

Summary of 2006 Public and Special Acts

Contents:

CONSUMER	1
DISABILITY	
Mental Retardation	4
Mental Health	5
Other Disability	7
EDUCATION	8
ELDERLY	11
EMPLOYMENT	
Employment Compensation and Workers' Compensation	12
Reentry to Employment from Prison	13
Other	15
FAMILY	
Custody and Visitation	16
Child Support	17
Domestic Violence	20
Child Protection	21
Juvenile Justice	26
GENERAL GOVERNMENT	27
HEALTH CARE, HEALTH INSURANCE, AND MEDICAL ASSISTANCE	
Medicaid, HUSKY, SAGA Medical, and Other Medical Assistance	28
Prescription Drugs	32
Nursing Homes and Long-Term Care	34
Private Health Insurance	37

[Continued on inside front cover]

HOUSING	
Rental Assistance	38
Code Enforcement	39
Housing Production Programs	40
Planning and Zoning	43
Property Taxes	43
Other	45
PUBLIC BENEFITS AND SOCIAL SERVICES	46
UTILITIES	49
INDEX OF PUBLIC AND SPECIAL ACTS	51

C O N S U M E R

P.A. 06-73 HOME IMPROVEMENT CONTRACTS (eff. May 30, 2006).

Section 14 of this act makes a home improvement contract unenforceable unless it contains the contractor's Department of Consumer Protection registration number. Prior law required that the registration number be included in all advertising but did not impose a similar requirement on contracts.

P.A. 06-87 and
P.A. 06-195 PREPAID FUNERAL SERVICES CONTRACTS (eff. October 1, 2006).

P.A. 06-87 requires a number of disclosures in connection with the purchase of a funeral services contract. In particular, it requires the contract to include, among other information:

- A description of any price guarantees made by the funeral home or a specific statement that the contract contains no such guarantees;
- The name and address of the escrow agent designated to hold the prepaid funeral services funds and a statement that the buyer will receive a confirmation of receipt from the escrow agent within 25 days after the funds are paid to the funeral home. Existing law requires the funeral home to transfer the deposit to the escrow agent within 15 days. This act requires the escrow agent to notify the purchaser of its receipt within 10 days of receiving the deposit.
- In regard to revocable funeral services contracts, a description of the right to cancel and the effect of cancellation;
- In regard to irrevocable funeral services contracts, a description of the beneficiary's right to transfer the contract to another funeral home.

The act also requires the escrow agent to notify the purchaser of all transfers of funds held in escrow (other than for payment of contract-related services). It permits such funds to be invested in insurance contracts, but only if the insurance company has at least a B+ A.M. Best rating; but it explicitly prohibits the transfer of escrowed funds into an insurance contract without the consent of the purchaser and the disclosure of any fees or costs associated with the transfer.

In addition, the act requires Medicaid beneficiaries who own a revocable prepaid funeral contract to give written notice to the Department of Social Services before revoking the contract.

P.A. 06-87 also requires the funeral home to notify the purchaser of the contract of the closure of the home or the transfer of more than a 50%

ownership interest within ten days of its occurrence. In addition, Section 21 of P.A. 06-195 requires notice to be given to all persons for whom it is storing cremated remains. Within ten days after the transfer, the owner must notify the Department of Public Health and provide a list of all unclaimed cremated remains. Section 13 of P.A. 06-195 requires funeral homes to keep their records of funeral service contracts and escrow accounts for an inspection period of at least three years after the death of the individual for whom funeral services were provided.

P.A. 06-65 SALE OF PROPANE AND HOME HEATING OIL (eff. October 1, 2006).

This act requires propane gas dealers to register with the Department of Consumer Protection and subjects them to the same sales rules as home heating oil dealers. In addition, the act prohibits both home heating oil dealers and propane dealers from selling their products for residential heating unless all of the purchaser's costs, including unit price and delivery surcharges, have been disclosed in writing when the customer enters or renews the purchase contract (or, at the time of placement of the fuel order for customers purchasing without a contract).

P.A. 06-118 FAILURE TO RETURN RENTED GOODS (eff. October 1, 2006).

This act modifies two criminal statutes so as to make it easier for companies which lease personal property (e.g., Taylor Rental) to get the police to arrest customers who either fail to return the leased goods when they are due or return them late but do not pay for the excess rental.

- Conversion of leased personal property: C.G.S. 53a-119(13), which is in the larceny statutes, applies to customers who fail to return leased goods. A person commits a conversion of leased personal property in violation of that statute if, with the intent to convert the property to his own or someone else's use, the person fails to return the property within 192 hours (eight days) after being sent a written notice by registered or certified mail demanding that the property be returned. The statute applies to both consumer and commercial rentals. Section 2 of this act makes two changes. First, it provides that consumer rent-to-own contracts are not "leases" for the purpose of 53a-119(13), so that a rent-to-own business cannot use the statute as the basis for seeking the arrest of a customer who has not returned the goods. Second, it makes clear that the 192-hour notice period begins to run from the mailing of the notice, not from its actual receipt. Thus, the failure of the lessee to sign for registered or certified mail does not prevent the police from making an arrest after 192 hours.
- Criminal trover: Trover occurs when a person, knowing that he or she has

no right to do so, uses someone else's personal property without consent. The use must result in either (a) damage to the property, (b) reduction in its value, or (c) economic loss or penalty to the owner. Trover is not necessarily a form of larceny, because it can apply even if the wrongfully taken property is returned to its owner. As a result, it is most commonly applied to conduct such as joyriding, in which the defendant takes and uses property without permission or payment but ultimately returns the property. Section 1 amends the act so that it can apply not only to a failure to return leased goods but also to returning them without paying for them. In particular, it amends the definition of "economic loss" to include an uncompensated loss (i.e., a failure to pay) resulting from a failure to return leased goods on time. This expansion of what constitutes an economic loss applies to such rentals only if (a) the rental is of non-consumer goods (goods leased for personal, family, or household purposes are not covered by the definition), (b) the goods are leased from a leasing business, (c) at least 120 hours (five days) have passed since the lessor sent a written demand by registered mail, and (d) the uncompensated loss exceeds \$500.

P.A. 06-66 ITEM PRICING OF CONSUMER COMMODITIES (eff. October 1, 2006).

Under existing law, a retailer who uses Universal Price Code (UPC) scanning to total purchases of "consumer commodities" at the cash register must nevertheless mark each individual item with its retail price. There are, however, numerous exceptions. One exception allows retailers not to have to change price stickers on goods marked down for sale for at least seven days. If such a reduced price item fails to scan at the sale price, the consumer must be given one item of that commodity for free.

This act greatly expands this exception by allowing the Commissioner of Consumer Protection to exempt retailers with UPC scanners if they demonstrate that their scanners are at least 98% accurate (i.e., that no more than 2% of the scans are erroneous). The retailer must also provide at least one scanner accessible to consumers for each 12,000 square feet of retail floor space so that the consumer can use it to check the price. If the scanner at the cash register misprices the good, the act applies a restricted form of the remedy currently available under the seven-day sale exception, i.e., the customer receives one item of the commodity without charge. The act, however, caps the value of the free commodity at \$20.

P.A. 06-45 MORTGAGE LENDING PRACTICES (eff. May 8, 2006).

Sections 5 and 10 of this act prohibit licensed first and second mortgage lenders and brokers from requiring borrowers to compensate them for fees or commissions on loans which do not close, except for advance fees made non-

refundable by an agreement which satisfies the requirements of C.G.S. 36a-498 or 36a-521. The act also prohibits first and second mortgage brokers from requiring borrowers to pay them a fee or commission for prepaying a loan. Section 6 of the act expands the applicability of the prohibition on charging more than five points or \$2,000 on a first mortgage loan. In particular, it repeals the exemption for lenders who make fewer than six first mortgage loans per year. The act also makes mortgage lenders responsible for known errors in the applications of their loan originators and expands the Banking Commissioner's authority to suspend loan originator registrations.

P.A. 06-130 REPAIR SHOP SIGNS (eff. June 2, 2006).

Prior to 2004, a customer who wanted to inspect a motor vehicle part which had been replaced could ask for the old part at the time he or she picked up the car at the repair shop. A 2004 law now requires the request to be made at the time the customer authorizes the repair. Section 5 of this act modifies the signs that must be displayed in motor vehicle repair shops to reflect the 2004 change in the law.

See also: Electronic Funds Transfer for Title IV-D Child Support Payments (P.A. 06-149), p. 17.

DISABILITY

MENTAL RETARDATION

P.A. 06-92 FINDINGS OF MENTAL RETARDATION (eff. October 1, 2006).

The existing statutory definition of "mental retardation," which limits who is eligible for services from DMR as an adult, requires that the retardation have been manifested while the person was a child, i.e., before the age of 18. Such a manifestation will usually be reflected in the person's school or medical records. Section 2 of this act provides that the absence of a diagnosis of mental retardation or of intellectual or developmental disability in an individual's school or medical records does not prevent DMR from finding that the condition was manifested before the age of 18 and thus from finding that an adult without such evidence of childhood manifestation is nevertheless a person with mental retardation.

P.A. 06-92 CHANGE OF NAME OF DEPARTMENT OF MENTAL RETARDATION (eff. May 30, 2006).

Section 1 of this act requires the Commissioner of Mental Retardation by January 1, 2007, to report to the Governor, OPM, and the General Assembly on whether the name of the Department should be changed and what the cost of such a name change would be. Prior to making such a report, the Commissioner must solicit input from clients and families, advocates for persons with mental retardation, and other interested parties.

P.A. 06-188 PILOT AUTISM SPECTRUM DISORDERS PROGRAM (eff. July 1, 2006).

Section 37 of this act requires DMR, in consultation with DSS and DMHAS, to establish a two-year Pilot Autism Spectrum Disorders Program to provide a coordinated system of supports and services, including case management, for persons with autism spectrum disorders who do not have mental retardation. The pilot program is to serve 50 adults who are not eligible for DMR services. DMR is to identify appropriate individualized services and supports for each person in the program and their families and to coordinate the provision of services and supports. The pilot program is to begin by October 1, 2006, and terminate by October 1, 2008. The Commissioner of Mental Retardation is to report to the legislature on the results of the program and recommendations for a system to address the needs of persons with autism spectrum disorder by January 1, 2009. The report must include recommendations on (a) establishing an independent advisory council on system design, implementation, and quality enhancement, (b) establishing procedural safeguards, (c) designing and implementing a quality enhancement and improvement process, and (d) designing and implementing an interagency data and information management system.

MENTAL HEALTH

P.A. 06-188 PUBLIC HEALTH IMPLEMENTER ACT.

This omnibus act implements a number of relatively minor changes in state policy concerning mental health.

- Behavioral Health Partnership Oversight Council (eff. October 1, 2006): Sections 28 and 29 add three state agency representatives (Department of Education, State Comptroller, and Office of Health Care Access) and at least one consumer as non-voting members of the Behavioral Health Partnership Oversight Council. The consumers are to be appointed by the chairs of the Council and may be added at any time.
- Behavioral Health Partnership appeal procedures (eff. October 1, 2006): Section 30 requires DCF and DSS to modify their consumer grievance procedures so as to permit a provider to appeal a decision of the

Behavioral Health Partnership on behalf of a consumer.

- Mental health pilot programs (eff. July 1, 2006): Section 31 requires DMHAS, in consultation with the Community Mental Health Strategy Board, to implement by October 1, 2007, two mental health pilot programs: (a) a program to improve the ability of professionals in general pediatric medicine, family medicine, and geriatric health care to identify, diagnose, refer, and treat patients with mental illness and (b) a peer-counseling program for state police officers. DMHAS is required to report to the legislature on the pilots by January 1, 2009. Section 52 reallocates \$275,000 in the DMHAS budget to fund these pilots.
- Home- and community-based mental health services (eff. May 26, 2006): Section 32 allows DSS, in consultation with DMHAS and the Community Mental Health Strategy Board, to seek a Medicaid plan amendment or waiver to implement a Medicaid-financed program to provide home- and community-based services and, if necessary, housing assistance, to adults with severe and persistent psychiatric disabilities who are diverted or discharged from nursing homes. DSS is to report to the General Assembly annually, beginning January 1, 2007, on the status of the implementation of the program. Section 53 allows DMHAS to use up to \$1.725 million of the appropriation for the Community Mental Health Strategy Board to implement the program.
- Maximization of Medicaid reimbursement (eff. July 1, 2006): Section 36 of the act allows the use of funds appropriated to DMHAS for the Community Mental Health Strategy Board to be used for services and programs that will maximize federal Medicaid reimbursement for community-based mental health care and will reduce inappropriate emergency hospitalization, in-patient psychiatric care, nursing home admissions, incarceration, referrals to juvenile justice, and other institutionalizations of adults and children with serious mental illness. Such services and programs may include housing support to participants in the home- and community-based services program authorized by Section 32 and consultations for early care and education providers with mental health professionals. The fund transfers must be recommended by the Board and approved by OPM.
- Utilization review information (eff. October 1, 2006): Under existing law, each utilization review company used by a health insurer must file annual reports with the Insurance Commissioner. Section 33 of this act requires those reports to include the following information for utilization of mental health services by health benefit plans, separately and by category: (a) the reason for the request, including at a minimum in-patient admissions, services, procedures, and extensions of in-patient or out-

patient treatment, (b) the number of requests denied by type of request, and (c) whether the request was totally or partially denied.

