



Senate

General Assembly

File No. 827

January Session, 2025

Substitute Senate Bill No. 1540

Senate, May 5, 2025

The Committee on Appropriations reported through SEN. OSTEN of the 19th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE PEDIATRIC HOSPICE WORKING GROUP.

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

1 Section 1. Section 29 of public act 24-19 is repealed and the following
2 is substituted in lieu thereof (*Effective from passage*):

3 (a) The chairpersons of the joint standing committee of the General
4 Assembly having cognizance of matters relating to public health shall
5 establish a working group to examine hospice services for pediatric
6 patients across the state. The working group shall include, but need not
7 be limited to, the following members:

8 (1) At least one representative of each pediatric hospice association in
9 the state;

10 (2) One representative of each organization licensed as a hospice by
11 the Department of Public Health pursuant to section 19a-122b of the
12 general statutes;

13 (3) At least one representative of an association of hospitals in the
14 state;

15 (4) One representative each of two children's hospitals in the state;

16 (5) One pediatric oncologist;

17 (6) One pediatric intensivist;

18 (7) The chairpersons and ranking members of the joint standing
19 committee of the General Assembly having cognizance of matters
20 relating to public health;

21 (8) The Commissioner of Public Health, or the commissioner's
22 designee; and

23 (9) The Commissioner of Social Services, or the commissioner's
24 designee.

25 (b) [The] (1) On and before March 1, 2025, the working group shall be
26 responsible for the following:

27 [(1)] (A) Reviewing existing hospice services for pediatric patients
28 across the state;

29 [(2)] (B) Making recommendations for appropriate levels of hospice
30 services for pediatric patients across the state; and

31 [(3)] (C) Evaluating payment and funding options for pediatric
32 hospice care.

33 (2) On and after March 1, 2025, and before July 1, 2026, the working
34 group shall be responsible for developing recommendations for the
35 establishment of a Children's Health, Advocacy, Management and
36 Palliative Care program and, within such program, a Pediatric Palliative
37 and Hospice Care Center of Excellence pilot program, as described in
38 the working group's report submitted pursuant to subdivision (1) of
39 subsection (f) of this section, including, but not limited to,
40 recommendations regarding (A) appropriations necessary to establish

41 such program and pilot program, (B) requirements for the operation of
42 the pilot program, including, but not limited to, staff and facility
43 requirements, (C) education and curriculum requirements for nurses
44 participating in the pilot program or providing pediatric palliative or
45 hospice care services, and (D) any licensing or certification requirements
46 necessary for the operation of the pilot program or expanding the
47 provision of pediatric palliative or hospice care services in the state.

48 (c) The cochairpersons of the joint standing committee of the General
49 Assembly having cognizance of matters relating to public health shall
50 schedule the first meeting of the working group, which shall be held not
51 later than [sixty days after the effective date of this section] July 20, 2024.

52 (d) The members of the working group shall elect two chairpersons
53 from among the members of the working group. Not later than thirty
54 days after the effective date of this section, the chairpersons of the
55 working group shall schedule a meeting of the working group to initiate
56 work on the responsibilities described in subdivision (2) of subsection
57 (b) of this section.

58 (e) The administrative staff of the joint standing committee of the
59 General Assembly having cognizance of matters relating to public
60 health shall serve as administrative staff of the working group.

61 (f) (1) Not later than March 1, 2025, the chairpersons of the working
62 group shall report, in accordance with the provisions of section 11-4a of
63 the general statutes, to the joint standing committee of the General
64 Assembly having cognizance of matters relating to public health
65 concerning the findings of the working group.

66 (2) Not later than March 1, 2026, the chairpersons of the working
67 group shall report, in accordance with the provisions of section 11-4a of
68 the general statutes, to the joint standing committee of the General
69 Assembly having cognizance of matters relating to public health
70 concerning the recommendations developed pursuant to subdivision (2)
71 of subsection (b) of this section.

Section 1	<i>from passage</i>	PA 24-19, Sec. 29
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APP *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:** None**Municipal Impact:** None**Explanation**

The bill, which expands the scope and responsibilities of the Working Group to Study Pediatric Hospice Services, results in no fiscal impact to the state. The working group has the necessary expertise and resources to carry out the required duties.

OLR Bill Analysis**sSB 1540*****AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE PEDIATRIC HOSPICE WORKING GROUP.*****SUMMARY**

This bill adds to the required duties of the working group (established under 2024 legislation) on pediatric hospice services within the state.

Currently, the working group is responsible for (1) reviewing existing pediatric hospice services in Connecticut, (2) making recommendations for appropriate levels of these services, and (3) evaluating pediatric hospice care payment and funding options. (The group submitted its report on these matters this March.)

The bill specifies that these current duties applied through March 1, 2025. From then through June 30, 2026, the bill requires the working group to also make recommendations to establish a (1) Children's Health, Advocacy, Management, and Palliative Care program and (2) within that program, a Pediatric Palliative and Hospice Care Center of Excellence pilot program, as described in the group's March 2025 report. The recommendations must include the following:

1. appropriations needed to establish the programs;
2. requirements for operating the pilot program, including staff and facility requirements;
3. education and curriculum requirements for nurses participating in the pilot program or providing pediatric palliative or hospice care services; and
4. any licensing or certification requirements needed to operate the

pilot program or expand pediatric palliative or hospice care services in Connecticut.

Within 30 days after the bill's passage, the working group's chairpersons must schedule a meeting to start working on the additional responsibilities described above.

Under the bill, the chairpersons must report on the working group's recommendations to the Public Health Committee by March 1, 2026.

EFFECTIVE DATE: Upon passage

COMMITTEE ACTION

Public Health Committee

Joint Favorable Change of Reference - APP
Yea 31 Nay 0 (03/27/2025)

Appropriations Committee

Joint Favorable Substitute
Yea 54 Nay 0 (04/24/2025)