (i) each town shall be ranked in descending order from one to one
16781 hundred sixty-nine according to such town's adjusted equalized net
16782 grand list per capita, as defined in section 10-261, and (ii) based upon
16783 such ranking, (I) a percentage of not less than ten nor more than seventy
16784 shall be determined for new construction or replacement of a school
16785 building for each town on a continuous scale, and (II) a percentage of

16786 not less than twenty nor more than eighty shall be determined for
16787 renovations, extensions, code violations, roof replacements and major
16788 alterations of an existing school building and the new construction or
16789 replacement of a school building when a town or regional school district
16790 can demonstrate that a new construction or replacement is less
16791 expensive than a renovation, extension or major alteration of an existing
16792 school building for each town on a continuous scale; (C) for grants
16793 approved pursuant to section 10-283 for which application is made on
16794 and after July 1, 2017, and before June 1, 2022, (i) each town shall be
16795 ranked in descending order from one to one hundred sixty-nine
16796 according to the adjusted equalized net grand list per capita, as defined
16797 in section 10-261, of the town two, three and four years prior to the fiscal
16798 year in which application is made, (ii) based upon such ranking, (I) a
16799 percentage of not less than ten nor more than seventy shall be
16800 determined for new construction or replacement of a school building for
16801 each town on a continuous scale, and (II) a percentage of not less than
16802 twenty nor more than eighty shall be determined for renovations,
16803 extensions, code violations, roof replacements and major alterations of
16804 an existing school building and the new construction or replacement of
16805 a school building when a town or regional school district can
16806 demonstrate that a new construction or replacement is less expensive
16807 than a renovation, extension or major alteration of an existing school
16808 building for each town on a continuous scale; (D) except as otherwise
16809 provided in subdivision (2) of this subsection, for grants approved
16810 pursuant to section 10-283 for which application is made on and after
16811 June 1, 2022, (i) each town shall be ranked in descending order from one
16812 to one hundred sixty-nine according to the adjusted equalized net grand
16813 list per capita, as defined in section 10-261, of the town two, three and
16814 four years prior to the fiscal year in which application is made, and (ii)
16815 based upon such ranking, (I) a percentage of not less than ten nor more
16816 than seventy shall be determined for new construction or replacement
16817 of a school building for each town on a continuous scale, and (II) a
16818 percentage of not less than twenty nor more than eighty shall be
16819 determined for renovations, extensions, code violations, roof
16820 replacements and major alterations of an existing school building and

16821 the new construction or replacement of a school building when a town
16822 or regional school district can demonstrate that a new construction or
16823 replacement is less expensive than a renovation, extension or major
16824 alteration of an existing school building for each town on a continuous
16825 scale; and (E) except as otherwise provided in subdivision (2) of this
16826 subsection, for grants approved pursuant to section 10-283 for which
16827 application is made on and after July 1, 2024, (i) each town shall be
16828 ranked in descending order from one to one hundred sixty-nine
16829 according to the adjusted equalized net grand list per capita, as defined
16830 in section 10-261, of the town two, three and four years prior to the fiscal
16831 year in which application is made, and (ii) based upon such ranking, (I)
16832 a percentage of not less than ten nor more than eighty shall be
16833 determined for new construction or replacement of a school building for
16834 each town on a continuous scale, and (II) a percentage of not less than
16835 twenty nor more than eighty shall be determined for renovations,
16836 extensions, code violations, roof replacements and major alterations of
16837 an existing school building and the new construction or replacement of
16838 a school building when a town or regional school district can
16839 demonstrate that a new construction or replacement is less expensive
16840 than a renovation, extension or major alteration of an existing school
16841 building for each town on a continuous scale.

16842 (2) For grants approved pursuant to section 10-283 for which
16843 application is made prior to July 1, 2047, the percentage of school
16844 building project grant money a local board of education for (A) any
16845 town with a total population of eighty thousand or greater may be
16846 eligible to receive shall be the greater of the percentage calculated
16847 pursuant to subdivision (1) of this subsection or sixty per cent, and (B)
16848 the town of Cheshire shall be the greater of the percentage calculated
16849 pursuant to subdivision (1) of this subsection or fifty per cent.

16850 (b) (1) Except as otherwise provided in subdivision (2) of this
16851 subsection, the percentage of school building project grant money a
16852 regional board of education may be eligible to receive under the
16853 provisions of section 10-286 shall be determined by its ranking. Such

16854 ranking shall be determined by (A) multiplying the total population, as
16855 defined in section 10-261, of each town in the district by such town's
16856 ranking, as determined in subsection (a) of this section, (B) adding
16857 together the figures determined under subparagraph (A) of this
16858 subdivision, and (C) dividing the total computed under subparagraph
16859 (B) of this subdivision by the total population of all towns in the district.
16860 The ranking of each regional board of education shall be rounded to the
16861 next higher whole number and each such board shall receive the same
16862 reimbursement percentage as would a town with the same rank plus ten
16863 per cent, except that no such percentage shall exceed eighty-five per
16864 cent.

16865 (2) Any board of education of a regional school district established or
16866 expanded on or after July 1, 2016, that submits an application for a
16867 school building project (A) not later than ten years after the
16868 establishment or expansion of such regional school district, and (B) that
16869 is related to such establishment or expansion, may be eligible to receive
16870 a percentage of school building project grant money, under the
16871 provisions of section 10-286, as follows: The reimbursement percentage
16872 of the town in such regional school district with the greatest
16873 reimbursement percentage, as determined in subsection (a) of this
16874 section, plus ten per cent.

16875 (c) The percentage of school building project grant money a regional
16876 educational service center may be eligible to receive shall be determined
16877 by its ranking. Such ranking shall be determined by (1) multiplying the
16878 population of each member town in the regional educational service
16879 center by such town's ranking, as determined in subsection (a) of this
16880 section; (2) adding together the figures for each town determined under
16881 subdivision (1) of this subsection, and (3) dividing the total computed
16882 under subdivision (2) of this subsection by the total population of all
16883 member towns in the regional educational service center. The ranking
16884 of each regional educational service center shall be rounded to the next
16885 higher whole number and each such center shall receive the same
16886 reimbursement percentage as would a town with the same rank.

16887 (d) The percentage of school building project grant money a
16888 cooperative arrangement pursuant to section 10-158a, may be eligible to
16889 receive shall be determined by its ranking. Such ranking shall be
16890 determined by (1) multiplying the total population, as defined in section
16891 10-261, of each town in the cooperative arrangement by such town's
16892 ranking, as determined in subsection (a) of this section, (2) adding the
16893 products determined under subdivision (1) of this subsection, and (3)
16894 dividing the total computed under subdivision (2) of this subsection by
16895 the total population of all towns in the cooperative arrangement. The
16896 ranking of each cooperative arrangement shall be rounded to the next
16897 higher whole number and each such cooperative arrangement shall
16898 receive the same reimbursement percentage as would a town with the
16899 same rank plus ten percentage points.

16900 (e) (1) If an elementary school building project for a new building or
16901 for the expansion of an existing building includes space for an early
16902 childhood care and education program that provides services for
16903 children from birth to five years, the percentage determined pursuant to
16904 this section for the entire school building project shall be increased by
16905 fifteen percentage points, but shall not exceed [one hundred] ninety-five
16906 per cent. Recipient districts shall maintain such early childhood care and
16907 education program for at least ten years.

16908 (2) The percentage determined pursuant to this section for any school
16909 building project for a building or facility that will be used exclusively by
16910 a local or regional board of education for an early childhood care and
16911 education program that provides services for children from birth to five
16912 years shall be increased by fifteen percentage points, but shall not
16913 exceed [one hundred] ninety-five per cent. Recipient districts shall
16914 maintain such early childhood care and education program for at least
16915 twenty years.

16916 (f) The percentage determined pursuant to this section for a school
16917 building project grant for the expansion, alteration or renovation of an
16918 existing public school building to convert such building for use as a
16919 lighthouse school, as defined in section 10-266cc, shall be increased by

16920 ten percentage points.

16921 (g) The percentage determined pursuant to this section for a school
16922 building project grant shall be increased by the percentage of the total
16923 projected enrollment of the school attributable to the number of spaces
16924 made available for out-of-district students participating in the program
16925 established pursuant to section 10-266aa, provided the maximum
16926 increase shall not exceed ten percentage points.

16927 (h) Subject to the provisions of section 10-285d, if an elementary
16928 school building project for a school in a priority school district or for a
16929 priority school is necessary in order to offer a full-day kindergarten
16930 program or a full-day preschool program or to reduce class size
16931 pursuant to section 10-265f, the percentage determined pursuant to this
16932 section shall be increased by fifteen percentage points, but shall not
16933 exceed [one hundred] ninety-five per cent, for the portion of the
16934 building used primarily for such full-day kindergarten program, full-
16935 day preschool program or such reduced size classes. Recipient districts
16936 that receive an increase pursuant to this subsection in support of a full-
16937 day preschool program shall maintain full-day preschool enrollment for
16938 at least ten years.

16939 (i) For all projects authorized on or after July 1, 2007, all attorneys'
16940 fees and court costs related to litigation shall be eligible for state school
16941 construction grant assistance only if the grant applicant is the prevailing
16942 party in any such litigation.

16943 (j) The percentage determined pursuant to this section for a school
16944 building project grant for a diversity school, approved pursuant to
16945 section 10-286h, shall be increased by ten percentage points.

16946 (k) If a school building project for a new building or for the
16947 renovation or expansion of an existing building includes plans for the
16948 expansion or creation of in-district special education programming and
16949 services, the percentage determined pursuant to this section shall be
16950 increased by fifteen percentage points, but shall not exceed [one

16951 hundred] ninety-five per cent, for the portion of the project used
16952 primarily for such purpose, provided the portion of such school
16953 building project that will be used primarily for such in-district special
16954 education programming and services shall be a part of a school building
16955 that is being used to provide a program of general education for
16956 nonspecial education students and is a part of the school building being
16957 constructed or renovated or expanded; and, provided further, any
16958 additional funding received by the local or regional board of education
16959 resulting from and related to the inclusion of such plans for the
16960 expansion or creation of in-district special education programming and
16961 services shall be expended for such construction or renovation or
16962 expansion.

16963 (l) On and after July 1, 2026, for applications submitted pursuant to
16964 subsection (a) of section 10-283, the reimbursement percentage of school
16965 building project that a local or regional board of education or an
16966 endowed academy approved pursuant to section 10-34 shall be
16967 increased by five percentage points, provided such increase shall not
16968 result in a reimbursement percentage exceeding [one hundred] ninety-
16969 five per cent, if the municipality (1) is in compliance with the provisions
16970 of section 8-13bb regarding its housing growth plan or compliance with
16971 a regional housing growth plan, as applicable, and has demonstrated
16972 steps such municipality has taken to implement its housing growth
16973 policies, (2) is a qualifying transit-oriented community pursuant to
16974 section 8-13hh, or (3) has adopted a development district established
16975 pursuant to a memorandum of agreement with the Connecticut
16976 Municipal Development Authority.

16977 (m) On and after July 1, 2026, if the student enrollment of a school
16978 district has increased by twenty per cent or more over the ten-year
16979 period immediately preceding the date an application is submitted
16980 pursuant to section 10-283, the reimbursement percentage of the town
16981 of such school district shall be increased by twenty percentage points,
16982 provided such increase shall not result in a reimbursement percentage
16983 exceeding ninety-five per cent.

16984 (n) Notwithstanding any provision of the general statutes, the
16985 percentage determined pursuant to this section for a school building
16986 project grant shall not exceed ninety-five per cent.

16987 Sec. 398. Section 10-292q of the general statutes is repealed and the
16988 following is substituted in lieu thereof (*Effective from passage*):

16989 (a) There is established a [School Building Projects Advisory Council]
16990 School Safety and Security Infrastructure Advisory Council. The council
16991 shall consist of: (1) The Secretary of the Office of Policy and
16992 Management, or the secretary's designee, (2) the Commissioner of
16993 Administrative Services, or the commissioner's designee, (3) the
16994 Commissioner of Education, or the commissioner's designee, (4) the
16995 Commissioner of Emergency Services and Public Protection, or the
16996 commissioner's designee, (5) the [chairperson of the Technical
16997 Education and Career System board, or the chairperson's] executive
16998 director of the Technical Education and Career System, or the executive
16999 director's designee, and (6) [six] eight members appointed by the
17000 Governor, one of whom shall be a person with experience in school
17001 [building] safety and security planning project matters, one of whom
17002 shall be a person with experience in [architecture] administration of the
17003 Connecticut Building Code, one of whom shall be a [person]
17004 Connecticut licensed architect with experience in [engineering] school
17005 planning and design, one of whom shall be a person from higher
17006 education with experience in [school] campus safety and security
17007 planning project matters, one of whom shall be a [person with
17008 experience with the administration of the State Building Code,]
17009 representative of a rural school district with experience in school safety
17010 and security planning project matters, one of whom shall be a
17011 representative of a suburban school district with experience in school
17012 safety and security planning project matters, one of whom shall be a
17013 representative of an urban school district with experience in school
17014 safety and security planning project matters and one of whom shall be
17015 a person with experience and expertise in construction for students with
17016 disabilities and the accessibility provisions of the Americans with

17017 Disabilities Act, 42 USC 12101 et seq. The terms for those members
17018 appointed under subdivision (6) of this subsection before the effective
17019 date of this section shall expire on June 30, 2026, and the members
17020 appointed under said subdivision shall be appointed not later than
17021 September 1, 2026.

17022 (b) (1) Prior to the effective date of this section, (A) the chairperson of
17023 the council shall be the Commissioner of Administrative Services, or the
17024 commissioner's designee; [A] and (B) a person employed by the
17025 Department of Administrative Services who is responsible for school
17026 building projects shall serve as the administrative staff of the council.

17027 (2) On and after the effective date of this section, (A) the chairperson
17028 of the council shall be the Commissioner of Emergency Services and
17029 Public Protection, or the commissioner's designee; and (B) a person
17030 employed by the Department of Emergency Services and Public
17031 Protection shall serve as the administrative staff of the council.

17032 (3) The council shall meet at least quarterly to discuss matters relating
17033 to school [building] safety and security infrastructure projects.

17034 [(b)] (c) The [School Building Projects Advisory Council] council shall
17035 (1) develop [model blueprints for new school building]
17036 recommendations regarding school safety and security infrastructure
17037 projects that are in accordance with industry standards for school
17038 [buildings and the school safety infrastructure criteria, developed
17039 pursuant to section 10-292r] safety and security infrastructure, (2)
17040 conduct studies, research and analyses related to school safety and
17041 security infrastructure, (3) make recommendations for improvements to
17042 the school [building projects] safety and security grant processes,
17043 including eligibility criteria, to the Governor and the joint standing
17044 [committee] committees of the General Assembly having cognizance of
17045 matters relating to [appropriations and the budgets of state agencies,]
17046 education and [finance, revenue and bonding] public safety, and (4)
17047 periodically review and update, as necessary, the school safety
17048 infrastructure criteria developed pursuant to section 10-292r.

17049 Sec. 399. Section 10-292r of the general statutes is repealed and the
17050 following is substituted in lieu thereof (*Effective from passage*):

17051 (a) The [School Building Projects Advisory Council] School Safety
17052 and Security Infrastructure Advisory Council, established pursuant to
17053 section 10-292q, shall periodically review and update, as necessary,
17054 school safety infrastructure criteria for school building projects awarded
17055 grants pursuant to this chapter and the school security infrastructure
17056 competitive grant program, pursuant to section 84 of public act 13-3.
17057 Such school safety infrastructure criteria shall conform to industry
17058 standards for school building safety infrastructure and shall address
17059 areas including, but not be limited to, (1) entryways to school buildings
17060 and classrooms, such as, reinforcement of entryways, ballistic glass,
17061 solid core doors, double door access, computer-controlled electronic
17062 locks, remote locks on all entrance and exits and buzzer systems, (2) the
17063 use of cameras throughout the school building and at all entrances and
17064 exits, including the use of closed-circuit television monitoring, (3)
17065 penetration resistant vestibules, and (4) other security infrastructure
17066 improvements and devices as they become industry standards. The
17067 council shall meet at least annually to review and update, if necessary,
17068 the school safety infrastructure criteria and make such criteria available
17069 to local and regional boards of education.

17070 (b) The [School Building Projects Advisory Council] council shall
17071 submit any updates made to the school safety infrastructure criteria to
17072 the Commissioners of Emergency Services and Public Protection and
17073 Education and the joint standing committees of the General Assembly
17074 having cognizance of matters relating to public safety and education, in
17075 accordance with the provisions of section 11-4a.

17076 Sec. 400. Subsections (b) and (c) of section 10-264h of the 2026
17077 supplement to the general statutes are repealed and the following is
17078 substituted in lieu thereof (*Effective from passage*):

17079 (b) Subject to the provisions of subsection (a) of this section, the
17080 applicant shall receive current payments of scheduled estimated eligible

17081 [project] costs for the interdistrict magnet school facility, provided (1)
17082 the applicant files an application for a school building project, in
17083 accordance with section 10-283, by the date prescribed by the
17084 Commissioner of Administrative Services, (2) final plans and
17085 specifications for the project are approved pursuant to sections 10-291
17086 and 10-292, and (3) such applicant submits to the Commissioner of
17087 Education, in such form as the commissioner prescribes, and the
17088 commissioner approves a plan for the operation of the facility which
17089 includes, but need not be limited to: A description of the educational
17090 programs to be offered, the completion date for the project, an estimated
17091 budget for the operation of the facility, written commitments for
17092 participation from the districts that will participate in the school and an
17093 analysis of the effect of the program on the reduction of racial, ethnic
17094 and economic isolation. The Commissioner of Education shall notify the
17095 Commissioner of Administrative Services and the secretary of the State
17096 Bond Commission when the provisions of subdivision (3) of this
17097 subsection have been met. Upon application to the Commissioner of
17098 Administrative Services, compliance with the provisions of subdivision
17099 (3) of this subsection and after authorization by the General Assembly
17100 pursuant to section 10-283, the applicant shall be eligible to receive
17101 progress payments in accordance with the provisions of section 10-287i.

17102 (c) (1) If the school building ceases to be used as an interdistrict
17103 magnet school facility and the grant was provided for the purchase or
17104 construction of the facility, the Commissioner of Administrative
17105 Services, in consultation with the Commissioner of Education, shall
17106 determine whether (A) title to the building and any legal interest in
17107 appurtenant land shall revert to the state, or (B) the school district shall
17108 reimburse the state an amount equal to the difference between the
17109 amount received pursuant to this section and the amount the district
17110 would have been eligible to receive based on the percentage determined
17111 pursuant to section 10-285a, multiplied by the estimated eligible
17112 [project] costs.

17113 (2) If the school building ceases to be used as an interdistrict magnet

17114 school facility and the grant was provided for the extension or major
17115 alteration of the facility, the school district shall reimburse the state the
17116 amount determined in accordance with subparagraph (B) of subdivision
17117 (1) of this subsection. A school district receiving a request for
17118 reimbursement pursuant to this subdivision shall reimburse the state
17119 not later than the close of the fiscal year following the year in which the
17120 request is made. If the school district fails to so reimburse the state, the
17121 Department of Administrative Services may request the Department of
17122 Education to withhold such amount from the total sum which is paid
17123 from the State Treasury to such school district or the town in which it is
17124 located or, in the case of a regional school district, the towns which
17125 comprise the school district. If the amount paid from the State Treasury
17126 is less than the amount due, the Department of Administrative Services
17127 shall collect such amount from the school district.

17128 Sec. 401. Subdivision (12) of section 10-282 of the general statutes is
17129 repealed and the following is substituted in lieu thereof (*Effective from*
17130 *passage*):

17131 (12) "Net eligible costs" means eligible [project] costs adjusted for the
17132 state standard education space specifications;

17133 Sec. 402. Subdivisions (5) and (6) of subsection (a) of section 10-286 of
17134 the general statutes are repealed and the following is substituted in lieu
17135 thereof (*Effective from passage*):

17136 (5) In the case of a public school administrative or service facility, one-
17137 half of the eligible percentage for subdivisions (1) and (2) of this
17138 subsection of the eligible [project] cost as determined by the
17139 Commissioner of Administrative Services, or in the case of a regional
17140 educational service center administrative or service facility, the eligible
17141 percentage, as determined pursuant to subsection (c) of section 10-285a,
17142 of the eligible [project] cost as determined by the commissioner;

17143 (6) In the case of the total replacement of a roof or the total
17144 replacement of a portion of a roof which has existed for at least twenty

17145 years, or in the case of the total replacement of a roof or the total
17146 replacement of a portion of a roof which has existed for fewer than
17147 twenty years when it is determined by a registered architect or
17148 registered engineer that such roof was improperly designed or
17149 improperly constructed and the town is prohibited from recovery of
17150 damages or has no other recourse at law or in equity, the eligible
17151 percentage for subdivisions (1) and (2) of this subsection, of the eligible
17152 cost as determined by the Commissioner of Administrative Services. In
17153 the case of the total replacement of a roof or the total replacement of a
17154 portion of a roof which has existed for fewer than twenty years (A) when
17155 it is determined by a registered architect or registered engineer that such
17156 roof was improperly designed or improperly constructed and the town
17157 has recourse at law or in equity and recovers less than such eligible cost,
17158 the eligible percentage for subdivisions (1) and (2) of this subsection of
17159 the difference between such recovery and such eligible cost, and (B)
17160 when the roof is at least fifteen years old but less than twenty years old
17161 and it cannot be determined by a registered architect or registered
17162 engineer that such roof was improperly designed or improperly
17163 constructed, the eligible percentage for subdivisions (1) and (2) of this
17164 subsection of the eligible [project] costs provided such costs are
17165 multiplied by the ratio of the age of the roof to twenty years. For
17166 purposes of this subparagraph, the age of the roof shall be determined
17167 in whole years to the nearest year based on the time between the
17168 completed installation of the old roof and the date of the grant
17169 application for the school construction project for the new roof;

17170 Sec. 403. Section 10-287i of the general statutes is repealed and the
17171 following is substituted in lieu thereof (*Effective from passage*):

17172 A grant under this chapter for any school building project authorized
17173 by the General Assembly on or after July 1, 1996, or for any project for
17174 which application is made pursuant to subsection (b) of section 10-283,
17175 on or after July 1, 1997, shall be paid as follows: Applicants shall request
17176 progress payments for the state share of eligible [project] costs
17177 calculated pursuant to sections 10-65, 10-76e and 10-286, at such time

17178 and in such manner as the Commissioner of Administrative Services
17179 shall prescribe provided no payments shall commence until the
17180 applicant has filed a notice of authorization of funding for the local share
17181 of project costs, and provided further no payments other than those for
17182 architectural planning and site acquisition shall be made prior to
17183 approval of the final architectural plans pursuant to section 10-292. For
17184 any project authorized on or after July 1, 2024, the Department of
17185 Administrative Services shall withhold five per cent of a grant if the
17186 commissioner determines that the applicant has failed to comply with
17187 the provisions of subdivision (3) of subsection (b) of section 4a-60g
17188 relating to minority business enterprises. The Department of
17189 Administrative Services shall withhold five per cent of a grant pending
17190 completion of an audit pursuant to section 10-287 provided, if the
17191 department is unable to complete the required audit within six months
17192 of the date a request for final payment is filed, the applicant may have
17193 an independent audit performed and include the cost of such audit in
17194 the eligible [project] costs.

17195 Sec. 404. Section 10-285b of the general statutes is repealed and the
17196 following is substituted in lieu thereof (*Effective from passage*):

17197 (a) (1) Any incorporated or endowed high school or academy
17198 approved by the State Board of Education, pursuant to section 10-34,
17199 may apply and be eligible to subsequently be considered for a school
17200 building project grant commitment from the state, provided the school
17201 building project complies with the provisions of this chapter.

17202 (2) Applications pursuant to this subsection shall be filed at such time
17203 and on such forms as the Department of Administrative Services
17204 prescribes. The Commissioners of Education and Administrative
17205 Services shall approve such applications pursuant to the provisions of
17206 section 10-284.

17207 (3) In the case of a school building project, as defined in subparagraph
17208 (A) of subdivision (3) of section 10-282, the amount of the grant
17209 approved by the Commissioner of Administrative Services shall be

17210 computed pursuant to the provisions of section 10-286, and the eligible
17211 percentage shall be computed pursuant to the provisions of subsection
17212 (b) of this section. The calculation of the grant pursuant to this section
17213 shall be made in accordance with the state standard space specifications
17214 in effect at the time of final grant calculation.

17215 (b) The percentage of school building project grant money each
17216 incorporated or endowed high school or academy may be eligible to
17217 receive under the provisions of subsection (a) of this section shall be
17218 determined by its ranking. The ranking shall be determined by (1)
17219 multiplying the total population, as defined in section 10-261, of each
17220 town which at the time of application for such school construction grant
17221 commitment has designated such school as the high school for such
17222 town for a period of not less than five years from the date of such
17223 application, by such town's percentile ranking, as determined in
17224 subsection (a) of section 10-285a, (2) adding together the figures for each
17225 town determined under subdivision (1) of this subsection, and (3)
17226 dividing the total computed under subdivision (2) of this subsection by
17227 the total population of all towns which designate the school as their high
17228 school under subdivision (1) of this subsection. The ranking determined
17229 pursuant to this subsection shall be rounded to the next higher whole
17230 number. Such high school or academy shall receive the reimbursement
17231 percentage of a town with the same rank increased by five per cent,
17232 except that the reimbursement percentage of such high school or
17233 academy shall not exceed eighty-five per cent.

17234 (c) In order for an incorporated or endowed high school or academy
17235 to be eligible for a grant commitment pursuant to this section such high
17236 school or academy shall provide educational services to the town or
17237 towns designating it as the high school for such town or towns for a
17238 period of not less than ten years after completion of grant payments
17239 under this section.

17240 (d) Notwithstanding the provisions of this chapter, for any school
17241 building project for an incorporated or endowed high school or
17242 academy that has been authorized by the General Assembly, the

17243 Commissioner of Administrative Services may waive any provision of
17244 this chapter that is inconsistent or incompatible with the educational or
17245 administrative structure of such high school or academy in order to
17246 provide a grant to such high school or academy under this chapter.

17247 Sec. 405. (*Effective from passage*) Notwithstanding the provisions of
17248 subdivision (1) of subsection (e) of section 10-285a of the general
17249 statutes, or any regulation adopted by the State Board of Education or
17250 the Department of Administrative Services pursuant to said section
17251 increasing the reimbursement percentage for an entire school building
17252 project that includes the expansion of an existing building to include
17253 space for an early childhood care and education program, the town of
17254 Greenwich shall be eligible for such increased reimbursement
17255 percentage for the entire extension and alteration and roof replacement
17256 project at Old Greenwich School (Project Number 057-0115 EA/RR),
17257 provided the application for such extension and alteration and roof
17258 replacement project submitted by the town of Greenwich on June 21,
17259 2024, includes plans and specifications for space for an early childhood
17260 care and education program that would otherwise be eligible under said
17261 section.

17262 Sec. 406. (*Effective from passage*) (a) Notwithstanding the provisions of
17263 section 10-283 of the general statutes or any regulation adopted by the
17264 State Board of Education or the Department of Administrative Services
17265 pursuant to said section requiring a completed grant application be
17266 submitted prior to June 30, 2025, for any school building project that was
17267 previously authorized and that has changed substantially in scope or
17268 cost and is seeking reauthorization, the renovation project at Edgewood
17269 Pre-K Academy (Project Number 24DASY017090RNV0624) in the town
17270 of Bristol with costs not to exceed twenty-eight million eight hundred
17271 thousand dollars shall be included in section 1 of this act and shall
17272 subsequently be considered for a grant commitment from the state,
17273 provided the town of Bristol meets all other provisions of chapter 173 of
17274 the general statutes or any regulation adopted by the State Board of
17275 Education or the Department of Administrative Services pursuant to

17276 said chapter and is eligible for grant assistance pursuant to said chapter.

