



Senate

General Assembly

File No. 611

January Session, 2025

Substitute Senate Bill No. 1450

Senate, April 9, 2025

The Committee on Public Health reported through SEN. ANWAR of the 3rd Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING RECRUITMENT AND RETENTION OF THE HEALTH CARE WORKFORCE.

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

- 1 Section 1. (NEW) (*Effective July 1, 2025*) (a) As used in this section:
- 2 (1) "Federally qualified health center" has the same meaning as
- 3 provided in Section 1905(l)(2)(B) of the Social Security Act, 42 USC
- 4 1396d(l)(2)(B), as amended from time to time;
- 5 (2) "Health care provider" means a health care provider licensed by
- 6 the Department of Public Health; and
- 7 (3) "Primary care" means the medical fields of family medicine,
- 8 general pediatrics, primary care, internal medicine, primary care
- 9 obstetrics or primary care gynecology, without regard to board
- 10 certification.
- 11 (b) The Department of Public Health shall establish, within available
- 12 appropriations, a health care provider loan reimbursement program.

13 The health care provider loan reimbursement program shall provide
14 loan reimbursement grants to health care providers who are employed
15 on a full-time basis as health care providers in the state.

16 (c) The Commissioner of Public Health shall (1) develop eligibility
17 requirements for recipients of such loan reimbursement grants, which
18 requirements may include, but need not be limited to, income
19 guidelines, (2) award not less than twenty per cent of such loan
20 reimbursement grants to persons employed full-time as primary care
21 providers, and (3) award not less than twenty per cent of such loan
22 reimbursement grants to persons employed full-time as health care
23 providers (A) in a rural community in the state, or (B) by a federally
24 qualified health center in the state. The commissioner shall consider
25 health care workforce shortage areas when developing such eligibility
26 requirements. A person who qualifies for a loan reimbursement grant
27 shall be reimbursed on an annual basis for qualifying student loan
28 payments in amounts determined by the commissioner. A health care
29 provider shall only be reimbursed for loan payments made while such
30 person is employed full-time in the state as a health care provider. Any
31 person may apply for a loan reimbursement grant to the Department of
32 Public Health at such time and in such manner as the commissioner
33 prescribes.

34 (d) The Department of Public Health may adopt regulations, in
35 accordance with the provisions of chapter 54 of the general statutes, to
36 implement the provisions of this section.

37 Sec. 2. (NEW) (*Effective from passage*) On and after October 1, 2026, no
38 state-administered loan reimbursement program offering loan
39 reimbursement grants to physicians, physician assistants or advanced
40 practice registered nurses employed in the state shall include as part of
41 the eligibility criteria for such program a requirement that a physician,
42 physician assistant or advanced practice registered nurse be employed
43 by a nonprofit employer to receive a loan reimbursement grant under
44 the program. Nothing in this section shall be construed to prohibit a
45 nonprofit employer from offering loan reimbursement grants to its

46 employees and requiring employment as a condition of receiving such
47 grants.

48 Sec. 3. (NEW) (*Effective from passage*) (a) As used in this section:

49 (1) "Nurse's aide" means a nurse's aide registered pursuant to chapter
50 378a of the general statutes; and

51 (2) "Emergency medical technician" means a person who is certified
52 to practice as an emergency medical technician under the provisions of
53 section 20-206ll or 20-206mm of the general statutes.

54 (b) Not later than January 1, 2026, the Department of Public Health,
55 in collaboration with a nonprofit organization providing education,
56 community and home-based services in the state, shall establish a
57 virtual education pilot program to provide home-based virtual
58 education to persons seeking certification as a nurse's aide or emergency
59 medical technician in the state. Such virtual education program shall
60 offer courses that satisfy the training and competency evaluation
61 requirements prescribed by the commissioner for (1) registration as a
62 nurse's aide, and (2) certification as an emergency medical technician.
63 The Commissioner of Public Health shall establish eligibility criteria for
64 such program and may solicit and accept private funds to implement
65 such pilot program.

66 (c) Not later than January 1, 2027, the Commissioner of Public Health
67 shall report, in accordance with the provisions of section 11-4a of the
68 general statutes, to the joint standing committee of the General
69 Assembly having cognizance of matters relating to public health,
70 regarding the outcome of such program.