- Managed care mental health report cards (eff. October 1, 2006): Existing law requires the Insurance Commissioner, in consultation with the Public Health Commissioner, to develop and annually distribute a report card for consumers on managed care organizations. Section 34 of this act requires the report card to contain information or measures about the percentage of enrollees who receive mental health services, the use of mental health and chemical dependency services, inpatient and outpatient admissions, discharge rates, and average lengths of stay. The data collection must be consistent with the measures of the National Committee for Quality Assurance's Health Plan Employer Data and Information Set (HEDIS).

P.A. 06-186 NURSING HOME MENTAL HEALTH PILOT (eff. July 1, 2006).

The State Budget ¹ appropriates \$500,000 to DMHAS for a pilot program in the Hartford region to establish a mobile crisis team to provide mental health crisis intervention services in nursing homes and to train nursing home staff to deal with troublesome mental health situations.

See also: Funding of DCF-Related Projects\Emily J. settlement agreement (P.A. 06-186), p. 23.
Funding of DCF-Related Projects\Child and adolescent rapid emergency stabilization services (P.A. 06-186), p. 24.

OTHER DISABILITY

P.A. 06-56 ACCESSIBILITY ADVISORY BOARD (eff. October 1, 2006).

This act authorizes the director of the Office of Protection and Advocacy for Persons with Disabilities to establish an Accessibility Advisory Board. The board is to be comprised of design professionals, people with disabilities, people whose family members have disabilities, and others who the director believes would provide valuable insight and input on matters relating to accessibility. The board is to advise the director on accessibility matters relating to housing, transportation, and government programs and services.

¹The State Budget Act (P.A. 06-186), with some exceptions, contains only line-item amounts for each separate agency program. The Budget Book of the legislature's Office of Fiscal Analysis (OFA), which can be found on the OFA website (<http://www.cga.ct.gov/ofa/Documents/OFABudget/2006/Book/Contents.pdf>), details the specifics of these line items and functions as a supplement to the Budget Act. The phrase "State Budget," as used in this report, includes both P.A. 06-186 and the OFA Budget Book.

P.A. 06-124 BOARD OF EDUCATION AND SERVICES FOR THE BLIND (eff. June 2, 2006).

This act ends the terms of all seven members of the Board of Education and Services for the Blind (BESB) as of January 4, 2007, and, effective that date, creates a new 13-member board of the same name. The old board consisted of the Commissioner of Social Services plus six members appointed by the Governor. The new board adds six additional members appointed by legislative leaders. The act formally designates the Board as the central policy-making authority in providing services to the blind and requires the members of the Board to monitor the agency in carrying out its mission. In addition, it directs the members to monitor agency compliance with the benchmarks and recommendations of the BESB Monitoring Council and to report annually to the Governor, the legislature, and OPM.

See also: Eligibility of Disabled Persons for Unemployment Compensation (P.A. 06-171), p. 12.
Janitorial Employment Pilot Project (P.A. 06-129), p. 15.
Medicaid Modifications\Medicaid for Employed Disabled program (P.A. 06-188 and P.A. 06-186), p. 29.
Medicaid Modifications\My Community Choices Program (P.A. 06-188 and P.A. 06-186), p. 30.
Expansion of Personal Care Assistance Pilot (P.A. 06-188), p. 35.
Health Insurance Coverage for Alcohol- or Drug-Related Injuries (P.A. 06-39), p. 37.
Cost-of-Living Adjustment for Social Services Providers (P.A. 06-186), p. 49.

EDUCATION

P.A. 06-18 SPECIAL EDUCATION (eff. July 1, 2006).

This act revises state special education laws to match the reauthorized federal Individuals With Disabilities Education Act of 2004 (IDEA), which governs special education programs and procedures in states and local school districts. Among other things, the act:

- Prohibits requiring a child to obtain a prescription drug as a condition of attending school, receiving an evaluation of eligibility for special education, or receiving special education services;
- Makes changes to special education hearing procedures, including (a) requiring a person requesting a special education hearing to send a copy of the request to the State Department of Education (SDE), (b) requiring

that all hearings be held by a single hearing officer rather a hearing board, and (c) extending the deadline for a decision by the hearing officer to 45 days after the commencement of the hearing (rather than 45 days after the request for the hearing).

- Authorizes special education hearing officers to require school districts to reimburse parents of special education children previously receiving special education for the cost of enrolling a child in a private school without the district's referral or consent, if the hearing officer finds that the district failed to provide the required free and appropriate public education for the child in a timely manner before the private school enrollment.
- Eliminates the requirement that voluntary mediations be completed within 30 days of the request for mediation;
- Requires that assessments of children with disabilities who transfer between school districts during an academic year be coordinated with both districts to ensure prompt completion of full evaluations;
- Narrows the circumstances in which a finding of need for special education can be made. Under prior law, a finding of need for special education could not be based "solely" on disciplinary violations, limited English proficiency, or lack of instruction in reading or mathematics. This act precludes a finding of need for special education if those factors are merely "dominant" rather than "sole."
- Eliminates a requirement that a school district perform a full evaluation of a student who leaves special education because he or she graduates from high school with a regular diploma or reaches the age at which he or she is no longer eligible for special education; and
- Requires SDE to appoint surrogate parents for homeless and unaccompanied youths, as defined by federal law.

The act also revises special education hearing and evaluation procedures, expands the Advisory Council for Special Education, updates and revises terminology, and makes technical changes.

P.A. 06-44 PHYSICAL HEALTH NEEDS OF STUDENTS (eff. May 8, 2006).

This act requires the State Department of Education, by January 1, 2007, to develop guidelines for addressing the physical health needs of students in a comprehensive manner that coordinates services, including services provided by municipal park and recreation departments. In particular, the guidelines must include (a) plans to engage students in daily physical exercise both in

school and also before or after school in coordination with municipal parks and recreation departments; (b) strategies for coordinating school-based health education, programs, and services, and (c) procedures for assessing the need for community-based services provided by such entities as school-based health clinics, family resource centers, after-school programs, and municipal parks and recreation departments. Local boards of education are to establish their plans, based on the SDE guidelines, by April 1, 2007.

P.A. 06-115 BULLYING POLICIES (eff. July 1, 2006).

Section 1 of this act requires school boards to (a) notify students annually of how they can make reports of bullying and (b) require the development of case-by-case interventions to address repeated incidents of bullying either by or against a single individual. The act expands the definition of bullying to include both harassment and events which occur on a school bus. It also allows bullying policies to apply to conduct outside of the school setting if it has a direct and negative impact on a student's academic performance or safety in school.

P.A. 06-167 REPORTING OF PARENTAL INVOLVEMENT (eff. July 1, 2006).

Under existing law, schools districts must submit an annual "school profile" report to the Commissioner of Education. The report, which includes separate subreports for each individual school in the district, must provide information on measures of student needs and performance, school resources and resource allocation, racial and economic isolation, and special education. This act requires the superintendent of schools also to include information about parental involvement and the measures which the district has taken to improve such involvement, including methods used to engage parents in the planning and improvement of school programs and to increase support to parents to work with their children on learning activities at home.

P.A. 06-192 STUDY OF DROP-OUT AND SUSPENSION RATES (eff. July 1, 2006).

Section 6 of this act requires the State Department of Education to review programs in other states for their effectiveness in reducing the drop-out and suspension rates for at-risk students and to report its findings to the legislature by January 1, 2007.

See also: Medicaid Modifications\School-Based Child Health Program (P.A. 06-188 and P.A. 06-186), p. 29.
Committee to Improve School-Based Health Care Access (P.A. 06-195), p. 31.

ELDERLY

P.A. 06-195 POWER OF ATTORNEY FOR HEALTH CARE (eff. October 1, 2006).

Sections 59 through 81 of this act modify and update Connecticut law on health care decision-making:

- Health care representatives (Secs. 63-68 and 87): The act combines the existing authority of the health care agent and the attorney-in-fact for health care decisions into a single representative known as the “health care representative.” A properly designated health care representative is authorized to make health care decisions on behalf of the person, including the decision to consent to medical and surgical decisions, to withhold life support, and to accept or refuse any treatment, service, or procedure used to diagnose or treat a physical or mental condition, including psychosurgery or shock therapy. The act repeals a statutory short form power of attorney for health care decisions so as to maintain consistency with the remainder of the act.
- Living will (Sec. 65): The act expands the scope of a living will from covering only decisions concerning life support to covering decisions concerning any aspect of health care. It similarly authorizes the health care representative to make any and all health care decisions for a person incapable of expressing those wishes himself or herself. The representative’s decisions must be in accordance with the wishes of the principal, if the principal’s wishes are known.
- Revocation of appointment of health care representative (Secs. 66 and 71): The act bars the revocation of an appointment of a health care representative once made except by the declarant in writing with two witnesses; and it immunizes doctors and others from liability based on a revoked appointment in the absence of their knowledge of the revocation. A living will, in contrast, remains revocable by the declarant at any time and in any manner, without regard to the declarant’s mental or physical condition. The revocation of the appointment of a health care representative does not, however, revoke a living will.
- Disclosure of determination of incapacity (Sec. 70): The act requires an attending physician, on request, to disclose in writing to the patient’s health care representative the fact that a determination of incapacity has been made. It is that determination which activates the powers of the health care representative.
- Probate court jurisdiction (Sec. 75): The act gives the probate court for the district where the person is domiciled or is located at the time of the

dispute jurisdiction to resolve contested issues, including disputes over the capacity of the health care representative or over claims that the actions of the health care representative would interfere with the treatment of the declarant. A person whose status as health care representative has been revoked has standing to file a claim challenging the validity of the revocation.

- Related powers of a conservator (Sec. 79): The act requires a conservator to comply with a ward's individual health care instructions expressed while the ward had capacity, and a ward may not revoke a health care directive without probate court permission. In the absence of a probate court order to the contrary, a health care decision made by a health care representative takes precedence over that of a conservator, unless (a) the ward is subject to statutes concerning persons convicted of a crime or acquitted by reason of insanity or (b) the ward has a conservator, is hospitalized, and is subject to an order concerning administration of medication for treatment of psychiatric disabilities.
- Validation of health care directives (Secs. 80 and 81): The act validates advance health care directives executed before the effective date of the act or under the laws of other states, unless contrary to Connecticut public policy.

P.A. 06-188 DEPARTMENT ON AGING (eff. May 26, 2007).

Section 54 of the act postpones the effective date of the reestablishment of the Department on Aging by six months, from January 1 to July 1, 2007.

See also: Prepaid Funeral Services Contracts (P.A.06-87 and P.A. 06-195), p. 1.
Medicaid Modifications\Medicaid for Employed Disabled program (P.A. 06-188 and P.A. 06-186), p. 29.
Expansion of Personal Care Assistance Pilot (P.A. 06-188), p. 35.
Deferral of Property Tax Increases for Homeowners over Age 70 (P.A. 06-176), p. 44.

E M P L O Y M E N T

UNEMPLOYMENT COMPENSATION AND WORKERS' COMPENSATION

P.A. 06-171 ELIGIBILITY OF DISABLED PERSONS FOR UNEMPLOYMENT COMPENSATION (eff. October 1, 2006).

This act exempts an unemployed person with a chronic or long-term disability from the requirement that an applicant be seeking full-time employment in order to qualify for unemployment compensation. In particular, it allows a claimant to limit job search to part-time work by (a) providing documentation from a physician of the inability to work full-time because of a physical or mental impairment that is chronic, long-term, or permanent and (b) establishing to the satisfaction of the Administrator that the limitation does not effectively remove the person from the labor force entirely. In making the latter determination, the Administrator is required to consider the individual's work history, his or her efforts to find work, the hours during which the individual is medically permitted to work, and the individual's availability during those hours for work that is suitable in light of the individual's impairment.

P.A. 06-3 NOTICE OF NON-PARTICIPATION IN UNEMPLOYMENT COMPENSATION SYSTEM (eff. April 21, 2006).