17277 (b) Notwithstanding the provisions of subsection (e) of section 10-
17278 285a of the general statutes, or any regulation adopted by the State
17279 Board of Education or the Department of Administrative Services
17280 pursuant to said section increasing the reimbursement percentage for a
17281 school building project that includes the expansion of an existing
17282 building to include space for an early childhood care and education
17283 program, the town of Bristol shall be eligible for such increased
17284 reimbursement percentage for the renovation project at Edgewood Pre-
17285 K Academy (Project Number 24DASY017090RNV0624), provided the
17286 application for reauthorization for such renovation project submitted by
17287 the town of Bristol includes plans and specifications for space for an
17288 early childhood care and education program that would otherwise be
17289 eligible under said section.

17290 Sec. 407. (*Effective from passage*) Notwithstanding the provisions of
17291 section 10-285a of the general statutes, or any regulation adopted by the
17292 State Board of Education or the Department of Administrative Services
17293 pursuant to said section concerning the reimbursement percentage that
17294 a local board of education may be eligible to receive for a school building
17295 project, the reimbursement percentage determined pursuant to said
17296 section shall be increased by ten percentage points for the town of
17297 Plainville for the renovation project at Middle School of Plainville
17298 (Project Number 110-0064 RNV).

17299 Sec. 408. Section 128 of public act 23-205 is repealed and the following
17300 is inserted in lieu thereof (*Effective from passage*):

17301 (a) Notwithstanding the provisions of section 10-283 of the general
17302 statutes, or any regulation adopted by the State Board of Education or
17303 the Department of Administrative Services pursuant to said section 10-
17304 283 requiring a completed grant application be submitted prior to June
17305 30, 2022, the renovation and extension and alteration project at John
17306 Winthrop Elementary School (Project Number 015-0182 RNV/EA) in
17307 the town of Bridgeport with costs not to exceed seventy-five million

17308 dollars shall be included in subdivision (1) of section 114 of [this act]
17309 public act 23-205 and shall subsequently be considered for a grant
17310 commitment from the state, provided the town of Bridgeport files an
17311 application for such school building project prior to [October 1]
17312 December 30, 2023, and meets all other provisions of chapter 173 of the
17313 general statutes or any regulation adopted by the State Board of
17314 Education or the Department of Administrative Services pursuant to
17315 said chapter and is eligible for grant assistance pursuant to said chapter.

17316 (b) Notwithstanding the provisions of subsection (e) of section 10-
17317 285a of the general statutes, or any regulation adopted by the State
17318 Board of Education or the Department of Administrative Services
17319 pursuant to said section increasing the reimbursement percentage for a
17320 school building project that includes the expansion of an existing
17321 building to include space for an early childhood care and education
17322 program, the town of Bridgeport shall be eligible for such increased
17323 reimbursement percentage for the renovation and extension and
17324 alteration project at John Winthrop Elementary School (Project Number
17325 015-0182 RNV/EA), provided the application for such renovation and
17326 extension and alteration project submitted by the town of Bridgeport on
17327 December 29, 2023, includes plans and specifications for space for an
17328 early childhood care and education program that would otherwise be
17329 eligible under said section.

17330 Sec. 409. (*Effective from passage*) (a) Notwithstanding the provisions of
17331 section 10-283 of the general statutes, or any regulation adopted by the
17332 State Board of Education or the Department of Administrative Services
17333 pursuant to said section requiring a completed grant application be
17334 submitted prior to June 30, 2025, the school building project at East End
17335 Elementary School in the town of Bridgeport with costs not to exceed
17336 one hundred thirty-two million dollars shall be included in section 1 of
17337 this act and shall subsequently be considered for a grant commitment
17338 from the state, provided the town of Bridgeport files an application for
17339 such school building project prior to September 1, 2026, and meets all
17340 other provisions of chapter 173 of the general statutes or any regulation

17341 adopted by the State Board of Education or the Department of
17342 Administrative Services pursuant to said chapter and is eligible for
17343 grant assistance pursuant to said chapter.

17344 (b) Notwithstanding the provisions of section 10-285a of the general
17345 statutes, or any regulation adopted by the State Board of Education or
17346 the Department of Administrative Services pursuant to said section
17347 concerning the reimbursement percentage that a local board of
17348 education may be eligible to receive for a school building project, the
17349 town of Bridgeport may use the reimbursement rate of ninety-five per
17350 cent for the school building project at East End Elementary School,
17351 provided such school building project includes plans and specifications
17352 for space for an early childhood care and education program and results
17353 in a net zero school building facility.

17354 Sec. 410. (*Effective from passage*) Notwithstanding the provisions of
17355 section 10-286 of the general statutes or any regulation adopted by the
17356 State Board of Education or the Department of Administrative Services
17357 pursuant to said section concerning the calculation of grants using the
17358 state standard space specifications, the town of Westport shall be
17359 exempt from the state standard space specifications for the purpose of
17360 the calculation of the grant for the new construction project at Long Lots
17361 Elementary School (Project Number 158-0101 N).

17362 Sec. 411. (*Effective from passage*) (a) Notwithstanding the provisions of
17363 section 10-283 of the general statutes, or any regulation adopted by the
17364 State Board of Education or the Department of Administrative Services
17365 pursuant to said section requiring a completed grant application be
17366 submitted prior to June 30, 2025, the school building project at Mary T.
17367 Murphy Elementary School in the town of Branford with costs not to
17368 exceed ninety-eight million dollars shall be included in section 1 of this
17369 act and shall subsequently be considered for a grant commitment from
17370 the state, provided the town of Branford files an application for such
17371 school building project prior to October 1, 2026, and meets all other
17372 provisions of chapter 173 of the general statutes or any regulation
17373 adopted by the State Board of Education or the Department of

17374 Administrative Services pursuant to said chapter and is eligible for
17375 grant assistance pursuant to said chapter.

17376 (b) Notwithstanding the provisions of section 10-285a of the general
17377 statutes, or any regulation adopted by the State Board of Education or
17378 the Department of Administrative Services pursuant to said section
17379 concerning the reimbursement percentage that a local board of
17380 education may be eligible to receive for a school building project, the
17381 reimbursement percentage determined pursuant to said section shall be
17382 increased by fifteen percentage points for the town of Branford for the
17383 school building project at Mary T. Murphy Elementary School.

17384 Sec. 412. (*Effective from passage*) (a) Notwithstanding the provisions of
17385 section 10-283 of the general statutes, or any regulation adopted by the
17386 State Board of Education or the Department of Administrative Services
17387 pursuant to said section requiring a completed grant application be
17388 submitted prior to June 30, 2025, the school building project at Mary R.
17389 Tisko Elementary School in the town of Branford with costs not to
17390 exceed ninety-eight million dollars shall be included in section 1 of this
17391 act and shall subsequently be considered for a grant commitment from
17392 the state, provided the town of Branford files an application for such
17393 school building project prior to October 1, 2026, and meets all other
17394 provisions of chapter 173 of the general statutes or any regulation
17395 adopted by the State Board of Education or the Department of
17396 Administrative Services pursuant to said chapter and is eligible for
17397 grant assistance pursuant to said chapter.

17398 (b) Notwithstanding the provisions of section 10-285a of the general
17399 statutes, or any regulation adopted by the State Board of Education or
17400 the Department of Administrative Services pursuant to said section
17401 concerning the reimbursement percentage that a local board of
17402 education may be eligible to receive for a school building project, the
17403 reimbursement percentage determined pursuant to said section shall be
17404 increased by fifteen percentage points for the town of Branford for the
17405 school building project at Mary R. Tisko Elementary School.

17406 Sec. 413. Section 125 of public act 23-205, as amended by section 187
17407 of public act 24-151, is repealed and the following is substituted in lieu
17408 thereof (*Effective from passage*):

17409 (a) Notwithstanding the provisions of section 10-283 of the general
17410 statutes, or any regulation adopted by the State Board of Education or
17411 the Department of Administrative Services pursuant to said section
17412 requiring a completed grant application be submitted prior to June 30,
17413 2022, the renovation project at Jefferson Elementary School in the town
17414 of New Britain with costs not to exceed seventy million dollars shall be
17415 included in subdivision (1) of section 114 of public act 23-205 and shall
17416 subsequently be considered for a grant commitment from the state,
17417 provided the town of New Britain files an application for such school
17418 building project prior to October 1, 2028, and meets all other provisions
17419 of chapter 173 of the general statutes or any regulation adopted by the
17420 State Board of Education or the Department of Administrative Services
17421 pursuant to said chapter and is eligible for grant assistance pursuant to
17422 said chapter.

17423 (b) Notwithstanding the provisions of section 10-285a of the general
17424 statutes, or any regulation adopted by the State Board of Education or
17425 the Department of Administrative Services pursuant to said section
17426 concerning the reimbursement percentage that a local board of
17427 education may be eligible to receive for a school building project, the
17428 town of New Britain may use the reimbursement rate of ninety-five per
17429 cent for the renovation project at Jefferson Elementary School, provided
17430 (1) the school district for the town of New Britain is an educational
17431 reform district, as defined in section 10-262u of the general statutes, on
17432 the effective date of this section, and (2) the school building committee
17433 responsible for undertaking such school building project is established
17434 in accordance with the provisions of section 120 of public act 21-111, as
17435 amended by public act 23-205.

17436 (c) Notwithstanding the provisions of section 10-286 of the general
17437 statutes or any regulation adopted by the State Board of Education or
17438 the Department of Administrative Services pursuant to said section

17439 concerning the calculation of grants using the state standard space
17440 specifications, the town of New Britain shall be exempt from the state
17441 standard space specifications for the purpose of the calculation of the
17442 grant for the renovation project at Jefferson Elementary School.

17443 Sec. 414. (*Effective July 1, 2026*) (a) Notwithstanding the provisions of
17444 section 10-283 of the general statutes, or any regulation adopted by the
17445 State Board of Education or the Department of Administrative Services
17446 pursuant to said section requiring a completed grant application be
17447 submitted prior to June 30, 2025, the school building project at Prudence
17448 Crandall Elementary School in the town of Enfield with costs not to
17449 exceed one hundred thirteen million nine hundred ninety-six thousand
17450 nine hundred fifty-seven dollars shall be included in section 1 of this act
17451 and shall subsequently be considered for a grant commitment from the
17452 state, provided the town of Enfield files an application for such school
17453 building project prior to October 1, 2026, and meets all other provisions
17454 of chapter 173 of the general statutes or any regulation adopted by the
17455 State Board of Education or the Department of Administrative Services
17456 pursuant to said chapter and is eligible for grant assistance pursuant to
17457 said chapter.

17458 (b) Notwithstanding the provisions of section 10-284 of the general
17459 statutes, or any regulation adopted by the State Board of Education or
17460 the Department of Administrative Services requiring that a town or
17461 regional school district begin construction on a project not later than two
17462 years after the effective date of the section of the General Assembly
17463 authorizing the Commissioner of Administrative Services to enter into
17464 grant commitments for such project, the town of Enfield shall have until
17465 June 30, 2030, to begin construction on the school building project at
17466 Prudence Crandall Elementary School.

17467 (c) Notwithstanding the provisions of section 10-286 of the general
17468 statutes, or any regulation adopted by the State Board of Education or
17469 the Department of Administrative Services pursuant to said section
17470 concerning the calculation of grants using the state standard space
17471 specifications, the town of Enfield shall be exempt from the state

17472 standard space specifications for the purpose of the calculation of the
17473 grant for the school building project at Prudence Crandall Elementary
17474 School.

17475 Sec. 415. (*Effective July 1, 2026*) (a) Notwithstanding the provisions of
17476 section 10-283 of the general statutes, or any regulation adopted by the
17477 State Board of Education or the Department of Administrative Services
17478 pursuant to said section requiring a completed grant application be
17479 submitted prior to June 30, 2025, the school building project at
17480 Hazardville Memorial Elementary School in the town of Enfield with
17481 costs not to exceed one hundred five million five hundred two thousand
17482 two hundred two dollars shall be included in section 1 of this act and
17483 shall subsequently be considered for a grant commitment from the state,
17484 provided the town of Enfield files an application for such school
17485 building project prior to October 1, 2026, and meets all other provisions
17486 of chapter 173 of the general statutes or any regulation adopted by the
17487 State Board of Education or the Department of Administrative Services
17488 pursuant to said chapter and is eligible for grant assistance pursuant to
17489 said chapter.

17490 (b) Notwithstanding the provisions of section 10-284 of the general
17491 statutes, or any regulation adopted by the State Board of Education or
17492 the Department of Administrative Services requiring that a town or
17493 regional school district begin construction on a project not later than two
17494 years after the effective date of the section of the General Assembly
17495 authorizing the Commissioner of Administrative Services to enter into
17496 grant commitments for such project, the town of Enfield shall have until
17497 June 30, 2030, to begin construction on the school building project at
17498 Hazardville Memorial Elementary School.

17499 (c) Notwithstanding the provisions of section 10-286 of the general
17500 statutes, or any regulation adopted by the State Board of Education or
17501 the Department of Administrative Services pursuant to said section
17502 concerning the calculation of grants using the state standard space
17503 specifications, the town of Enfield shall be exempt from the state
17504 standard space specifications for the purpose of the calculation of the

17505 grant for the school building project at Hazardville Memorial
17506 Elementary School.

17507 Sec. 416. (*Effective from passage*) (a) Notwithstanding the provisions of
17508 subdivision (3) of section 10-282 of the general statutes, or any
17509 regulation adopted by the State Board of Education or the Department
17510 of Administrative Services pursuant to said section concerning the
17511 definition of school building project, the construction, extension or
17512 major alteration of a gymnasium, including an ice rink, at West Haven
17513 High School shall be considered a school building project and
17514 subsequently qualify for a school building project grant under chapter
17515 173 of the general statutes.

17516 (b) Notwithstanding the provisions of section 10-283 of the general
17517 statutes, or any regulation adopted by the State Board of Education or
17518 the Department of Administrative Services pursuant to said section
17519 requiring a completed grant application be submitted prior to June 30,
17520 2025, the school building project described in subsection (a) of this
17521 section in the town of West Haven with costs not to exceed four million
17522 dollars shall be included in section 1 of this act and shall subsequently
17523 be considered for a grant commitment from the state, provided the town
17524 of West Haven files an application for such school building project prior
17525 to October 1, 2026, and meets all other provisions of chapter 173 of the
17526 general statutes or any regulation adopted by the State Board of
17527 Education or the Department of Administrative Services pursuant to
17528 said chapter and is eligible for grant assistance pursuant to said chapter.

17529 (c) Notwithstanding the provisions of subdivision (3) of subsection
17530 (a) of section 10-286 of the general statutes or any regulation adopted by
17531 the State Board of Education or the Department of Administrative
17532 Services limiting reimbursement to one-half of the eligible percentage of
17533 the net eligible cost of construction to a town for the construction,
17534 extension or major alteration of a gymnasium, the town of West Haven
17535 shall receive full reimbursement of the eligible percentage for
17536 subdivisions (1) and (2) of subsection (a) of section 10-286 of the general
17537 statutes of the net eligible cost of the construction of a gymnasium,

17538 including an ice rink, as part of the school building project described in
17539 subsection (a) of this section at West Haven High School.

17540 Sec. 417. (*Effective from passage*) Notwithstanding the provisions of
17541 section 10-283 of the general statutes or any regulation adopted by the
17542 State Board of Education or the Department of Administrative Services
17543 pursuant to said section concerning ineligible costs, the town of
17544 Seymour shall be eligible to receive reimbursement under chapter 173
17545 of the general statutes for certain ineligible costs associated with any
17546 existing or future energy or infrastructure improvement projects,
17547 including, but not limited to, photovoltaic, building management
17548 systems, energy conservation, heating, ventilation and air conditioning
17549 systems and roof replacement projects, at any public elementary,
17550 middle or high school in the town that are financed through a tax-
17551 exempt lease purchase agreement entered into between July 1, 2025, and
17552 June 30, 2027.

17553 Sec. 418. (*Effective July 1, 2026*) Notwithstanding the provisions of
17554 section 10-285a of the general statutes, or any regulation adopted by the
17555 State Board of Education or the Department of Administrative Services
17556 pursuant to said section concerning the reimbursement percentage that
17557 a local board of education may be eligible to receive for a school building
17558 project, the reimbursement percentage determined pursuant to said
17559 section shall be increased by twenty percentage points for the town of
17560 South Windsor for any school building project for South Windsor High
17561 School for which an application is submitted to the Department of
17562 Administrative Services, pursuant to section 10-283 of the general
17563 statutes, on or before June 30, 2027.

17564 Sec. 419. (*Effective from passage*) (a) Notwithstanding the provisions of
17565 subdivision (6) of subsection (a) of section 10-286 of the general statutes
17566 or any regulations adopted by the State Board of Education or the
17567 Department of Administrative Services regarding eligible costs for roof
17568 replacement projects and requiring that a roof be at least twenty years
17569 old to qualify for a grant for a replacement of such roof, the roof at
17570 Suffield High School shall be deemed to be twenty years old and the

17571 town of Suffield may replace the roof at Suffield High School and be
17572 eligible to receive a grant based on the eligible percentages determined
17573 pursuant to said section of the eligible project costs.

17574 (b) Notwithstanding the provisions of section 10-283 of the general
17575 statutes or any regulation adopted by the State Board of Education or
17576 the Department of Administrative Services pursuant to said section 10-
17577 283 requiring that the description of a project type for a school building
17578 project be made at the time of application for a school building project
17579 grant, the town of Suffield may change the description of the roof
17580 replacement project at Suffield High School to a roof replacement and
17581 photovoltaic project and subsequently qualify as a roof replacement and
17582 photovoltaic project.

17583 Sec. 420. (*Effective from passage*) (a) Notwithstanding the provisions of
17584 section 10-283 of the general statutes, or any regulation adopted by the
17585 State Board of Education or the Department of Administrative Services
17586 pursuant to said section requiring a completed grant application be
17587 submitted prior to June 30, 2025, the school building project at Suffield
17588 Middle School in the town of Suffield with costs not to exceed one
17589 hundred nineteen million five hundred thousand dollars shall be
17590 included in section 1 of this act and shall subsequently be considered for
17591 a grant commitment from the state, provided the town of Suffield files
17592 an application for such school building project prior to July 1, 2026, and
17593 meets all other provisions of chapter 173 of the general statutes or any
17594 regulation adopted by the State Board of Education or the Department
17595 of Administrative Services pursuant to said chapter and is eligible for
17596 grant assistance pursuant to said chapter.

17597 (b) Notwithstanding the provisions of section 10-285a of the general
17598 statutes, or any regulation adopted by the State Board of Education or
17599 the Department of Administrative Services pursuant to said section
17600 concerning the reimbursement percentage that a local board of
17601 education may be eligible to receive for a school building project, the
17602 reimbursement percentage determined pursuant to said section shall be
17603 increased by ten percentage points for the town of Suffield for the school

17604 building project at Suffield Middle School.

17605 Sec. 421. (*Effective from passage*) (a) Notwithstanding the provisions of
17606 section 10-283 of the general statutes, or any regulation adopted by the
17607 State Board of Education or the Department of Administrative Services
17608 pursuant to said section requiring a completed grant application be
17609 submitted prior to June 30, 2025, the school building project at Timothy
17610 Dwight Elementary School in the town of Fairfield with costs not to
17611 exceed seventy-six million dollars shall be included in section 1 of this
17612 act and shall subsequently be considered for a grant commitment from
17613 the state, provided the town of Fairfield files an application for such
17614 school building project prior to July 1, 2026, and meets all other
17615 provisions of chapter 173 of the general statutes or any regulation
17616 adopted by the State Board of Education or the Department of
17617 Administrative Services pursuant to said chapter and is eligible for
17618 grant assistance pursuant to said chapter.

17619 (b) Notwithstanding the provisions of section 10-285a of the general
17620 statutes, or any regulation adopted by the State Board of Education or
17621 the Department of Administrative Services pursuant to said section
17622 concerning the reimbursement percentage that a local board of
17623 education may be eligible to receive for a school building project, the
17624 town of Fairfield may use the reimbursement rate of seventy-five per
17625 cent for the school building project at Timothy Dwight Elementary
17626 School.

17627 Sec. 422. (*Effective from passage*) Notwithstanding the provisions of
17628 section 10-292 of the general statutes or any regulation adopted by the
17629 State Board of Education or the Department of Administrative Services
17630 requiring that a bid not be let out until plans and specifications have
17631 been approved by the Department of Administrative Services, the town
17632 of Fairfield shall be reimbursed for eligible project costs for a project to
17633 update the heating, ventilation and air conditioning system at
17634 Tomlinson Middle School, provided the town of Fairfield meets all other
17635 provisions of chapter 173 of the general statutes or any regulation
17636 adopted by the State Board of Education or the Department of

17637 Administrative Services pursuant to said chapter and is eligible for
17638 grant assistance pursuant to said chapter.

17639 Sec. 423. (*Effective from passage*) Notwithstanding the provisions of
17640 section 10-283 of the general statutes, or any regulation adopted by the
17641 State Board of Education or the Department of Administrative Services
17642 pursuant to said section requiring a completed grant application be
17643 submitted prior to June 30, 2025, the school building project at Casimir
17644 Pulaski Elementary School in the town of Meriden with costs not to
17645 exceed one hundred twenty-two million dollars shall be included in
17646 section 1 of this act and shall subsequently be considered for a grant
17647 commitment from the state, provided the town of Meriden files an
17648 application for such school building project prior to October 1, 2026, and
17649 meets all other provisions of chapter 173 of the general statutes or any
17650 regulation adopted by the State Board of Education or the Department
17651 of Administrative Services pursuant to said chapter and is eligible for
17652 grant assistance pursuant to said chapter.

17653 Sec. 424. (*Effective from passage*) (a) Notwithstanding the provisions of
17654 subdivision (3) of section 10-282 of the general statutes, or any
17655 regulation adopted by the State Board of Education or the Department
17656 of Administrative Services pursuant to said section concerning the
17657 definition of school building project, the construction of outdoor athletic
17658 facilities, including synthetic turf field replacement, at Cheshire High
17659 School shall be considered a school building project and subsequently
17660 qualify for a school building project grant under chapter 173 of the
17661 general statutes.

17662 (b) Notwithstanding the provisions of section 10-283 of the general
17663 statutes, or any regulation adopted by the State Board of Education or
17664 the Department of Administrative Services pursuant to said section
17665 requiring a completed grant application be submitted prior to June 30,
17666 2025, the school building project described in subsection (a) of this
17667 section in the town of Cheshire with costs not to exceed one million five
17668 hundred thousand dollars shall be included in section 1 of this act and
17669 shall subsequently be considered for a grant commitment from the state,

17670 provided the town of Cheshire files an application for such school
17671 building project prior to July 1, 2027, and meets all other provisions of
17672 chapter 173 of the general statutes or any regulation adopted by the
17673 State Board of Education or the Department of Administrative Services
17674 pursuant to said chapter and is eligible for grant assistance pursuant to
17675 said chapter.

17676 (c) Notwithstanding the provisions of subparagraph (B) of
17677 subdivision (2) of subsection (a) of section 10-285a of the general statutes
17678 or any regulation adopted by the State Board of Education or the
17679 Department of Administrative Services pursuant to said section
17680 concerning the reimbursement percentage that a town may be eligible
17681 to receive for a school building project, the town of Cheshire shall use
17682 the reimbursement rate of ninety-five per cent for the school building
17683 project described in subsection (a) of this section at Cheshire High
17684 School.

17685 (d) Notwithstanding the provisions of subdivision (3) of subsection
17686 (a) of section 10-286 of the general statutes or any regulation adopted by
17687 the State Board of Education or the Department of Administrative
17688 Services limiting reimbursement to one-half of the eligible percentage of
17689 the net eligible cost of construction to a town for the construction,
17690 extension or major alteration of outdoor athletic facilities, the town of
17691 Cheshire shall receive full reimbursement of the reimbursement
17692 percentage described in subsection (c) of this section of the net eligible
17693 cost of the construction of outdoor athletic facilities, including synthetic
17694 turf field replacement, as part of the school building project described
17695 in subsection (a) of this section at Cheshire High School.

17696 Sec. 425. (*Effective from passage*) (a) Notwithstanding the provisions of
17697 subdivision (3) of section 10-282 of the general statutes, or any
17698 regulation adopted by the State Board of Education or the Department
17699 of Administrative Services pursuant to said section concerning the
17700 definition of school building project, the construction of outdoor athletic
17701 facilities, including the installation or replacement of synthetic turf
17702 fields, replacement of a track and replacement of tennis courts, at

17703 Glastonbury High School shall be considered a school building project
17704 and subsequently qualify for a school building project grant under
17705 chapter 173 of the general statutes.

17706 (b) Notwithstanding the provisions of section 10-283 of the general
17707 statutes, or any regulation adopted by the State Board of Education or
17708 the Department of Administrative Services pursuant to said section
17709 requiring a completed grant application be submitted prior to June 30,
17710 2025, the school building project described in subsection (a) of this
17711 section in the town of Glastonbury with costs not to exceed five million
17712 five hundred twenty-five thousand dollars shall be included in section
17713 1 of this act and shall subsequently be considered for a grant
17714 commitment from the state, provided the town of Glastonbury files an
17715 application for such school building project prior to July 1, 2027, and
17716 meets all other provisions of chapter 173 of the general statutes or any
17717 regulation adopted by the State Board of Education or the Department
17718 of Administrative Services pursuant to said chapter and is eligible for
17719 grant assistance pursuant to said chapter.

17720 (c) Notwithstanding the provisions of subdivision (3) of subsection
17721 (a) of section 10-286 of the general statutes or any regulation adopted by
17722 the State Board of Education or the Department of Administrative
17723 Services limiting reimbursement to one-half of the eligible percentage of
17724 the net eligible cost of construction to a town for the construction,
17725 extension or major alteration of a gymnasium, the town of Glastonbury
17726 shall receive full reimbursement of the eligible percentage for
17727 subdivisions (1) and (2) of subsection (a) of section 10-286 of the general
17728 statutes of the net eligible cost of the construction of outdoor athletic
17729 facilities as part of the school building project described in subsection
17730 (a) of this section at Glastonbury High School.

17731 (d) Notwithstanding the provisions of section 10-292 of the general
17732 statutes or any regulation adopted by the State Board of Education or
17733 the Department of Administrative Services requiring that a bid not be
17734 let out until plans and specifications have been approved by the
17735 Department of Administrative Services, the town of Glastonbury shall

17736 be reimbursed for eligible project costs for the construction of outdoor
17737 athletic facilities as part of the school building project described in
17738 subsection (a) of this section at Glastonbury High School, provided the
17739 town of Glastonbury meets all other provisions of chapter 173 of the
17740 general statutes or any regulation adopted by the State Board of
17741 Education or the Department of Administrative Services pursuant to
17742 said chapter and is eligible for grant assistance pursuant to said chapter.

17743 Sec. 426. Section 127 of public act 23-205 is repealed and the following
17744 is substituted in lieu thereof (*Effective from passage*):

17745 (a) Notwithstanding the provisions of section 10-283 of the general
17746 statutes, or any regulation adopted by the State Board of Education or
17747 the Department of Administrative Services pursuant to said section 10-
17748 283 requiring a completed grant application be submitted prior to June
17749 30, 2022, the alteration and code compliance project at Naubuc
17750 Elementary School (Project Number 054-0099 A/CV) in the town of
17751 Glastonbury with costs not to exceed three million two hundred
17752 thousand dollars shall be included in subdivision (1) of section 114 of
17753 [this act] public act 23-205 and shall subsequently be considered for a
17754 grant commitment from the state, provided the town of Glastonbury
17755 files an application for such school building project prior to October 1,
17756 2023, and meets all other provisions of chapter 173 of the general
17757 statutes or any regulation adopted by the State Board of Education or
17758 the Department of Administrative Services pursuant to said chapter and
17759 is eligible for grant assistance pursuant to said chapter.