71 (d) Nothing in this section shall be construed to eliminate the
72 requirements for nurse's aides and emergency medical technicians to
73 receive in-person, supervised practical training pursuant to 42 CFR
74 483.152, section 19-13-D8t(l)(1)(A) of the regulations of Connecticut state
75 agencies and subsection (d) of section 20-206mm of the general statutes,
76 respectively.

77 Sec. 4. Section 10-21q of the general statutes is repealed and the
78 following is substituted in lieu thereof (*Effective from passage*):

79 (a) The Commissioner of Education shall, in collaboration with the
80 Chief Workforce Officer, utilize the plan required of the Office of
81 Workforce Strategy pursuant to section 2 of special act 22-9 in (1) the
82 promotion of the health care professions as career options to students in
83 middle and high school, including, but not limited to, through career
84 day presentations regarding health care career opportunities in the
85 state, the development of partnerships with health care career education
86 programs in the state and the creation of counseling programs directed
87 to high school students to inform such students about, and recruit them
88 to, the health care professions, and (2) job shadowing and internship
89 experiences in health care fields for high school students.

90 (b) Not later than September 1, 2023, the Commissioner of Education
91 shall provide each local and regional board of education with the plan
92 described in subsection (a) of this section, and through the Governor's
93 Workforce Council Education Committee, support implementation of
94 such plan.

95 (c) Not later than January 1, 2026, the Commissioner of Education
96 shall amend the plan described in subsection (a) of this section to
97 include the specific promotion of the professions of radiologic
98 technology, nuclear medicine technology and respiratory care through
99 (1) career day presentations regarding career opportunities in such
100 health care professions, partnerships with education programs in
101 radiologic technology, nuclear medicine technology and respiratory
102 care in the state and the creation of counseling programs directed to
103 high school students to inform such students about, and recruit them to,
104 such health care professions, and (2) job shadowing and internship
105 experiences in such health care professions for high school students.

106 Sec. 5. (NEW) (*Effective July 1, 2025*) (a) Not later than January 1, 2026,
107 the Commissioner of Public Health shall establish, within available
108 appropriations, a grant program to recruit athletic trainers to work in
109 rural and underserved areas of the state. The grant program shall

110 provide a grant, in an amount determined by the commissioner, to each
 111 athletic trainer who (1) relocates to the state, (2) obtains licensure as an
 112 athletic trainer from the Department of Public Health, and (3) practices
 113 as an athletic trainer in a rural and underserved area of the state, for the
 114 costs associated with relocating to the state.

115 (b) The commissioner shall (1) prescribe forms and criteria for an
 116 athletic trainer to apply and qualify for grant funds under the grant
 117 program, and (2) require each athletic trainer who receives a grant to
 118 report to the commissioner on the use of the funds for the costs
 119 associated with relocating to the state.

120 (c) Not later than January 1, 2027, and annually thereafter, the
 121 commissioner shall report, in accordance with the provisions of section
 122 11-4a of the general statutes, to the joint standing committee of the
 123 General Assembly having cognizance of matters relating to public
 124 health regarding the impact of the grant program on recruiting athletic
 125 trainers to work in rural and underserved areas of the state.

This act shall take effect as follows and shall amend the following sections:

Section 1	<i>July 1, 2025</i>	New section
Sec. 2	<i>from passage</i>	New section
Sec. 3	<i>from passage</i>	New section
Sec. 4	<i>from passage</i>	10-21q
Sec. 5	<i>July 1, 2025</i>	New section

Statement of Legislative Commissioners:

In Section 1(c)(3), "at least" was changed to "not less than" for consistency. In Section 3(b), "virtual education program" was changed to "virtual education pilot program", for internal consistency. In Section (3)(d), "42 483.152" was changed to "42 CFR 438.152" for accuracy.

PH *Joint Favorable Subst.*

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 26 \$	FY 27 \$
Public Health, Dept.	GF - Cost	136,100	97,900
Education, Dept.	GF - Cost	20,000	None
Public Health, Dept.	GF - Revenue Gain	1,710	3,555
Public Health, Dept.	GF - Potential Cost	See Below	See Below
State Comptroller - Fringe Benefits ¹	GF - Cost	27,600	37,700

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill contains various provisions regarding the healthcare workforce, which result in the fiscal impacts described below.

