
OLR Bill Analysis

sHB 5514

AN ACT CONCERNING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.

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SUMMARY

This bill makes various unrelated changes to the public health statutes as shown in the section-by-section analysis below.

EFFECTIVE DATE: October 1, 2026, unless otherwise noted below.

§ 1 — HEALTH CARE FACILITIES OPERATED BY EDUCATIONAL FACILITIES

Allows an infirmary operated by an educational institution to care for dependent family members of students, faculty, and employees when they are enrolled in the institution's health plan

The bill allows an infirmary operated by an educational institution to provide care to dependent family members of students, faculty, and employees when these family members are enrolled in the institution's health plan.

Under current state law and regulation, these facilities provide evaluation and treatment for routine health problems and, in some cases, short-term overnight accommodations (for example, when someone is recovering from surgery or requires observation) only for students, faculty, and employees (Conn. Agencies Regs., § 19-13-D43a(a)(15)).

§ 2 — DDS ABUSE AND NEGLECT REPORTS

Prohibits DDS from notifying or giving copies of original or investigation reports of alleged abuse and neglect to a parent or guardian if they are, or live with, the alleged or substantiated perpetrator

By law, when the Department of Developmental Services (DDS) determines that reported abuse or neglect warrants investigation, the department must notify the victim's legal representative, unless the

representative is the alleged or substantiated perpetrator or lives with the alleged or substantiated perpetrator. The bill specifically requires DDS to also notify the victim's parent or guardian and extends the same exception to cases where the parent or guardian is, or lives with, the alleged or substantiated perpetrator.

Similarly, existing law requires DDS, upon request, to give the legal representative additional information if the commissioner determines that the representative was entitled to it, unless the legal representative is the alleged or substantiated perpetrator or lives with that person. The bill also requires DDS to give this information in the same way to the parent or guardian, unless they are, or live with, the alleged or substantiated perpetrator.

The bill also prohibits DDS from giving the original abuse report or the investigator's evaluation report to a parent or guardian who is, or lives with, the alleged or substantiated perpetrator. Current law already prohibits DDS from giving these reports to a legal guardian under these circumstances.

Background — Related Bill

HB 5558, favorably reported by the Human Services Committee, requires DDS to give the original abuse report or the investigator's evaluation report to the victim's parent or other legal representative, unless they are the alleged or substantiated perpetrator.

§ 3 — WORKING GROUP ON MANAGED RESIDENTIAL COMMUNITIES

Requires the DPH commissioner to establish a working group to advise the department on managed residential communities in the state that provide assisted living services and whether these communities should be licensed by the state

The bill requires the Department of Public Health (DPH) commissioner to establish a working group to advise the department on (1) managed residential communities (MRCs) where assisted living services agencies (ALSAs) provide services to residents and (2) whether licensing these MRCs would enable DPH and these communities to improve residents' health, safety, and overall well-being.

Under the bill, the working group must at least include:

1. at least three representatives each of different MRCs and ALSAs in the state;
2. at least three residents and three relatives of residents receiving assisted living services in an MRC, each from different communities; and
3. one representative of a state association of aging services organizations.

The bill requires the working group to report its findings and recommendations to the DPH commissioner by January 1, 2027. The commissioner must then report the information to the Public Health Committee by February 1, 2027, and indicate whether she agrees with each finding and recommendation.

EFFECTIVE DATE: July 1, 2026

Background — MRCs

By law, the state does not license assisted living facilities. Instead, it licenses and regulates ALSAs that provide assisted living services. ALSAs can only provide these services at an MRC. MRCs that wish to provide assisted living services must obtain a DPH license as an ALSA or arrange for the services with a licensed ALSA.

§ 4 — NONPROFIT DISTRIBUTION OF FREE EYEGLASSES

Allows nonprofits that give free eyeglasses to people to give them to the person's authorized representative if the person is unavailable to receive them from the organization in-person

Regardless of the state's optician laws, the bill allows nonprofit organizations that give free glasses produced by an optician to the person wearing them to give the glasses to the wearer's authorized representative if the wearer is unavailable to receive them in-person from the organization.

Under current practice, the Connecticut Board of Examiners for Opticians requires eyeglasses to be dispensed in-person by a licensed

optician.

EFFECTIVE DATE: July 1, 2026

§ 5 — PATIENT NOTICE ON MEDICAL RECORDS RETENTION

Requires health care providers to notify patients in writing at their initial intake about the amount of time the law requires the provider to keep their medical records and how the patient can request copies of them

The bill requires health care providers, starting by January 1, 2027, to notify patients in writing at their initial intake, about the amount of time the law requires the provider to keep their medical records and how the patient can request copies of them.