17760 (b) Notwithstanding the provisions of section 10-287 of the general
17761 statutes, or any regulation adopted by the State Board of Education or
17762 the Department of Administrative Services pursuant to said section 10-
17763 287 requiring a competitive bidding process for orders and contracts for
17764 school building projects receiving state assistance under chapter 173 of
17765 the general statutes, the town of Glastonbury shall be eligible to receive
17766 full reimbursement for the ineligible costs associated with the design
17767 fees for such project.

17768 Sec. 427. (*Effective from passage*) The Commissioner of Administrative
17769 Services shall waive any audit deficiencies for the town of New Haven
17770 related to costs associated with the projects at (1) Worthington Hooker
17771 School (Project Number 093-0342 PF/EA), (2) Christopher Columbus
17772 School (Project Number 093-0348 EA/RR), (3) Engineering and Science
17773 University Magnet School (Project Number 093-0357), (4) New Haven
17774 Academy (Project Number 093-0364), (5) Strong 21st Century
17775 Communication Lab School (Project Number 093-0368), (6) Central
17776 Registration Office (Project Number 093-0366), (7) Helene Grant/Dr.
17777 Mayo (Project Number 093-0365), (8) Roberto Clemente Leadership
17778 Academy for Global Awareness (Project Number 093-0351 N), (9) Hill
17779 Central School (Project Number 093-0353 N), and (10) Bowen Field
17780 (Project Number 093-0367).

17781 Sec. 428. Section 161 of public act 25-174 is repealed. (*Effective from*
17782 *passage*)

17783 Sec. 429. (*Effective from passage*) (a) Notwithstanding the provisions of
17784 subsection (d) of section 10-286 of the general statutes or any regulation
17785 adopted by the State Board of Education or the Department of
17786 Administrative Services pursuant to said section requiring all change
17787 orders or other change directives issued on or after July 1, 2008, to be
17788 submitted not later than six months after the date of such issuance, the
17789 town of North Branford may submit change orders issued after such six-
17790 month time limit for the new construction project at North Branford
17791 High School (Project Number 099-0053 N) for reimbursement of eligible
17792 costs from the state, provided change orders are submitted on or before
17793 January 1, 2027, and have been reviewed and approved by the
17794 Department of Administrative Services.

17795 (b) Notwithstanding the provisions of section 10-283 of the general
17796 statutes, or any regulation adopted by the State Board of Education or
17797 the Department of Administrative Services pursuant to said section
17798 concerning ineligible costs, the town of North Branford shall be eligible
17799 to receive reimbursement for certain ineligible costs resulting from
17800 premium time and rework associated with the new construction project

17801 at North Branford High School (Project Number 099-0053 N), provided
17802 such reimbursement for such ineligible costs do not exceed five hundred
17803 ninety-five thousand dollars.

17804 Sec. 430. Section 176 of public act 25-174 is repealed and the following
17805 is substituted in lieu thereof (*Effective from passage*):

17806 (a) Notwithstanding the provisions of section 10-283 of the general
17807 statutes, or any regulation adopted by the State Board of Education or
17808 the Department of Administrative Services pursuant to said section
17809 requiring a completed grant application be submitted prior to June 30,
17810 2025, the school building project for a preschool through grade eight
17811 school consolidation project in the town of Willington with costs not to
17812 exceed one hundred ten million dollars shall be included in section 1 of
17813 this act and shall subsequently be considered for a grant commitment
17814 from the state, provided the town of Willington files an application for
17815 such school building project prior to October 1, 2027, and meets all other
17816 provisions of chapter 173 of the general statutes or any regulation
17817 adopted by the State Board of Education or the Department of
17818 Administrative Services pursuant to said chapter and is eligible for
17819 grant assistance pursuant to said chapter.

17820 (b) Notwithstanding the provisions of section 10-285a of the general
17821 statutes, [as amended by this act,] or any regulation adopted by the State
17822 Board of Education or the Department of Administrative Services
17823 pursuant to said section concerning the reimbursement percentage that
17824 a local board of education may be eligible to receive for a school building
17825 project, the reimbursement percentage determined pursuant to said
17826 section shall be increased by fifteen percentage points for the town of
17827 Willington for [any] the school building project for [which an
17828 application is submitted to the Department of Administrative Services,
17829 pursuant to section 10-283 of the general statutes, on or before June 30,
17830 2027] a preschool through grade eight school consolidation project.

17831 (c) Notwithstanding the provisions of section 10-286 of the general
17832 statutes, or any regulation adopted by the State Board of Education or

17833 the Department of Administrative Services pursuant to said section
17834 concerning the calculation of grants using the state standard space
17835 specifications, the town of Willington shall be exempt from the state
17836 standard space specifications for the purpose of the calculation of the
17837 grant for the school building project for a preschool through grade eight
17838 school consolidation project.

17839 Sec. 431. (*Effective July 1, 2026*) (a) Notwithstanding the provisions of
17840 section 10-283 of the general statutes, or any regulation adopted by the
17841 State Board of Education or the Department of Administrative Services
17842 pursuant to said section requiring a completed grant application be
17843 submitted prior to June 30, 2025, the school building project at Beecher
17844 Road School in the town of Woodbridge with costs not to exceed one
17845 hundred eighteen million five hundred thousand dollars shall be
17846 included in section 1 of this act and shall subsequently be considered for
17847 a grant commitment from the state, provided the town of Woodbridge
17848 files an application for such school building project prior to October 1,
17849 2026, and meets all other provisions of chapter 173 of the general
17850 statutes or any regulation adopted by the State Board of Education or
17851 the Department of Administrative Services pursuant to said chapter and
17852 is eligible for grant assistance pursuant to said chapter.

17853 (b) Notwithstanding the provisions of subsection (l) of section 10-
17854 285a of the general statutes, or any regulation adopted by the State
17855 Board of Education or the Department of Administrative Services
17856 pursuant to said section increasing the reimbursement percentage by
17857 five percentage points if the municipality meets the requirements of
17858 section 8-13bb or 8-13hh of the general statutes or has adopted a
17859 development district, the reimbursement rate for the town of
17860 Woodbridge shall be increased by five percentage points for the school
17861 building project at Beecher Road School, provided the town of
17862 Woodbridge meets the requirements of section 8-13bb or 8-13hh of the
17863 general statutes or has adopted a development district and would
17864 otherwise be eligible under subsection (l) of section 10-285a of the
17865 general statutes.

17866 (c) Notwithstanding the provisions of subdivision (6) of subsection
17867 (a) of section 10-286 of the general statutes or any regulations adopted
17868 by the State Board of Education or the Department of Administrative
17869 Services regarding eligible costs for roof replacement projects and
17870 requiring that a roof be at least twenty years old to qualify for a grant
17871 for a replacement of such roof, the roof at Beecher Road School shall be
17872 deemed to be twenty years old and the town of Woodbridge may
17873 replace the roof at Beecher Road School and be eligible to receive a grant
17874 based on the eligible percentages determined pursuant to said section
17875 of the eligible project costs.

17876 Sec. 432. (*Effective from passage*) Notwithstanding the provisions of
17877 section 10-283 of the general statutes or any regulation adopted by the
17878 State Board of Education or the Department of Administrative Services
17879 pursuant to said section concerning ineligible costs, the town of
17880 Naugatuck shall be eligible to receive reimbursement under chapter 173
17881 of the general statutes for certain ineligible costs associated with any
17882 existing or future energy or infrastructure improvement projects,
17883 including, but not limited to, photovoltaic, building management
17884 systems, energy conservation, heating, ventilation and air conditioning
17885 systems and roof replacement projects, at any public elementary,
17886 middle or high school in the town that are financed through a tax-
17887 exempt lease purchase agreement entered into between July 1, 2025, and
17888 June 30, 2027.

17889 Sec. 433. Section 158 of public act 25-174 is repealed and the following
17890 is substituted in lieu thereof (*Effective from passage*):

17891 (a) Notwithstanding the provisions of section 10-283 of the general
17892 statutes, or any regulation adopted by the State Board of Education or
17893 the Department of Administrative Services pursuant to said section
17894 requiring a completed grant application be submitted prior to June 30,
17895 2024, the school building project at King Street Primary School in the
17896 town of Danbury with costs not to exceed seven million dollars shall be
17897 included in subdivision (1) of section 141 of [this act] public act 25-174
17898 and shall subsequently be considered for a grant commitment from the

17899 state, provided the town of Danbury files an application for such school
17900 building project prior to October 1, [2025] 2027, and meets all other
17901 provisions of chapter 173 of the general statutes or any regulation
17902 adopted by the State Board of Education or the Department of
17903 Administrative Services pursuant to said chapter and is eligible for
17904 grant assistance pursuant to said chapter.

17905 (b) Notwithstanding the provisions of section 10-285a of the general
17906 statutes, as amended by [this act] public act 25-174, or any regulation
17907 adopted by the State Board of Education or the Department of
17908 Administrative Services pursuant to said section concerning the
17909 reimbursement percentage that a local board of education may be
17910 eligible to receive for a school building project, the town of Danbury
17911 may use the reimbursement rate of eighty per cent for the school
17912 building project at King Street Primary School.

17913 (c) Notwithstanding the provisions of section 10-284 of the general
17914 statutes, or any regulation adopted by the State Board of Education or
17915 the Department of Administrative Services requiring that a town or
17916 regional school district begin construction on a project not later than two
17917 years after the effective date of the section of the General Assembly
17918 authorizing the Commissioner of Administrative Services to enter into
17919 grant commitments for such project, the town of Danbury shall have
17920 until October 1, 2029, to begin construction on the school building
17921 project at King Street Primary School.

17922 Sec. 434. Section 5 of public act 20-8 of the September special session,
17923 as amended by section 383 of public act 22-118, is repealed and the
17924 following is substituted in lieu thereof (*Effective from passage*):

17925 (a) Notwithstanding the provisions of section 10-283 of the general
17926 statutes or any regulation adopted by the State Board of Education or
17927 the Department of Administrative Services pursuant to said section
17928 requiring a completed grant application be submitted prior to June 30,
17929 2019, the new construction project at Norwalk High School in the town
17930 of Norwalk with costs not to exceed [two hundred thirty-nine million]

17931 two hundred sixty million seven hundred thirty-four thousand eight
17932 hundred twelve dollars shall be included in subdivision (1) of section 1
17933 of public act 20-8 of the September special session and shall
17934 subsequently be considered for a grant commitment from the state,
17935 provided the town of Norwalk files an application for such school
17936 building project prior to December 31, 2020, and meets all other
17937 provisions of chapter 173 of the general statutes or any regulation
17938 adopted by the State Board of Education or the Department of
17939 Administrative Services pursuant to said chapter and is eligible for
17940 grant assistance pursuant to said chapter.

17941 (b) Except as otherwise provided in subsections (c) and (d) of this
17942 section, notwithstanding the provisions of section 10-285a of the general
17943 statutes or any regulation adopted by the State Board of Education or
17944 the Department of Administrative Services pursuant to said section
17945 concerning the reimbursement percentage that a local board of
17946 education may be eligible to receive for a school building project, the
17947 town of Norwalk may use the reimbursement rate of eighty per cent for
17948 the new construction project at Norwalk High School, provided the local
17949 board of education for the town of Norwalk (1) establishes a pathways
17950 in technology early college high school program at the new Norwalk
17951 High School and such program enrolls students from surrounding
17952 towns with priority given to students from Stamford and Bridgeport,
17953 and (2) does not restrict students who are not enrolled in an arts
17954 pathways program offered at Norwalk High School from joining or
17955 otherwise participating in any arts or music program offered as part of
17956 the regular school curriculum or any extracurricular arts or music-
17957 related program.

17958 (c) (1) Notwithstanding the provisions of section 10-285a of the
17959 general statutes or any regulation adopted by the State Board of
17960 Education or the Department of Administrative Services pursuant to
17961 said section concerning the reimbursement percentage that a local board
17962 of education may be eligible to receive for a school building project, the
17963 town of Norwalk may use the reimbursement rate of fifty per cent for

17964 the construction of a natatorium as part of the new construction project
17965 at Norwalk High School.

17966 (2) Notwithstanding the provisions of subdivision (3) of subsection
17967 (a) of section 10-286 of the general statutes or any regulation adopted by
17968 the State Board of Education or the Department of Administrative
17969 Services limiting reimbursement to one-half of the eligible percentage of
17970 the net eligible cost of construction to a town for construction, the town
17971 of Norwalk shall receive full reimbursement of the reimbursement
17972 percentage described in subdivision (1) of this subsection of the net
17973 eligible cost of the new construction project at Norwalk High School.

17974 (d) Notwithstanding the provisions of section 10-285a of the general
17975 statutes or any regulation adopted by the State Board of Education or
17976 the Department of Administrative Services pursuant to said section
17977 concerning the reimbursement percentage that a local board of
17978 education may be eligible to receive for a school building project, the
17979 town of Norwalk may use the reimbursement rate of fifty per cent for
17980 site acquisition costs associated with the purchase of any parcels of land
17981 adjacent to the site of the new construction project at Norwalk High
17982 School.

17983 Sec. 435. Section 149 of public act 25-174, as amended by section 18 of
17984 public act 26-1, is repealed and the following is substituted in lieu
17985 thereof (*Effective from passage*):

17986 (a) Notwithstanding the provisions of section 10-283 of the general
17987 statutes, or any regulation adopted by the State Board of Education or
17988 the Department of Administrative Services pursuant to said section
17989 requiring a completed grant application be submitted prior to June 30,
17990 2024, the school building project at Middlefield Memorial School in
17991 Regional District 13 with costs not to exceed seventy-six million one
17992 hundred thirty thousand dollars shall be included in subdivision (1) of
17993 section 141 of public act 25-174 and shall subsequently be considered for
17994 a grant commitment from the state, provided Regional District 13 files
17995 an application for such school building project prior to October 1, 2025,

17996 and meets all other provisions of chapter 173 of the general statutes or
17997 any regulation adopted by the State Board of Education or the
17998 Department of Administrative Services pursuant to said chapter and is
17999 eligible for grant assistance pursuant to said chapter.

18000 (b) Notwithstanding the provisions of section 10-283 of the general
18001 statutes, or any regulation adopted by the State Board of Education or
18002 the Department of Administrative Services pursuant to said section
18003 requiring that the description of a project type for a school building
18004 project be made at the time of application for a school building project
18005 grant and the provisions of subdivision (18) of section 10-282 of the
18006 general statutes, or any regulation adopted by the State Board of
18007 Education or the Department of Administrative Services pursuant to
18008 said section 10-282 concerning the definition of renovation, Regional
18009 District 13 may change the description of the school building project at
18010 Middlefield Memorial School to a renovation project and subsequently
18011 qualify as a renovation, as defined in subdivision (18) of said section 10-
18012 282.

18013 (c) Notwithstanding the provisions of subdivision (1) of subsection
18014 (e) of section 10-285a of the general statutes, revision of 1958, revised to
18015 January 1, 2025, or any regulation adopted by the State Board of
18016 Education or the Department of Administrative Services pursuant to
18017 said section increasing the reimbursement percentage for a school
18018 building project that includes the expansion of an existing building to
18019 include space for an early childhood care and education program by
18020 fifteen percentage points for the portion of the building used primarily
18021 for such program, the reimbursement percentage for the school building
18022 project at Middlefield Memorial School in Regional District 13 shall be
18023 increased by fifteen percentage points for the entire school building
18024 project.

18025 (d) Notwithstanding the provisions of section 10-283 of the general
18026 statutes or any regulation adopted by the State Board of Education or
18027 the Department of Administrative Services pursuant to said section
18028 concerning ineligible costs, Regional District 13 shall be eligible to

18029 receive reimbursement for certain ineligible costs relating to the Phase 1
18030 swing space used for students while the school building project at
18031 Middlefield Memorial School was being completed, provided such
18032 ineligible costs do not exceed two million dollars.

18033 (e) Notwithstanding the provisions of subparagraph (B) of
18034 subdivision (3) of subsection (b) of section 10-287 of the general statutes
18035 or any regulation adopted by the State Board of Education or the
18036 Department of Administrative Services pursuant to said section
18037 concerning the inclusion of a guaranteed maximum price for the cost of
18038 construction in a construction manager's contract prior to the
18039 commencement of work relating to site preparation and demolition,
18040 Regional District 13 shall be eligible to receive reimbursement for costs
18041 associated with work relating to site preparation and demolition that
18042 was not included as part of the guaranteed maximum price determined
18043 for the construction manager's contract prior to the commencement of
18044 such work for the renovation project at Middlefield Memorial School.

18045 Sec. 436. *(Effective from passage)* (a) Notwithstanding the provisions of
18046 section 10-283 of the general statutes, or any regulation adopted by the
18047 State Board of Education or the Department of Administrative Services
18048 pursuant to said section requiring a completed grant application be
18049 submitted prior to June 30, 2025, the new construction project at
18050 Pomperaug Elementary School in Regional District 15 with costs not to
18051 exceed one hundred twelve million three hundred thousand dollars
18052 shall be included in section 1 of this act and shall subsequently be
18053 considered for a grant commitment from the state, provided Regional
18054 District 15 files an application for such school building project prior to
18055 October 1, 2027, and meets all other provisions of chapter 173 of the
18056 general statutes or any regulation adopted by the State Board of
18057 Education or the Department of Administrative Services pursuant to
18058 said chapter and is eligible for grant assistance pursuant to said chapter.

18059 (b) Notwithstanding the provisions of section 10-286 of the general
18060 statutes or any regulation adopted by the State Board of Education or
18061 the Department of Administrative Services pursuant to said section

18062 concerning the calculation of grants using the state standard space
18063 specifications, Regional District 15 shall be exempt from the state
18064 standard space specifications for the purpose of the calculation of the
18065 grant for the new construction project at Pomperaug Elementary School.

18066 Sec. 437. (*Effective from passage*) (a) Notwithstanding the provisions of
18067 section 10-283 of the general statutes, or any regulation adopted by the
18068 State Board of Education or the Department of Administrative Services
18069 pursuant to said section requiring a completed grant application be
18070 submitted prior to June 30, 2025, the new construction project at
18071 Gainfield Elementary School in Regional District 15 with costs not to
18072 exceed one hundred eleven million nine hundred ten thousand dollars
18073 shall be included in section 1 of this act and shall subsequently be
18074 considered for a grant commitment from the state, provided Regional
18075 District 15 files an application for such school building project prior to
18076 October 1, 2027, and meets all other provisions of chapter 173 of the
18077 general statutes or any regulation adopted by the State Board of
18078 Education or the Department of Administrative Services pursuant to
18079 said chapter and is eligible for grant assistance pursuant to said chapter.

18080 (b) Notwithstanding the provisions of section 10-286 of the general
18081 statutes or any regulation adopted by the State Board of Education or
18082 the Department of Administrative Services pursuant to said section
18083 concerning the calculation of grants using the state standard space
18084 specifications, Regional District 15 shall be exempt from the state
18085 standard space specifications for the purpose of the calculation of the
18086 grant for the new construction project at Gainfield Elementary School.

18087 Sec. 438. (*Effective from passage*) (a) Notwithstanding the provisions of
18088 section 10-283 of the general statutes, or any regulation adopted by the
18089 State Board of Education or the Department of Administrative Services
18090 pursuant to said section requiring a completed grant application be
18091 submitted prior to June 30, 2025, the school building project at Haddam-
18092 Killingworth High School in Regional District 17 with costs not to
18093 exceed one hundred fifty-one million nine hundred thousand dollars
18094 shall be included in section 1 of this act and shall subsequently be

18095 considered for a grant commitment from the state, provided Regional
18096 District 17 files an application for such school building project prior to
18097 October 1, 2026, and meets all other provisions of chapter 173 of the
18098 general statutes or any regulation adopted by the State Board of
18099 Education or the Department of Administrative Services pursuant to
18100 said chapter and is eligible for grant assistance pursuant to said chapter.

18101 (b) Notwithstanding the provisions of section 10-285a of the general
18102 statutes, or any regulation adopted by the State Board of Education or
18103 the Department of Administrative Services pursuant to said section
18104 concerning the reimbursement percentage that a local board of
18105 education may be eligible to receive for a school building project,
18106 Regional District 17 may use the reimbursement rate of fifty-one and
18107 forty-three hundredths per cent for the school building project at
18108 Haddam-Killingworth High School.

18109 (c) Notwithstanding the provisions of section 10-286 of the general
18110 statutes or any regulation adopted by the Department of Administrative
18111 Services or the State Board of Education pursuant to said section
18112 concerning the calculation of grants using the state standard space
18113 specifications, Regional District 17 shall be exempt from the state
18114 standard space specifications for the purpose of the calculation of the
18115 grant for the school building project at Haddam-Killingworth High
18116 School.

18117 (d) Notwithstanding the provisions of subdivision (5) of subsection
18118 (a) of section 10-286 of the general statutes or any regulation adopted by
18119 the State Board of Education or the Department of Administrative
18120 Services limiting reimbursement to one-half of the eligible percentage of
18121 the net eligible cost of construction to a town for the construction,
18122 extension or major alteration of outdoor athletic facilities, tennis courts
18123 or a natatorium, gymnasium or auditorium, Regional District 17 shall
18124 receive full reimbursement of the reimbursement percentage described
18125 in subsection (b) of this section of the net eligible cost of such
18126 construction, extension or major alteration as part of the school building
18127 project at Haddam-Killingworth High School.

18128 Sec. 439. (*Effective from passage*) (a) Notwithstanding the provisions of
18129 subdivision (3) of section 10-282 of the general statutes, or any
18130 regulation adopted by the State Board of Education or the Department
18131 of Administrative Services pursuant to said section concerning the
18132 definition of school building project, the renovation of a bus loop at The
18133 Gilbert School shall be considered a school building project and
18134 subsequently qualify for a school building project grant under chapter
18135 173 of the general statutes.

18136 (b) Notwithstanding the provisions of section 10-283 of the general
18137 statutes, or any regulation adopted by the State Board of Education or
18138 the Department of Administrative Services pursuant to said section
18139 requiring a completed grant application be submitted prior to June 30,
18140 2025, the school building project at The Gilbert School with costs not to
18141 exceed four million six hundred eighty-five thousand dollars shall be
18142 included in section 1 of this act and shall subsequently be considered for
18143 a grant commitment from the state, provided The Gilbert School files an
18144 application for such school building project prior to October 1, 2026, and
18145 meets all other provisions of chapter 173 of the general statutes or any
18146 regulation adopted by the State Board of Education or the Department
18147 of Administrative Services pursuant to said chapter and is eligible for
18148 grant assistance pursuant to said chapter.

18149 Sec. 440. Section 171 of public act 25-174 is repealed and the following
18150 is substituted in lieu thereof (*Effective from passage*):

18151 (a) Notwithstanding the provisions of section 10-283 of the general
18152 statutes or any regulation adopted by the State Board of Education or
18153 the Department of Administrative Services pursuant to said section
18154 requiring a completed grant application be submitted prior to June 30,
18155 2024, the alteration project at the Norwich Free Academy campus in the
18156 town of Norwich with costs not to exceed five million six hundred ten
18157 thousand dollars shall be included in subdivision (1) of section 141 of
18158 [this act] public act 25-174 and shall subsequently be considered for a
18159 grant commitment from the state, provided Norwich Free Academy
18160 files an application for such school building project prior to October 1,

18161 2025, and meets all other provisions of chapter 173 of the general
18162 statutes or any regulation adopted by the State Board of Education or
18163 the Department of Administrative Services pursuant to said chapter and
18164 is eligible for grant assistance pursuant to said chapter.

18165 (b) Notwithstanding the provisions of subsection (l) of section 10-
18166 285a of the general statutes, or any regulation adopted by the State
18167 Board of Education or the Department of Administrative Services
18168 pursuant to said section concerning the reimbursement percentage that
18169 an endowed academy approved pursuant to section 10-34 of the general
18170 statutes may be eligible to receive for a school building project, Norwich
18171 Free Academy may use the reimbursement rate of ninety-five per cent
18172 for the school building project at Norwich Free Academy.

18173 ~~[(b)]~~ (c) Notwithstanding the provisions of section 10-283 of the
18174 general statutes or any regulation adopted by the State Board of
18175 Education or the Department of Administrative Services pursuant to
18176 said section concerning ineligible costs, Norwich Free Academy shall be
18177 eligible to receive reimbursement for certain ineligible costs for the
18178 alteration project at the Norwich Free Academy campus in the town of
18179 Norwich for ordinary resurfacing, maintenance, repairs and
18180 replacements, repair of site improvements and artificial turf.

18181 ~~[(c)]~~ (d) Notwithstanding the provisions of section 10-286 of the
18182 general statutes, or any regulation adopted by the State Board of
18183 Education or the Department of Administrative Services pursuant to
18184 said section concerning the calculation of grants using the state standard
18185 space specifications, Norwich Free Academy shall be exempt from the
18186 state standard space specifications for the purpose of the calculation of
18187 the grant for the school building project at the Norwich Free Academy.

18188 (e) Notwithstanding the provisions of section 10-287 of the general
18189 statutes, or any regulation adopted by the State Board of Education or
18190 the Department of Administrative Services pursuant to said section 10-
18191 287 requiring a competitive bidding process for orders and contracts for
18192 school building projects receiving state assistance under chapter 173 of

18193 the general statutes, the provisions of said section 10-287 related to all
18194 orders and contracts for school building construction shall not apply to
18195 the school building project at the Norwich Free Academy and Norwich
18196 Free Academy shall be eligible to receive full reimbursement for the
18197 ineligible costs associated with any orders and contracts for such project.

18198 (f) Notwithstanding the provisions of section 10-292 of the general
18199 statutes or any regulation adopted by the State Board of Education or
18200 the Department of Administrative Services requiring that a bid not be
18201 let out until plans and specifications have been approved by the
18202 Department of Administrative Services, Norwich Free Academy shall
18203 be reimbursed for eligible project costs for the school building project at
18204 Norwich Free Academy.

18205 Sec. 441. (*Effective from passage*) Notwithstanding the provisions of
18206 section 10-283 of the general statutes or any regulation adopted by the
18207 State Board of Education or the Department of Administrative Services
18208 pursuant to said section concerning ineligible costs, the town of
18209 Cheshire shall be eligible to receive reimbursement under chapter 173
18210 of the general statutes and any related chapters of the general statutes
18211 for certain ineligible costs associated with any existing or future school
18212 building projects for energy or infrastructure improvement, including,
18213 but not limited to, photovoltaic installations on roofs or free-standing
18214 solar carports or free-standing, ground-based solar arrays, building
18215 management systems, energy conservation, heating, ventilation and air
18216 conditioning systems, and roof replacement projects, at any elementary,
18217 middle or high school in the town that are financed through a tax-
18218 exempt lease purchase agreement and part of an overall energy
18219 performance contract that has been previously executed and duly
18220 awarded through a prior procurement process.

18221 Sec. 442. Subsection (b) of section 17b-191 of the 2026 supplement to
18222 the general statutes is repealed and the following is substituted in lieu
18223 thereof (*Effective July 1, 2026*):

18224 (b) The state-administered general assistance program shall provide

18225 cash assistance of [(1)] two hundred sixty-nine dollars per month [for an
18226 unemployable person upon determination of such person's
18227 unemployability; (2) two hundred dollars per month for a transitional
18228 person who is required to pay for shelter; and (3) fifty dollars per month
18229 for a transitional person who is not required to pay for shelter] to
18230 persons eligible for the program. The standard of assistance paid for
18231 individuals residing in rated boarding facilities shall remain at the level
18232 in effect on August 31, 2003. No person shall be eligible for cash
18233 assistance under the program if eligible for cash assistance under any
18234 other state or federal cash assistance program. The standards of
18235 assistance set forth in this subsection shall be subject to annual increases,
18236 as described in subsection (b) of section 17b-104.