Section 1 requires the Department of Public Health to create a program providing loan reimbursement grants to full-time licensed health care providers. Significant costs would be incurred to finance a substantive program, dependent upon the number of participants and the per participant grant amount. Should funding be made available for the grants, DPH would utilize its present resources and expertise to implement the reimbursement program and develop relevant regulations. The department currently operates a similar Student Loan

¹The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 40.71% of payroll in FY 26.

Repayment Program which is supported by federal funds.

Section 2 prohibits any state-administered loan reimbursement program for physicians, physician assistants or advanced practice registered nurses from mandating nonprofit employee status as a criterion for eligibility. This results in no fiscal impact. All student loan repayment programs currently operated by DPH do not include this condition.

Section 3 requires DPH to create a pilot program (in collaboration with a nonprofit organization) providing home-based virtual education for people seeking to become a nurse's aide or emergency medical technician (EMT). This results in a potential cost to the General Fund of \$60,000 in FY 26, \$4,800 in FY 27, and \$480 annually thereafter for the expertise of an Educational Consultant to assist in the development of the pilot program. While the bill authorizes the Commissioner to solicit private funds to support this effort, no such funding sources are identified currently.

DPH does not have the expertise to develop a virtual training program. If the nonprofit organization also lacks the required expertise, an Education Consultant would provide curriculum design as well as be responsible for developing the didactic and practicum training required for both professional classifications.² Additionally, after the biennium, the consultant would be required to provide an annual review of the EMT curriculum to ensure it remains compliant with the current standards of care.³

Section 4 results in a one-time cost to the Department of Education (SDE) of \$20,000 in FY 26. It requires SDE to promote specific health care professions through various educational programming. It is anticipated SDE will need to contract services for program development and implementation.

² The Education Consultant would be contracted for 1,000 hours in FY 26 and 80 hours in FY 27, at an estimated rate of \$60 per hour.

³ This review is estimated to take approximately 8 hours annually.

Section 5 creates a program providing relocation assistance grants to athletic trainers who relocate to and become licensed in Connecticut to work in rural or underserved areas. Administering this program results in a cost to DPH of \$76,100 in FY 26 and \$93,100 in FY 27 (and annually thereafter), with an estimated cost to the Office of the State Comptroller for associated fringe benefits of \$27,600 in FY 26 and \$37,700 in FY 27. FY 26 costs reflect an October 1 start date for all staff. Additionally, this section results in a projected revenue gain of \$1,900 in FY 26 and \$3,950 in FY 27. The cost of the relocation grants may be significant.

To establish and administer the new program, DPH requires: (1) a part-time (0.75 FTE) Health Program Assistant (HPA) 2 position with an annualized salary of \$47,700 (plus \$19,400 annualized fringe benefits), and (2) a part-time (0.5 FTE) Grants Management Specialist position with an annualized salary of \$45,000 (plus \$18,300 annualized fringe benefits). These positions are necessary to determine grant amounts, set application and eligibility criteria, create related forms, and track grant recipient fund usage reports. The HPA position will also help develop an annual report to the legislature as required by the bill.

Other expenses include a one-time total cost of \$8,400 in FY 26 for laptops and related hardware and ongoing costs of \$400 beginning in FY 27 for software and general office supplies.

Potentially significant costs related to paying relocation expenses of eligible grant recipients cannot be determined in advance. The cost is dependent on the number of recipients and the relocation expenses of each. Relocation expenses vary.

Estimated additional licensure revenue of \$1,710 in FY 26 and \$3,555 in FY 27 is expected, based on 9 applicants per year.⁴

The Out Years

⁴ The Athletic Trainers Task Force anticipates between 8 to 10 persons applying for the grant each year. Athletic trainer initial licensure fees are \$190 each, with annual licensure renewal fees of \$205 each year thereafter.

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

OLR Bill Analysis**sSB 1450*****AN ACT CONCERNING RECRUITMENT AND RETENTION OF THE HEALTH CARE WORKFORCE.*****SUMMARY**

This bill requires the Department of Public Health (DPH) to create, within available appropriations, a loan reimbursement program for health care providers, with some of the awards targeted to primary care providers and those employed in rural communities or at federally qualified health centers (FQHCs).

Starting October 1, 2026, the bill prohibits state-administered loan reimbursement programs for physicians, advanced practice registered nurses, or physician assistants from requiring, under their eligibility criteria, that the provider be employed by a nonprofit employer. The bill specifies that it does not prohibit nonprofits from offering loan reimbursement grants to their employees and requiring employment as a condition of grant eligibility (§ 2).