Under existing law, certain employers, including religious institutions, are exempt from the unemployment compensation system. This act requires any such exempt employer (except those participating voluntarily in the system) to notify all prospective employees that their jobs will not be subject to unemployment compensation. In addition, by July 1, 2006, such employers must notify all current employees of this fact.

P.A. 06-84 SOCIAL SECURITY OFFSETS UNDER THE WORKERS' COMPENSATION ACT (eff. May 30, 2006).

This act eliminates the requirement that workers' compensation wage replacement benefits be reduced by an amount equal to the Social Security retirement benefits to which the injured worker is entitled. Under prior law, a person receiving Social Security retirement benefits who is eligible for workers' compensation total disability payments for an injury that took place on or after July 1, 1993, receives workers' compensation only if the compensation exceeds his Social Security benefit; and the worker receives only the amount of compensation in excess of the Social Security benefit. Under the act, the injured worker can receive both Social Security and workers' compensation benefits with no reduction for any compensable injury that occurs on or after May 30, 2006.

REENTRY TO EMPLOYMENT FROM PRISON

P.A. 06-193 EX-OFFENDER REENTRY (eff. July 1, 2006).

This act spells out in greater detail the principles of a comprehensive reentry strategy for persons released from prison and focuses that strategy on

offenders who are being supervised in the community. In particular, the strategy, whose overall goals are to support the rights of victims, protect the public, and promote the successful transition of offenders from incarceration back to the community, is to (a) maximize the period of community supervision of offenders, (b) identify and address barriers to successful transition, (c) ensure sufficient resources to manage offender caseloads, (d) identify community-based supervision, treatment, educational, and other services and programs that are proven to be effective in reducing recidivism, and (e) use savings achieved through a reduction of prison population to establish employment initiatives through public and private services and partnerships.

The act also reorganizes responsibility for the development and implementation of the reentry strategy by placing it in the Criminal Justice Policy and Planning Division of OPM. By January 1, 2007, and annually thereafter, the Division must submit a report to the General Assembly on the success of the reentry strategy, using measures previously established by statute. It must also include in its annual report to the legislature, beginning January 1, 2008, the status of the reentry strategy and recommendations on the use of funds generated by reduced prison population. In addition, the act adds the development and implementation of the reentry strategy to matters which must be covered by the Division's existing comprehensive criminal justice system plan and requires that the comprehensive plan be submitted to the Governor and the legislature by January 15, 2007, and resubmitted in updated form biennially thereafter.

The act also renames the Commission on Prison and Jail Overcrowding as the Criminal Justice Policy Advisory Commission. It adds four state agencies to the commission with limited authority to participate and vote. DSS and DOL are authorized to participate and vote only in regard to matters concerning employment and entitlement programs available to adult and juvenile offenders who are reentering the community. DCF and the Department of Education can participate and vote only in regard to matters concerning juvenile justice. The act expands the duties of the Commission to include advising the Criminal Justice Policy and Planning Division on ways to promote more effective and cohesive state criminal and juvenile justice systems, on the development and implementation of the offender reentry strategy, and on the Division's reentry strategy report. The act also creates a Connecticut Sentencing Task Force, with a reporting date of December 1, 2008, to review sentencing policies in order to create "a more just, effective and efficient system of criminal sentencing."

P.A. 06-187 PROVISIONAL PARDONS (eff. October 1, 2006).

Sections 84 through 87 of this act authorize the Board of Pardons and

Paroles (BPP) to issue provisional pardons to eligible offenders who have been convicted of a crime or crimes in Connecticut or elsewhere but are now under the jurisdiction of the BPP. Provisional pardons lift barriers to certain types of employment that are barred to those with criminal records. A provisional pardon be issued, at the discretion of the Board, at any time after sentencing if (a) it may promote the public policy of rehabilitation of ex-offenders through employment and (b) it is consistent with the public interest in public safety and the protection of property. A “barrier” is the denial of employment or a license to an ex-offender without “due consideration” of whether the nature of the crime bears a direct relationship to the employment or license. A provisional pardon may be limited to the removal of one or more enumerated barriers or be limited to specified types of employment or licenses, or it may relieve the ex-offender of all barriers. If a provisional pardon is issued while an ex-offender is on probation or parole, it is to be deemed temporary and may be revoked for violation of probation or parole. The granting of a provisional pardon does not constitute the erasure of the conviction or relieve the ex-offender from disclosing the existence of the conviction.

The act prohibits employers from denying employment to a prospective employee or discharging or discriminating against an existing employee solely on the basis of a conviction that occurred before his employment for which the person has received a provisional pardon.

See also: Child Support Amendments\Support orders against prisoners (P.A. 06-149), p. 19.

OTHER

P.A. 06-129 JANITORIAL EMPLOYMENT PILOT PROJECT (eff. October 1, 2006).

This act requires the Commissioner of Administrative Services to establish a four-year pilot program to create and expand janitorial job opportunities at state agencies for “persons with a disability” and “persons with a disadvantage.” A “person with a disability” is any person deemed disabled by DHMAS, DMR, DSS’s Bureau of Rehabilitation Services, or the Veterans’ Administration, except for persons disabled by blindness. A “person with a disadvantage” is one whose income for the previous calendar year was below 200% of the federal poverty level or who has been determined by the Department of Labor to be eligible for employment services under the Workforce Investment Act.

Under the pilot, DAS, in consultation with DSS and the Labor Commissioner, is to establish four projects for janitorial work for the state with a market value of at least \$3 million which together will create at least 60

full-time jobs or full-time equivalents at standard wages. The work is to be contracted through the Connecticut Community Providers Association (CCPA). CCPA is to certify “qualified partnerships,” which are to consist of binding agreements between commercial janitorial companies with at least 200 employees and a community program which provides to persons with a disability rehabilitation services that are based on an individualized plan and budget for each disabled worker. A participating janitorial company must agree to fill at least one-third of the jobs from a successful bid under the pilot program with persons with a disability and at least one-third with persons with a disadvantage. Those persons can be spread through the entirety of the company’s operations and need not work directly on the bid job, but the persons with disability must be new hires. Upon receipt of a request from a state agency for janitorial services, DAS must invite bids on the contract from each of the qualified partnerships and, if one or more appropriate bids are made, must hire one of the partnerships.

The act also requires the legislature’s Government Administrations and Elections Committee to study the effectiveness of the pilot program, including its effectiveness in creating integrated work settings for persons with disabilities, and, if effective, ways to create incentives for businesses and municipalities to utilize the pilot program.

P.A. 06-164 OFFICE OF WORKFORCE COMPETITIVENESS (eff. July 1, 2006).

Section 1 of this act permits the Office of Workforce Competitiveness (OWC) to establish a pilot program giving parents access to training to develop skills they need to get and keep jobs. Particular skills include a high school diploma or GED, an alternative degree, English as a Second Language, and vocational training. The program is for those with children under age 18 who qualify for, but are not receiving, cash benefits under TANF.

See also: Medicaid Modifications\Medicaid for Employed Disabled program (P.A. 06-188 and P.A. 06-186), p. 29.
Employment Success Programs (P.A. 06-188), p. 46.

F A M I L Y

CUSTODY AND VISITATION

P.A. 06-168 RELOCATION OF CUSTODIAL PARENTS (eff. October 1, 2006).

This act overrules the Supreme Court decision in Ireland v. Ireland, 246 Conn. 413 (1998), by changing the burden of proof when a custodial parent

seeks to relocate after a judgment of dissolution of marriage has entered. Ireland identified three elements to be proved. First, the relocating parent must prove that the relocation is for a legitimate purpose and, second, the relocating parent must show that the new location is reasonable in light of that purpose. If those elements are established, then the burden of proof shifts to the non-custodial parent to show that the relocation is not in the best interests of the child.

This act places the burden of proof of all three elements, including the best interests of the child, on the relocating parent. The burden must be met by a preponderance of the evidence. The act also requires the court, in determining whether or not to approve a relocation, to consider (a) each parent's reasons for seeking or opposing the relocation, (b) the quality of the relationships between the child and each parent, (c) the impact of the relocation on the quantity and the quality of the child's future contact with the non-relocating parent, (d) the degree to which the lives of the relocating parent and the child may be enhanced economically, emotionally, and educationally by the relocation, and (e) the feasibility of preserving the relationship between the non-relocating parent and the child through suitable visitation arrangements. The act does not apply to all relocations but comes into play only if the relocation will have "a significant impact on an existing parenting plan."

P.A. 06-115 SCHOOL NOTICES TO NON-CUSTODIAL PARENTS (eff. July 1, 2006).

Section 2 of this act requires schools to comply with a request from a parent with whom a child does not reside that he or she be mailed a copy of all school notices at the same time that they are provided to the custodial parent.

See also: Funding of DCF-Related Projects\Children's Law Center (P.A. 06-186), p. 24.

CHILD SUPPORT

P.A. 06-149 ELECTRONIC FUNDS TRANSFER FOR TITLE IV-D CHILD SUPPORT PAYMENTS (eff. June 6, 2006).

Sections 3 and 26 of this act allow the Commissioner of Social Services to distribute child support in the Title IV-D system by electronic funds transfer (EFT), rather than by state-issued check, to custodial parents who do not authorize direct deposit into their own bank account. To implement this change, the Commissioner is to establish a debit account at a financial institution, which Title IV-D participants will be able to access by debit card. The debit card may be used to make purchases at participating retail outlets and to obtain cash at ATM machines. Any debit card system implemented by

the Commissioner must require the bank holding the debit account to agree to the following terms:

- No fee for debit card use: The bank cannot impose charges on the participant for use of the debit card at a point-of-sale terminal or an ATM, including an ATM outside the bank's network, for a minimum number of withdrawals, the number of which will be specified in the contract between DSS and the bank;
- ATM availability: The bank must assure the availability of a "substantial number" of in-network ATMs in all regions of the state;
- Free account balance information: The bank must provide, without fee, (a) an adequate mechanism by which the recipient can promptly determine that a deposit has been made to the account and (b) account balance information by telephone or on the bank's website;
- Free monthly statements: The bank must provide, without fee, regular written monthly account transaction statements which, at the participant's option, may be received by mail or on the bank's website;
- Regulation E protections: The bank must provide participant accounts with the "full protections" of Federal Reserve Board Regulation E;
- No fee discrimination: The bank may not assess fees against participants that it does not assess against other users of the bank's debit cards;
- Bilingual service: The bank must provide customer service to participants in languages other than English; and
- Plain language notice of rules: The bank must provide notice at the opening of the account and annually thereafter to each participant, in plain language and in an easily readable and understandable format, of (a) all service and penalty fees; (b) the procedure for reporting account errors, reporting and replacing a lost or stolen debit card, and obtaining funds if a card is lost or stolen; (c) the allocation of liability for unauthorized use of a lost or stolen card and for account errors; (d) the possibility, if any, for overdrafts; and (e) other similar consumer information. The notice must be phrased so as to provide only information that is applicable to the type of debit card authorized for the account.

The act also makes clear that a custodial parent's EBT account is not subject to attachment by a judgment creditor of the parent.

P.A. 06-149 CHILD SUPPORT AMENDMENTS (eff. June 6, 2006).

This act makes a number of changes in the rules and procedures for the state collection of child support, including:

- Retroactive liability for child support (Secs. 5, 12, 13, and 16): It establishes a uniform three-year retroactive period for which an obligor is

liable for child support for a child born out of wedlock, which it measures from the filing of a support petition, not from the date of acknowledgement of paternity.

- Cost of paternity tests (Secs. 10 and 11): It eliminates the requirement that a person eligible for state payment of paternity tests because of indigency must nevertheless repay the state if the tests prove him to be the father of the child. It also expands the right to free paternity testing to any person defined as a “low-income obligor” under the Child Support Guidelines, without further need to prove inability to pay. It repeals prior language requiring DSS to promulgate regulations on a respondent’s ability to pay.
- HUSKY plan payments (Secs. 4, 8, 12, and 15): It exempts only persons defined as “low-income obligors” under the Child Support Guidelines from having to contribute to the custodial parent’s HUSKY plan payments.
- Application of current child support guidelines (Sec. 18): It makes clear that the child support guidelines in effect on the date that a determination of support is made are to be used in setting not only the amount of current support but also the payment on arrearages and past due support.
- Notice of state lien for child support (Sec. 25): It eliminates the requirement of prior notice and hearing before the Bureau of Child Support Enforcement (BCSE) places a lien on the property of an obligor owing more than \$500 in past due child support. The obligor can still obtain an administrative hearing after the lien is filed.
- Redirection of child support payments (Secs. 2, 5, 12, 13, 17, and 23): It broadens BCSE’s existing power to redirect child support payments to the state or the custodial parent without going to court, particularly when the custodial parent starts or stops receiving state assistance, but only if no objection is received within ten days of the giving of notice to the obligor and the obligee. A copy of the notice must be filed with the child support magistrate.
- Support for 18-year-olds (Secs. 13 and 15): It eliminates the requirement that an unmarried 18-year-old who is still a full-time high school student be living with a parent in order to receive child support.
- Support orders against prisoners (Sec. 19): It allows the state to consider the “substantial assets, if any” of a prisoner, not just his income, in setting a child support order. It also prohibits reducing the support obligation of a person who is imprisoned for an offense against the child

or the custodial parent.