18237 Sec. 443. Subsection (f) of section 17b-274d of the general statutes is
18238 repealed and the following is substituted in lieu thereof (*Effective July 1,*
18239 *2026*):

18240 (f) Nonpreferred drugs in the classes of drugs included on the
18241 preferred drug lists shall be subject to prior authorization. Prior
18242 authorization is not required for any mental-health-related drug that
18243 has been filled or refilled, in any dosage, at least one time in the one-
18244 year period prior to the date the individual presents a prescription for
18245 the drug at a pharmacy. If prior authorization is granted for a drug not
18246 included on a preferred drug list, the authorization shall be valid for one
18247 year from the date the prescription is first filled. [Antiretroviral classes
18248 of drugs shall not be included on the preferred drug lists.]

18249 Sec. 444. (NEW) (*Effective July 1, 2026*) (a) The Commissioner of Social
18250 Services may periodically review available data on the clinical
18251 effectiveness of outpatient prescription drugs covered under the
18252 Medicaid program that are projected to exceed (1) a net cost per
18253 consumer, after factoring in rebates, of twenty-five thousand dollars per
18254 year, or (2) an annual aggregate cost, after factoring in rebates to the
18255 medical assistance program, of ten million dollars. The commissioner
18256 may, within available appropriations, contract with a third party to
18257 conduct a comparative effectiveness review of any such outpatient

18258 prescription drug. For purposes of this section, "rebate" means an
18259 amount sent to the state by a prescription drug manufacturer to offset
18260 the cost of outpatient prescription drugs covered by the Medicaid
18261 program.

18262 (b) Any such comparative effectiveness review shall include, but
18263 need not be limited to: (1) Clinical efficacy and outcomes; (2)
18264 information relating to the pricing of the outpatient prescription drug,
18265 including, but not limited to, information relating to prices paid by other
18266 states or developed nations; (3) such drug's net price to the Medicaid
18267 program as compared to its therapeutic benefits, including, but not
18268 limited to, the seriousness and prevalence of the disease or condition
18269 that is treated by the drug; (4) the extent of utilization of such drug; (5)
18270 the likelihood that the use of such drug will reduce the need for other
18271 medical care; (6) the number of manufacturers that produce such drug;
18272 and (7) whether there are pharmaceutical equivalents of such drug.

18273 (c) Any such comparative effectiveness review shall not include any
18274 brand-name prescription drug or biologic that is designated for a rare
18275 disease or condition under 21 USC 360bb and for which the only
18276 approved indication is for one or more rare diseases or conditions.

18277 (d) The Commissioner of Social Services may make public and share
18278 the results of any comparative effectiveness review with any entity,
18279 including any multistate prescription drug purchasing collaborative in
18280 which the state is a participating member, in order to help negotiate
18281 additional supplemental rebate agreements beyond any rebates
18282 required under federal law.

18283 Sec. 445. Section 332 of public act 25-168 is repealed and the following
18284 is substituted in lieu thereof (*Effective from passage*):

18285 Notwithstanding the provisions of section 17b-340d of the general
18286 statutes, the Commissioner of Social Services shall, within available
18287 appropriations, increase nursing home facility rates to support wage
18288 increases for [nursing] licensed nurses engaged solely in direct patient

18289 care services and supports and not employed in administrative
18290 functions, nurse's aide, dietary, housekeeping, laundry and
18291 maintenance and plant operation personnel of three per cent effective
18292 July 1, 2025, three per cent effective July 1, 2026, and four per cent
18293 effective January 1, 2027. Facilities that receive a rate adjustment for
18294 wage enhancements for employees but do not provide such
18295 enhancements may be subject to a rate decrease in the same amount as
18296 the adjustment.

18297 Sec. 446. Subdivision (2) of subsection (a) of section 17b-340d of the
18298 2026 supplement to the general statutes is repealed and the following is
18299 substituted in lieu thereof (*Effective from passage*):

18300 (2) (A) Beginning July 1, 2022, facilities will be required to comply
18301 with collection and reporting of quality metrics as specified by the
18302 Department of Social Services, after consultation with the nursing home
18303 industry, consumers, employees and the Department of Public Health.
18304 Rate adjustments based on performance on quality metrics will be
18305 phased in, beginning July 1, 2022, with a period of reporting only.
18306 Effective July 1, 2023, the Department of Social Services shall issue
18307 individualized reports annually to each nursing home facility showing
18308 the impact to the Medicaid rate for such home based on the quality
18309 metrics program. A nursing home facility receiving an individualized
18310 quality metrics report may use such report to evaluate the impact of the
18311 quality metrics program on said facility's Medicaid reimbursement. On
18312 or after October 1, 2026, the Department of Social Services may establish
18313 a quality metrics program, within available appropriations designated
18314 for such purpose, to provide payments to nursing home facilities [(A)]
18315 (i) for high-quality outcomes based on performance in the quality
18316 metrics program, and [(B)] (ii) designed to incentivize the provision of
18317 high-quality services to nursing home residents who are Medicaid
18318 beneficiaries, as indicated in the individualized report issued to each
18319 nursing home facility pursuant to the provisions of this subdivision.
18320 Such quality metrics program shall evaluate nursing home facilities
18321 based on national quality measures for nursing home facilities issued by

18322 the Centers for Medicare and Medicaid Services and state-administered
18323 consumer satisfaction measures. Such quality measures may be
18324 weighted higher for desired outcomes, as determined by the
18325 department. Not later than February 1, 2027, the department shall
18326 submit a report, in accordance with the provisions of section 11-4a, to
18327 the joint standing committees of the General Assembly having
18328 cognizance of matters relating to appropriations and the budgets of state
18329 agencies and human services on the implementation of the quality
18330 metrics program.

18331 (B) For the fiscal year ending June 30, 2029, and each fiscal year
18332 thereafter, the Department of Social Services shall make distributions,
18333 from an annual pool of ten million dollars of enhanced Medicaid quality
18334 performance payments, to eligible nursing home facilities based on each
18335 nursing home facility's performance in the quality metrics program.
18336 Payments will be determined based on the maximum quality score
18337 points a nursing home facility may be awarded for its performance in
18338 improving its quality metrics. In determining a nursing home facility's
18339 maximum quality score points, the department may use the Centers for
18340 Medicare and Medicaid Services' nursing home quarterly metrics for
18341 patients with stays of one hundred one days or longer, a consumer
18342 satisfaction survey and Department of Public Health data. Nursing
18343 home facilities that have been identified by the Centers for Medicare and
18344 Medicaid Services as special focus facilities for serious quality of care
18345 issues, special focus facility candidates or with an abuse icon on the
18346 centers' Nursing Home Compare Internet web site shall not be eligible
18347 for participation in the quality metrics program and shall not receive
18348 payment. Enhanced Medicaid quality performance payments may be
18349 prorated to stay within available appropriations.

18350 (C) On and after July 1, 2026, the Department of Social Services shall
18351 utilize the nursing component of the Patient Driven Payment Model
18352 resident assessment to calculate quarterly adjustments to the Medicaid
18353 nursing home facility reimbursement case-mix index scores. To align
18354 Medicaid cost data with the Patient Driven Payment Model resident

18355 assessment data, the department shall rebase nursing home facility
18356 Medicaid per diem rates using the cost year ending September 30, 2024,
18357 for rates effective July 1, 2026. To incorporate Patient Driven Payment
18358 Model data into the Medicaid per diem payment calculation, the
18359 department shall adjust Medicaid rates over a three-year phase-in
18360 period. The three-year phase-in period shall use phase-in parameters,
18361 including, but not limited to, budget adjustment factors, case-mix
18362 neutrality factors and stop loss and stop gain corridors, as necessary, to
18363 stay within available appropriations.

18364 (D) Not later than July 1, 2026, the Department of Social Services shall
18365 implement a Medicaid utilization pool that provides enhanced
18366 Medicaid payments to nursing home facilities that have a resident payor
18367 mix that comprises more than seventy-five per cent of Medicaid
18368 members. Utilizing annual Medicaid cost reports, the department shall
18369 determine each nursing home facility's payor mix to identify nursing
18370 home facilities eligible to receive enhanced Medicaid payments on an
18371 annual basis. Payments shall be for the purpose of supporting increased
18372 Medicaid utilization and enhanced access and services for Medicaid
18373 members. Eligible nursing home facilities shall receive enhanced
18374 Medicaid funding from a funding pool limited to two million five
18375 hundred thousand dollars for the fiscal year ending June 30, 2027, and
18376 five million dollars for subsequent fiscal years. The Commissioner of
18377 Social Services may prorate enhanced Medicaid utilization payments to
18378 stay within available appropriations.

18379 Sec. 447. Subdivision (12) of subsection (a) of section 17b-340d of the
18380 2026 supplement to the general statutes is repealed and the following is
18381 substituted in lieu thereof (*Effective July 1, 2026*):

18382 (12) For purposes of computing minimum allowable patient days,
18383 utilization of a facility's certified beds shall be determined at a minimum
18384 of ninety per cent of capacity, except for facilities that have undergone
18385 a change in ownership, new facilities, and facilities which are certified
18386 for additional beds, which may be permitted a lower occupancy rate for
18387 the first three months of operation after the effective date of licensure.

18388 Notwithstanding the provisions of this subdivision, the Commissioner
18389 of Social Services may recalculate the Medicaid rate established for a
18390 licensed chronic and convalescent nursing home for the fiscal year
18391 ending June 30, 2026, and for each fiscal year thereafter, at any time
18392 during the fiscal year to address (A) any temporary licensed bed
18393 reductions due to closure of beds during renovations, (B) prolonged
18394 workforce staffing challenges, or (C) any other impediments to
18395 maintaining full patient census as the commissioner, in the
18396 commissioner's discretion, determines would justify relief from the
18397 minimum allowable patient days requirement.

18398 Sec. 448. (*Effective July 1, 2026*) The Commissioner of Social Services
18399 shall amend the Medicaid state plan to increase rates of reimbursement
18400 for family planning services and provide not less than five hundred
18401 thousand dollars in Medicaid state share funding to increase such rates
18402 for licensed family planning clinics. The commissioner shall use funds
18403 appropriated for family planning services for the fiscal year ending June
18404 30, 2027, for this purpose.

18405 Sec. 449. Subsection (c) of section 17b-28 of the 2026 supplement to
18406 the general statutes is repealed and the following is substituted in lieu
18407 thereof (*Effective July 1, 2026*):

18408 (c) On and after October 31, 2017, the council shall be composed of
18409 the following members:

18410 (1) The chairpersons and ranking members of the joint standing
18411 committees of the General Assembly having cognizance of matters
18412 relating to aging, human services, public health and appropriations and
18413 the budgets of state agencies, or their designees;

18414 (2) Five appointed by the speaker of the House of Representatives,
18415 one of whom shall be a member of the General Assembly, one of whom
18416 shall be a community provider of adult Medicaid health services, one of
18417 whom shall be a recipient of Medicaid benefits for the aged, blind and
18418 disabled or an advocate for such a recipient, one of whom shall be a

18419 representative of the state's federally qualified health clinics and one of
18420 whom shall be a member of the Connecticut Hospital Association;

18421 (3) Five appointed by the president pro tempore of the Senate, one of
18422 whom shall be a member of the General Assembly, one of whom shall
18423 be a representative of the home health care industry, one of whom shall
18424 be a primary care medical home provider, one of whom shall be an
18425 advocate for Department of Children and Families foster families and
18426 one of whom shall be a representative of the business community with
18427 experience in cost efficiency management;

18428 (4) Three appointed by the majority leader of the House of
18429 Representatives, one of whom shall be an advocate for persons with
18430 substance abuse disabilities, one of whom shall be a Medicaid dental
18431 provider and one of whom shall be a representative of the for-profit
18432 nursing home industry;

18433 (5) Three appointed by the majority leader of the Senate, one of whom
18434 shall be a representative of school-based health centers, one of whom
18435 shall be a recipient of benefits under the HUSKY Health program and
18436 one of whom shall be a physician who serves Medicaid clients;

18437 (6) Three appointed by the minority leader of the House of
18438 Representatives, one of whom shall be an advocate for persons with
18439 disabilities, one of whom shall be a dually eligible Medicaid-Medicare
18440 beneficiary or an advocate for such a beneficiary and one of whom shall
18441 be a representative of the not-for-profit nursing home industry;

18442 (7) Three appointed by the minority leader of the Senate, one of
18443 whom shall be a low-income adult recipient of Medicaid benefits or an
18444 advocate for such a recipient, one of whom shall be a representative of
18445 hospitals and one of whom shall be a representative of the business
18446 community with experience in cost efficiency management;

18447 (8) The executive director of the Commission on Women, Children,
18448 Seniors, Equity and Opportunity, or the executive director's designee;

18449 (9) A member of the Commission on Women, Children, Seniors,
18450 Equity and Opportunity, designated by the executive director of said
18451 commission;

18452 (10) A representative of the Long-Term Care Advisory Council;

18453 (11) The Commissioners of Social Services, Children and Families,
18454 Public Health, Developmental Services, Aging and Disability Services
18455 and Mental Health and Addiction Services, or their designees, who shall
18456 be ex-officio nonvoting members;

18457 (12) The Comptroller, or the Comptroller's designee, who shall be an
18458 ex-officio nonvoting member;

18459 (13) The Secretary of the Office of Policy and Management, or the
18460 secretary's designee, who shall be an ex-officio nonvoting member;
18461 [and]

18462 (14) One representative of an administrative services organization
18463 which contracts with the Department of Social Services in the
18464 administration of the Medicaid program, who shall be a nonvoting
18465 member; and

18466 (15) A representative of a labor organization, as defined in section 7-
18467 273j, representing health care workers, who shall be appointed by the
18468 House and Senate chairpersons of the joint standing committee of the
18469 General Assembly having cognizance of matters relating to human
18470 services.

18471 Sec. 450. (NEW) (*Effective July 1, 2026*) (a) As used in this section, (1)
18472 "Medicaid rate study" means the study commissioned by the
18473 Department of Social Services pursuant to section 1 of public act 23-186;
18474 and (2) "five-state rate benchmark" means the average of rates for the
18475 same health care services in Maine, Massachusetts, New Jersey, New
18476 York and Oregon.

18477 (b) In reviewing Medicaid rates, the Commissioner of Social Services

18478 shall include those rates required to be studied pursuant to the Medicaid
18479 rate study with no corresponding (1) Medicare rate for the same health
18480 care service, or (2) average five-state rate benchmark included in the
18481 Medicaid rate study. If any one state within the five-state rate
18482 benchmark group has a corresponding rate for the same or a
18483 substantially similar health care service, such rate shall be used for
18484 comparison in such review. If two or more states in the benchmark
18485 group have rates for the same or a substantially similar health care
18486 service, an average of the rates shall be used for such comparison.

18487 (c) For purposes of setting Medicaid rates of reimbursement for
18488 behavioral health services, the commissioner shall include medication
18489 administration services delivered by a licensed home health care agency
18490 to individuals with psychiatric diagnoses under a care plan (1)
18491 developed and supervised by a licensed behavioral health clinician or
18492 prescriber, and (2) overseen by the state's behavioral health
18493 administrative services organization.

18494 Sec. 451. Section 19a-521b of the general statutes is repealed and the
18495 following is substituted in lieu thereof (*Effective July 1, 2026*):

18496 (a) Each licensed chronic and convalescent nursing home, chronic
18497 disease hospital associated with a chronic and convalescent nursing
18498 home, rest home with nursing supervision and residential care home
18499 shall position beds in a manner that promotes resident care and that
18500 provides at least a three-foot clearance at the sides and foot of each bed.
18501 Such bed position shall (1) not act as a restraint to the resident, (2) not
18502 create a hazardous situation, including, but not limited to, an
18503 entrapment possibility, or obstacle to evacuation or being close to or
18504 blocking a heat source, and (3) allow for infection control.

18505 (b) On and after July 1, 2026, no licensed chronic and convalescent
18506 nursing home or rest home with nursing supervision shall place a newly
18507 admitted resident in a room containing more than two beds. A violation
18508 of the requirements of this subsection shall constitute a Class B violation
18509 under section 19a-527, except no licensed chronic and convalescent

18510 nursing home or rest home with nursing supervision shall incur more
18511 than one violation per newly admitted resident in one calendar year.

18512 (c) The Commissioner of Social Services may recalculate a licensed
18513 chronic and convalescent nursing home or rest home with nursing
18514 supervision's Medicaid rate established for the fiscal year ending June
18515 30, 2026, and for the fiscal years thereafter, reflecting any licensed bed
18516 reductions associated with the elimination of three and four-bed rooms.
18517 Allowable fair rent shall reflect costs for building modifications or other
18518 additions incurred for fiscal year 2025, and for the fiscal years thereafter,
18519 that are associated with the elimination of three and four-bed rooms.

18520 (d) Notwithstanding the provisions of subsection (b) of this section,
18521 the Commissioner of Public Health may waive the requirements of said
18522 subsection for any licensed chronic and convalescent nursing home or
18523 rest home with nursing supervision that is actively investing in and
18524 developing a new Connecticut small-house style skilled nursing facility
18525 to meet the requirements of said subsection. Any such waiver shall be
18526 limited to one licensed chronic and convalescent nursing home or rest
18527 home with nursing supervision for each small-house style skilled
18528 nursing facility under development. The commissioner may prescribe
18529 documentation requirements for such homes to qualify for such waiver
18530 in the transitional period before the new facility opens. Such waiver
18531 shall not extend beyond July 1, 2027.

18532 Sec. 452. *(Effective from passage)* On or before January 15, 2027, The
18533 University of Connecticut Health Center shall submit a report, in
18534 accordance with the provisions of section 11-4a of the general statutes,
18535 to the Governor and the joint standing committees of the General
18536 Assembly having cognizance of matters relating to appropriations and
18537 the budgets of state agencies, human services, public health and higher
18538 education. Such report shall include, but need not be limited to: (1) The
18539 most recent payer mix for health center services, (2) efforts taken to
18540 increase the proportion of Medicaid days, including, but not limited to,
18541 increasing the census in the adolescent psychiatric unit and inpatient
18542 services provided to incarcerated individuals at the Department of

18543 Correction, and (3) increasing access to specialists for Medicaid
18544 members. In preparing the report, The University of Connecticut Health
18545 Center shall consult with stakeholders, including, but not limited to,
18546 medical professionals, community groups and labor unions. For
18547 purposes of this section, "Medicaid days" means the total number of in-
18548 patient days a Medicaid-eligible patient stays in a hospital.

18549 Sec. 453. (*Effective from passage*) (a) As used in this section:

18550 (1) "Access Health Connecticut" means the Internet web site
18551 maintained by the Connecticut Health Insurance Exchange, established
18552 pursuant to section 38a-1081 of the general statutes, through which
18553 enrollees and prospective enrollees may obtain standardized
18554 comparative information on and enroll in qualified health plans under
18555 the Affordable Care Act;

18556 (2) "Affordable Care Act" has the same meaning as provided in
18557 section 38a-1080 of the general statutes;

18558 (3) "Connecticut Option program" means a plan to lower health care
18559 coverage costs and expand health care coverage;

18560 (4) "Exchange" means the Connecticut Health Insurance Exchange
18561 established under section 38a-1081 of the general statutes;

18562 (5) "Health benefit plan" has the same meaning as provided in section
18563 38a-1080 of the general statutes;

18564 (6) "Secretary" means the Secretary of the Office of Policy and
18565 Management;

18566 (7) "State innovation waiver" means a waiver of one or more
18567 requirements of the Affordable Care Act authorized under Section 1332
18568 of said act; and

18569 (8) "Transitional health care premium assistance" means state-funded
18570 premium subsidies to address the impact of federally funded premium
18571 subsidies for individuals who purchase coverage through Access Health

18572 Connecticut.

18573 (b) The Secretary of the Office of Policy and Management may, within
18574 available appropriations, (1) study the feasibility of establishing the
18575 Connecticut Option program with the goal of reducing health insurance
18576 premiums, and (2) design a plan for providing transitional health care
18577 premium assistance that may be funded from the Federal Cuts Response
18578 Fund established pursuant to section 1 of special act 26-1 or other
18579 potential sources of funding. The study shall include analyses,
18580 conclusions and recommendations sufficient for the secretary, in
18581 consultation with the Insurance Commissioner, to evaluate and
18582 compare design models for the program. The study shall include, but
18583 need not be limited to:

18584 (A) A review of the efficacy, impact and reasonableness of proposed
18585 program design elements, including, but not limited to: (i) Provider
18586 reimbursement methodologies; (ii) value-based or performance-based
18587 contracting arrangements; (iii) enrollee cost-sharing and premium
18588 affordability targets; (iv) incentives or rewards for the delivery of high-
18589 quality, cost-effective health care; and (v) any state-specific premium
18590 assistance programs or risk stabilization programs, including, but not
18591 limited to, a state-operated reinsurance program that may maximize
18592 available federal funding pursuant to a state innovation waiver and
18593 premium support that could facilitate a purchase option leveraging the
18594 state's medical assistance program on or off the exchange for individuals
18595 ineligible for the medical assistance program;

18596 (B) Identification of any necessary statutory or regulatory changes
18597 required for implementation of the Connecticut Option program;

18598 (C) Determination of staffing needs across state agencies to
18599 effectively implement the Connecticut Option program;

18600 (D) Analysis of the state insurance market and projected impacts of
18601 the Connecticut Option program on persons who receive health care
18602 coverage through the exchange; and

18603 (E) Required state action or design elements needed to achieve
18604 multiple premium savings targets.

18605 (c) Not later than January 15, 2027, the secretary may file an interim
18606 report, in accordance with the provisions of section 11-4a of the general
18607 statutes, on the study conducted pursuant to subsection (b) of this
18608 section with the joint standing committees of the General Assembly
18609 having cognizance of matters relating to appropriations and the budgets
18610 of state agencies, human services and insurance and real estate. Not later
18611 than January 31, 2028, the secretary shall file a final report, in accordance
18612 with the provisions of section 11-4a of the general statutes, on the
18613 feasibility of the Connecticut Option program, any recommendations on
18614 the program, and a summary of stakeholder engagement and feedback
18615 collected pursuant to section 456 of this act with the joint standing
18616 committees of the General Assembly having cognizance of matters
18617 relating to appropriations and the budgets of state agencies, human
18618 services and insurance and real estate.

18619 (d) If the secretary, in consultation with the Insurance Commissioner,
18620 determines a Connecticut Option program is feasible after completion
18621 of the study or related reports pursuant to subsections (b) and (c) of this
18622 section, the secretary may direct the relevant state agency to develop
18623 and implement a state innovation waiver or Medicaid waiver under
18624 Section 1115 of the Social Security Act or any applicable waiver from
18625 federal law that may be required to maximize federal funding for the
18626 program or any component part of a program design to help achieve
18627 health care savings. Any approval of a Connecticut Option program
18628 shall be subject to legislative review pursuant to section 17b-8 of the
18629 general statutes.

18630 (e) Not later than October 1, 2026, the Secretary of the Office of Policy
18631 and Management shall design a plan for transitional health care
18632 premium assistance to offset premium and cost-sharing increases on
18633 Access Health Connecticut in 2027. Such plan shall include a state health
18634 care premium subsidy to enable an eligible enrollee to obtain an
18635 affordable health plan on Access Health Connecticut until December 31,

18636 2027.

18637 Sec. 454. (NEW) (*Effective from passage*) (a) As used in this section and
18638 sections 455 and 456 of this act:

18639 (1) "Affordable Care Act" has the same meaning as provided
18640 in section 38a-1080 of the general statutes;

18641 (2) "Access Health Connecticut" means the Internet web site
18642 maintained by the Connecticut Health Insurance Exchange, established
18643 pursuant to section 38a-1081 of the general statutes, through which
18644 enrollees and prospective enrollees may obtain standardized
18645 comparative information on and enroll in qualified health plans under
18646 the Affordable Care Act;

18647 (3) "Eligible individual" means a state resident who (A) is under sixty-
18648 five years of age, (B) has a household income exceeding one hundred
18649 thirty-three per cent of the federal poverty level but not exceeding two
18650 hundred per cent of the federal poverty level, (C) is otherwise
18651 ineligible for medical assistance programs established pursuant to
18652 chapter 319v of the general statutes, and (D) is otherwise eligible to
18653 enroll in a qualified health plan, as defined in section 38a-1080 of the
18654 general statutes, on Access Health Connecticut; and

18655 (4) "Basic health program" means a health care program authorized
18656 under Section 1331 of the Affordable Care Act.

18657 (b) (1) Following the submission of an application for approval,
18658 renewal or continuation of the federal waiver approved under Section
18659 1115 of the Social Security Act pursuant to which the Covered
18660 Connecticut program is administered under section 19a-754c of the
18661 general statutes, as amended by this act, the Department of Social
18662 Services, in consultation with the Office of Policy and Management, may
18663 develop an application to establish a basic health program pursuant to
18664 Section 1331 of the Affordable Care Act, as amended from time to time.

18665 (2) In the event the application for approval, renewal or continuation

18666 of the federal waiver approved under Section 1115 of the Social Security
18667 Act pursuant to which the Covered Connecticut program is
18668 administered either: (A) Is denied by the federal government, or (B) has
18669 not been approved by the federal government by July 1, 2027, the
18670 Department of Social Services shall either (i) seek any necessary
18671 approvals from the federal government to establish a basic health
18672 program and take all necessary actions to maximize federal funding, or
18673 (ii) take necessary steps to continue Covered Connecticut as a state-
18674 funded program beginning January 1, 2028.

18675 (c) If the Commissioner of Social Services proceeds with
18676 establishment of a basic health program pursuant to subdivision (2) of
18677 subsection (b) of this section, the commissioner shall, in accordance
18678 with the Affordable Care Act, coordinate the administration of, and
18679 provision of benefits under, such basic health program.

18680 (d) If the commissioner determines that the cost of medical assistance
18681 provided to eligible individuals in such basic health program will
18682 exceed federal subsidies, or if changes in federal law, regulations or the
18683 administration of federal law or regulations affects funding, eligibility
18684 for or administration of the program, the commissioner, in consultation
18685 with the Office of Policy and Management, may develop a plan to
18686 respond to such changes. To the extent that federal funds received
18687 under the Affordable Care Act for such basic health program exceed the
18688 cost of medical assistance that would otherwise be provided to
18689 eligible individuals, the commissioner shall use such funds to reduce the
18690 premiums and cost-sharing of, or provide additional benefits for,
18691 eligible individuals in accordance with 42 USC 18051, as amended from
18692 time to time.

18693 (e) The Commissioner of Social Services shall forward any
18694 application for federal approval of or changes to such basic health
18695 program to the joint standing committees of the General Assembly
18696 having cognizance of matters relating to appropriations and the budgets
18697 of state agencies and human services not later than thirty days before
18698 seeking federal approval for the program.

18699 (f) Not later than January 1, 2027, and every six months thereafter
18700 through January 1, 2029, the commissioner shall submit a report, in
18701 accordance with the provisions of section 11-4a of the general statutes,
18702 to the joint standing committees of the General Assembly having
18703 cognizance of matters relating to appropriations and the budgets of state
18704 agencies, human services and insurance and real estate. The report
18705 shall contain a narrative description of the activities and planning to
18706 sustain the Covered Connecticut program as an affordable coverage
18707 option for qualified individuals, including, but not limited to, a status
18708 report and contingency planning for a renewal of the Covered
18709 Connecticut program Medicaid waiver authority under Section 1115 of
18710 the Social Security Act, and, if necessary, efforts to sustain the program
18711 through the basic health program authority or a state-funded
18712 alternative.