§§ 6-8 — TECHNICAL CHANGES

Makes technical changes to update the name of LeadingAge Connecticut to Leading Age Connecticut and Rhode Island in statute

The bill makes technical changes to statutory provisions referencing Leading Age CT, updating its name to Leading Age Connecticut and Rhode Island to reflect the merging of its Connecticut and Rhode Island associations.

EFFECTIVE DATE: Upon passage

§§ 9 & 10 — NURSING SCHOOL DATA REPORTING

Requires the Board of Examiners for Nursing to develop a standardized form for nursing schools to report licensure examination passage rates and related data and requires schools to report this data annually, starting by January 1, 2027; requires the board to set criteria for school performance based on the data and the types of corrective actions needed for low-performing schools

The bill requires each Connecticut nursing school that prepares students to take examinations required for state licensure to annually report, starting by January 1, 2027, certain data on licensure examination rates to the Connecticut State Board of Examiners for Nursing.

It also requires the board to develop, by December 1, 2026, (1) a standardized form for schools to report the data, (2) criteria to evaluate schools' performance, and (3) types of corrective actions needed for schools to achieve an acceptable performance level. The board must post on its website the standardized form, criteria, and corrective action types.

Correspondingly, the bill expands the board's duties to include (1) evaluating the data schools report and (2) requiring any needed corrective action for low-performing schools.

Annual Reports

The bill requires nursing schools to report the following data for the preceding calendar year and post it in a conspicuous location on their websites:

1. the passage rates of students who took the National Council Licensure Examination (NCLEX) for the first time and of students who retook it and
2. graduation rates and job placement outcomes for recent graduates.

Under the bill, the board must create a standardized form for schools to report the data.

Performance Criteria and Corrective Actions

The board must also develop, by December 1, 2026, criteria to evaluate whether a school has consistently fallen below acceptable performance thresholds based on the data.

Under the bill, these criteria must include that the examination pass rate for the most recent year, or the average rate for the three most recent years, meets at least one of the following standards:

1. at least 80% for students who took the exam for the first time,
2. at least 80% for all students who took the exam (for the first time or repeat attempts), or
3. at or above the national or territorial mean rate based on the nursing program type.

The board must also set the types of corrective actions needed for schools to achieve an acceptable performance level, such as following an improvement plan it recommends, enhanced monitoring, limiting

new student enrollment, and temporary withdrawal of the school's approval. Starting July 1, 2027, the board must notify a school whose performance it determines has fallen below the acceptable threshold and require the school to take at least one corrective action it deems necessary to help the school improve its performance.

§ 11 — SEWAGE DISPOSAL WORKING GROUP RECOMMENDATIONS

Requires DPH, in collaboration with DEEP, to evaluate the sewage disposal working group's recommendations and report to the legislature by January 1, 2027, on the feasibility and implications of implementing them

The bill requires the DPH commissioner to collaborate with the Department of Energy and Environmental Protection (DEEP) commissioner to evaluate the recommendations of the sewage disposal working group established under PA 25-97. The commissioners must jointly report to the Environment and Public Health committees by January 1, 2027, on the feasibility and implications of implementing these recommendations (and whether legislation is needed to do so), particularly the recommendation to require nitrogen assessments of sewage disposal systems at (1) 5,000 gallons per day for properties in an environmentally sensitive area and (2) 7,500 gallons per day for all other properties with a DPH-regulated system.

EFFECTIVE DATE: Upon passage

Background — Sewage Disposal Working Group

PA 25-97 established a working group to assess and make recommendations on (1) regulatory requirements for sewage disposal, including nitrogen discharge limits and their impact on housing development, public health, and the environment, and (2) balancing the costs of housing development and a risk-based approach to protecting public health and the environment. The law required the working group to report its assessment and recommendations to the DPH commissioner and the Environment, Housing, and Public Health committees by February 1, 2026.

§ 12 — REPEALERS

Repeals the statutory cap on executive director salaries in state agencies' calculations of grants to private agencies that provide employment opportunities, day services, or residential facility services

The bill repeals statutory provisions that cap at \$125,000 (subject to cost-of-living increases), executive director salaries in DDS', the Department of Mental Health and Addiction Services', Department of Social Services', and other state agencies' calculations of grants to private agencies that provide employment opportunities, day services, or residential facility services.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 29 Nay 3 (03/23/2026)