- Attorney General participation (Secs. 7, 9, and 14): Effective January 1, 2007, it requires the probate court to notify the Attorney General of all petitions involving emancipation, termination of parental rights, and paternity. The AG may file an appearance and must be made and remain a party if the child received state assistance or child support enforcement services.
- Cell phone records (Sec. 1): Effective October 1, 2006, it gives BCSE access to obligor cell phone records to obtain the address of obligors and their employers. BCSE already has access to similar records from utility and cable TV companies. It also extends BCSE's authority to require third-parties to disclose income and property information in cases of persons being investigated for a child support order, and not only those for whom a support order is already in place.
- Special police officers (Secs. 6 and 24): Effective October 1, 2006, it increases from two to four the number of BCSE employees who can be designated special police officers by the Department of Public Safety to serve warrants and capias writs in child support cases. Such persons have the powers of state police officers and state marshals. The act also permits the service of copies rather than of original documents.

DOMESTIC VIOLENCE

P.A. 06-100 PROTECTION OF VICTIMS OF DOMESTIC VIOLENCE (eff. June 2, 2006).

Section 1 of this act limits the ability of pro se litigants previously convicted of family violence crimes, risk of injury to a minor, sexual assault, or stalking to subpoena their victims into court in habeas corpus and other civil cases. In particular, it requires court approval, after a hearing, before such a person can issue a subpoena in a civil case against the victim. The court may authorize the subpoena if it finds that the testimony expected to be given by the victim is relevant and necessary to the civil matter.

Section 5 of the act modifies the state's Address Confidentiality Program. Under existing law, a victim of family violence, risk of injury, sexual assault, or stalking who fears for his or her safety may participate in the program, under which his or her residential address is kept confidential and the Secretary of the State is deemed the person's agent for service of process. Section 5 requires the Secretary of the State to provide the State Marshal Commission with a list of participants in the Address Confidentiality Program and requires state marshals serving process to check the list before making service.

P.A. 06-152 SERVICE OF RESTRAINING ORDERS (eff. October 1, 2006).

Section 2 of this act allows marshals notifying the applicable police departments of the issuance of a restraining order to send a copy of “the information contained in” the application for the order, rather than a copy of the application itself.

CHILD PROTECTION

P.A. 06-102 PERMANENCY PLANS (eff. October 1, 2006).

This act makes a number of changes in DCF procedures:

- Treatment plan for children aging out of DCF: Under existing law, a DCF ward who turns 18 may voluntarily remain under the supervision of DCF until age 21. This act provides that any such person is entitled to a written care and treatment plan and applies to them the existing requirement that DCF administer a comprehensive and integrated statewide program of services.
- Determination that reunification efforts not required: The act allows a hearing on whether reunification efforts are required to be consolidated with a trial on a petition to terminate parental rights; provides that adoption of a permanency plan other than reunification eliminates the requirement that DCF make reasonable efforts to reunify; and expands the circumstances under which a court may find that efforts at reunification are not required. Under existing law, the severe abuse of the child by the parent, or the severe abuse or murder of a sibling by the parent, is a sufficient ground for a court to waive reunification efforts. This act makes “knowingly permitting” another to have engaged in such conduct also a sufficient ground. Similarly, existing law authorizes the court to waive reunification efforts if the parental rights to a sibling have been involuntarily terminated within the preceding three years. This act eliminates the restriction that the prior termination have been involuntary, thereby allowing the court to deny reunification efforts solely because of the parent’s voluntary agreement to termination of parental rights.
- Permanency plan options: In cases not involving family reunification, the act limits permanency plans to (a) adoption, (b) long-term foster care with a relative who is licensed as a foster parent or certified as a relative caregiver, or (c) transfer of guardianship, unless DCF documents a compelling reason why one of those arrangements would not be in the child’s best interests. The act thereby eliminates “independent living” as a permanency plan priority.

- Motion to maintain commitment: Under existing law, nine months after initial placement of a child with DCF the Commissioner must move for a review of the permanency plan and to maintain or revoke the commitment. This act eliminates the requirement of a motion to maintain or revoke commitment, requiring instead only that the Commissioner bear the burden of proving that the proposed permanency plan is in the best interests of the child. The act also requires a motion opposing the permanency plan to include the reasons for opposition. It eliminates the existing mandatory provisions that the court must revoke a commitment if cause for commitment no longer exists and revocation is in the best interest of the child. It instead leaves the determination to the court's discretion.
- Permanency hearing: If the court approves a permanency plan of reunification, the act requires the court to determine the services to be provided to the parent and a timetable for those services. If the court approves adoption as the permanency plan, the act requires DCF to file a termination of parental rights petition within 60 days.
- Foster parent rights: The act gives foster parents the right to notice and to be heard on a motion for review of a permanency plan.
- Photo-listing service: Under existing law, DCF must contract with a nonprofit agency to establish and maintain an electronic photo-listing service for adoptable children, if appropriations are available. This act limits the exception for lack of funds and instead mandates that DCF implement the photo-listing service.

P.A. 06-187 OFFICE OF THE CHIEF CHILD PROTECTION ATTORNEY (eff. July 1, 2006).

Under a 2005 law, the Chief Child Protection Attorney (CCPA) is required to establish a system to provide legal services to indigent respondents in family contempt and paternity matters and to provide legal services and guardians ad litem to children and indigent parents in non-delinquency matters in juvenile court. Sections 23 and 24 of this act expand those duties to include the appointment of guardians ad litem in Superior Court family matters (and not just juvenile matters), to cover all types of family matters for which the state is ordered to pay the cost of the attorney or guardian ad litem (and not just contempt and paternity), to cover all legal parties in juvenile court proceedings (and not just parents and children), and to provide in-service training to guardians ad litem (and not just to attorneys). The act also makes clear that a judge appointing counsel for an indigent person is to appoint the CCPA to provide representation and that the CCPA, not the court, will then arrange for representation by a specific attorney.

Sections 75 and 76 of the act permit DCF to disclose otherwise-confidential records relating to abused and neglected children to employees of the Commission on Child Protection who require access in the performance of their duties. The act also allows the CCPA to obtain copies of DCF records without the subject's consent so as to ensure competent representation by and accurate billing records of attorneys who are contracted to provide legal and guardian ad litem services.

P.A. 06-188 ASSIGNMENT OF DCF STAFF TO COURT MONITOR (eff. July 1, 2006).

Section 25 of this act extends by one year, to December 31, 2007, the time period during which state employees can be assigned to the court monitor at DCF established under the consent decree in the U.S. District Court case of Juan F. v. O'Neill. The exit plan in that case establishes performance and outcome measures concerning DCF's handling of abuse and neglect cases. If these measures are met, the plan is scheduled to terminate in November, 2006.

P.A. 06-182 KINSHIP NAVIGATOR PROGRAM (eff. October 1, 2006).

Under existing law, DCF was required to establish a "kinship foster care" program under which DCF would inform relatives of a child being placed in foster care of the procedures for becoming licensed as a foster parent. Section 2 of this act renames the program as the "kinship navigator" program; requires DCF to consult with DSS, DMHAS, and DMR; requires DCF to ensure that grandparents and other relatives caring for a child related to them will be provided with information on the state services and benefits for which they may be eligible, including the subsidized guardianship program; and requires DCF to ensure that information on available services is also accessible through the 211 INFOLine program. DCF is to submit a report to the General Assembly by January 1, 2008, on the implementation of the program.

P.A. 06-186 FUNDING OF DCF-RELATED PROJECTS (eff. July 1, 2006).

The DCF budget² includes funding for a number of new projects:

- Emily J. settlement agreement: The DCF budget includes \$3.5 million in new funds to implement the settlement agreement in the Emily J. litigation. This is the second year of a two-year plan to provide post-detention, community-based mental health services for children released from state-run juvenile detention centers, alternative detention programs, and community detention centers. The intent of the two-year plan is to provide supplemental services to juvenile clients to divert them from

²See Footnote 1, p. 7.

residential placement, and the program is therefore focused on those at high risk of out-of-home placement.

- Intensive Reunification Program: The DCF budget includes a net of \$625,000 for a new program to provide intensive in-home reunification services during the first 20 days after a child has been removed from the home by DCF for protective services reasons. This is the time period after removal but before a contested hearing on an order of temporary custody is held. The goal is to increase the likelihood that the child can be returned to the home and thereby reduce state foster care costs. It is anticipated that the program will serve about 300 families per year. The program assumes that about half of its cost will be offset by reduced costs for foster care. The program is to begin by October 1, 2006.
- Short-term juvenile assessment centers: The DCF budget includes an additional \$1.55 million to replace DCF's existing emergency shelter system for adolescents with 14 six-bed short-term assessment centers. The assessment centers will be gender-specific, small, non-institutional settings with an array of on-site clinical supports that will be located near each of the Department's area offices.
- Child and adolescent rapid emergency stabilization services: The State Budget appropriates \$395,000 to DSS to establish a pilot program of child and adolescent rapid emergency stabilization services in the Hartford region, to take effect April 1, 2007. The grant is to develop a comprehensive model for the delivery of acute care to children and adolescents in psychiatric crisis.
- Children's Law Center: The budget of the Council to Administer the Children's Trust Fund includes a \$150,000 grant to the Children's Law Center of Connecticut (CLC) for operating expenses. The CLC, among other activities, represents indigent children in family court.

See also: Expansion of Rental Assistance Programs\Supportive Housing for Recovering Families (P.A. 06-186), p. 38.

P.A. 06-37 GRANDPARENT NOTIFICATION OF THE REMOVAL OF A CHILD FROM THE HOME (eff. October 1, 2006).

This act requires DCF to use "best efforts" to identify and notify the grandparents of a child removed from parental custody by DCF. Notice is to be given within 15 days. A grandparent may provide contact information to DCF for the purposes of notice if the child is the subject of a DCF investigation or is or has been under DCF care or supervision.

P.A. 06-182 YOUTH FUTURES COMMITTEE (eff. June 7, 2006).

Section 1 of this act requires the Office of Workforce Competitiveness, in consultation with the Connecticut Employment and Training Commission, to convene a Youth Futures Committee. The committee is to include legislators; representatives of DCF, DPH, DSS, DMHAS, Department of Education, DOL, OPM, the Office of Workforce Competitiveness, the Commission on Children, and the Court Support Services Division of the Judicial Branch; and a representative of the Connecticut Youth Services Association.

The committee is to (a) develop guidelines for the delivery of services that incorporate best practices based on defined, developmentally appropriate, positive outcomes for youth relating to health, safety, and education; (b) improve communication among agencies that administer programs serving youth; (c) assess existing funding resources to maximize the development of community-level services; and (d) collaborate with public and private partnerships. Positive outcomes are defined to include improved school attendance, improved academic and technical proficiencies, a higher percentage of youth obtaining a high school diploma or its equivalent, a higher percentage of youth enrolling in and completing post-secondary school education and training programs, employment programs that build skills, full employment for youth not enrolled in school or training, opportunities for public service, stable and safe housing, access to quality mental and physical health providers, and opportunities to develop leadership and mentoring skills. A report to the legislature is due on January 1, 2008, which must include (a) the progress made and the amounts spent on achieving positive outcomes, including a delineation of the progress made by each town, and (b) a listing of the state agency programs that serve youth not in school.

P.A. 06-164 NURTURING FAMILIES NETWORK (eff. July 1, 2006).

Sections 2 through 4 of this act require DSS, DPH, and DHMAS to disseminate information about services provided by the state's Nurturing Families Network. The Network (formerly known as Healthy Families Connecticut) is a free, voluntary program that, among other things, provides home visits, guidance, and assistance to first-time parents at risk of abusing or neglecting their children. More specifically, the act requires the three agencies jointly to establish a program to provide information about the Nurturing Families Network to applicants for Healthy Start, a program for low-income, pregnant women seeking medical assistance. It also requires DSS to give eligibility and service information about the Nurturing Families Network to all applicants for Medicaid.

P.A. 06-188 LIABILITY OF ADULTS TO REPAY AID RECEIVED AS A CHILD (eff. May 26, 2006).

Under existing law, a child who receives care and maintenance services from DCF is liable for their repayment. Section 43 of this act exempts any person who as a child or youth received such services from liability for repayment if, between June 25, 2005, and May 26, 2006, he or she becomes entitled to proceeds from a lawsuit or insurance payments based on a minor child's death.