18713 Sec. 455. (*Effective from the date of approval of a state basic health program*
18714 *by the Centers for Medicare and Medicaid Services*) There is established an
18715 account to be known as the "basic health program account", which shall
18716 be a separate, nonlapsing account. The account shall contain any
18717 moneys required by law to be deposited in the account. Moneys in the
18718 account shall be expended by the Department of Social Services solely
18719 for the purposes of operating a basic health program in accordance with
18720 the Affordable Care Act.

18721 Sec. 456. (*Effective July 1, 2026*) In developing a Connecticut Option
18722 program or basic health program, the Secretary of the Office of Policy
18723 and Management shall hold, to the extent possible, a series of
18724 stakeholder engagement meetings with potential stakeholders,
18725 including, but not limited to: (1) Representatives of hospitals, health
18726 centers, other health care providers, health insurers, HUSKY Health
18727 plan enrollees and Access Health Connecticut enrollees, (2) members of
18728 the joint standing committees of the General Assembly having
18729 cognizance of matters relating to appropriations and the budgets of state
18730 agencies, human services, public health and insurance and real estate,
18731 and (3) other persons with health equity and health coverage policy

18732 expertise, including representatives from the Commission on Racial
18733 Equity in Public Health.

18734 Sec. 457. (NEW) (*Effective from passage*) (a) As used in this section and
18735 section 458 of this act, "work and community engagement requirements"
18736 means federal requirements for certain Medicaid and supplemental
18737 nutrition assistance program beneficiaries to work, participate in a
18738 work-related program or community service or enroll in an education
18739 program pursuant to the federal Fiscal Responsibility Act of 2023, P.L.
18740 118-5 or Section 71119 of P.L. 119-21. There is established a safety net
18741 mitigation working group that shall advise on, monitor and coordinate
18742 the state's response to significant changes in federal law or policy that
18743 impact public health, social services or other safety net programs.

18744 (b) The working group shall consist of the following members:

18745 (1) The Secretary of the Office of Policy and Management, or the
18746 secretary's designee;

18747 (2) The Commissioners of Social Services, Revenue Services, Mental
18748 Health and Addiction Services, Developmental Services and Public
18749 Health, the Insurance Commissioner and the Labor Commissioner, or
18750 their designees;

18751 (3) The chairpersons of the joint standing committees of the General
18752 Assembly having cognizance of matters relating to appropriations and
18753 the budgets of state agencies, human services, housing and insurance
18754 and real estate, or their designees, who shall jointly choose the
18755 chairpersons of the working group; and

18756 (4) The chief executive officer of Access Health Connecticut.

18757 (c) The working group shall:

18758 (1) Convene not later than ninety days after the effective date of this
18759 section;

18760 (2) Review any significant changes in federal law or policy that

18761 impact public health, social services or other safety net programs;

18762 (3) Consider regulatory, administrative or legislative measures to
18763 mitigate adverse programmatic, procurement or service outcomes and
18764 recommend such measures to the Office of Policy and Management and
18765 the joint standing committees of the General Assembly having
18766 cognizance of matters relating to appropriations and the budgets of state
18767 agencies, human services, housing and insurance and real estate; and

18768 (4) Solicit input from stakeholders, including municipal governments
18769 and community-based providers, and independent experts such as
18770 academic researchers and policy organizations, as necessary.

18771 (d) The administrative staff of the joint standing committee of the
18772 General Assembly having cognizance of matters relating to human
18773 services shall provide administrative support to the working group.

18774 (e) Not later than February 1, 2027, and annually thereafter through
18775 February 1, 2029, the working group shall submit a report, in accordance
18776 with the provisions of section 11-4a of the general statutes, to the joint
18777 standing committees of the General Assembly having cognizance of
18778 matters relating to appropriations and the budgets of state agencies,
18779 human services, housing and insurance and real estate. Such report shall
18780 include:

18781 (1) The estimated impact of changes to federal policies, guidance or
18782 programs on access to and participation in the Medicaid and
18783 supplemental nutrition assistance programs in the state resulting from
18784 recent or upcoming federal action or inaction;

18785 (2) Implementation of federal law concerning work and community
18786 engagement requirements for Medicaid and supplemental nutrition
18787 assistance beneficiaries under P.L. 119-21;

18788 (3) The estimated number of beneficiaries who have lost and are
18789 expected to lose eligibility for the supplemental nutrition assistance and
18790 Medicaid programs since implementation of such requirements under

18791 P.L. 119-21; and

18792 (4) A summary of actions taken to improve user experiences and
18793 streamline communication with Medicaid and supplemental nutrition
18794 assistance program participants, including, but not limited to: (A)
18795 Efforts to engage recipients of such benefits in relevant decision-making
18796 processes; (B) a long-term plan for ongoing dissemination of
18797 information and support for Medicaid and supplemental nutrition
18798 assistance recipients and providers to minimize disenrollment of
18799 eligible individuals; and (C) statistics concerning the Department of
18800 Social Services' customer service telephone call center and actions taken
18801 by the department to improve such statistics.

18802 (f) The working group shall terminate on the date that it submits its
18803 final report or February 1, 2029, whichever is later.

18804 Sec. 458. (*Effective from passage*) (a) To the extent deemed necessary to
18805 verify exemptions from work and community engagement
18806 requirements for Medicaid as permitted under federal law, the
18807 Commissioner of Social Services shall identify parameters for an
18808 effective assessment of "medical frailty" for any given Medicaid
18809 participant or applicant. In identifying such parameters, the
18810 commissioner may take into consideration existing definitions in state
18811 or federal statutes and regulations relevant to medical frailty, definitions
18812 of medical frailty in other states, and medical codes used to identify
18813 pertinent diagnoses.

18814 (b) The commissioner shall maximize the use of such information and
18815 medical codes to effectuate ex parte eligibility determinations to the
18816 extent permitted by federal law. The commissioner shall provide
18817 regular updates on the development of any such parameters to the
18818 Council on Medical Assistance Program Oversight established pursuant
18819 to section 17b-28 of the general statutes.

18820 Sec. 459. Subsection (a) of section 17b-8 of the general statutes is
18821 repealed and the following is substituted in lieu thereof (*Effective July 1,*

18822 2026):

18823 (a) The Commissioner of Social Services shall submit an application
18824 for a federal waiver or renewal of such waiver of any assistance program
18825 requirements, except such application pertaining to routine operational
18826 issues, and any proposed amendment to the Medicaid state plan to
18827 provide medical assistance through a Medicaid managed care
18828 organization pursuant to Section 1932 of the Social Security Act or to
18829 make a change in program requirements that would have required a
18830 waiver were it not for the passage of the Patient Protection and
18831 Affordable Care Act, P.L. 111-148, and the Health Care and Education
18832 Reconciliation Act of 2010, P.L. 111-152 to the joint standing committees
18833 of the General Assembly having cognizance of matters relating to
18834 human services and appropriations and the budgets of state agencies,
18835 and, for the waiver application required under section 17b-312, the joint
18836 standing committee of the General Assembly having cognizance of
18837 matters relating to insurance, prior to the submission of such application
18838 or proposed amendment to the federal government. Not later than thirty
18839 days after the date of their receipt of such application or proposed
18840 amendment, the joint standing committees shall: (1) Hold a public
18841 hearing on the waiver application, or (2) in the case of a proposed
18842 amendment to the Medicaid state plan, notify the Commissioner of
18843 Social Services whether or not said joint standing committees intend to
18844 hold a public hearing. Any notice to the commissioner indicating that
18845 the joint standing committees intend to hold a public hearing on a
18846 proposed amendment to the Medicaid state plan shall state the date on
18847 which the joint standing committees intend to hold such public hearing,
18848 which shall not be later than sixty days after the joint standing
18849 committees' receipt of the proposed amendment. At the conclusion of a
18850 public hearing held in accordance with the provisions of this section, the
18851 joint standing committees shall advise the commissioner of their
18852 approval, denial or modifications, if any, of the commissioner's waiver
18853 application or proposed amendment. If the joint standing committees
18854 advise the commissioner of their denial of the commissioner's waiver
18855 application or proposed amendment, the commissioner shall not submit

18856 the application for a federal waiver or proposed amendment to the
18857 federal government. If such committees do not concur, the committee
18858 chairpersons shall appoint a committee of conference which shall be
18859 composed of three members from each joint standing committee. At
18860 least one member appointed from each joint standing committee shall
18861 be a member of the minority party. The report of the committee of
18862 conference shall be made to each joint standing committee, which shall
18863 vote to accept or reject the report. The report of the committee of
18864 conference may not be amended. If a joint standing committee rejects
18865 the report of the committee of conference, that joint standing committee
18866 shall notify the commissioner of the rejection and the commissioner's
18867 waiver application or proposed amendment shall be deemed approved.
18868 If the joint standing committees accept the report, the committee having
18869 cognizance of matters relating to appropriations and the budgets of state
18870 agencies shall advise the commissioner of their approval, denial or
18871 modifications, if any, of the commissioner's waiver application or
18872 proposed amendment. If the joint standing committees do not so advise
18873 the commissioner during the thirty-day period, the waiver application
18874 or proposed amendment shall be deemed approved. Any application
18875 for a federal waiver, waiver renewal or proposed amendment submitted
18876 to the federal government by the commissioner, pursuant to this section,
18877 shall be in accordance with the approval or modifications, if any, of the
18878 joint standing committees of the General Assembly having cognizance
18879 of matters relating to human services and appropriations and the
18880 budgets of state agencies, and, for the waiver application required under
18881 section 17b-312, the joint standing committee of the General Assembly
18882 having cognizance of matters relating to insurance. For purposes of this
18883 section, "medical assistance" shall not include a basic health program
18884 established pursuant to 42 USC 18051.

18885 Sec. 460. (NEW) (*Effective January 1, 2027*) As used in this section and
18886 section 461 of this act:

18887 (1) "Biological product" has the same meaning as provided in 42 USC
18888 262;

18889 (2) "Biosimilar" means any biological product that is licensed under
18890 42 USC 262(k);

18891 (3) "Brand-name drug" means a drug that is produced or distributed
18892 in accordance with an original new drug application approved under 21
18893 USC 355, as amended from time to time, but does not include an
18894 authorized generic drug as defined in 42 CFR 447.502, as amended from
18895 time to time;

18896 (4) "Formulary" means a list of prescription drugs that are covered by
18897 a specific health insurance plan;

18898 (5) "Generic drug" means (A) a prescription drug product that is
18899 marketed or distributed in accordance with an abbreviated new drug
18900 application approved under 21 USC 355, as amended from time to time,
18901 (B) an authorized generic drug as defined in 42 CFR 447.502, as
18902 amended from time to time, or (C) a drug that entered the market before
18903 calendar year 1962 that was not originally marketed under a new
18904 prescription drug product application;

18905 (6) "Reference product" means (A) with respect to a generic drug, the
18906 listed brand-name drug against which the generic drug is compared, in
18907 accordance with 21 USC 355(j)(2)(A)(i); and (B) with respect to a
18908 biosimilar, the reference biological product as defined in 42 USC 1395w-
18909 3a(c)(6)(I);

18910 (7) "Net drug cost" means the cost to a covered person under the
18911 health benefit plan of (A) a brand-name or generic prescription drug, or
18912 (B) a biological product or biosimilar, net of all applicable discounts and
18913 rebates;

18914 (8) "Health benefit plan" has the same meaning as provided in section
18915 38a-1080 of the general statutes; and

18916 (9) "Health carrier" has the same meaning as provided in section 38a-
18917 591a of the general statutes.

18918 Sec. 461. (NEW) (*Effective January 1, 2027*) (a) If one or more generic
18919 drugs (1) are approved by the United States Food and Drug
18920 Administration, (2) are marketed pursuant to such approval, and (3)
18921 have a net drug cost that is less than the net drug cost of the reference
18922 product, a health benefit plan issued or renewed on or after January 1,
18923 2027, that provides coverage for a reference product shall make
18924 available on such health benefit plan's formulary, on a tier with lower
18925 cost sharing, including actual out-of-pocket costs, relative to the
18926 reference product, at least one generic drug meeting these criteria.

18927 (b) If one or more biosimilars (1) are licensed by the United States
18928 Food and Drug Administration, (2) are marketed pursuant to such
18929 licensure, and (3) have a net drug cost that is less than the net drug cost
18930 of the reference product, a health benefit plan issued or renewed on or
18931 after January 1, 2027, that provides coverage for the biosimilar's
18932 reference product, shall make available on such health benefit plan's
18933 formulary, on a tier with lower cost sharing, including actual out-of-
18934 pocket costs, relative to the reference product, at least one biosimilar
18935 meeting these criteria.

18936 (c) Subsections (a) and (b) of this section shall apply as long as the net
18937 drug cost of the generic drug or biosimilar is lower than the net drug
18938 cost of the reference product.

18939 (d) A health benefit plan may not restrict the pharmacy network
18940 through which covered persons may obtain the generic drug or
18941 biosimilar, unless the same restriction applies to the reference product.

18942 (e) If a generic drug or biosimilar has a lower net drug cost than its
18943 reference product, and neither the generic drug or biosimilar nor the
18944 reference product is included on the health benefit plan's formulary, the
18945 health benefit plan issued or renewed on or after January 1, 2027, shall
18946 not impose a more restrictive formulary exception process for the
18947 generic drug or biosimilar than for the reference product.

18948 (f) Nothing in this section shall:

18949 (1) Require a health benefit plan to provide coverage for a reference
18950 product after a generic drug or biosimilar is approved or licensed, as
18951 applicable and marketed;

18952 (2) Require a health benefit plan to provide coverage for a brand-
18953 name drug, biological product, generic drug or biosimilar if there is a
18954 determination by the pharmacy and therapeutics committee that
18955 develops the plan's formulary that such drug or biological product is no
18956 longer medically appropriate or cost effective;

18957 (3) Interfere with the ability of a pharmacy or pharmacist to comply
18958 with the provisions of chapter 400j of the general statutes; or

18959 (4) Prevent a health benefit plan from including on its formulary
18960 more than one generic drug or biosimilar that has a net drug cost that is
18961 lower than that of its reference product.

18962 (g) The Insurance Commissioner may adopt regulations, in
18963 accordance with the provisions of chapter 54 of the general statutes, to
18964 implement the provisions of this section.

18965 (h) The requirements of this section:

18966 (1) Apply only with respect to coverage of and cost sharing for
18967 generic drugs, biosimilars and brand-name drugs when dispensed by
18968 pharmacies as outpatient prescription drugs and do not apply to generic
18969 drugs, biosimilars or brand-name drugs when provided by a hospital,
18970 physician or other provider of health care or palliative services, other
18971 than a pharmacy, incident to the services of such provider and paid for
18972 by or on behalf of the relevant health benefit plan as part of the payment
18973 for such services under the medical benefit of the health benefit plan;

18974 (2) Do not apply to the extent that they would require coverage by a
18975 health benefit plan or cost sharing for a generic drug or biosimilar that
18976 is not permitted under any applicable federal law or any law of this
18977 state; and

18978 (3) Do not require that a health benefit plan include on its formulary
18979 a generic drug or biosimilar if the health carrier has not included the
18980 reference product for that generic drug or biosimilar on its formulary
18981 due to a determination by the pharmacy and therapeutics committee for
18982 the health benefit plan that the brand-name drug should not be covered
18983 due to clinical concerns about the safety or efficacy of the brand-name
18984 drug based on the strength of scientific evidence.

18985 Sec. 462. Section 19a-754c of the general statutes is repealed and the
18986 following is substituted in lieu thereof (*Effective from passage*):

18987 (a) For the purposes of this section:

18988 (1) "Affordable Care Act" has the same meaning as provided in
18989 section 38a-1080;

18990 (2) "Covered Connecticut program" means the program established
18991 under subsection (b) of this section;

18992 (3) "Exchange" has the same meaning as provided in section 38a-1080;

18993 (4) "Health carrier" has the same meaning as provided in section 38a-
18994 1080;

18995 (5) "Individual market" has the same meaning as provided in 42 USC
18996 18024(a), as amended from time to time; and

18997 [(6) "Office of Health Strategy" means the Office of Health Strategy
18998 established under section 19a-754a; and]

18999 [(7)] (6) "Silver level" has the same meaning as provided in 42 USC
19000 18022(d), as amended from time to time.

19001 (b) There is established within the Department of Social Services the
19002 Covered Connecticut program for the purpose of reducing the state's
19003 uninsured rate. The Commissioner of Social Services shall administer
19004 said program in consultation with the [Office of Health Strategy,]
19005 Insurance Commissioner and exchange, and, as part of said program,

19006 the Department of Social Services shall:

19007 (1) Provide premium and cost-sharing subsidies that are sufficient to
19008 ensure fully subsidized premium coverage:

19009 (A) On and after July 1, 2021, for parents and needy caretaker
19010 relatives, and their tax dependents not older than twenty-six years of
19011 age, who (i) are eligible for premium and cost-sharing subsidies for a
19012 qualified health plan, (ii) are ineligible for Medicaid because their
19013 income exceeds the Medicaid income limits under chapter 319v, (iii)
19014 have household income up to one hundred seventy-five per cent of the
19015 federal poverty level, (iv) are receiving coverage under a qualified
19016 health plan offered through the exchange in the individual market at a
19017 silver level of coverage, and (v) are utilizing the full amount of
19018 applicable premium subsidies for such plan;

19019 (B) On and after July 1, 2021, for the following additional family
19020 members of parents and caretaker relatives receiving coverage under
19021 such qualified health plan, provided the requirements of subparagraph
19022 (A) of subdivision (1) of this subsection are met: (i) A child over twenty-
19023 six years of age who is permanently and totally disabled, as defined by
19024 the Internal Revenue Service pursuant to 26 USC 152, or (ii) a child who
19025 is over the age of twenty-six and is incapable of self-sustaining
19026 employment by reason of mental or physical handicap and is chiefly
19027 dependent upon the parent or caretaker relative for support and
19028 maintenance, as described in sections 38a-489 and 38a-512a, or (iii) a
19029 child or stepchild receiving coverage under such qualified health plan
19030 as described in sections 38a-497 and 38a-512b;

19031 (C) On and after July 1, 2022, for all parents, needy caretaker relatives
19032 and low-income adults who (i) are at least nineteen but not more than
19033 sixty-four years of age, (ii) are eligible for premium and cost-sharing
19034 subsidies for a qualified health plan, (iii) are ineligible for Medicaid
19035 because their income exceeds the Medicaid income limits under chapter
19036 319v, (iv) have household income up to one hundred seventy-five per
19037 cent of the federal poverty level, (v) are receiving coverage under a

19038 qualified health plan offered through the exchange in the individual
19039 market at a silver level of coverage, and (vi) are utilizing the full amount
19040 of applicable premium subsidies for such plan; and

19041 (D) On and after July 1, 2022, for the following additional family
19042 members of parents, caretaker relatives, and adults receiving coverage
19043 under such qualified health plan, provided the requirements of
19044 subparagraph (C) of subdivision (1) of this subsection are met: (i) A
19045 child over twenty-six years of age who is permanently and totally
19046 disabled, as defined by the Internal Revenue Service pursuant to 26 USC
19047 152, or (ii) a child who is over the age of twenty-six and is incapable of
19048 self-sustaining employment by reason of mental or physical handicap
19049 and is chiefly dependent upon the parent or caretaker relative for
19050 support and maintenance, as described in sections 38a-489 and 38a-512a,
19051 or (iii) a child or stepchild, as described in sections 38a-497 and 38a-512b.

19052 [(2) Not earlier than July 1, 2022, provide dental and nonemergency
19053 medical transportation services, as provided under chapter 319v, to all
19054 eligible individuals described in subdivision (1) of this subsection;]

19055 [(3)] (2) Establish procedures to, on a quarterly basis, pay in
19056 reimbursement to each health carrier offering the qualified health plan
19057 described in subparagraph (A) or (B) of subdivision (1) of this
19058 subsection, as applicable, the premium and cost-sharing subsidies
19059 required under subdivision (1) of this subsection to ensure fully
19060 subsidized coverage; and

19061 [(4)] (3) Consult with the [Office of Health Strategy and] Insurance
19062 Commissioner for the purposes set forth in section 17b-312.

19063 (c) On or after January 1, 2027, the Department of Social Services may,
19064 as part of the Covered Connecticut program, provide dental and
19065 nonemergency medical transportation services, as provided under
19066 chapter 319v, to all eligible individuals described in subsection (b) of
19067 this section.

19068 [(c)] (d) (1) The [Office of Health Strategy] Department of Social

19069 Services may, subject to the approval required under subdivision (3) of
19070 this subsection, seek a waiver pursuant to Section 1332 of the Affordable
19071 Care Act, as amended from time to time, to advance the purpose of the
19072 Covered Connecticut program. The [Office of Health Strategy]
19073 department shall implement such waiver if the federal government
19074 issues such waiver.

19075 (2) The [Office of Health Strategy] Department of Social Services shall
19076 submit a report, in accordance with section 11-4a, to the joint standing
19077 committees of the General Assembly having cognizance of matters
19078 relating to appropriations, human services and insurance containing
19079 any proposed waiver described in subdivision (1) of this subsection
19080 before seeking such waiver from the federal government.

19081 (3) Not later than thirty days after the [Office of Health Strategy]
19082 Department of Social Services submits a report under subdivision (2) of
19083 this subsection, the joint standing committees of the General Assembly
19084 having cognizance of matters relating to appropriations, human
19085 services and insurance shall convene a joint public hearing on the
19086 proposed waiver contained in the report, [submitted pursuant to
19087 subdivision (2) of this subsection,] separately vote to approve or reject
19088 such proposed waiver and advise the [Office of Health Strategy]
19089 department of their approval or rejection of such proposed waiver. If
19090 any committee takes no action on such proposed waiver within the
19091 thirty-day period, the proposed waiver shall be deemed rejected.

19092 [(d)] (e) The benefits and subsidies provided for individuals as part
19093 of the Covered Connecticut program shall not be considered income for
19094 such individuals for the purposes of chapter 229.

19095 [(e) Not later than January 1, 2022, every six months thereafter
19096 through January 1, 2024, and annually after January 1, 2024, the] (f) The
19097 Commissioner of Social Services shall annually submit a report, in
19098 accordance with section 11-4a, to the joint standing committees of the
19099 General Assembly having cognizance of matters relating to
19100 appropriations, human services and insurance. Such report shall contain

19101 a description of the operations and finances of, and progress made by,
19102 the Covered Connecticut program for the immediately preceding
19103 reporting period.

19104 [(f) Notwithstanding any provision of this section] (g) On or before
19105 January 1, 2028, subject to federal approval, the Covered Connecticut
19106 program shall only include in-network health care providers and in-
19107 network services, unless the health carrier's network is deemed by the
19108 Insurance Commissioner to be inadequate. Benefits described in
19109 subsection (b) of this section and cost-sharing available to all eligible
19110 individuals pursuant to subdivision (1) of subsection (b) of this section
19111 shall only apply if such eligible individuals use in-network health care
19112 providers or in-network facilities.

19113 (h) Notwithstanding any provision of this section, the Commissioner
19114 of Social Services may make program design changes as necessary to
19115 meet requirements for approval, renewal or continuation of the federal
19116 waiver approved under Section 1115 of the Social Security Act pursuant
19117 to which the Covered Connecticut program is administered. If necessary
19118 federal approvals are not obtained, the commissioner may seek federal
19119 approval for a basic health program in accordance with section 454 of
19120 this act.

19121 Sec. 463. (*Effective July 1, 2026*) The sum of \$250,000 of the amount
19122 appropriated in section 1 of this act to the Department of Housing, for
19123 Rental Assistance Program, for the fiscal year ending June 30, 2027, shall
19124 be made available for inspections of housing units for compliance with
19125 state and local health, housing, building and safety codes.

19126 Sec. 464. (*Effective from passage*) (a) The sum of \$100,000,006 is
19127 appropriated to the Office of Policy and Management, for Various
19128 Municipal Grants, for the fiscal year ending June 30, 2026, and shall be
19129 made available as a one-time payment in said fiscal year and expended
19130 as follows:

T2224

Grant for Fiscal

T2225		Year
T2226	Town	2026
T2227	Andover	17,751
T2228	Ansonia	261,746
T2229	Ashford	24,858
T2230	Avon	60,304
T2231	Barkhamsted	20,054
T2232	Beacon Falls	32,957
T2233	Berlin	75,947
T2234	Bethany	21,913
T2235	Bethel	95,477
T2236	Bethlehem	14,158
T2237	Bloomfield	264,102
T2238	Bolton	29,551
T2239	Bozrah	12,185
T2240	Branford	70,511
T2241	Bridgeport	10,373,486
T2242	Bridgewater	1,831
T2243	Bristol	991,338
T2244	Brookfield	46,102
T2245	Brooklyn	106,086
T2246	Burlington	44,057
T2247	Canaan	29,770
T2248	Canterbury	36,403
T2249	Canton	29,695
T2250	Chaplin	155,805
T2251	Cheshire	715,676
T2252	Chester	21,671
T2253	Clinton	51,998
T2254	Colchester	116,408
T2255	Colebrook	6,257
T2256	Columbia	22,616
T2257	Cornwall	7,988
T2258	Coventry	61,253
T2259	Cromwell	66,024
T2260	Danbury	1,592,148
T2261	Darien	28,726
T2262	Deep River	18,488
T2263	Derby	426,691

T2264	Durham	25,339
T2265	East Granby	30,354
T2266	East Haddam	35,476
T2267	East Hampton	104,793
T2268	East Hartford	1,390,427
T2269	East Haven	342,732
T2270	East Lyme	536,657
T2271	East Windsor	77,422
T2272	Eastford	14,635
T2273	Easton	20,603
T2274	Ellington	64,632
T2275	Enfield	575,188
T2276	Essex	15,263
T2277	Fairfield	818,108
T2278	Farmington	1,669,896
T2279	Franklin	15,866
T2280	Glastonbury	76,932
T2281	Goshen	7,837
T2282	Granby	40,940
T2283	Greenwich	161,948
T2284	Griswold	171,970
T2285	Groton	2,239,466
T2286	Guilford	52,719
T2287	Haddam	42,348
T2288	Hamden	1,572,111
T2289	Hampton	14,776
T2290	Hartford	13,107,801
T2291	Hartland	27,482
T2292	Harwinton	25,174
T2293	Hebron	30,258
T2294	Kent	15,707
T2295	Killingly	333,903
T2296	Killingworth	30,712
T2297	Lebanon	41,770
T2298	Ledyard	1,703,834
T2299	Lisbon	42,901
T2300	Litchfield	35,537
T2301	Lyme	7,909
T2302	Madison	205,858
T2303	Manchester	1,001,403

T2304	Mansfield	2,613,732
T2305	Marlborough	30,635
T2306	Meriden	1,518,429
T2307	Middlebury	33,414
T2308	Middlefield	16,332
T2309	Middletown	2,348,250
T2310	Milford	667,970
T2311	Monroe	51,404
T2312	Montville	2,090,413
T2313	Morris	7,647
T2314	Naugatuck	418,778
T2315	New Britain	4,671,689
T2316	New Canaan	14,857
T2317	New Fairfield	42,694
T2318	New Hartford	22,147
T2319	New Haven	12,419,995
T2320	New London	2,912,568
T2321	New Milford	188,992
T2322	Newington	453,379
T2323	Newtown	216,181
T2324	Norfolk	27,508
T2325	North Branford	49,136
T2326	North Canaan	36,047
T2327	North Haven	265,182
T2328	North Stonington	1,336,723
T2329	Norwalk	1,432,992
T2330	Norwich	3,126,949
T2331	Old Lyme	17,974
T2332	Old Saybrook	29,797
T2333	Orange	86,627
T2334	Oxford	103,082
T2335	Plainfield	283,649
T2336	Plainville	121,099
T2337	Plymouth	133,545
T2338	Pomfret	32,424
T2339	Portland	52,900
T2340	Preston	1,807,504
T2341	Prospect	47,719
T2342	Putnam	164,942
T2343	Redding	48,331

T2344	Ridgefield	44,831
T2345	Rocky Hill	471,899
T2346	Roxbury	2,027
T2347	Salem	35,835
T2348	Salisbury	5,599
T2349	Scotland	19,307
T2350	Seymour	114,457
T2351	Sharon	10,902
T2352	Shelton	135,076
T2353	Sherman	3,450
T2354	Simsbury	76,945
T2355	Somers	425,850
T2356	South Windsor	77,457
T2357	Southbury	115,615
T2358	Southington	181,419
T2359	Sprague	45,613
T2360	Stafford	161,510
T2361	Stamford	1,550,880
T2362	Sterling	56,351
T2363	Stonington	40,066
T2364	Stratford	406,351
T2365	Suffield	516,210
T2366	Thomaston	42,738
T2367	Thompson	71,358
T2368	Tolland	52,389
T2369	Torrington	743,529
T2370	Trumbull	125,054
T2371	Union	37,619
T2372	Vernon	325,941
T2373	Voluntown	172,490
T2374	Wallingford	270,800
T2375	Warren	1,732
T2376	Washington	8,299
T2377	Waterbury	5,114,077
T2378	Waterford	171,858
T2379	Watertown	278,092
T2380	West Hartford	392,543
T2381	West Haven	1,336,369
T2382	Westbrook	46,507
T2383	Weston	6,109

T2384	Westport	188,683
T2385	Wethersfield	366,924
T2386	Willington	55,458
T2387	Wilton	45,578
T2388	Winchester	136,056
T2389	Windham	1,819,472
T2390	Windsor	154,121
T2391	Windsor Locks	745,276
T2392	Wolcott	95,678
T2393	Woodbridge	13,949
T2394	Woodbury	26,755
T2395	Woodstock	32,548

19131 (b) The funds appropriated in subsection (a) of this section to the
 19132 Office of Policy and Management, for Various Municipal Grants, for the
 19133 fiscal year ending June 30, 2026, shall not lapse and shall be available to
 19134 the Office of Policy and Management for the same purpose for the fiscal
 19135 year ending June 30, 2027.