The bill requires DPH, in collaboration with a nonprofit organization, to create a pilot program providing home-based virtual education to people seeking certification as a nurse's aide or emergency medical technician (EMT). The bill specifies that it does not eliminate existing requirements for these people to receive in-person practical training.

It requires the education commissioner to add radiologic technology, nuclear medicine technology, and respiratory care to an existing plan on promoting health care career options to middle and high school students.

Lastly, the bill requires DPH, within available appropriations, to create a program giving grants to recruit athletic trainers from other

states to move to Connecticut to work in rural or underserved areas. The grants are for their relocation costs.

EFFECTIVE DATE: Upon passage, except the provisions on the DPH loan reimbursement program and athletic trainer grant program take effect July 1, 2025.

§ 1 — STUDENT LOAN REIMBURSEMENT GRANT PROGRAM

The bill requires DPH, within available appropriations, to create a program giving loan reimbursement grants to health care providers. The program is open to DPH-licensed providers employed full time in the state, and DPH must give awards annually, to reimburse recipients for qualifying student loan payments.

Under the bill, the DPH commissioner must set the (1) award amounts; (2) program's eligibility requirements, which may include income guidelines; and (3) application process. She must consider workforce shortage areas when developing the eligibility requirements.

DPH must award at least (1) 20% of grants to full-time primary care providers and (2) 20% of grants to providers employed full-time in rural communities or at FQHCs. For this purpose, primary care includes family medicine, general pediatrics, primary care, internal medicine, and primary care obstetrics or gynecology, regardless of board certification.

The bill allows DPH to adopt regulations implementing the program.

§ 3 — VIRTUAL EDUCATION PILOT PROGRAM

The bill requires DPH to create a pilot program providing home-based virtual education for people seeking to become a nurse's aide or EMT. DPH must do so by January 1, 2026, and in collaboration with a nonprofit organization providing education, community, and home-based services in the state.

Under the bill, the program must offer courses that meet DPH's training and competency evaluation requirements for nurse's aide

registration and EMT certification. The bill requires the commissioner to set the program's eligibility criteria and allows her to solicit and accept private funds to implement the program. By January 1, 2027, she must report to the Public Health Committee on the program's outcome.

The bill specifies that it does not eliminate specified existing requirements for nurse's aides and EMTs to receive in-person, supervised practical training. This includes requirements under (1) federal regulations on state approval of nurse's aide training programs, (2) state regulations on nursing homes employing nurse's aides, and (3) state law on EMT certification.

§ 4 — HEALTH CARE CAREER PROMOTION

Existing law requires the state's chief workforce officer, in consultation with various stakeholders, to develop a plan to work with high schools in the state to encourage students to pursue high-demand health care professions. The education commissioner, in collaboration with the chief workforce officer, must use this plan in (1) promoting health care professions as career options to middle and high school students and (2) health care job shadowing and internship experiences for high school students.

The bill requires the education commissioner, by January 1, 2026, to amend the plan to specifically include promoting the professions of radiologic technology, nuclear medicine technology, and respiratory care through related (1) career day presentations; (2) partnerships with in-state education programs; (3) counseling programs to inform high school students about, and recruit them for, these professions; and (4) job shadowing and internship experiences for high school students.

§ 5 — ATHLETIC TRAINER RELOCATION GRANT PROGRAM

The bill requires DPH, by January 1, 2026, and within available appropriations, to create a program giving relocation assistance grants to athletic trainers who relocate to Connecticut, get licensed here, and work in rural or underserved areas. The commissioner must determine the grant amounts and set the application and eligibility criteria and

related forms. She also must require grant recipients to report to her on how they used the funds.

Starting by January 1, 2027, the bill requires the commissioner to annually report to the Public Health Committee on the program's impact in recruiting athletic trainers to work in the state's rural and underserved areas.

BACKGROUND

Related Bills

sHB 6979, § 5 (File 116), favorably reported by the Public Health Committee, requires DPH, within available appropriations, to establish a student loan repayment program for primary care and behavioral health services providers.

sHB 6886 (File 458), favorably reported by the Higher Education and Employment Advancement Committee, requires the Office of Higher Education, within available appropriations, to establish a student loan reimbursement program for nurses.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 29 Nay 3 (03/21/2025)