See also: Special Education (P.A. 06-18), p. 8.
Bullying Policies (P.A. 06-115), p. 10.
Cost-of-Living Adjustment for Social Services Providers (P.A. 06-186), p. 49.

JUVENILE JUSTICE

P.A. 06-187 JUVENILE COURT JURISDICTION OVER 16- AND 17-YEAR-OLDS (eff. May 26, 2006).

Section 16 of this act establishes a 26-member Juvenile Jurisdiction Planning and Implementation Committee to plan for the implementation of any changes in the juvenile justice system that would be required in order to extend juvenile court jurisdiction in delinquency matters to include 16- and 17-year-olds. The committee consists of 14 legislators, seven agency representatives (DCF, DOC, Public Defender, Chief State's Attorney, OPM, Chief Court Administrator, and Child Advocate), a juvenile court judge, and four representatives of the advocacy community. The committee is to report to the General Assembly by February 1, 2007.

P.A. 06-186 JUVENILE JUSTICE COMMUNITY SUPPORT PROGRAMS (eff. July 1, 2006).

The DCF budget includes \$1.25 million for two new community-based support programs for juveniles in the juvenile justice system and \$550,000 to expand an existing program:

- Education Re-entry and Support Services program: The program is to serve about 45 DCF-involved juvenile delinquents ages 12 to 17 who are on parole. The program will operate in two cities, one beginning on July 1, 2006, and the other on January 1, 2007. It will offer comprehensive educational transition, reintegration, and support services by establishing a partnership with local schools and community-based organizations to create a wrap-around service model. Its purpose is to prevent truancy, suspension, and expulsion.

- School Based Juvenile Delinquency program: This program is intended to reduce recidivism and increase socially acceptable behaviors in a measurable way through a methodology known as Balanced and Restorative Justice (BARJ) that integrates community safety, accountability, and skill development. The methodology includes not only life skills such as employment, citizenship, and peer leadership but also “restorative activities,” such as restitution, community service, and understanding the impact on victims.
- Community diversion boards: Community diversion boards (CDBs) attempt to hold youth responsible for their actions by requiring victim restitution, as well as providing mental health and substance abuse services. Children arrested for the first or second time on misdemeanor charges are eligible for the program. At present, one such program exists in Hartford. The State Budget includes \$550,000 to create new CDBs in Bridgeport and New Haven, to fully fund the Hartford program, and to pay for a program evaluation.

P.A. 06-188 FAMILIES WITH SERVICE NEEDS ADVISORY BOARD (eff. May 26, 2006).

Section 42 of this act creates a 20-member Families with Service Needs (FWSN) Advisory Board to monitor and advise DCF and the Judicial Department in developing and providing services, including those less restrictive than detention or residential placement, to girls age 15 and under who have committed status offenses (e. g., truants and runaways) and other troubled girls. The Board must make written recommendations to the legislature and Judicial Department on the status of program development and implementation by December 31, 2007, the date on which the board terminates.

GENERAL GOVERNMENT

P.A. 06-32 APPEALS UNDER THE UAPA (eff. October 1, 2006).

This act (a) requires that an agency which agrees to reconsider a decision must render its new decision within 90 days of agreeing to the reconsideration request and (b) provides that the reconsidered decision becomes the final decision of the agency for purposes of appeal, including as to issues for which reconsideration was not sought. The effect is to eliminate the need to file an appeal of the original decision in order to protect litigant rights once the agency agrees to reconsider. The act provides that the failure to render a new decision within 90 days reinstates the original decision as the final agency decision for purposes of appeal. The act also clarifies that the 45-day period

for filing an appeal from a decision for which reconsideration has been requested runs, as applicable, from the date of the denial of the request to reconsider, the rendering of the reconsidered decision, or the expiration of the 90-day period for rendering such a reconsidered decision.

See also: Department on Aging (P.A. 06-188), p. 12.

HEALTH CARE, HEALTH INSURANCE, AND MEDICAL ASSISTANCE

MEDICAID, HUSKY, SAGA MEDICAL, AND OTHER MEDICAL ASSISTANCE

P.A. 06-186 VISION CARE, NON-EMERGENCY MEDICAL TRANSPORTATION, AND OTHER SAGA MEDICAL SERVICES (July 1, 2006).

The State Budget enhances medical services under SAGA, including the allocation of funding to provide recipients with limited vision care benefits and non-emergency transportation. It also increases payment to federally qualified health centers, through which SAGA is delivered, so as to permit payment at 95% of their actual costs, rather than at 80% as was previously paid. It also includes a small increase (\$1 million) in reimbursements to hospitals for care provided to SAGA participants.

P.A. 06-188 MEDICAID MODIFICATIONS (eff. July 1, 2006).
and

P.A. 06-186 P.A. 06-188 and the State Budget Act (P.A. 06-186), as detailed in the OFA Budget Book³, make a number of modifications to the Medicaid statutes:

- Restoration of self-declaration in HUSKY A and B: Section 16 of P.A. 06-188 requires DSS and its servicer, to the extent permitted by federal law, to rely on eligibility information about their family income that HUSKY A and B applicants put on their applications, unless there is reason to believe that the information is inaccurate or incomplete. DSS is required annually to review a random sample of cases to confirm that, based on statistical sampling, self-declaration is not resulting in HUSKY benefits being received by persons who are ineligible.
- Dental benefits: Section 24 of P.A. 06-188 authorizes DSS to use Medicaid appropriations to pay the proceeds of any settlement agreement

³See Footnote 1, p. 7.

in the U.S. District Court action of Carr v. Wilson-Coker. That suit is a class action claiming that DSS's unreasonably low reimbursement rates for dental care are effectively denying Medicaid services to eligible recipients. Within six months of the date of such a settlement, DSS is required to report to the General Assembly on a plan to achieve compliance with the settlement.

The State Budget also enhances dental benefits to children with two new programs. First, under the pilot Access to Baby Care (ABC) program, a child's pediatrician will examine the child periodically before age three and apply topical fluoride to prevent tooth decay, in conjunction with teaching mother and child better oral hygiene practices. Second, DSS will expand dental coverage to include sealant coverage for pre-molars as a way of preventing tooth decay. The budget contains \$1.85 million for the ABC program and \$1.1 million for the sealant program.

- School-Based Child Health Program: Section 26 of P.A. 06-188 makes changes to the School-Based Child Health (SBCH) program. It makes clear that durable medical equipment is available through the program but that DSS can require prior authorization. It allows the program to supercede other provisions of law (e.g., it thereby permits the program to pay for durable medical equipment to be owned by a school for use at the school, rather than solely by the child's family). The act also removes the requirement that diagnostic and evaluation services that children receive under the program be specified on their individualized education program (IEP), as long as they are recommended by the planning and placement team (PPT).
- Medicaid for Employed Disabled program: Section 27 of P.A. 06-188 permits DSS to open the Medicaid for Employed Disabled (MED) "buy-in" program to persons age 65 and older. It does this by cross-referencing the state program to a federal statute without an age restriction. The MED program is designed to provide affordable health care coverage to working people with severe disabilities.
- Medical Home Pilot Program: Sections 47 and 48 of P.A. 06-188 authorize the Commissioner of Public Health, in consultation with the Medicaid managed care organizations administering HUSKY Part A, to establish a medical home pilot program in one region of the state. The purpose of the program is to enhance health outcomes for children, including children with special health care needs, by ensuring that each child has a primary care physician who will provide continuous comprehensive health care for the child. The Commissioner is permitted to solicit private funds for the program. The pilot is to begin on January 1, 2007, and the Commissioner is to complete an evaluation within one

year of the start of the pilot to ascertain specific improved health outcomes and any cost efficiencies achieved. The Commissioner is to submit a report to the General Assembly within 30 days of completing the evaluation.

- Home health care services for children: Section 50 of P.A. 06-188 requires DSS to provide Medicaid reimbursement under HUSKY Part A for children's home health care services provided not only in the child's home but also in a "substantially equivalent environment," which is defined to include licensed child care facilities and after-school programs.
- EPSDT: Section 49 of P.A. 06-188, as amended by Section 289 of P.A. 06-196, requires DSS to maintain services under the Early Periodic Screening, Diagnostic, and Treatment (EPSDT) program, including medical, vision, dental, and hearing services, at a level no less than what was required by federal law as it existed on December 31, 2005. The services must be made available to all persons under the age of 21 who are eligible for Medicaid, even if the federal government reduces or discontinues Medicaid reimbursement for those services. Thus, if the federal government cuts back EPSDT, the act requires the state to maintain EPSDT as a state-funded program.
- Customized wheelchairs: The State Budget creates a program, estimated to save more than \$800,000 per year, to allow nursing homes to refurbish customized wheelchairs, rather than purchase new ones.
- My Community Choices program: The State Budget includes funding to continue the My Community Choices program (also known as the Nursing Facility Transition Project) in the face of reduced federal support. The program, which is administered by DSS, helps disabled persons who are leaving nursing home placements transition into integrated community settings appropriate for their individual support requirements.
- Medicaid Managed Care Council: Section 46 of P.A. 06-188 expands the scope of the Medicaid Managed Care Council to include recommendations on the managed care portion of SAGA. It also adds the chairs and ranking members of the Appropriations Committee to the Council.
- Hospital hardship grants: Section 49 of P.A. 06-186 authorizes the expenditure by DSS, in consultation with the Commissioner of Public Health, the Office of Health Care Access, and the executive director of the Connecticut Health and Educational Facilities Authority, of up to \$11

million to avoid the substantial deterioration of a hospital's financial condition that would adversely affect patient care. One factor to be considered by the Commissioner is the extent of hospital utilization by patients eligible for state assistance programs. A hospital applying for a grant must submit a plan describing operating savings and non-governmental revenue enhancements and must file quarterly reports on plan implementation.

P.A. 06-178 DISCLOSURE OF FEE INFORMATION BY HMOs (eff. Oct. 1, 2006)

This act requires that health maintenance organizations (HMOs) develop, by October 1, 2007, a procedure to permit physicians and physician organizations participating in the HMOs to access fee-for-service reimbursement rates. Section 1(e) of the act says that the fee information made available under this provision "is proprietary and shall be confidential".

P.A. 06-186 LEAD POISONING SCREENING INITIATIVE (eff. July 1, 2006).

The State Budget includes \$92,500 to the Department of Public Health to implement a childhood lead poisoning and prevention and eradication health education initiative in New Haven and New Britain. The initiative is to be based on collaborations by the New Haven Health Department and the New Britain Board of Education with the Foundation for Educational Advancement.

P.A. 06-131 DEVELOPMENT NEEDS OF CHILDREN AND YOUTH WITH CANCER (eff. June 6, 2006).

To the extent permitted by federal law, this act requires DSS to amend the state Medicaid plan to provide coverage under HUSKY A and HUSKY B, without prior authorization, for physician-ordered neurological testing for each child diagnosed with cancer on or after January 1, 2000, to assess the extent of cognitive or developmental delays due to chemotherapy or radiation treatment. The act also requires private individual and group health insurance policies to provide the same coverage.

P.A. 06-195 COMMITTEE TO IMPROVE SCHOOL-BASED HEALTH CARE ACCESS (eff. June 7, 2006).

Section 51 of this act requires the Commissioner of Public Health to establish an ad hoc committee with a minimum of nine members to assist him in examining statutory and regulatory changes to improve health care through access to school-based health centers, particularly by under- or uninsured persons and Medicaid recipients. The committee is to include representatives of DPH, DSS, DMHAS, OPM, and three school-based health center providers

recommended by the Connecticut Association of School Based Health centers. The Commissioner may expand membership to include representatives from related fields. The committee must hold its first meeting by July 15, 2006.

The committee must focus on improving school-based resources, facilitating access to school-based health centers, and identifying or recommending appropriate fiscal support for the operational and capital activities of those centers. It must also assess the current school-based health center system, with particular emphasis on (a) expansion of existing services to achieve the school-based health center model; (b) supportive processes for such expansion, including the use of unified data systems; (c) identification of geographical areas of need; (d) financing for an expanded system; and (e) service availability under the current and expanded system. The committee's report is to be submitted to the Governor and the legislature with specific recommendations for statutory or regulatory changes by December 1, 2006.

See also: Prepaid Funeral Services Contracts (P.A. 06-87 and P.A. 06-195), p. 1.
Public Health Implementer Act (P.A. 06-188), p. 5.
Nurturing Families Network (P.A. 06-164), p. 25.
NURSING HOMES AND LONG-TERM CARE, pp. 34-37.