19136 (c) Not later than January 1, 2027, each municipality shall report to
 19137 the Secretary of the Office of Policy and Management concerning the
 19138 expenditure of the grant identified in subsection (a) of this section.

19139 Sec. 465. Section 25 of public act 25-168 is repealed and the following
 19140 is substituted in lieu thereof (*Effective from passage*):

19141 [(a)] Notwithstanding any provision of the general statutes, for the
 19142 fiscal years ending June 30, 2026, and June 30, 2027, the total grants paid
 19143 to municipalities from the moneys available in the Mashantucket Pequot
 19144 and Mohegan Fund established pursuant to section 3-55i of the general
 19145 statutes shall be as follows:

T2396	Grantee	Grant Amount For Fiscal Year 2026	Grant Amount For Fiscal Year 2027
T2397			
T2398	Andover	6,680	6,680
T2399	Ansonia	113,045	113,045
T2400	Ashford	12,010	12,010

T2401	Avon	-	-
T2402	Barkhamsted	6,728	6,728
T2403	Beacon Falls	12,467	12,467
T2404	Berlin	-	-
T2405	Bethany	881	881
T2406	Bethel	-	-
T2407	Bethlehem	4,125	4,125
T2408	Bloomfield	94,314	94,314
T2409	Bolton	3,244	3,244
T2410	Bozrah	9,143	9,143
T2411	Branford	-	-
T2412	Bridgeport	5,606,925	5,606,925
T2413	Bridgewater	3,734	3,734
T2414	Bristol	400,282	400,282
T2415	Brookfield	-	-
T2416	Brooklyn	191,703	191,703
T2417	Burlington	-	-
T2418	Canaan	6,202	6,202
T2419	Canterbury	15,208	15,208
T2420	Canton	-	-
T2421	Chaplin	73,052	73,052
T2422	Cheshire	1,962,440	1,962,440
T2423	Chester	3,278	3,278
T2424	Clinton	-	-
T2425	Colchester	23,167	23,167
T2426	Colebrook	6,045	6,045
T2427	Columbia	4,857	4,857
T2428	Cornwall	4,434	4,434
T2429	Coventry	13,336	13,336
T2430	Cromwell	-	-
T2431	Danbury	678,398	678,398
T2432	Darien	-	-
T2433	Deep River	4,490	4,490
T2434	Derby	207,304	207,304
T2435	Durham	1,003	1,003
T2436	Eastford	7,529	7,529
T2437	East Granby	987	987
T2438	East Haddam	3,042	3,042
T2439	East Hampton	6,742	6,742
T2440	East Hartford	156,898	156,898

T2441	East Haven	82,006	82,006
T2442	East Lyme	270,204	270,204
T2443	Easton	-	-
T2444	East Windsor	1,015,432	1,015,432
T2445	Ellington	4,081	4,081
T2446	Enfield	1,224,751	1,224,751
T2447	Essex	-	-
T2448	Fairfield	114,941	114,941
T2449	Farmington	-	-
T2450	Franklin	9,738	9,738
T2451	Glastonbury	-	-
T2452	Goshen	2,687	2,687
T2453	Granby	-	-
T2454	Greenwich	-	-
T2455	Griswold	55,478	55,478
T2456	Groton	1,232,069	1,232,069
T2457	Guilford	-	-
T2458	Haddam	908	908
T2459	Hamden	725,946	725,946
T2460	Hampton	8,881	8,881
T2461	Hartford	6,136,523	6,136,523
T2462	Hartland	6,593	6,593
T2463	Harwinton	3,676	3,676
T2464	Hebron	3,350	3,350
T2465	Kent	1,298	1,298
T2466	Killingly	94,184	94,184
T2467	Killingworth	-	-
T2468	Lebanon	13,139	13,139
T2469	Ledyard	1,391,000	[1,391,000] 2,191,000
T2470	Lisbon	11,287	11,287
T2471	Litchfield	-	-
T2472	Lyme	1,997	1,997
T2473	Madison	-	-
T2474	Manchester	412,450	412,450
T2475	Mansfield	179,151	179,151
T2476	Marlborough	1,807	1,807
T2477	Meriden	698,609	698,609
T2478	Middlebury	-	-
T2479	Middlefield	5,616	5,616
T2480	Middletown	1,060,747	1,060,747

T2481	Milford	236,690	236,690
T2482	Monroe	-	-
T2483	Montville	1,446,162	[1,446,162] <u>2,246,162</u>
T2484	Morris	5,059	5,059
T2485	Naugatuck	147,899	147,899
T2486	New Britain	1,980,822	1,980,822
T2487	New Canaan	-	-
T2488	New Fairfield	-	-
T2489	New Hartford	822	822
T2490	New Haven	5,503,352	5,503,352
T2491	Newington	164,924	164,924
T2492	New London	1,667,837	1,667,837
T2493	New Milford	2,049	2,049
T2494	Newtown	829,098	829,098
T2495	Norfolk	8,899	8,899
T2496	North Branford	2,647	2,647
T2497	North Canaan	12,383	12,383
T2498	North Haven	86,789	86,789
T2499	North Stonington	880,690	880,690
T2500	Norwalk	577,059	577,059
T2501	Norwich	2,360,229	2,360,229
T2502	Old Lyme	-	-
T2503	Old Saybrook	-	-
T2504	Orange	6,408	6,408
T2505	Oxford	-	-
T2506	Plainfield	82,099	82,099
T2507	Plainville	27,635	27,635
T2508	Plymouth	33,955	33,955
T2509	Pomfret	9,172	9,172
T2510	Portland	2,902	2,902
T2511	Preston	1,165,290	1,165,290
T2512	Prospect	1,085	1,085
T2513	Putnam	75,902	75,902
T2514	Redding	-	-
T2515	Ridgefield	-	-
T2516	Rocky Hill	213,545	213,545
T2517	Roxbury	2,188	2,188
T2518	Salem	7,370	7,370
T2519	Salisbury	-	-
T2520	Scotland	11,620	11,620

T2521	Seymour	24,111	24,111
T2522	Sharon	2,001	2,001
T2523	Shelton	-	-
T2524	Sherman	109	109
T2525	Simsbury	-	-
T2526	Somers	1,564,515	1,564,515
T2527	Southbury	-	-
T2528	Southington	7,160	7,160
T2529	South Windsor	-	-
T2530	Sprague	17,479	17,479
T2531	Stafford	60,839	60,839
T2532	Stamford	625,635	625,635
T2533	Sterling	24,317	24,317
T2534	Stonington	30,000	30,000
T2535	Stratford	30,567	30,567
T2536	Suffield	2,760,598	2,760,598
T2537	Thomaston	16,872	16,872
T2538	Thompson	38,307	38,307
T2539	Tolland	-	-
T2540	Torrington	196,642	196,642
T2541	Trumbull	-	-
T2542	Union	19,013	19,013
T2543	Vernon	79,820	79,820
T2544	Voluntown	80,641	80,641
T2545	Wallingford	33,058	33,058
T2546	Warren	4,369	4,369
T2547	Washington	-	-
T2548	Waterbury	2,637,435	2,637,435
T2549	Waterford	-	-
T2550	Watertown	11,631	11,631
T2551	Westbrook	-	-
T2552	West Hartford	27,820	27,820
T2553	West Haven	807,097	807,097
T2554	Weston	-	-
T2555	Westport	-	-
T2556	Wethersfield	137,556	137,556
T2557	Willington	17,399	17,399
T2558	Wilton	-	-
T2559	Winchester	49,474	49,474
T2560	Windham	793,155	793,155

T2561	Windsor	-	-
T2562	Windsor Locks	387,713	387,713
T2563	Wolcott	16,939	16,939
T2564	Woodbridge	-	-
T2565	Woodbury	-	-
T2566	Woodstock	5,694	5,694
T2567	Golden Hill Paugussett	20,000	20,000
T2568	Paucatuck Eastern Pequot	20,000	20,000
T2569	Schaghticoke	20,000	20,000
T2570	TOTALS	52,532,789	[52,532,789] <u>54,132,789</u>

19146 Sec. 466. Section 1. (*Effective July 1, 2026*) The amounts appropriated
19147 in section 1 of this act to the Judicial Department, for Youth Services
19148 Prevention, for the fiscal year ending June 30, 2027, shall be made
19149 available in said fiscal year for the following grants:

T2571	Grantee	Grant
T2572	100 Black Men of Stamford	\$40,000
T2573	333 Valley Street Center, An Intergenerational Organization	\$300,000
T2574	6-Love, Inc.	\$35,000
T2575	Abe Prior-Keep 5 Alive, Inc.	\$40,000
T2576	ACCESS Educational Services, Inc.	\$75,000
T2577	ActUp Theater, Inc.	\$75,000
T2578	Alex Breanne Corporation	\$15,000
T2579	Alliance for the Mystic River Watershed	\$7,500
T2580	ALMO Sports	\$25,000
T2581	Aluminum Falcon Robotics, Inc.	\$5,000
T2582	Amplify, Inc.	\$25,000
T2583	Angel of Edgewood, Inc.	\$10,000
T2584	Arte, Inc.	\$35,000
T2585	Artists Collective, Inc.	\$10,000
T2586	Asian Pacific American Coalition of CT	\$50,000
T2587	AskSammy Resources	\$15,000
T2588	Asociacion de Dominicanos de New London	\$40,000
T2589	Athletes R Us, Inc.	\$50,000
T2590	BAGS Foundation, Inc.	\$5,000

T2591	Ball Heads, Inc.	\$20,000
T2592	Bangladesh Society of Connecticut	\$50,000
T2593	Bangladeshi American Association of Connecticut (BAAC)	\$25,000
T2594	Bangladeshi American Friends & Family of CT	\$25,000
T2595	Barbara's House, Inc.	\$50,000
T2596	Be Ye Ready, Inc.	\$18,125
T2597	Beat the Street Community Center, Inc.	\$20,000
T2598	Bloomfield Jr Warhawks, Inc.	\$18,125
T2599	Boriken United of Eastern Connecticut, Inc.	\$10,000
T2600	Boys & Girls Club of Greater Waterbury	\$80,000
T2601	Boys & Girls Club of Meriden	\$10,000
T2602	Boys & Girls Club of New Britain	\$80,000
T2603	Boys and Girls Club of Hartford	\$30,000
T2604	Boys and Girls Club of Stamford, Inc.	\$20,000
T2605	Bregamos Theater	\$25,000
T2606	Bridgeport Caribe Youth Leaders	\$185,000
T2607	Building Leaders and Community Strategies, Inc.	\$25,000
T2608	Building One Community-The Center for Immigrant Opportunity	\$35,000
T2609	Business Industry Foundation of Middlesex County, Inc.	\$20,000
T2610	C.O.R.N.E.R.S Community	\$10,000
T2611	Charter Oak Boxing Academy	\$30,000
T2612	Charter Oak Temple Restoration Association, Inc.	\$50,000
T2613	Christ Christian Church, Inc.	\$12,000
T2614	Christian Community Action, Inc.	\$200,000
T2615	City Angel Baseball Academy	\$25,000
T2616	City of New Haven Youth and Rec.	\$300,000
T2617	CO Sports Academy, Inc.	\$5,000
T2618	Community for Generations	\$25,000
T2619	Community Speaks Out, Inc.	\$7,500
T2620	Connect Us, Inc.	\$25,000
T2621	Connecticut Institute for Community Development-Puerto Rican Parade, Inc.	\$10,000
T2622	Connecticut Scholars, Inc.	\$10,000
T2623	Cook and Grow LLC	\$20,000
T2624	Creative Youth Productions, Inc.	\$10,000
T2625	CT Rebound	\$10,000
T2626	CT Riptide	\$5,000

T2627	CT Violence Intervention Program, Inc.	\$200,000
T2628	Cultural Alliance of Western Connecticut	\$25,000
T2629	Danbury Grassroots Academy	\$25,000
T2630	Danbury Law Enforcement Cadets, Inc.	\$25,000
T2631	Danbury Youth Soccer Club, Inc.	\$10,000
T2632	Denison Pequotsepos Nature Center	\$5,000
T2633	DHW Athletics	\$5,000
T2634	DNA Entrepreneurial Pipeline Initiative, Urban League of Southern Connecticut	\$75,000
T2635	Dominican Community Center, Inc.	\$15,000
T2636	Dr. Martin Luther King Scholarship Fund	\$30,000
T2637	DT Cares	\$18,125
T2638	East End NRZ Market & Cafe	\$35,000
T2639	Ebony Horsewomen, Inc.	\$12,500
T2640	Edgewood PTA Child Care Program, Inc.	\$35,000
T2641	Edmunds Cofield Charter School	\$25,000
T2642	EJ's HEART, Inc.	\$80,000
T2643	Family Centers, Inc.	\$25,000
T2644	Ferguson Library	\$30,000
T2645	Fixing Fathers One Dad at a Time, Inc.	\$75,000
T2646	FRESH New London	\$10,000
T2647	Friends of Bethel Parks and Recreation, Inc.	\$75,000
T2648	Friends of MPMRC, Inc.	\$15,000
T2649	Friends of the Danbury Museum & Historical Society	\$50,000
T2650	From Quicksand Unto Solid Ground	\$10,000
T2651	Girls, Inc.	\$20,000
T2652	God Provides Ministries International, Inc.	\$10,000
T2653	Good Shepherd Ministries	\$8,000
T2654	Greenwich Alliance for Education	\$25,000
T2655	Groton Little League	\$15,000
T2656	Groton Mystic Youth Football League	\$10,000
T2657	Haitian Community Center, Inc.	\$10,000
T2658	Hartford Communities That Care, Inc.	\$30,000
T2659	Hartford Health Initiative	\$15,000
T2660	Hartford Hurricanes	\$18,125
T2661	Hartford Lions Soccer Academy, Inc.	\$30,625
T2662	Hartford Northend Little League	\$5,000
T2663	Hartford Stage Company, Inc.	\$50,000
T2664	Heavy Hitters USA, Inc.	\$10,000

T2665	Higher Edge, Inc.	\$10,000
T2666	Hip Hop 1001	\$10,000
T2667	Hispanic Alliance of Southeastern Connecticut, Inc.	\$10,000
T2668	Hispanic Coalition of Greater Waterbury, Inc.	\$20,000
T2669	Historically Black College Black Alumni, Inc.	\$3,000
T2670	Hoops 4 Life, Inc.	\$5,000
T2671	HOOPWAVE Sports Mentoring	\$10,000
T2672	Human Resources Agency of New Britain, Inc.	\$30,000
T2673	Integrated Day Charter School Foundation	\$28,000
T2674	INTEMPO Organization, Inc.	\$30,000
T2675	Interdistrict Committee for Project Oceanology (aka 'Project Oceanology')	\$25,000
T2676	Journey 2 Justice, Inc., Law Pipeline Program	\$25,000
T2677	Kind Works, Inc.	\$75,000
T2678	L.I.F.T. Foundation	\$50,000
T2679	LEAF	\$20,000
T2680	Ledyard Little League	\$8,000
T2681	Ledyard Soccer Club	\$8,000
T2682	Ledyard Youth Football	\$11,000
T2683	Left Hearts, Inc.	\$15,000
T2684	Life Center of CT, Inc.	\$15,000
T2685	Manchester Adult & Continuing Education	\$15,000
T2686	McGivney Community Center, Inc.	\$10,000
T2687	Mental Health CT	\$60,000
T2688	Meriden New Britain Berlin YMCA	\$25,000
T2689	Meriden Police Cadets	\$15,000
T2690	Meriden-Wallingford Chrysalis	\$20,000
T2691	Mi Casa (Hispanic Health Council)	\$25,000
T2692	Mill River Collaboration, Inc.	\$25,000
T2693	Montville Education Foundation, Inc.	\$20,000
T2694	Montville Lacrosse, LLC	\$6,000
T2695	Montville Little League, Inc.	\$8,000
T2696	Montville Youth Football League, Inc.	\$11,000
T2697	Montville Youth Soccer Club, Inc.	\$8,000
T2698	Motivate Kids	\$50,000
T2699	Music Haven	\$100,000
T2700	My Architexture Workshops, Inc.	\$25,000
T2701	Mystic Community Bikes Inc.	\$5,000
T2702	Mystic Seaport Museum, Inc.	\$20,000
T2703	New Britain Police Athletic League	\$25,000

T2704	New Britain ROOTS, Inc.	\$45,000
T2705	New England Science & Sailing Foundation	\$7,500
T2706	New Haven Ecology Project	\$200,000
T2707	New Life II Teaching You Another Way	\$25,000
T2708	New London Babe Ruth League, Inc.	\$10,000
T2709	Night Flight Association, Inc.	\$8,000
T2710	North End Little League	\$15,000
T2711	Northern Middlesex YMCA	\$120,000
T2712	Norwalk Jr. Football, Inc.	\$10,000
T2713	Norwich Bully Busters	\$3,000
T2714	Norwich Free Academy	\$15,000
T2715	Norwich Public Schools Education Foundation, Inc.	\$18,000
T2716	Norwich Youth Football League	\$20,000
T2717	Notre Dame West Haven	\$9,000
T2718	Ocean Community YMCA	\$15,000
T2719	Oddfellows Playhouse, Inc.	\$40,000
T2720	OIC New Britain, Inc.	\$35,000
T2721	Organized Parents Make A Difference, Inc.	\$50,000
T2722	Parent Leadership Training Institute (PLTI) and Children Leadership Training Institute (CLTI)	\$75,000
T2723	Park Central, Inc.	\$10,000
T2724	Park Street Public Library	\$25,000
T2725	Pathways to Employment and Housing, Inc.	\$25,000
T2726	Police Activity League of Middletown, Inc. (Middletown PAL)	\$10,000
T2727	Project 9 Foundation 8181-369	\$45,000
T2728	Project LEARN	\$7,500
T2729	PROJECT MUSIC, Inc.	\$30,000
T2730	Puerto Rican Parade of Fairfield County	\$20,000
T2731	Puerto Ricans United	\$30,000
T2732	READY, Inc.	\$35,000
T2733	Rehoboth Church of God	\$18,125
T2734	RF Youth Boxing, Inc.	\$100,000
T2735	Rich Dae Entrepreneur Foundation	\$168,125
T2736	Rivera Memorial Foundation, Inc.	\$72,500
T2737	Rodney Williams	\$35,000
T2738	Safe Futures, Inc.	\$10,000
T2739	Sankofa Education and Leadership, Inc.	\$40,000
T2740	Second Chance Re-entry Initiative Program (SCRIP)	\$10,000
T2741	Silver City Girls Softball	\$10,000

T2742	SoundWaters, Inc.	\$40,000
T2743	Sports Academy	\$50,000
T2744	Stamford Alumni Diamond Foundation, Inc.	\$45,000
T2745	Stamford Public Education Foundation, Inc.	\$15,000
T2746	Teach Kids Music, Inc.	\$20,000
T2747	Team West Haven, Inc.	\$30,000
T2748	The Bread Room, Inc.	\$17,000
T2749	The Bridge Family Center, Inc.	\$150,000
T2750	The Color a Positive Thought Organization	\$82,500
T2751	The Cornelia Brown Foundation Corp	\$25,000
T2752	The Dominican American Coalition of Connecticut Inc.	\$25,000
T2753	The Gifted Onez, Inc.	\$25,000
T2754	The Historically Black College Alumni	\$10,000
T2755	The House of Darla, Inc.	\$30,000
T2756	The Legacy Foundation of Hartford, Inc.	\$50,000
T2757	The Missing Piece LLC	\$18,125
T2758	The Mohegan Tribe of Indians of Connecticut	\$10,000
T2759	The Norwalk Conservatory of the Arts	\$10,000
T2760	The Norwalk Hospital Association, now part of Northwell	\$10,000
T2761	The Police Activities League of Hartford, Inc.	\$120,000
T2762	The Sonship Institute, Inc.	\$25,000
T2763	The Village Initiative Project, Inc.	\$70,000
T2764	The Walter E. Lockett Jr. Foundation, Inc.	\$50,000
T2765	The Young Women's Christian Association of New Britain	\$10,000
T2766	Today's Youth Tomorrow's Future, Inc.	\$10,000
T2767	TOPS The Other Persons Shoes	\$12,500
T2768	Town of East Hartford	\$100,000
T2769	Town of East Hartford Youth and Social Services Department	\$75,000
T2770	Town of Manchester Youth Service Bureau	\$75,000
T2771	Transcend The Trend, Inc.	\$75,000
T2772	Umbrella Impact	\$10,000
T2773	Unique & Unified New Era Youth Movement	\$55,000
T2774	United Way of Greenwich, Inc.	\$40,000
T2775	University of Bridgeport	\$20,000
T2776	University of Connecticut	\$7,500
T2777	UR Community Cares, Inc.	\$10,000

T2778	Village Initiative Project	\$35,000
T2779	Walnut Orange Walsh Neighborhood Revitalization Zone, Inc.	\$82,500
T2780	West Haven Board of Education	\$9,000
T2781	Whaling City Youth Football League, Inc.	\$10,000
T2782	Women and Families Center	\$20,000
T2783	Yellow Farmhouse Education Center, Inc.	\$2,500
T2784	YMCA of Northern Middlesex County, Inc.	\$110,000
T2785	YMCA-Meriden, Berlin, New Britain	\$10,000
T2786	Young Men's Christian Association of Greenwich	\$10,000
T2787	Youth Business Initiative (YBI)	\$25,000
T2788	Yuke Nation, Inc.	\$25,000

19150 Sec. 467. (*Effective from passage*) (a) For the fiscal year ending June 30,
19151 2027, the amount of \$3,250,000 shall be transferred from the Citizens'
19152 Election Fund to the Secretary of the State, for Other Expenses.

19153 (b) From the amount transferred pursuant to subsection (a) of this
19154 section, the Secretary of the State shall use \$2,250,000 for early voting
19155 grants to municipalities, and \$1,000,000 for a public information
19156 campaign.

19157 Sec. 468. (*Effective from passage*) The memorandum of agreement
19158 between the State of Connecticut Personal Care Attendant (PCA)
19159 Workforce Council and the New England Health Care Employees
19160 Union, District 1199, SEIU, submitted to this assembly for approval May
19161 1, 2026, as provided in subdivisions (7) and (8) of subsection (c) of
19162 section 17b-706b of the general statutes, including any attachments or
19163 appendices thereto, and any provisions that require supersedence of a
19164 law or regulation, is approved.

19165 Sec. 469. (*Effective from passage*) The memorandum of agreement
19166 between the State of Connecticut Office of Early Childhood and the
19167 Connecticut State Employees Association SEIU Local 2001, submitted to
19168 this assembly for approval May 1, 2026, as provided in subdivisions (7)
19169 and (8) of subsection (e) of section 17b-705a of the general statutes,
19170 including any attachments or appendices thereto, and any provisions

19171 that require supersedence of a law or regulation, is approved.

19172 Sec. 470. Section 10a-174d of the 2026 supplement to the general
19173 statutes is repealed and the following is substituted in lieu thereof
19174 (*Effective July 1, 2026*):

19175 (a) As used in this section:

19176 (1) "Award" means the greater of: (A) The unpaid portion, if any, of a
19177 qualifying student's eligible institutional costs after subtracting such
19178 student's financial aid, or (B) a minimum award of five hundred dollars
19179 for a full-time student or three hundred dollars for a part-time student;

19180 (2) "Eligible institutional costs" means the tuition and required fees
19181 incurred each semester by an individual student that are established by
19182 the Board of Regents for Higher Education for the Connecticut State
19183 University System and Charter Oak State College;

19184 (3) "Financial aid" means the sum of all scholarships, grants and
19185 federal, state and institutional aid received by a qualifying student.
19186 "Financial aid" does not include any federal, state or private student
19187 loans received by a qualifying student;

19188 (4) "Qualifying student" means any person who (A) participated in
19189 the debt-free community college program, established pursuant to
19190 section 10a-174, and [completed not fewer than sixty credits through
19191 said program] received an associate's degree at the Connecticut State
19192 Community College, (B) enrolls as a full-time or part-time student for
19193 the fall semester of 2026, or any semester thereafter, at a state university
19194 within the Connecticut State University System or Charter Oak State
19195 College in a program leading to a bachelor's degree, (C) is classified as
19196 an in-state student pursuant to section 10a-29, (D) made satisfactory
19197 academic progress while enrolled at the Connecticut State Community
19198 College and continues to make satisfactory academic progress while
19199 enrolled at such state university or Charter Oak State College, (E) has
19200 completed the Free Application for Federal Student Aid, and (F) has
19201 accepted all available financial aid;

19202 (5) "Full-time student" means a student who is enrolled at a state
19203 university within the Connecticut State University System or Charter
19204 Oak State College and (A) is carrying twelve or more credit hours in a
19205 semester, or (B) has a learning disability documented with such
19206 university in which he or she is enrolled and is enrolled in the maximum
19207 number of credit hours that is feasible for such student to attempt in a
19208 semester, as determined by such student's academic advisor;

19209 (6) "Semester" means the fall or spring semester of an academic year.
19210 "Semester" does not include a summer semester or session; and

19211 (7) "Part-time student" means a student who is enrolled at a state
19212 university within the Connecticut State University System or Charter
19213 Oak State College and is carrying not less than six but fewer than twelve
19214 credit hours in a semester.

19215 (b) The Board of Regents for Higher Education shall (1) establish a
19216 finish line scholars program to make awards to qualifying students each
19217 semester, (2) adopt rules, procedures and forms necessary to implement
19218 the finish line scholars program, and (3) submit a report outlining such
19219 rules, procedures and forms, in accordance with the provisions of
19220 section 11-4a, to the joint standing committee of the General Assembly
19221 having cognizance of matters relating to higher education.