PRESCRIPTION DRUGS

P.A. 06-188 STATE PAYMENT FOR MEDICARE PART D NONFORMULARY DRUGS (eff. July 1, 2006).

Section 13 of this act requires DSS to pay claims for prescription drugs for Medicare Part D beneficiaries who are also on ConnPACE or Medicaid and who are denied coverage by their Medicare Part D plan because the drug is not included on the plan's formulary. The initial payment must cover a 30-day supply, subject to any applicable co-payment, and payments must continue through the end of the calendar year while appeals are being taken. The beneficiary is required to appoint the Commissioner as his or her representative for the purpose of pursuing federal appeals. The Commissioner in turn is to contract with an entity specializing in Medicare appeals (which the State Budget identifies as the Center for Medicare Advocacy) to handle appeals for Part D beneficiaries whenever a prescription is denied as nonformulary. The entity is to seek reconsideration by an Independent Review Entity and, if authorized by DSS, to pursue an appeal before an administrative law judge, the Medicare Appeals Council, and the United States District Court. If DSS determines that appeals are not cost-effective and does not authorize such appeals, the Department must pay for the drug for the remainder of the calendar year.

P.A. 06-186 DRUG IMPORTATION SURVEY (eff. July 1, 2006).

The State Budget provides \$50,000 to the Department of Public Health to survey companies which import prescription drugs from Canada and Europe and to publish on its website a pamphlet on drug importation. The publication is to (a) describe the legal status of drug importation and the safety risks associated with it, (b) provide a list of drug importation programs with the best safety records, and (c) specify the safety standards used by the Department.

P.A. 06-170 MEDICARE PART D ADVISORY COUNCIL (eff. June 6, 2006).

This act creates a 22-member council to advise the Commissioner of Social Services on the administration and implementation of the Medicare Part D program. The council is to include four pharmacists, one physician, one psychiatrist, one consumer representative, one attorney experienced in Medicare advocacy, representatives of two state agencies (DSS and DPH), and the co-chairs and ranking members of three legislative committees (Human Services, Public Health, and Aging). The council is to report by January 15, 2007, and annually thereafter.

The council is specifically directed to advise (a) on the effect of the implementation of Medicare Part D on the ConnPACE and Medicaid programs, full-benefit dually eligible Medicare Part D beneficiaries (i.e., persons eligible for both Medicare Part D and Medicaid), pharmacies and pharmacists, physicians, and prescription drug coverage, benefits, and costs for participants and (b) on the administration of the Medicare Part D Supplemental Needs Fund. That fund provides financial assistance to Part D beneficiaries enrolled in ConnPACE or Medicaid who cannot pay for drugs that are not on their Medicare Part D plan's formulary.

P.A. 06-188 DRUG AND INSURANCE ASSISTANCE FOR PEOPLE WITH HIV OR AIDS (eff. May 26, 2006).

Under prior law, DSS administered two programs to help people with HIV or AIDS purchase drugs and obtain health insurance. Sections 14 and 55 of this act modify the drug program and terminate the health insurance program, effectively limiting state health insurance assistance for such persons to prescription drug assistance for those who qualify for Medicare Part D.

In regard to the drug program, the act restricts the program to treatment-related drugs (eliminating drugs for prevention purposes), requires DSS to consult with DPH on the specific drugs to be covered, and makes the maintenance of insurance policies discretionary for DSS and only with federal approval. It requires applicants and recipients to enroll in Medicare Part D if

eligible or to apply to the Social Security Administration for the low-income subsidy benefit. If the applicant does not select a Part D plan, then DSS is authorized to make the selection. The applicant must designate DSS as his or her representative for the purpose of appealing benefit denials. DSS may pay Medicare Part D premium and co-insurance costs for eligible applicants and recipients. On March 1, 2007, and annually thereafter, DSS is to report to the General Assembly on the projected availability of funds for this program.

In regard to the former Insurance Assistance for People with AIDS program, which was intended to provide health insurance for persons with AIDS who without such assistance would be unable to obtain health insurance coverage through an employer, the act grandfathers current participants until “the expiration of the insurance coverage,” presumably at the end of the policy year.

P.A. 06-188 DRUG COVERAGE UNDER CONNPACE (eff. July 1, 2006).

Under prior law, ConnPACE was prohibited from paying for drugs to treat erectile dysfunction for persons required to register with the state’s sexual offender registry but did not exclude erectile dysfunction drugs for other participants. Section 11 of this act expands the exclusion to all ConnPACE participants, except when the drug is prescribed to treat a condition other than erectile dysfunction and has been approved by the Food and Drug Administration for that purpose. The law continues to bar the ConnPACE program from paying for erectile dysfunction drugs for sexual offenders under any circumstance.

NURSING HOMES AND LONG-TERM CARE

P.A. 06-187 REGISTRATION OF HOME MAKER SERVICES (eff. October 1, 2006).

Sections 52 through 62 of this act prohibit the operation of a “homemaker-companion agency” without first obtaining a registration certificate from the Department of Consumer Protection. “Homemaker” services include assistance with personal hygiene, cooking, household cleaning, laundry, and other household chores. “Companion” services are basic supervision services to ensure the well-being and safety of a person in his or her home. Both types of service are supportive and non-medical in nature. The act does not apply to home health care or homemaker-home health aide agencies, which are already licensed by the Department of Public Health.

The act requires homemaker-companion agencies to conduct background checks on employees, to be bonded, and to provide clients, within seven days after beginning the provision of services, with a written individualized

contract or service plan that specifically identifies the anticipated scope, type, frequency, and duration of the services to be provided. The contract or service plan must also provide notice of the right to request changes to the contract or plan; and no contract is enforceable against a client unless it has been signed by both the client and the agency. Each agency must also state in all advertising that it is registered and include its registration number in any advertisement. Agencies are prohibited from claiming in any manner that the fact of registration constitutes a DCP endorsement of the quality of services provided. The Commissioner of Consumer Protection is to report to the General Assembly on the registration program by January 1, 2008.

P.A. 06-188 EXPANSION OF PERSONAL CARE ASSISTANCE PILOT (eff. July 1, 2006).

Sections 8 and 9 of this act expand two personal care assistance (PCA) programs. PCA services are a “consumer-directed” alternative to nursing homes or home care through an agency, in which the client employs a personal care assistant directly. Section 8 of the act removes, subject to federal approval of a waiver, the upper age limit on the state's Medicaid PCA program, which previously covered eligible disabled adults only up to age 64. If a participant “aged out,” he or she could not continue PCA services except by applying to the state-funded PCA pilot for the elderly. Section 9 increases from 150 to 250 the maximum number of participants in the state-funded PCA pilot program.

P.A. 06-188 “MONEY FOLLOWS THE PERSON” PILOT (eff. May 26, 2006).

Section 44 of this act allows DSS to apply to the federal Department of Health and Human Services to establish a “Money Follows the Person” demonstration project, as authorized in the federal Deficit Reduction Act of 2005. The demonstration allows money that would have been spent on people's long-term care in nursing homes or other institutions to be spent on the services they need to live in the community. The newly authorized federal program allows states to apply for competitive federal grants for demonstrations that have the objectives of (a) increasing the use of home- and community-based services, rather than institutional long-term care; (b) eliminating barriers or mechanisms that prevent or restrict the flexible use of Medicaid funds to enable people to receive the services they need in the setting they choose; (c) providing continuity of services for people moving from an institution to the community; and (d) ensuring and improving service quality.

The act limits the demonstration project to a maximum of 100 persons. Personal care assistance services must be included in the demonstration. The act authorizes the Commissioner to apply for a Medicaid Section 1115

research and demonstration waiver or to modify any existing Medicaid home- or community-based waiver, if necessary to implement the demonstration.

P.A. 06-188 PRIOR AUTHORIZATION FOR HOME HEALTH CARE SERVICES (eff. July 1, 2006).

Under previous practice, prior authorization was not required for home health aide services of less than 20 hours per week. Section 15 of this act requires prior authorization for home health aide visits in excess of 14 hours per week.

P.A. 06-188 LONG-TERM CARE COMPREHENSIVE NEEDS ASSESSMENT (eff. July 1, 2006).

Section 38 of this act transfers the existing duty to conduct a comprehensive needs assessment of unmet long-term care needs and to project future demand for such services from OPM to the General Assembly, which is to contract for the assessment after consulting with the Commission on Aging, the Long-Term Care Advisory Council, and the Long-Term Care Planning Committee. The assessment is to analyze future needs and costs over the next 30 years and to recommend changes to programs and delivery systems to better meet long-term care needs.

P.A. 06-64 CERTIFICATE OF NEED REQUIREMENTS FOR NURSING HOMES (eff. July 1, 2006).

This act makes several changes in the certificate of need (CON) requirements for nursing homes. Under existing law, a nursing home or similar health care facility is required to file a letter of intent prior to submitting a CON application when proposing to change the operations of the facility. The Commissioner of Social Services may waive the letter of intent requirement if the change is of an emergency nature because of the necessity of complying with a federal, state, or local code requirement. Section 6 of this act creates an additional exception to the required letter of intent. In particular, it allows the Commissioner to waive the letter of intent requirement upon a showing that the proposed change is needed to “maintain continued access to the health care services provided by the facility or institution.”

In addition, Section 8 of the act (a) limits the granting of exemptions from CON requirements for nonprofits to those nonprofits that are under contract with a state agency or department; (b) in regard to a proposed relocation of services by such a nonprofit, permits the Commissioner of the Office of Health Care Access (OHCA) to grant an exemption upon his determination that the health needs of the area previously served by the nonprofit will continue to be met in a satisfactory or better manner; and (c) in

regard to a proposed termination of services, permits the Commissioner of OHCA to grant an exemption upon the same determination as for a relocation of services, but only if the head of the state agency with which the nonprofit is under contract also makes a determination that the needs of the area previously served will continue to be met in a satisfactory or better manner. The latter agency's determination must be in writing and must specify how the needs of the area will continue to be met.

See also: Public Health Implementer Act\Home- and community-based mental health services (P.A. 06-188), p. 6.
Nursing Home Mental Health Pilot (P.A. 06-186), p. 7.
Medicaid Modifications\My Community Choices Program (P.A. 06-188 and P.A. 06-186), p. 30.
Medicaid Modifications\Customized wheelchairs (P.A. 06-188 and P.A. 06-186), p. 30.

PRIVATE HEALTH INSURANCE

P.A. 06-188 NOTICE TO INSURERS OF CHANGES IN REQUIRED BENEFITS (eff. October 1, 2006).

Section 35 of this act requires the Insurance Commissioner to notify in writing each insurance company, HMO, and other entity that provides individual or group health insurance plans of any benefits the law requires them to provide or any modifications in benefit requirements that occur on or after October 1, 2006. The Commissioner's notice must be given at least 30 days before the benefit or modification takes effect. The Commissioner must also instruct insurers to submit to the Commissioner, prior to benefits or modifications taking effect or a plan being renewed, any necessary policy forms reflecting those benefits or modifications.

P.A. 06-39 HEALTH INSURANCE COVERAGE FOR ALCOHOL- OR DRUG-RELATED INJURIES (eff. October 1, 2006).

This act prohibits individual and group health insurance policies from denying coverage for services rendered to treat injuries incurred when the insured has an elevated blood alcohol level (over .08 of 1%) or under the influence of intoxicating liquor or a drug.

See also: Public Health Implementer Act\Utilization review information (P.A. 06-188), p. 6.
Development Needs of Children and Youth with Cancer (P.A. 06-131), p. 31.

HOUSING

RENTAL ASSISTANCE

P.A. 06-186 EXPANSION OF RENTAL ASSISTANCE PROGRAMS (eff. July 1, 2006).

The State Budget⁴ includes funding for the expansion of two state rental assistance programs:

- Rental Assistance Program (RAP): Section 47 of P.A. 06-186 allows DSS to retain \$1.8 million of its 2005-2006 RAP budget, which it failed to spend, and adds those funds to its RAP budget for 2006-2007, thereby increasing the RAP allocation for 2006-2007 to about \$15.9 million. This will permit DSS to increase the number of RAP certificates from less than 1,400 to nearly 1,900.
- Supportive Housing for Recovering Families: The DSS budget includes \$1.26 million for RAP certificates to add 100 families to the Supportive Housing for Recovering Families program. The program, which is administered by DCF, provides case management services and rental assistance for families whose children are involved with DCF and for whom the lack of stable housing is a significant obstacle to returning the child to the parent.

P.A. 06-186 HOUSING SUPPORT PROGRAMS (eff. July 1, 2006).

The State Budget provides an additional \$250,000 for the Security Deposit Guarantee Program (SDGP), which will permit DSS to make about \$1 million in additional SDGP guarantees available and to reopen the SDGP to first-time recipients of Section 8 vouchers and state RAP certificates. The budget also includes \$300,000 for case management services for women in shelters in New Haven, \$250,000 to enhance the Beyond Shelter program for women, and \$65,000 for the Open Hearth program in Hartford.

See also: Public Health Implementer Act\Maximization of Medicaid reimbursement (P.A. 06-188, p. 6).

P.A. 06-7 USE OF RAP CERTIFICATES IN SUPPORTIVE HOUSING (eff. April 21, 2006).

Existing law allows the Commissioner of Social Services to designate certificates under the Rental Assistance Program (RAP) for use in tenant- and

⁴See Footnote 1, p. 7.

project-based supportive housing units. This act allows the Commissioner to allocate RAP funds for that purpose without having to issue individual RAP certificates. In practice, this will permit DSS to make direct payment to the property owner as an operating subsidy rather than as a certificate, if the supportive housing is project-based.

CODE ENFORCEMENT

P.A. 06-185 MUNICIPAL LIENS FOR CODE VIOLATIONS (eff. October 1, 2006).

This act strengthens municipal lien powers when enforcing housing and zoning codes and increases penalties for code violations. In particular:

- Notice to lienholders (Secs. 4 and 5): The act requires towns to send all lienholders, simultaneous with notice to the property owner, a copy of any notice or order sent to the property owner issued under any state or local building, health, or safety code or regulation. They must also send lienholders a copy of any notice of costs or expenses being imposed on the property, including any notice filed on the land records.
- Code enforcement liens (Secs. 2, 3, and 5): Section 5 of the act makes clear that C.G.S. 49-73b, which gives municipalities a priority lien for expenses incurred for the inspection, repair, demolition, removal or other disposition of real property to make it “safe” also (a) applies to expenses to make the property “sanitary” and (b) covers actions taken under any provision of the General Statutes or any municipal building, health, housing, or safety code or regulation. Under C.G.S. 49-73b, a lien for expenses incurred by the municipality has priority over all other liens (including mortgages) except for municipal taxes.

Sections 2 and 3 of the act create new liens under C.G.S. 47a-53 and C.G.S. 47a-58. C.G.S. 47a-53(b), which is part of the Tenement House Act and applies to rental properties of three or more units, allows the enforcing authority to impose a 5% service charge and a 10% penalty charge whenever it “executes an order” to enforce the Act. An order is ordinarily “executed” when the enforcing authority corrects the condition itself because of the landlord’s failure to do so; and these charges are thus in addition to the cost of correcting the condition. C.G.S. 47a-58(c), a statute that applies to violations of C.G.S. 47a-50 through 47a-61, which covers all rental housing, allows municipalities to impose civil penalties of \$5 per day, up to a maximum of \$7,500, for housing code violations.

Sections 2 and 3 provide that these charges and fines will become liens against the property if (a) the liens are filed on the land records within 30 days after “the penalty was imposed” and (b) they are not paid

by the property owner within 60 days after their “due date.” Unlike liens under C.G.S. 49-73b, which cover the cost of work actually performed by the municipality, the new liens under Sections 2 and 3 are not priority liens and take precedence only over subsequent encumbrances.

- Special assessments on blighted properties (Secs. 1 and 6): The act allows municipalities which have adopted anti-blight regulations under C.G.S. 7-148(c)(7)(H)(xv) to provide by ordinance for a system of special tax assessments on blighted property (eff. July 1, 2006). The assessment will be added to the property owner’s next tax bill and, if not paid, can be enforced as an unpaid property tax, which has priority over all other liens, including the mortgage. Before approving a special assessment ordinance, the town must appoint a committee of at least six taxpayers, including a landlord, the tax assessor, and representatives of the town’s code enforcement agencies. The committee, among other tasks, is to determine the town’s costs in enforcing codes against blighted properties. The assessment ordinance is to contain standards by which a municipal board will determine whether to impose an assessment on a particular property; a calculation of the amount of the assessment based on the cost of enforcement, including police and fire costs; procedures for notice; an opportunity for the property owner to remedy the condition before an assessment is imposed; and a right of appeal. Any funds received from the special assessment must be placed in a separate fund or account to be used solely for the cost of enforcing ordinances related to blight and code violations. Section 6 of the act appears to limit the use of this special assessment procedure to instances in which a municipality does not file a lien on the land records for work performed, so that a municipality cannot both place a lien on the property and impose a special assessment.
- Fines for violations of municipal ordinances (Secs. 7, 8, and 9): The act increases the maximum fine for violation of a municipal ordinance from \$100 to \$250. It also provides that fines for such violations can be paid through the Centralized Infractions Bureau of the Superior Court without going to court, except for violations of building and health codes.

See also: Lead Poisoning Screening Initiative (P.A. 06-186), p. 31.

HOUSING PRODUCTION PROGRAMS

P.A. 06-48 NOTICE BY OWNERS OF FEDERALLY-SUBSIDIZED HOUSING OF INTENT TO REMOVE HOUSING FROM THE FEDERAL SUBSIDY SYSTEM (eff. July 1, 2006).

This act expands an existing requirement that owners of privately-owned federally-subsidized housing in the Section 221(d), Section 236, and Section

515 programs give one year's notice of the intent to prepay their federal mortgage. In particular, the act (a) expands the circumstances in which notice must be given to include expiration of regulatory restrictions, maturity of the mortgage, and any other termination of the federal subsidy, and not only prepayment; (b) expands the programs covered to include Section 8 programs other than tenant-based vouchers, the Low Income Housing Tax Credit program, the programs under Sections 101, 202, and 521 of the National Housing Act, and the Supportive Housing for Persons with Disabilities program; and (c) requires DECD to post the notice on its website within ten business days of receiving it and to make notices available electronically to those who request them. Notice need not be given unless the intended action will result in the termination or reduction of the financial assistance or regulatory requirements designed to make the assisted units affordable.

Since the act is not effective until July 1, 2006, the one-year notice requirement applies only to terminations which will be implemented after July 1, 2007. For terminations during the one year after the effective date of the act, the act requires that a 90-day notice be given.

P.A. 06-186 EXPANSION OF CHFA HOUSING TAX CREDIT CONTRIBUTION
 and PROGRAM.
P.A. 06-189

Section 65 of P.A. 06-186 doubles the tax credit authority for CHFA's Housing Tax Credit Contribution Program from \$5 million per year to \$10 million per year. It also increases the set-aside for supportive housing from \$1 million to \$2 million and makes clear that the Next Steps Initiative is eligible for the set-aside. It sets aside \$1 million for "workforce housing," as defined by CHFA. In addition, it increases from \$400,000 to \$500,000 the maximum amount of tax credits which a housing program can receive.

Section 23 of P.A. 06-189 repeals the existing Employer-Assisted Tax Credit Program, which allowed employers to claim a credit of up to \$100,000 in any tax year for contributions to a revolving loan fund used for housing loans to their low- and moderate-income employees. It had been funded at \$1 million per year. In light of the \$1 million set-aside in P.A. 06-186, the practical effect seems to have been to fold the program into the expansion of the Housing Tax Credit Contribution Program.

P.A. 06-186 HISTORIC TAX CREDIT PROGRAM FOR COMMERCIAL BUILDINGS
(eff. July 1, 2006).

Section 82 of this act allocates \$15 million per year for a new tax credit program for commercial and industrial buildings on the National Register of Historic Places which are rehabilitated for residential use. A project is eligible for tax credits equal to 25% of qualified rehabilitation expenditures, up to a

maximum of \$2.7 million per project. The program is to be administered by the Connecticut Commission on Culture and Tourism.

P.A. 06-194 CHFA ASSISTANCE TO PURCHASE MOBILE HOMES IN MOBILE HOME PARKS (eff. July 1, 2006).

Section 8 of this act requires CHFA to set aside at least \$2 million for direct loans to Connecticut residents to purchase mobile manufactured homes to be located in mobile manufactured home parks. The loans must accept the perpetually renewing one-year ground lease required by the Mobile Manufactured Home Park Act as being of sufficient duration to satisfy underwriting requirements and may not require the park resident to purchase private mortgage insurance.

P.A. 06-47 CHFA UNINSURED MORTGAGE CAP (eff. October 1, 2006).

This act increases from \$750 million to \$1 billion the maximum amount of permanent mortgages and mortgage interests which are not insured by federal agencies that CHFA may, at any one time, use as security for direct loans or buy, sell, or service. The mortgages are used to finance housing construction and home buyer mortgages. The cap was last raised in 1987. The higher cap will allow CHFA to increase the percentage of its mortgages which are not federally insured to about 25% of its total portfolio.

P.A. 06-93 MINOR CHANGES TO DECD STATUTES (eff. October 1, 2006).

This act makes minor changes to DECD-related statutes and repeals statutes which have become obsolete. In particular:

- It eliminates the requirement that DECD adopt regulations for the Window Repair and Replacement Program (C.G.S. 8-37ww) and the Administrative Oversight Charge program (C.G.S. 8-37tt). The amendment to C.G.S. 8-37ww is effective May 30, 2006.
- It repeals two 1993 housing programs which DECD never implemented. The Consolidated Housing Program (C.G.S. 8-430 et seq.) has been superseded by the FLEX Program (C.G.S. 8-37pp) as DECD's primary housing production program. The Single Room Occupancy (SRO) Pilot program (C.G.S. 8-361) was supposed to help non-profits acquire and rehabilitate abandoned property in towns with enterprise zones into single room occupancy housing.
- It makes explicit that repayments of housing loans made under the FLEX Program are to be placed in the Housing Repayment and Revolving Loan Fund, which allows those repayments to be recycled for housing

purposes.

- It eliminates a provision in a number of state housing statutes which prohibited DECD from accepting any new applications under those statutes after the Consolidated Housing Program regulations became effective.
- For purposes of an assisted living pilot program for “frail elderly” in congregate housing in Norwich, it defines “frail elderly” as elderly persons who have temporary or periodic difficulties with one or more essential daily living activities.

PLANNING AND ZONING

P.A. 06-97 SUBDIVISION OF LAND FOR AFFORDABLE HOUSING (eff. October 1, 2006).

Under existing law, a landowner who divides one lot into two lots is not subject to the subdivision regulations. Division into three or more lots, or a resubdivision of a lot that was previously divided, is governed by the town’s subdivision regulations. This act allows municipalities by ordinance to exempt the first subdivision of land from the regulations if the lot created is for affordable housing to be developed by the town or a non-profit corporation. In effect, this allows the property owner, without following the subdivision regulations, to divide the lot into three lots, if one of them is reserved for affordable housing. The act is explicit that this exemption is in addition to any other exemptions under C.G.S. 8-26.

PROPERTY TAXES

P.A. 06-183 PHASE-IN OF PROPERTY TAX REVALUATIONS (eff. for assessment
and years beginning October 1, 2006).

P.A. 06-148

and

P.A. 06-176

These statutes make changes in state law governing the extent to which municipalities can phase in property tax increases which result from property tax revaluation.

Section 2 of P.A. 06-183 creates a special revaluation phase-in system which applies only to the City of Hartford. At present, Hartford operates under C.G.S. 12-62d, which allows it to impose a 15% property tax surcharge on commercial and industrial properties so as to moderate what would otherwise be higher tax rates on one- to three-family buildings and apartment houses. This act repeals that authority as of the property tax year beginning October 1, 2010. In its place, and effective with the October 1, 2006, tax year, this act allows Hartford to adopt a new system if the tax assessor determines

that, as a result of revaluation, the retention of the old system will result in an increase of 20% or more in the share of the grand list for the class of properties consisting of one- to four-family buildings (known as “residential property” under the act) and apartment buildings. If Hartford adopts this system, the property tax increase for residential property and apartment buildings will be limited to 3.5% per year for five years. These increases must be used to reduce the existing surcharge on commercial and industrial property so that the surcharge will not exceed 7.5% by the tax year that begins on October 1, 2010.

Section 2 of P.A. 06-148 allows towns which want to phase in the effect of a property tax revaluation to do so over a period of five years, rather than over four years. It also allows towns, at their option, to subdivide the phase-in into three classes of property and, instead of phasing in revaluation based on the overall increase in the municipal tax base, phase in the increase for properties in each class, based on the grand list increase for each class. The three classes are (a) residential property (defined as one- to four-family houses), (b) commercial property (defined to include buildings containing five or more dwelling units), and (c) vacant land.

Section 3 of P.A. 06-176 modifies P.A. 06-148 by allowing towns to phase in a portion of an increase caused by evaluation, rather than the entire increase. In other words, it permits the town to implement a portion of revaluation immediately and phase in the remainder. Section 296 of P.A. 06-196 applies this section to assessment years beginning on or after October 1, 2005.