19222 (c) For the fall semester of 2026, and each semester thereafter, the
19223 Board of Regents for Higher Education shall make awards to qualifying
19224 students within available appropriations. An award shall be available
19225 to a qualifying student for the first seventy-two credit hours earned by
19226 the qualifying student at a state university within the Connecticut State
19227 University System or Charter Oak State College, as applicable, or until
19228 such qualifying student earns a bachelor's degree, whichever is earlier,
19229 provided the qualifying student meets and continues to meet the
19230 requirements of this section. The board shall not use an award to
19231 supplant any financial aid, including, but not limited to, state or
19232 institutional aid, otherwise available to a qualifying student.

19233 (d) Not later than [November 1, 2026, and March 1, 2027, and each
 19234 semester] January 1, 2027, June 1, 2027, and quarterly thereafter, the
 19235 Board of Regents for Higher Education shall report, in accordance with
 19236 the provisions of section 11-4a, to the joint standing committees of the
 19237 General Assembly having cognizance of matters relating to higher
 19238 education and employment advancement and appropriations and the
 19239 budgets of the state agencies regarding the finish line scholars program,
 19240 including, but not limited to, (1) the number of qualifying students
 19241 enrolled at a state university within the Connecticut State University
 19242 System and Charter Oak State College during each semester, (2) the
 19243 number of qualifying students receiving minimum awards and the
 19244 number of qualifying students receiving awards for the unpaid portion
 19245 of eligible institutional costs, (3) the average number of credit hours the
 19246 qualifying students enrolled in each semester and the average number
 19247 of credit hours the qualifying students completed each semester, (4) the
 19248 average amount of the award made to qualifying students under this
 19249 section for the unpaid portion of eligible institutional costs, [and] (5) the
 19250 degree completion rates of qualifying students receiving awards under
 19251 this section by subject area, and (6) the average amount of institutional
 19252 aid awarded to (A) Finish Line Scholars recipients by Student Aid Index
 19253 groupings, and (B) students who did not receive a Finish Line Scholars
 19254 award by the same Student Aid Index groupings.

19255 Sec. 471. (*Effective from passage*) The following sums are appropriated
 19256 from the GENERAL FUND for the purposes herein specified for the
 19257 fiscal year ending June 30, 2026:

T2789	GENERAL FUND	2025-2026
T2790		
T2791	DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION	
T2792	Personal Services	4,800,000
T2793	Other Expenses	2,765,000
T2794	Fleet Purchase	2,620,000
T2795	Connecticut State Firefighter's Association	75,000
T2796		

T2797	DEPARTMENT OF LABOR	
T2798	Other Expenses	1,400,000
T2799		
T2800	DEPARTMENT OF HOUSING	
T2801	Housing/Homeless Services	17,000,000
T2802		
T2803	DEPARTMENT OF PUBLIC HEALTH	
T2804	Other Expenses	700,000
T2805		
T2806	DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES	
T2807	Personal Services	7,500,000
T2808	Behavioral Health Medications	1,300,000
T2809		
T2810	DEPARTMENT OF SOCIAL SERVICES	
T2811	Medicaid	80,000,000
T2812	Old Age Assistance	6,100,000
T2813	Aid To The Blind	190,000
T2814	Aid To The Disabled	6,400,000
T2815	Connecticut Home Care Program	2,900,000
T2816		
T2817	DEPARTMENT OF EDUCATION	
T2818	Education Equalization Grants	2,000,000
T2819		
T2820	TECHNICAL EDUCATION AND CAREER SYSTEM	
T2821	Personal Services	2,000,000
T2822	Other Expenses	2,300,000
T2823		
T2824	OFFICE OF EARLY CHILDHOOD	
T2825	Birth to Three	3,500,000
T2826		
T2827	DEPARTMENT OF CORRECTION	
T2828	Personal Services	18,000,000
T2829		
T2830	DEPARTMENT OF CHILDREN AND FAMILIES	
T2831	Personal Services	2,400,000
T2832		
T2833	JUDICIAL DEPARTMENT	
T2834	Other Expenses	4,100,000
T2835		

T2836	STATE COMPTROLLER - FRINGE BENEFITS	
T2837	State Employees Health Service Cost	43,000,000
T2838		
T2839	WORKERS' COMPENSATION CLAIMS - DEPARTMENT OF ADMINISTRATIVE SERVICES	
T2840	Workers' Compensation Claims	1,400,000
T2841	Workers Comp Claims - UCHC	400,000
T2842	Workers Comp Claims - DCF	200,000
T2843	Workers Comp Claims - DMHAS	8,000,000
T2844	Workers Comp Claims - DESPP	1,400,000
T2845	Workers Comp Claims - DOC	9,300,000
T2846		
T2847	TOTAL - GENERAL FUND	231,750,000

19258 Sec. 472. (*Effective from passage*) The amounts appropriated to the
19259 following agencies in section 1 of public act 25-168 are reduced by the
19260 following amounts for the fiscal year ending June 30, 2026:

T2848	GENERAL FUND	2025-2026
T2849		
T2850	LEGISLATIVE MANAGEMENT	
T2851	Personal Services	3,000,000
T2852	Other Expenses	2,000,000
T2853		
T2854	SECRETARY OF THE STATE	
T2855	Personal Services	900,000
T2856		
T2857	ELECTIONS ENFORCEMENT COMMISSION	
T2858	Elections Enforcement Commission	300,000
T2859		
T2860	DEPARTMENT OF REVENUE SERVICES	
T2861	Personal Services	2,500,000
T2862		
T2863	OFFICE OF GOVERNMENTAL ACCOUNTABILITY	
T2864	Contracting Standards Board	100,000
T2865	Office of the Child Advocate	200,000
T2866	Office of the Correction Ombuds	250,000
T2867	Office of the Educational Ombudsperson	150,000
T2868		
T2869	OFFICE OF POLICY AND MANAGEMENT	

T2870	Personal Services	1,000,000
T2871	Property Tax Relief for Veterans	1,000,000
T2872		
T2873	DEPARTMENT OF VETERANS AFFAIRS	
T2874	Personal Services	500,000
T2875		
T2876	DEPARTMENT OF ADMINISTRATIVE SERVICES	
T2877	Personal Services	3,000,000
T2878	Other Expenses	1,200,000
T2879	Rents and Moving	100,000
T2880	State Insurance and Risk Mgmt Operations	4,000,000
T2881	IT Services	1,000,000
T2882		
T2883	ATTORNEY GENERAL	
T2884	Personal Services	3,500,000
T2885		
T2886	DIVISION OF CRIMINAL JUSTICE	
T2887	Personal Services	3,775,000
T2888		
T2889	DEPARTMENT OF CONSUMER PROTECTION	
T2890	Personal Services	2,250,000
T2891		
T2892	DEPARTMENT OF LABOR	
T2893	Opportunities for Long Term Unemployed	175,000
T2894		
T2895	COMMISSION ON HUMAN RIGHTS AND OPPORTUNITIES	
T2896	Personal Services	350,000
T2897		
T2898	DEPARTMENT OF AGRICULTURE	
T2899	Personal Services	250,000
T2900	Other Expenses	250,000
T2901		
T2902	DEPARTMENT OF ECONOMIC AND COMMUNITY DEVELOPMENT	
T2903	Personal Services	200,000
T2904	Other Expenses	500,000
T2905		
T2906	AGRICULTURAL EXPERIMENT STATION	
T2907	Personal Services	200,000

T2908		
T2909	DEPARTMENT OF PUBLIC HEALTH	
T2910	Personal Services	900,000
T2911	Pancreatic Cancer Screening	100,000
T2912	Public Health Response	850,000
T2913	School Based Health Clinics	600,000
T2914		
T2915	OFFICE OF HEALTH STRATEGY	
T2916	Personal Services	350,000
T2917		
T2918	DEPARTMENT OF DEVELOPMENTAL SERVICES	
T2919	Personal Services	500,000
T2920	Behavioral Services Program	1,100,000
T2921	Supplemental Payments for Medical Services	300,000
T2922		
T2923	DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES	
T2924	Home and Community Based Services	650,000
T2925		
T2926	DEPARTMENT OF SOCIAL SERVICES	
T2927	Personal Services	5,500,000
T2928	HUSKY B Program	1,400,000
T2929	Substance Use Disorder Waiver Reserve	6,570,000
T2930	Temporary Family Assistance - TANF	13,900,000
T2931	State Administered General Assistance	3,100,000
T2932		
T2933	DEPARTMENT OF EDUCATION	
T2934	Personal Services	1,150,000
T2935	Other Expenses	1,750,000
T2936	Sheff Settlement	5,000,000
T2937	Sheff Transportation	4,960,000
T2938	Aspiring Educators Scholarship Program	4,500,000
T2939	Charter Schools	1,200,000
T2940	Open Choice Program	1,000,000
T2941	Magnet Schools	2,300,000
T2942		
T2943	OFFICE OF EARLY CHILDHOOD	
T2944	Personal Services	500,000
T2945		
T2946	OFFICE OF HIGHER EDUCATION	

T2947	Other Expenses	200,000
T2948	CT Loan Forgiveness	4,500,000
T2949		
T2950	TEACHERS' RETIREMENT BOARD	
T2951	Retirees Health Service Cost	300,000
T2952	Municipal Retiree Health Insurance Costs	700,000
T2953		
T2954	JUDICIAL DEPARTMENT	
T2955	Personal Services	1,871,496
T2956	Alternative Incarceration Program	500,000
T2957	Juvenile Alternative Incarceration	375,000
T2958	Workers' Compensation Claims	350,000
T2959	Youth Violence Initiative	27,022
T2960	Youth Services Prevention	573,122
T2961	Juvenile Justice Outreach Services	375,000
T2962	Board and Care for Children - Short-term and Residential	250,000
T2963		
T2964	PUBLIC DEFENDER SERVICES COMMISSION	
T2965	Personal Services	1,240,000
T2966	Assigned Counsel - Criminal	684,360
T2967		
T2968	STATE COMPTROLLER - FRINGE BENEFITS	
T2969	Higher Education Alternative Retirement System	32,000,000
T2970	Employers Social Security Tax	7,000,000
T2971	Other Post Employment Benefits	8,000,000
T2972	SERS Defined Contribution Match	1,000,000
T2973		
T2974	WORKERS' COMPENSATION CLAIMS - DEPARTMENT OF ADMINISTRATIVE SERVICES	
T2975	Workers Comp Claims - UConn	450,000
T2976	Workers Comp Claims - CSCU	750,000
T2977	Workers Comp Claims - DDS	100,000
T2978		
T2979	TOTAL - GENERAL FUND	152,076,000

19261 Sec. 473. (*Effective from passage*) The following sums are appropriated
19262 from the SPECIAL TRANSPORTATION FUND for the purposes herein
19263 specified for the fiscal year ending June 30, 2026:

T2980	SPECIAL TRANSPORTATION FUND	2025-2026
T2981		
T2982	DEPARTMENT OF TRANSPORTATION	
T2983	Other Expenses	9,000,000
T2984	Highway Planning And Research	1,041,500
T2985		
T2986	STATE COMPTROLLER - FRINGE BENEFITS	
T2987	Employers Social Security Tax	150,000
T2988	State Employees Health Service Cost	7,000,000
T2989		
T2990	WORKERS' COMPENSATION CLAIMS - DEPARTMENT OF ADMINISTRATIVE SERVICES	
T2991	Workers' Compensation Claims	350,000
T2992		
T2993	TOTAL - SPECIAL TRANSPORTATION FUND	17,541,500

19264 Sec. 474. (*Effective from passage*) The amounts appropriated to the
19265 following agencies in section 2 of public act 25-168 are reduced by the
19266 following amounts for the fiscal year ending June 30, 2026:

T2994	SPECIAL TRANSPORTATION FUND	2025-2026
T2995		
T2996	DEPARTMENT OF ADMINISTRATIVE SERVICES	
T2997	Personal Services	400,000
T2998	State Insurance and Risk Mgmt Operations	750,000
T2999		
T3000	DEPARTMENT OF MOTOR VEHICLES	
T3001	Personal Services	2,000,000
T3002		
T3003	DEPARTMENT OF TRANSPORTATION	
T3004	Rail Operations	10,041,500
T3005		
T3006	TOTAL - SPECIAL TRANSPORTATION FUND	13,191,500

19267 Sec. 475. (*Effective from passage*) The amounts appropriated to the
19268 following agencies in section 5 of public act 25-168 are reduced by the
19269 following amounts for the fiscal year ending June 30, 2026:

T3007	INSURANCE FUND	2025-2026

T3008		
T3009	DEPARTMENT OF PUBLIC HEALTH	
T3010	Immunization Services	2,000,000
T3011		
T3012	OFFICE OF HEALTH STRATEGY	
T3013	Other Expenses	1,000,000
T3014		
T3015	TOTAL - INSURANCE FUND	3,000,000

19270 Sec. 476. (*Effective from passage*) Notwithstanding the provisions of
19271 title 2 of the general statutes and any personnel policies adopted
19272 pursuant to said provisions, the Office of Legislative Management shall
19273 apply terms consistent with those contained in Article 20, except section
19274 3 of said article, of the tentative agreement for a successor collective
19275 bargaining agreement between the State of Connecticut and the
19276 Connecticut Employees Union Independent, NP-2 Bargaining Unit
19277 (CEUI), ratified on January 8, 2026, and approved pursuant to
19278 subsection (f) of section 5-278 of the general statutes, and applicable to
19279 the fiscal year ending June 30, 2027, to legislative employees for the fiscal
19280 year ending June 30, 2027.

19281 Sec. 477. (*Effective from passage*) Up to \$100,000 of the unexpended
19282 balance of funds appropriated to Legislative Management, for Statues,
19283 in section 1 of public act 23-204, for the fiscal year ending June 30, 2024,
19284 carried forward in section 9 of public act 24-81, for the fiscal year ending
19285 June 30, 2025, and carried forward in section 30 of public act 25-168, for
19286 the fiscal year ending June 30, 2026, shall not lapse on June 30, 2026, and
19287 shall be made available during the fiscal year ending June 30, 2027, to
19288 support removal of the John Mason statue from the State Capitol
19289 building.

19290 Sec. 478. (*Effective July 1, 2026*) The sum of \$100,000 of the amount
19291 appropriated in section 3 of this act, to the Department of Energy and
19292 Environmental Protection, for Various Grants, for the fiscal year ending
19293 June 30, 2027, shall be made available in said fiscal year to the three
19294 state-recognized tribes, the Schaghticoke, the Paucatuck Eastern Pequot

19295 and the Golden Hill Paugussett, for storm damage clean-up and
19296 hazardous tree removal on their reservations.

19297 Sec. 479. (*Effective July 1, 2026*) The sum of \$50,000 of the amount
19298 appropriated in section 3 of this act, to the Department of Energy and
19299 Environmental Protection, for Various Grants, for the fiscal year ending
19300 June 30, 2027, shall be made available in said fiscal year to the
19301 Mashantucket Pequot Tribe, the Mohegan Tribe of Indians of
19302 Connecticut and the three state-recognized tribes, the Schaghticoke, the
19303 Paucatuck Eastern Pequot and the Golden Hill Paugussett, for hunting
19304 and fishing license fees.

19305 Sec. 480. (*Effective from passage*) The sum of \$3,000,000 of the amount
19306 appropriated in section 1 of public act 25-168, as amended by this act, to
19307 the Department of Transportation, for Rail Operations, for the fiscal year
19308 ending June 30, 2026, and the sum of \$4,000,000 of the amount
19309 appropriated in said section to the Department of Transportation, for
19310 Rail Operations, for the fiscal year ending June 30, 2027, shall be made
19311 available in said fiscal years for Shore Line East.

19312 Sec. 481. (*Effective from passage*) The sum of \$850,000 of the amount
19313 appropriated in section 1 of public act 25-168, as amended by this act, to
19314 the Department of Emergency Services and Public Protection, for Social
19315 Work Law Enforcement Training Partnership, for the fiscal year ending
19316 June 30, 2026, shall not lapse on June 30, 2026, and shall be carried
19317 forward for the fiscal year ending June 30, 2027.

19318 Sec. 482. (*Effective from passage*) Up to \$200,000 of the unexpended
19319 balance of funds appropriated to the Department of Economic and
19320 Community Development, for Various Grants, in section 1 of public act
19321 25-168, as amended by this act, for the fiscal year ending June 30, 2026,
19322 shall not lapse on June 30, 2026, and shall be carried forward and made
19323 available during the fiscal year ending June 30, 2027, as a grant to the
19324 American Legion Post 17 in Naugatuck.

19325 Sec. 483. (*Effective from passage*) Up to \$250,000 of the unexpended

19326 balance of funds appropriated to the Department of Children and
19327 Families, for Various Grants, in section 1 of public act 25-168, as
19328 amended by this act, for the fiscal year ending June 30, 2026, shall not
19329 lapse on June 30, 2026, and shall be transferred to the Department of
19330 Housing, for Various Grants, and made available during the fiscal year
19331 ending June 30, 2027, as a grant to Thames River Community Services.

19332 Sec. 484. Section 29-11l of the 2026 supplement to the general statutes
19333 is repealed and the following is substituted in lieu thereof (*Effective July*
19334 *1, 2026*):

19335 (a) The Department of Emergency Services and Public Protection, in
19336 consultation with the Police Officer Standards and Training Council,
19337 shall establish a project to be known as the social work and law
19338 enforcement project to advance the ethical and effective integration of
19339 social work services into law enforcement units by preparing social
19340 workers, social work students and law enforcement professionals to
19341 collaborate in the field of police social work. The project shall be located
19342 at Southern Connecticut State University. The objectives of the project
19343 shall be to: (1) Educate and train the social work and law enforcement
19344 workforce to collaborate by using a model that integrates police and
19345 social work, (2) increase community wellness through training,
19346 research, education and policy advocacy concerning the integration of
19347 police and social work, (3) strengthen the engagement among social
19348 workers, law enforcement officers and community members, and (4)
19349 promote dialogue concerning diversity, disparities and systemic racism
19350 in criminal and juvenile justice settings. For purposes of this section,
19351 "law enforcement unit" has the same meaning as provided in section 7-
19352 294a.

19353 (b) Not later than January 1, 2026, the Commissioner of Emergency
19354 Services and Public Protection shall enter into a memorandum of
19355 understanding with Southern Connecticut State University for the
19356 purpose of establishing the social work and law enforcement project.
19357 Such memorandum shall include, but need not be limited to, a
19358 requirement that any use of funding for the project for a purpose other

19359 than providing training or education to a police officer shall require the
19360 commissioner's written authorization.

19361 (c) Not later than January 1, 2027, and annually thereafter, the
19362 Commissioner of Emergency Services and Public Protection, the Police
19363 Officer Standards and Training Council and the president of Southern
19364 Connecticut State University shall jointly report, in accordance with the
19365 provisions of section 11-4a, to the joint standing committees of the
19366 General Assembly having cognizance of matters relating to public safety
19367 and appropriations and the budgets of state agencies on the status of the
19368 project and expenditures associated with the project.

19369 Sec. 485. *(Effective July 1, 2026)* Not later than January 1, 2027, the
19370 Student Loan Ombudsman, appointed pursuant to section 36a-25 of the
19371 general statutes, shall report, in accordance with the provisions of
19372 section 11-4a of the general statutes, to the joint standing committees of
19373 the General Assembly having cognizance of matters relating to banking,
19374 higher education and appropriations and the budgets of state agencies
19375 concerning the activities of the Office of the Student Loan Ombudsman
19376 during the calendar years 2025 and 2026.

19377 Sec. 486. Section 27-19d of the general statutes is repealed and the
19378 following is substituted in lieu thereof *(Effective July 1, 2026)*:

19379 There is established an account to be known as the ["Governor's
19380 Guards account"] "Governor's Foot Guards account", which shall be a
19381 separate, nonlapsing account within the General Fund. The account
19382 shall contain any moneys required by law to be deposited in the account,
19383 which shall include, but not be limited to, the proceeds of Governor's
19384 Foot Guards programs. Moneys in the account shall be expended by the
19385 Adjutant General for the purposes of facilitating the operations of the
19386 Governor's Guards.

19387 Sec. 487. Section 27-19e of the 2026 supplement to the general statutes
19388 is repealed and the following is substituted in lieu thereof *(Effective July*
19389 *1, 2026)*:

19390 (a) There is established an account to be known as the "Governor's
19391 Guards horse account", which shall be a separate, nonlapsing account.
19392 The account shall contain any moneys required by law to be deposited
19393 in the account, which shall include, but not be limited to, donations for
19394 the specific purpose of offsetting the costs of maintaining Governor's
19395 Guards' horses.

19396 (b) There is established a subaccount within the Governor's Guards
19397 horse account, established pursuant to subsection (a) of this section, to
19398 be known as the "First Company Governor's Horse Guard account" to
19399 be used solely for activities relating to the First Company Governor's
19400 Horse Guard in Avon.

19401 (c) There is established a subaccount within the Governor's Guards
19402 horse account, established pursuant to subsection (a) of this section, to
19403 be known as the "Second Company Governor's Horse Guard account"
19404 to be used solely for activities relating to the Second Company
19405 Governor's Horse Guard in Newtown.

19406 (d) Moneys in the account shall be expended by the Adjutant General
19407 for the purposes of facilitating the operations of the Governor's Guards.

19408 Sec. 488. Subsection (b) of section 12-18b of the 2026 supplement to
19409 the general statutes is repealed and the following is substituted in lieu
19410 thereof (*Effective July 1, 2026*):

19411 (b) Notwithstanding the provisions of sections 12-19a and 12-20a, on
19412 or before September thirtieth, annually, all funds appropriated for state
19413 grants in lieu of taxes shall be payable to municipalities and fire districts
19414 pursuant to the provisions of this section. On or before January first,
19415 annually, the Secretary of the Office of Policy and Management shall
19416 determine the amount due, as a state grant in lieu of taxes, to each
19417 municipality and fire district in this state wherein college and hospital
19418 property is located and to each municipality and fire district in this state
19419 wherein state, municipal or tribal property, except that which was
19420 acquired and used for highways and bridges, but not excepting

19421 property acquired and used for highway administration or maintenance
19422 purposes, is located. Such determination shall be calculated based on
19423 assessed values provided to the Office of Policy and Management prior
19424 to the preceding April first, pursuant to section 12-19b.

19425 (1) The grant payable to any municipality or fire district for state,
19426 municipal or tribal property under the provisions of this section in the
19427 fiscal year ending June 30, 2022, and each fiscal year thereafter, shall be
19428 equal to the total of:

19429 (A) One hundred per cent of the property taxes that would have been
19430 paid with respect to any facility designated by the Commissioner of
19431 Correction, on or before August first of each year, to be a correctional
19432 facility administered under the auspices of the Department of
19433 Correction or a juvenile residential center under direction of the Judicial
19434 Branch that was used for incarcerative purposes during the preceding
19435 fiscal year. If a list containing the name and location of such designated
19436 facilities and information concerning their use for purposes of
19437 incarceration during the preceding fiscal year is not available from the
19438 Secretary of the State on August first of any year, the Commissioner of
19439 Correction shall, on said date, certify to the Secretary of the Office of
19440 Policy and Management a list containing such information;

19441 (B) One hundred per cent of the property taxes that would have been
19442 paid with respect to that portion of the John Dempsey Hospital located
19443 at The University of Connecticut Health Center in Farmington that is
19444 used as a permanent medical ward for prisoners under the custody of
19445 the Department of Correction. Nothing in this section shall be construed
19446 as designating any portion of The University of Connecticut Health
19447 Center John Dempsey Hospital as a correctional facility;

19448 (C) One hundred per cent of the property taxes that would have been
19449 paid on any land [designated within the 1983 Settlement boundary and]
19450 taken into trust by the federal government for the Mashantucket Pequot
19451 Tribal Nation on or after June 8, 1999;

19452 (D) One hundred per cent of the property taxes that would have been
19453 paid with respect to the property and facilities owned by the
19454 Connecticut Port Authority;

19455 (E) Subject to the provisions of subsection (c) of section 12-19a, sixty-
19456 five per cent of the property taxes that would have been paid with
19457 respect to the buildings and grounds comprising Connecticut Valley
19458 Hospital and Whiting Forensic Hospital in Middletown;

19459 (F) With respect to any municipality in which more than fifty per cent
19460 of the property is state-owned real property, one hundred per cent of
19461 the property taxes that would have been paid with respect to such state-
19462 owned property;

19463 (G) Forty-five per cent of the property taxes that would have been
19464 paid with respect to all municipally owned airports; except for the
19465 exemption applicable to such property, on the assessment list in such
19466 municipality for the assessment date two years prior to the
19467 commencement of the state fiscal year in which such grant is payable.
19468 The grant provided pursuant to this section for any municipally owned
19469 airport shall be paid to any municipality in which the airport is located,
19470 except that the grant applicable to Sikorsky Airport shall be paid one-
19471 half to the town of Stratford and one-half to the city of Bridgeport;

19472 (H) One hundred per cent of the property taxes that would have been
19473 paid with respect to any land [designated within the 1983 Settlement
19474 boundary and] taken into trust by the federal government for the
19475 Mashantucket Pequot Tribal Nation prior to June 8, 1999, or taken into
19476 trust by the federal government for the Mohegan Tribe of Indians of
19477 Connecticut, provided the real property subject to this subparagraph
19478 shall be the land only, and shall not include the assessed value of any
19479 structures, buildings or other improvements on such land; and

19480 (I) Forty-five per cent of the property taxes that would have been paid
19481 with respect to all other state-owned real property.

19482 (2) The grant payable to any municipality or fire district for college

19483 and hospital property under the provisions of this section in the fiscal
19484 year ending June 30, 2017, and each fiscal year thereafter, shall be equal
19485 to the total of seventy-seven per cent of the property taxes that, except
19486 for any exemption applicable to any college and hospital property under
19487 the provisions of section 12-81, would have been paid with respect to
19488 college and hospital property on the assessment list in such municipality
19489 or fire district for the assessment date two years prior to the
19490 commencement of the state fiscal year in which such grant is payable.

19491 Sec. 489. Section 2-83 of the general statutes is repealed and the
19492 following is substituted in lieu thereof (*Effective July 1, 2026*):

19493 Such interns shall be appointed for the duration of the spring
19494 semester of such interns' institution of higher education, and may
19495 continue to serve for the duration of the regular session of the General
19496 Assembly or any subsequent special sessions of the General Assembly.
19497 The committee shall (1) appoint a program coordinator, and (2)
19498 authorize the expenses of administration of the program, [and (3) pay
19499 at least one-half of the stipend awarded to such interns, the remainder
19500 of such stipend to be paid out of appropriations to the committee
19501 therefor.] Each such intern shall be paid a stipend of five hundred
19502 dollars.

19503 Sec. 490. Subsection (a) of section 3 of special act 26-1 is amended to
19504 read as follows (*Effective from passage*):

19505 (a) The sum of [\$330,811,954] \$380,811,954 is appropriated from the
19506 Federal Cuts Response Fund, established pursuant to section 1 of [this
19507 act] special act 26-1, to the Office of Policy and Management, for the
19508 fiscal year ending June 30, 2026, for the purpose of responding to the
19509 policy impacts of P.L. 119-21 and mitigating any action or inaction by
19510 the federal government that results in a reduction in funding for any
19511 program in this state."

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>July 1, 2026</i>	New section
Sec. 2	<i>July 1, 2026</i>	New section
Sec. 3	<i>July 1, 2026</i>	New section
Sec. 4	<i>July 1, 2026</i>	New section
Sec. 5	<i>July 1, 2026</i>	New section
Sec. 6	<i>July 1, 2026</i>	New section
Sec. 7	<i>July 1, 2026</i>	New section
Sec. 8	<i>July 1, 2026</i>	New section
Sec. 9	<i>July 1, 2026</i>	New section
Sec. 10	<i>from passage</i>	New section
Sec. 11	<i>July 1, 2026</i>	PA 25-168, Sec. 31
Sec. 12	<i>July 1, 2026</i>	PA 25-168, Sec. 36
Sec. 13	<i>from passage</i>	New section
Sec. 14	<i>from passage</i>	New section
Sec. 15	<i>from passage</i>	New section
Sec. 16	<i>from passage</i>	New section
Sec. 17	<i>from passage</i>	PA 26-1, Sec. 9
Sec. 18	<i>from passage</i>	New section
Sec. 19	<i>from passage</i>	New section
Sec. 20	<i>from passage</i>	New section
Sec. 21	<i>from passage</i>	New section
Sec. 22	<i>from passage</i>	New section
Sec. 23	<i>from passage</i>	New section
Sec. 24	<i>from passage</i>	New section
Sec. 25	<i>from passage</i>	New section
Sec. 26	<i>from passage</i>	New section
Sec. 27	<i>from passage</i>	New section
Sec. 28	<i>from passage</i>	New section
Sec. 29	<i>from passage</i>	New section
Sec. 30	<i>from passage</i>	New section
Sec. 31	<i>from passage</i>	New section
Sec. 32	<i>from passage</i>	New section
Sec. 33	<i>from passage</i>	New section
Sec. 34	<i>from passage</i>	New section
Sec. 35	<i>from passage</i>	New section
Sec. 36	<i>from passage</i>	New section
Sec. 37	<i>from passage</i>	New section

Sec. 38	<i>from passage</i>	New section
Sec. 39	<i>from passage</i>	New section
Sec. 40	<i>from passage</i>	New section
Sec. 41	<i>from passage</i>	New section
Sec. 42	<i>from passage</i>	New section
Sec. 43	<i>from passage</i>	New section
Sec. 44	<i>from passage</i>	New section
Sec. 45	<i>from passage</i>	New section
Sec. 46	<i>from passage</i>	New section
Sec. 47	<i>from passage</i>	New section
Sec. 48	<i>from passage</i>	New section
Sec. 49	<i>from passage</i>	New section
Sec. 50	<i>from passage</i>	New section
Sec. 51	<i>from passage</i>	New section
Sec. 52	July 1, 2026	New section
Sec. 53	July 1, 2026	New section
Sec. 54	<i>from passage</i>	New section
Sec. 55	<i>from passage</i>	New section
Sec. 56	<i>from passage</i>	8-169jj(e)
Sec. 57	<i>from passage</i>	8-169ll(a)
Sec. 58	<i>from passage</i>	8-37x(b)
Sec. 59	<i>from passage</i>	47a-4d
Sec. 60	July 1, 2026, and applicable to calendar quarters commencing on or after July 1, 2026	12-263s(b)
Sec. 61	<i>from passage</i>	Repealer section
Sec. 62	July 1, 2026	New section
Sec. 63	<i>from passage</i>	29-1r(a)
Sec. 64	July 1, 2026	14-21cc(d)
Sec. 65	<i>from passage</i>	4-65a(a)
Sec. 66	July 1, 2026	7-74(b)
Sec. 67	July 1, 2026	46a-52
Sec. 68	July 1, 2026	1-84(d)
Sec. 69	July 1, 2026	1-84b(c)
Sec. 70	July 1, 2026	2-137(b)
Sec. 71	July 1, 2026	4-5
Sec. 72	July 1, 2026	4-101a(b)
Sec. 73	July 1, 2026	8-37vvv(b)
Sec. 74	July 1, 2026	10-222tt(c)(8)

Sec. 75	July 1, 2026	10-532(b) to (d)
Sec. 76	July 1, 2026	12-34h(b)
Sec. 77	July 1, 2026	12-263q(c)(1)(B)
Sec. 78	July 1, 2026	17b-59a
Sec. 79	July 1, 2026	17b-59d(d) to (g)
Sec. 80	July 1, 2026	17b-59e(f)
Sec. 81	July 1, 2026	17b-59f
Sec. 82	July 1, 2026	17b-59g(a) and (b)
Sec. 83	July 1, 2026	17b-312
Sec. 84	July 1, 2026	New section
Sec. 85	July 1, 2026	17b-340(f)(3)
Sec. 86	July 1, 2026	17b-356
Sec. 87	July 1, 2026	19a-6q
Sec. 88	July 1, 2026	19a-7(b)
Sec. 89	July 1, 2026	19a-7h(l)
Sec. 90	July 1, 2026	19a-75a(a)
Sec. 91	July 1, 2026	19a-127k
Sec. 92	July 1, 2026	19a-486
Sec. 93	July 1, 2026	19a-486g
Sec. 94	July 1, 2026	19a-486h
Sec. 95	July 1, 2026	19a-486i(d) to (i)
Sec. 96	July 1, 2026	19a-486j
Sec. 97	July 1, 2026	19a-490ii(b)
Sec. 98	July 1, 2026	19a-493b(b) and (c)
Sec. 99	July 1, 2026	19a-507(a)
Sec. 100	July 1, 2026	19a-508c(d) to (m)
Sec. 101	July 1, 2026	19a-509b(c)
Sec. 102	July 1, 2026	19a-612
Sec. 103	July 1, 2026	19a-612d
Sec. 104	July 1, 2026	19a-613(c)
Sec. 105	July 1, 2026	19a-614
Sec. 106	July 1, 2026	19a-630
Sec. 107	July 1, 2026	19a-631(b)
Sec. 108	July 1, 2026	19a-632a
Sec. 109	July 1, 2026	19a-634(a)
Sec. 110	July 1, 2026	19a-638(d) and (e)
Sec. 111	July 1, 2026	19a-639(a)(1)
Sec. 112	July 1, 2026	19a-639a(a)
Sec. 113	July 1, 2026	19a-639a(h)
Sec. 114	July 1, 2026	19a-639b(e)

Sec. 115	July 1, 2026	19a-639c(b)
Sec. 116	July 1, 2026	19a-639e(d)
Sec. 117	July 1, 2026	19a-639f(a)
Sec. 118	July 1, 2026	19a-639f(l)
Sec. 119	July 1, 2026	19a-639g(a) and (b)
Sec. 120	July 1, 2026	19a-643
Sec. 121	July 1, 2026	19a-644(a) and (b)
Sec. 122	July 1, 2026	19a-645
Sec. 123	July 1, 2026	19a-646(a)(1)
Sec. 124	July 1, 2026	19a-653(a) to (d)
Sec. 125	July 1, 2026	19a-654(b) to (g)
Sec. 126	July 1, 2026	19a-659(1)
Sec. 127	July 1, 2026	19a-673a
Sec. 128	July 1, 2026	19a-681(c)
Sec. 129	July 1, 2026	19a-754b(b) to (f)
Sec. 130	July 1, 2026	19a-754c(a) to (c)
Sec. 131	July 1, 2026	19a-754d
Sec. 132	July 1, 2026	19a-754f
Sec. 133	July 1, 2026	19a-754g
Sec. 134	July 1, 2026	19a-754h
Sec. 135	July 1, 2026	19a-754i
Sec. 136	July 1, 2026	19a-754j
Sec. 137	July 1, 2026	19a-754k
Sec. 138	July 1, 2026	19a-755a
Sec. 139	July 1, 2026	19a-755b
Sec. 140	July 1, 2026	19a-911(b)
Sec. 141	July 1, 2026	20-195ttt(b) and (c)
Sec. 142	July 1, 2026	28-33(b)
Sec. 143	July 1, 2026	33-182bb(e) to (g)
Sec. 144	July 1, 2026	38a-47(a)(2) and (3)
Sec. 145	July 1, 2026	38a-48(b) to (f)
Sec. 146	July 1, 2026	38a-477e(a)
Sec. 147	July 1, 2026	38a-477ee(c)(2)
Sec. 148	July 1, 2026	38a-1083(c)(13) to (17)
Sec. 149	July 1, 2026	38a-1084(26)
Sec. 150	July 1, 2026	3-123ddd(d)
Sec. 151	July 1, 2026	3-123hhh(b)
Sec. 152	July 1, 2026	New section
Sec. 153	July 1, 2026	New section
Sec. 154	July 1, 2026	New section

Sec. 155	July 1, 2026	New section
Sec. 156	July 1, 2026	19a-2a
Sec. 157	July 1, 2026	4-66
Sec. 158	July 1, 2026	17b-3(a)
Sec. 159	July 1, 2026	38a-477jj
Sec. 160	July 1, 2026	Repealer section
Sec. 161	July 1, 2026	Repealer section
Sec. 162	October 1, 2026	HB 5043 (current session), Sec. 501
Sec. 163	<i>from passage</i>	HB 5043 (current session), Sec. 502
Sec. 164	July 1, 2026	32-664(m)
Sec. 165	<i>from passage</i>	17a-714a
Sec. 166	July 1, 2026	15-120h
Sec. 167	July 1, 2026	New section
Sec. 168	July 1, 2026	15-120i
Sec. 169	July 1, 2026	15-120j
Sec. 170	July 1, 2026	15-120l
Sec. 171	July 1, 2026	15-120m
Sec. 172	July 1, 2026	15-120o(a)
Sec. 173	July 1, 2026	32-75d
Sec. 174	<i>from passage</i>	New section
Sec. 175	October 1, 2026	4-66l(f)(3)
Sec. 176	July 1, 2026	4b-3(b)
Sec. 177	July 1, 2026	New section
Sec. 178	<i>from passage</i>	New section
Sec. 179	<i>from passage</i>	PA 25-173, Sec. 18
Sec. 180	<i>from passage</i>	New section
Sec. 181	<i>from passage</i>	5-198
Sec. 182	<i>from passage</i>	5-207a
Sec. 183	October 1, 2026	19a-502
Sec. 184	October 1, 2026	19a-503
Sec. 185	October 1, 2026	19a-11
Sec. 186	<i>from passage</i>	New section
Sec. 187	<i>from passage</i>	7-51a(c) and (d)
Sec. 188	<i>from passage</i>	19a-537(a)
Sec. 189	<i>from passage</i>	19a-36g
Sec. 190	<i>from passage</i>	19a-36h(b)
Sec. 191	<i>from passage</i>	19a-36b
Sec. 192	<i>from passage</i>	19a-580h

Sec. 193	<i>from passage</i>	19a-112h(a)
Sec. 194	<i>October 1, 2026</i>	19a-2a
Sec. 195	<i>October 1, 2026</i>	31-225a(c)
Sec. 196	<i>October 1, 2026</i>	31-266c
Sec. 197	<i>July 1, 2026</i>	31-236f
Sec. 198	<i>July 1, 2026</i>	31-264a
Sec. 199	<i>July 1, 2026</i>	31-264b
Sec. 200	<i>October 1, 2026</i>	Repealer section
Sec. 201	<i>October 1, 2026</i>	31-76b(2)
Sec. 202	<i>from passage</i>	New section
Sec. 203	<i>October 1, 2026</i>	New section
Sec. 204	<i>October 1, 2026</i>	31-98
Sec. 205	<i>from passage</i>	PA 25-168, Sec. 228
Sec. 206	<i>July 1, 2027</i>	HB 5003 (current session), Sec. 44
Sec. 207	<i>July 1, 2026</i>	32-9y
Sec. 208	<i>October 1, 2026</i>	New section
Sec. 209	<i>from passage</i>	16-256l
Sec. 210	<i>from passage</i>	12-407(a)(9)(B)
Sec. 211	<i>from passage</i>	New section
Sec. 212	<i>July 1, 2026</i>	New section
Sec. 213	<i>from passage</i>	New section
Sec. 214	<i>from passage</i>	New section
Sec. 215	<i>January 1, 2027</i>	New section
Sec. 216	<i>January 1, 2027</i>	New section
Sec. 217	<i>from passage</i>	New section
Sec. 218	<i>October 1, 2026</i>	38a-477i(a)(2)
Sec. 219	<i>October 1, 2026, and applicable to assessment years commencing on or after October 1, 2026</i>	12-71e
Sec. 220	<i>from passage</i>	New section
Sec. 221	<i>from passage</i>	3-13m
Sec. 222	<i>October 1, 2026</i>	5-142(a)
Sec. 223	<i>from passage</i>	12-217jj
Sec. 224	<i>from passage and applicable to assessment years commencing on or after October 1, 2027</i>	New section

Sec. 225	<i>from passage and applicable to assessment years commencing on or after October 1, 2027</i>	12-8100
Sec. 226	<i>October 1, 2026</i>	New section
Sec. 227	<i>October 1, 2026</i>	New section
Sec. 228	<i>October 1, 2026</i>	New section
Sec. 229	<i>October 1, 2026</i>	New section
Sec. 230	<i>October 1, 2026</i>	New section
Sec. 231	<i>October 1, 2026</i>	New section
Sec. 232	<i>October 1, 2026</i>	New section
Sec. 233	<i>October 1, 2026</i>	New section
Sec. 234	<i>October 1, 2026</i>	New section
Sec. 235	<i>October 1, 2026</i>	New section
Sec. 236	<i>October 1, 2026</i>	New section
Sec. 237	<i>October 1, 2026</i>	New section
Sec. 238	<i>October 1, 2026</i>	19a-612d(a)
Sec. 239	<i>October 1, 2026</i>	19a-638(a) to (e)
Sec. 240	<i>October 1, 2026</i>	19a-639(a) to (e)
Sec. 241	<i>October 1, 2026</i>	19a-639a
Sec. 242	<i>October 1, 2026</i>	19a-639b
Sec. 243	<i>October 1, 2026</i>	19a-639c(a)
Sec. 244	<i>October 1, 2026</i>	19a-639e(a) to (c)
Sec. 245	<i>October 1, 2026</i>	19a-639f(a) and (b)
Sec. 246	<i>October 1, 2026</i>	19a-641
Sec. 247	<i>July 1, 2027</i>	HB 5003 (current session), Sec. 9(b)
Sec. 248	<i>from passage</i>	New section
Sec. 249	<i>from passage</i>	New section
Sec. 250	<i>from passage</i>	New section
Sec. 251	<i>from passage</i>	New section
Sec. 252	<i>October 1, 2026</i>	9-369b(a)(3)
Sec. 253	<i>from passage</i>	New section
Sec. 254	<i>July 1, 2026</i>	New section
Sec. 255	<i>July 1, 2026</i>	32-616b
Sec. 256	<i>from passage</i>	4-30a(a)
Sec. 257	<i>from passage</i>	PA 25-168, Sec. 42
Sec. 258	<i>from passage</i>	New section
Sec. 259	<i>from passage</i>	New section
Sec. 260	<i>from passage</i>	PA 25-168, Sec. 43

Sec. 261	<i>from passage</i>	New section
Sec. 262	<i>from passage</i>	12-407e
Sec. 263	<i>from passage and applicable to income and taxable years commencing on or after January 1, 2026</i>	New section
Sec. 264	<i>October 1, 2026, and applicable to sales occurring on or after October 1, 2026</i>	12-330ll
Sec. 265	<i>from passage</i>	12-217(b)
Sec. 266	<i>from passage</i>	New section
Sec. 267	<i>from passage and applicable to taxable years commencing on or after January 1, 2026</i>	New section
Sec. 268	<i>from passage</i>	12-217jj
Sec. 269	<i>July 1, 2026</i>	PA 25-168, Sec. 472
Sec. 270	<i>July 1, 2026</i>	New section
Sec. 271	<i>January 1, 2027, and applicable to taxable years commencing on or after January 1, 2027</i>	New section
Sec. 272	<i>July 1, 2026, and applicable to sales occurring on or after July 1, 2026</i>	12-412(128)
Sec. 273	<i>July 1, 2026</i>	12-7e
Sec. 274	<i>from passage</i>	New section
Sec. 275	<i>July 1, 2027, and applicable to income years commencing on or after January 1, 2027</i>	New section
Sec. 276	<i>from passage</i>	New section
Sec. 277	<i>July 1, 2026, and applicable to taxable years commencing on or after January 1, 2026</i>	12-701(a)(20)(B)
Sec. 278	<i>July 1, 2026</i>	PA 25-168, Sec. 460
Sec. 279	<i>July 1, 2026</i>	PA 25-168, Sec. 461
Sec. 280	<i>July 1, 2026</i>	PA 25-168, Sec. 462

Sec. 281	July 1, 2026	PA 25-168, Sec. 463
Sec. 282	July 1, 2026	PA 25-168, Sec. 464
Sec. 283	July 1, 2026	PA 25-168, Sec. 465
Sec. 284	July 1, 2026	PA 25-168, Sec. 466
Sec. 285	July 1, 2026	PA 25-168, Sec. 468
Sec. 286	July 1, 2026	PA 25-168, Sec. 471
Sec. 287	July 1, 2026	PA 25-168, Sec. 469
Sec. 288	July 1, 2026	PA 25-168, Sec. 470
Sec. 289	July 1, 2026	New section
Sec. 290	July 1, 2026	New section
Sec. 291	July 1, 2026	New section
Sec. 292	July 1, 2026	New section
Sec. 293	July 1, 2026	New section
Sec. 294	July 1, 2026	New section
Sec. 295	July 1, 2026	New section
Sec. 296	July 1, 2026	New section
Sec. 297	July 1, 2026	New section
Sec. 298	July 1, 2026	New section
Sec. 299	July 1, 2026	New section
Sec. 300	July 1, 2026	New section
Sec. 301	July 1, 2026	New section
Sec. 302	July 1, 2026	New section
Sec. 303	July 1, 2026	New section
Sec. 304	July 1, 2026	10-287d
Sec. 305	July 1, 2026	Repealer section
Sec. 306	July 1, 2026	10a-109d(a)(10)
Sec. 307	July 1, 2026	10a-109e(a)
Sec. 308	July 1, 2026	10a-109g(a)(1)
Sec. 309	July 1, 2026	PA 12-189, Sec. 9(c)(3)
Sec. 310	July 1, 2026	PA 22-118, Sec. 306
Sec. 311	July 1, 2026	Repealer section
Sec. 312	July 1, 2026	PA 22-118, Sec. 314(c)(2)
Sec. 313	July 1, 2026	PA 22-118, Sec. 314(d)(1)
Sec. 314	July 1, 2026	PA 23-205, Sec. 1
Sec. 315	July 1, 2026	PA 23-205, Sec. 2(d)(3)
Sec. 316	July 1, 2026	PA 23-205, Sec. 2(j)
Sec. 317	July 1, 2026	Repealer section
Sec. 318	July 1, 2026	PA 23-205, Sec. 13(c)(5)
Sec. 319	July 1, 2026	PA 23-205, Sec. 13(e)(2)
Sec. 320	July 1, 2026	PA 23-205, Sec. 20

Sec. 321	July 1, 2026	Repealer section
Sec. 322	July 1, 2026	PA 23-205, Sec. 32(b)(5)
Sec. 323	July 1, 2026	PA 23-205, Sec. 92(a) and (b)
Sec. 324	July 1, 2026	PA 23-205, Sec. 99(b)
Sec. 325	July 1, 2026	PA 25-174, Sec. 1
Sec. 326	July 1, 2026	PA 25-174, Sec. 2(n)(3)
Sec. 327	July 1, 2026	Repealer section
Sec. 328	July 1, 2026	Repealer section
Sec. 329	July 1, 2026	PA 25-174, Sec. 13(b)(8)
Sec. 330	July 1, 2026	PA 25-174, Sec. 20
Sec. 331	July 1, 2026	PA 25-174, Sec. 21(c)(2)
Sec. 332	July 1, 2026	PA 25-174, Sec. 21(i)
Sec. 333	July 1, 2026	Repealer section
Sec. 334	July 1, 2026	PA 25-174, Sec. 45
Sec. 335	July 1, 2026	PA 25-174, Sec. 46(c)
Sec. 336	July 1, 2026	PA 25-174, Sec. 55
Sec. 337	July 1, 2026	PA 25-174, Sec. 132
Sec. 338	July 1, 2026	PA 25-174, Sec. 134
Sec. 339	July 1, 2026	PA 25-174, Sec. 135
Sec. 340	<i>from passage</i>	New section
Sec. 341	<i>from passage</i>	New section
Sec. 342	July 1, 2026	New section
Sec. 343	July 1, 2026	New section
Sec. 344	<i>from passage</i>	10a-232
Sec. 345	July 1, 2026	8-265ccc(2)
Sec. 346	July 1, 2026	8-265eee
Sec. 347	July 1, 2026	13a-175a
Sec. 348	July 1, 2026	13b-78
Sec. 349	<i>from passage</i>	32-285a(b) and (c)
Sec. 350	July 1, 2026	32-7x
Sec. 351	July 1, 2026	New section
Sec. 352	July 1, 2026	New section
Sec. 353	<i>from passage</i>	New section
Sec. 354	July 1, 2026	New section
Sec. 355	October 1, 2026	New section
Sec. 356	October 1, 2026	38a-1053(e)
Sec. 357	July 1, 2026	12-263p
Sec. 358	July 1, 2026	12-263q
Sec. 359	<i>from passage</i>	New section

Sec. 360	July 1, 2026	New section
Sec. 361	July 1, 2026	12-263aa
Sec. 362	<i>from passage</i>	New section
Sec. 363	July 1, 2026	17b-239e
Sec. 364	July 1, 2026	19a-754f
Sec. 365	July 1, 2026	19a-754g
Sec. 366	July 1, 2026	19a-754h
Sec. 367	July 1, 2026	19a-754i
Sec. 368	July 1, 2026	19a-754j
Sec. 369	July 1, 2026	19a-754k
Sec. 370	July 1, 2026	New section
Sec. 371	<i>from passage</i>	Repealer section
Sec. 372	January 1, 2027	31-53(d)
Sec. 373	October 1, 2026	31-53(j)
Sec. 374	<i>from passage</i>	New section
Sec. 375	July 1, 2026	10-512a
Sec. 376	<i>from passage</i>	New section
Sec. 377	July 1, 2026	New section
Sec. 378	July 1, 2026	10-217a(i)
Sec. 379	July 1, 2026	PA 25-174, Sec. 224
Sec. 380	July 1, 2026	10a-173(d)
Sec. 381	July 1, 2026	New section
Sec. 382	July 1, 2026	New section
Sec. 383	<i>from passage</i>	New section
Sec. 384	<i>from passage</i>	Repealer section
Sec. 385	July 1, 2026	36a-25
Sec. 386	July 1, 2026	New section
Sec. 387	<i>from passage</i>	New section
Sec. 388	July 1, 2026	New section
Sec. 389	July 1, 2026	7-576d(a)
Sec. 390	<i>from passage</i>	New section
Sec. 391	<i>from passage</i>	New section
Sec. 392	July 1, 2027	New section
Sec. 393	<i>from passage</i>	New section
Sec. 394	July 1, 2026	New section
Sec. 395	<i>from passage</i>	New section
Sec. 396	<i>from passage</i>	New section
Sec. 397	July 1, 2026	10-285a
Sec. 398	<i>from passage</i>	10-292q
Sec. 399	<i>from passage</i>	10-292r

Sec. 400	<i>from passage</i>	10-264h(b) and (c)
Sec. 401	<i>from passage</i>	10-282(12)
Sec. 402	<i>from passage</i>	10-286(a)(5) and (6)
Sec. 403	<i>from passage</i>	10-287i
Sec. 404	<i>from passage</i>	10-285b
Sec. 405	<i>from passage</i>	New section
Sec. 406	<i>from passage</i>	New section
Sec. 407	<i>from passage</i>	New section
Sec. 408	<i>from passage</i>	PA 23-205, Sec. 128
Sec. 409	<i>from passage</i>	New section
Sec. 410	<i>from passage</i>	New section
Sec. 411	<i>from passage</i>	New section
Sec. 412	<i>from passage</i>	New section
Sec. 413	<i>from passage</i>	PA 23-205, Sec. 125
Sec. 414	<i>July 1, 2026</i>	New section
Sec. 415	<i>July 1, 2026</i>	New section
Sec. 416	<i>from passage</i>	New section
Sec. 417	<i>from passage</i>	New section
Sec. 418	<i>July 1, 2026</i>	New section
Sec. 419	<i>from passage</i>	New section
Sec. 420	<i>from passage</i>	New section
Sec. 421	<i>from passage</i>	New section
Sec. 422	<i>from passage</i>	New section
Sec. 423	<i>from passage</i>	New section
Sec. 424	<i>from passage</i>	New section
Sec. 425	<i>from passage</i>	New section
Sec. 426	<i>from passage</i>	PA 23-205, Sec. 127
Sec. 427	<i>from passage</i>	New section
Sec. 428	<i>from passage</i>	Repealer section
Sec. 429	<i>from passage</i>	New section
Sec. 430	<i>from passage</i>	PA 25-174, Sec. 176
Sec. 431	<i>July 1, 2026</i>	New section
Sec. 432	<i>from passage</i>	New section
Sec. 433	<i>from passage</i>	PA 25-174, Sec. 158
Sec. 434	<i>from passage</i>	PA 20-8 of the September Sp. Sess., Sec. 5
Sec. 435	<i>from passage</i>	PA 25-174, Sec. 149
Sec. 436	<i>from passage</i>	New section
Sec. 437	<i>from passage</i>	New section

Sec. 438	<i>from passage</i>	New section
Sec. 439	<i>from passage</i>	New section
Sec. 440	<i>from passage</i>	PA 25-174, Sec. 171
Sec. 441	<i>from passage</i>	New section
Sec. 442	<i>July 1, 2026</i>	17b-191(b)
Sec. 443	<i>July 1, 2026</i>	17b-274d(f)
Sec. 444	<i>July 1, 2026</i>	New section
Sec. 445	<i>from passage</i>	PA 25-168, Sec. 332
Sec. 446	<i>from passage</i>	17b-340d(a)(2)
Sec. 447	<i>July 1, 2026</i>	17b-340d(a)(12)
Sec. 448	<i>July 1, 2026</i>	New section
Sec. 449	<i>July 1, 2026</i>	17b-28(c)
Sec. 450	<i>July 1, 2026</i>	New section
Sec. 451	<i>July 1, 2026</i>	19a-521b
Sec. 452	<i>from passage</i>	New section
Sec. 453	<i>from passage</i>	New section
Sec. 454	<i>from passage</i>	New section
Sec. 455	<i>from the date of approval of a state basic health program by the Centers for Medicare and Medicaid Services</i>	New section
Sec. 456	<i>July 1, 2026</i>	New section
Sec. 457	<i>from passage</i>	New section
Sec. 458	<i>from passage</i>	New section
Sec. 459	<i>July 1, 2026</i>	17b-8(a)
Sec. 460	<i>January 1, 2027</i>	New section
Sec. 461	<i>January 1, 2027</i>	New section
Sec. 462	<i>from passage</i>	19a-754c
Sec. 463	<i>July 1, 2026</i>	New section
Sec. 464	<i>from passage</i>	New section
Sec. 465	<i>from passage</i>	PA 25-168, Sec. 25
Sec. 466	<i>July 1, 2026</i>	New section
Sec. 467	<i>from passage</i>	New section
Sec. 468	<i>from passage</i>	New section
Sec. 469	<i>from passage</i>	New section
Sec. 470	<i>July 1, 2026</i>	10a-174d
Sec. 471	<i>from passage</i>	New section
Sec. 472	<i>from passage</i>	New section
Sec. 473	<i>from passage</i>	New section

Sec. 474	<i>from passage</i>	New section
Sec. 475	<i>from passage</i>	New section
Sec. 476	<i>from passage</i>	New section
Sec. 477	<i>from passage</i>	New section
Sec. 478	<i>July 1, 2026</i>	New section
Sec. 479	<i>July 1, 2026</i>	New section
Sec. 480	<i>from passage</i>	New section
Sec. 481	<i>from passage</i>	New section
Sec. 482	<i>from passage</i>	New section
Sec. 483	<i>from passage</i>	New section
Sec. 484	<i>July 1, 2026</i>	29-1ll
Sec. 485	<i>July 1, 2026</i>	New section
Sec. 486	<i>July 1, 2026</i>	27-19d
Sec. 487	<i>July 1, 2026</i>	27-19e
Sec. 488	<i>July 1, 2026</i>	12-18b(b)
Sec. 489	<i>July 1, 2026</i>	2-83
Sec. 490	<i>from passage</i>	SA 26-1, Sec. 3(a)