P.A. 06-176 DEFERRAL OF PROPERTY TAX INCREASES FOR HOMEOWNERS OVER AGE 70 (eff. October 1, 2006).

Sections 1 and 2 of this act allow towns to implement a property tax deferral for homeowners who are age 70 or older (or whose spouse is age 70 or older) and to defer collection of any tax increase until the person dies. The deferral continues after the homeowner’s death for a homeowner’s surviving spouse if the spouse is at least 62 years old. Homeowners must meet the same income standards as for the existing “Circuit Breaker” tax relief program under C.G.S. 12-170aa, which at present are \$27,700 per year for an individual and \$33,900 per year for a couple. The income of a spouse institutionalized and receiving Medicaid is not counted. Towns are allowed to impose asset limits on eligibility. Participation in this new tax deferral program does not preclude the homeowner from also receiving benefits in the property tax relief programs for elderly homeowners under C.G.S. 12-129b, 12-129n, and 12-170aa.

Applications must be filed locally with the town’s tax assessor between

February 1 and May 15 of the year in which the benefit is first claimed. Approvals are good for two years. The act requires the tax assessors to notify participants by mail on or before February 1 of a year in which reapplication is required and, if no application is received, renotify them by April 1. The municipality may place a lien on the property for any increased taxes not assessed because of the freeze, plus interest, and the lien will have priority in the settlement of the beneficiary's estate.

P.A. 06-153 VETERANS' PROPERTY TAX EXEMPTIONS (eff. October 1, 2006).

Under existing law, veterans and totally disabled persons are entitled to a \$1,000 exemption from municipal property taxes, and persons who are blind are entitled to a \$3,000 tax exemption. In addition, such persons with income below certain levels are entitled to an additional exemption, which towns can choose to enlarge. This act provides that, in determining those income levels, veterans' disability benefits are not to be counted as income. The act also makes clear that National Guard members mobilized for home security duty (Title 32 mobilizations) are eligible for veterans' benefits to the same extent as those mobilized for army service in the United States or abroad (Title 10 mobilizations).

In addition, the act requires all state agencies and municipalities that provide benefits to veterans to report annually to the Commissioner of Veterans Affairs, starting July 15, 2007, on the benefits provided and the number of veterans receiving them. The Commissioner is then to report to the General Assembly and the Military Department.

OTHER

P.A. 06-187 PROPERTY RIGHTS OMBUDSMAN (eff. July 1, 2006).

Sections 3 through 11 of this act establish a new Office of Ombudsman for Property Rights, under the direction of the Ombudsman for Property Rights, to assist persons whose property is being acquired by eminent domain. More specifically, the Office is to: (a) develop expertise in the constitutional, statutory, and judicial law of eminent domain, (b) assist and advise public agencies in properly applying the law and analyzing actions with potential eminent domain implications, (c) provide information about eminent domain to the general public and assistance about eminent domain procedures to individual property owners, (d) mediate disputes between private property owners and government agencies concerning eminent domain or related relocation assistance, and (e) recommend statutory changes to the General Assembly. The Ombudsman, who is to be appointed by the Governor with the approval of one house of the General Assembly, must be an attorney with experience in real estate law or land use regulation.

The act requires the Ombudsman to adopt regulations on the establishment of a mediation procedure and to set standards for when a mediation request will be accepted. If a mediation request is filed with the Ombudsman, either party may move the Superior Court for a stay of any related pending action, which the court must grant for good cause shown. The act requires all public agencies to participate in mediation at the request of the Ombudsman and to comply with reasonable requests for information and assistance. It also requires each agency seeking to acquire property by eminent domain (a) to make a reasonable effort to negotiate with the property owner for purchase before filing a statement of compensation and (b) at least 14 days before filing a statement of compensation, to advise the property owner of the availability of services from the Ombudsman and of mediation, to provide contact information with the Ombudsman, and to provide the property owner with a written statement that oral representations and promises made by the agency during the negotiation process are not binding on the agency. The Ombudsman is to prescribe the form for these disclosures.

PUBLIC BENEFITS AND SOCIAL SERVICES

P.A. 06-114 ISSUANCE OF PHOTO IDENTIFICATION CARDS (eff. July 1, 2006).

Under prior law, DSS is required to issue photo identification cards to all recipients of TFA and food stamps. This act makes issuance of such cards discretionary.

P.A. 06-188 DSS INDIGENT FUNERAL AND BURIAL ALLOWANCE (eff. July 1, 2006).

Sections 17 through 19 of this act increase the DSS funeral and burial allowance for indigent persons from \$1,200 to \$1,800. Existing law applies explicitly to TFA and State Supplement recipients, and this act explicitly adds SAGA beneficiaries.

P.A. 06-188 EMPLOYMENT SUCCESS PROGRAMS (eff. May 26, 2006).
and

P.A. 06-186 The State Budget provides \$1.5 million to DSS to increase child care funding to meet new federal work requirements regarding TANF in the Deficit Reduction Act of 2005. Of this amount, \$825,000 is for the Employment Success program. The State Budget also provides \$6.5 million to the Department of Labor for vocational and basic education (\$2 million), Community Training and Education Opportunities (CETO) (\$1.2 million), work experience (\$2.5 million), and expansion of employment services (\$700,000).

In addition, Section 45 of P.A. 06-188 requires DSS, in consultation with DOL and OPM, to provide quarterly status reports to the General Assembly and the TANF Advisory Council on the implementation of these and other programs intended to bring the state into federal compliance. The first report is due on July 1, 2006. The status reports are to contain a description of mechanisms being used or contemplated to measure the outcomes and effects of programmatic revisions on program beneficiaries. Such revisions are to emphasize vocational and educational training programs, work experience programs, and the expansion of employment services and child care services and must be designed to promote the employment of participants in a manner consistent with the work participation rates required by federal law.

P.A. 06-179 STATE PREVENTION AND CHILD POVERTY COUNCIL (eff. October 1, 2006).

This act merges the State Prevention Council into the Child Poverty Council (CPC), creating a combined entity called the Child Poverty and Prevention Council (CPPC), consisting of the members of the CPC plus the Chief Court Administrator. The act expands the duties of the former CPC, which developed a ten-year plan to reduce child poverty by 50% by June 30, 2014, to include establishing prevention goals and recommendations and measuring prevention service outcomes in order to promote the health and well-being of children and families.

The act also lays out a series of tasks to be performed by the Council and by state agencies. By November 1, 2006, each agency on the Council is to provide the Council with a report on at least two prevention services which the agency provides. The agencies on the Council are OPM; DCF, DOC, DMR, DMHAS, DOT, DPH, SDE, DECD, OHCA, DOL, DHE, and CHRO; the Office of Health Care Access; the Judicial Branch; the Child Advocate; and the Children's Trust Fund. The report is to include the following:

- A description of the preventive services provided, any performance-based protocols to determine vendor accountability, and a statement of the number of children and families served;
- The agency's long-term goals, strategies, and outcomes to promote the health and well-being of children and families, which may include:
 - *Health goals:* Increasing the number of healthy pregnant women and newborns, the number of youths who adopt healthy behaviors, and access to health care for children and families;
 - *Education goals:* Increasing the number of children who are ready for school, learn to read by third grade, succeed in school, graduate from high school, and successfully obtain and maintain

- employment as adults;
- *Safety goals*: Decreasing the rate of child neglect and abuse, the number of children who are unsupervised after school, the incidence of child and youth suicide, and the incidence of juvenile crime; and
- *Housing goals*: Increasing access to stable and adequate housing;
- Overall findings on the effectiveness of prevention within the agency; and
- A description of methods used by the agency to reduce disparities in performance and outcomes by race, income level, and gender.

The agencies are to submit another set of reports covering two prevention services by November 1, 2007. Each 2007 report is also required to include a description of performance-based standards and outcomes which the agency has included in its vendor contracts.

By January 1, 2007, the Council is to report to the Governor and the General Assembly on the state's progress in prioritizing expenditures in the state agencies on the Council to fund prevention services. The report is to include the agency reports, along with (a) a summary of measurable gains made toward prevention and poverty reduction goals, (b) examples of successful interagency collaborations to meet those goals, and (c) recommendations for prevention investment and budget priorities, about which the Council is required to consult with experts and providers of services to children and families.

The act also requires the Governor's budgets for Fiscal Years 2007 and 2008 to include a "prevention report" that (a) presents in detail for each fiscal year of the biennium the recommended appropriation for prevention services within each state agency providing such services, (b) identify the state's progress toward meeting the goal that, by the year 2020, at least 10% of total recommended appropriations for each budgeted agency will be allocated for prevention services, and (c) include a listing of prevention services and the actual amounts spent on them in the previous fiscal year.

P.A. 06-186 RESULTS-BASED ACCOUNTABILITY (eff. July 1, 2006).

Section 26 of this act requires each recipient of state funds for the fiscal year ending June 30, 2007, for a program that is designated by the Office of Fiscal Analysis as a new or expanded program to submit by August 1, 2007, a preliminary report setting forth the purposes or goals of the program and by June 1, 2008, a progress report setting forth the results or achievements of the program with respect to those purposes or goals.

P.A. 06-186 COST-OF-LIVING ADJUSTMENT FOR SOCIAL SERVICES PROVIDERS (eff. October 1, 2006).

The State Budget includes funds for a 2% cost-of-living increase for most private services providers under contract with DMR, DMHAS, DSS, DCF, DOC, DPH, Judicial Department, and the Council to Administer the Children's Trust Fund.

UTILITIES

P.A. 06-187 SALES TAX EXEMPTION FOR WEATHERIZATION PRODUCTS (eff. June 1, 2006).

Section 18 of this act extends the sales tax moratorium on residential weatherization products until June 30, 2007. Weatherization products include programmable thermostats, window film, caulking, weatherstripping, insulation, water heater blankets, water heaters, natural gas and propane furnaces, energy-efficient windows and doors, 85%-efficient oil furnaces and boilers, and energy-efficient ground-based heat pumps.

See also: Sale of Propane and Home Heating Oil (P.A. 06-65), p. 2.

INDEX OF PUBLIC ACTS

PUBLIC ACTS

06-3	13	06-97	43	06-171	12
06-7	38	06-100	20	06-176	43, 44
06-18	8	06-102	21	06-178	31
06-32	27	06-114	46	06-179	47
06-37	24	06-115	10, 17	06-182	23, 25
06-39	37	06-118	2	06-183	43
06-44	9	06-124	8	06-185	39
06-45	3	06-129	15	06-186	7, 23, 26, 28, 31, 33, 38, 41, 46, 48, 49
06-47	42	06-130	4	06-187	14, 22, 26, 34, 45, 49
06-48	40	06-131	31	06-188	5, 12, 23, 26, 27, 28, 32, 33, 34, 35, 36, 37, 46
06-56	7	06-148	43	06-189	41
06-64	36	06-149	17, 18	06-192	10
06-65	2	06-152	21	06-193	13
06-66	3	06-153	45	06-194	42
06-73	1	06-164	16, 25	06-195	1, 11, 31
06-84	13	06-167	10		
06-87	1	06-168	16		
06-92	4	06-170	33		
06-93	42				

EXPLANATION OF ABBREVIATIONS

Two standard abbreviations are ordinarily used in this publication. "P.A." stands for "Public Act." "Sp.A." stands for "Special Act." A public act is one of general applicability and is eventually codified in the Connecticut General Statutes. A special act is one of limited applicability (such as one authorizing a study commission) and is not codified. There are no special acts summarized in this year's publication. In addition, the abbreviated names of state agencies are commonly used. The principal ones appearing in this edition are:

AG	Attorney General
BCSE	Bureau of Child Support Enforcement (within DSS)
BESB	Board of Education and Services for the Blind
BPP	Board of Pardons and Paroles
CCPA	Chief Child Protection Attorney
CHFA	Connecticut Housing Finance Authority
CHRO	Commission on Human Rights and Opportunities
DAS	Department of Administrative Services
DCF	Department of Children and Families
DCP	Department of Consumer Protection
DECD	Department of Economic and Community Development
DHE	Department of Higher Education
DMR	Department of Mental Retardation
DMHAS	Department of Mental Health and Addiction Services
DOC	Department of Corrections
DOL	Department of Labor
DOT	Department of Transportation
DPH	Department of Public Health
DSS	Department of Social Services
OFA	Office of Fiscal Analysis
OHCA	Office of Health Care Access
OPM	Office of Policy and Management
SBE	State Board of Education

Published by: Legal Assistance Resource Center of Connecticut, Inc.
80 Jefferson St.
Hartford, CT. 06106
(860) 278-5688

Written by: Raphael L. Podolsky, Attorney at Law

© 2006 All rights reserved. Duplication without the express consent of the Legal Assistance Resource Center of Connecticut, Inc., is prohibited by law.