

OFFICE OF FISCAL ANALYSIS

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sHB-7157

AN ACT CONCERNING VARIOUS REVISIONS TO THE PUBLIC HEALTH STATUTES.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 26 \$	FY 27 \$
Public Health, Dept.	GF - Cost	26,000	1,000
Public Health, Dept.	GF - Potential Revenue Gain	See Below	See Below
Office of the Chief Medical Examiner	GF - Revenue Loss	At least 5,750	At least 5,750

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill makes various revisions to the public health statutes, which result in fiscal impacts as described below.

Section 1 prohibits the Chief Medical Examiner's Office from charging immediate family members of a deceased minor for copies of the minor's investigation record. This results in an annual revenue loss to the office of at least \$5,750¹ beginning in FY 26, subject to the annual number of minor death investigations and related record requests. The bill does not define the next of kin included in immediate family or a specific age cutoff for a deceased minor, creating uncertainty for the scale of potential fiscal impacts.

Section 2 allows emergency medical services personnel to administer epinephrine using any device approved by the federal Food and Drug

¹ Assumes an estimated 115 investigations of deceased minors annually, with one record requested each at a current cost of \$50 per record request.

Administration, including nasal spray. This results in no fiscal impact to the state or municipalities.

Section 3 requires licensed physical therapists to annually complete at least two hours of education or training on ethics and jurisprudence as part of their existing continuing education requirement. This results in no fiscal impact to the state.

Section 4 makes it an unfair trade practice violation for health care providers to require certain forms of patient payment methods to be kept on file, resulting in no fiscal impact to the state. The Department of Consumer Protection enforces unfair trade practice violations and has the resources and expertise to meet the requirements of the bill.

Sections 5 - 17 and Section 24 update patient confidentiality requirements for psychologists and result in no fiscal impact.

Section 18 increases the maximum civil penalty that the Department of Public Health (DPH) may impose against individual health care providers by \$15,000 (from \$10,000 to \$25,000), which may result in a revenue gain to the General Fund beginning in FY 26. The extent of the revenue gain, if any, is dependent on the number of violations and the department's discretion regarding civil penalties.

Section 19 extends the date by which health care employers must annually report to DPH on workplace violence incidents and results in no fiscal impact.

Section 20 authorizes MRI and radiologic technicians to perform certain oxygen-related patient care activities in hospitals, which results in no fiscal impact to the state.

Section 21 changes the biannual reporting dates for a hospital's nurse staffing plan to be given to DPH, which results in no fiscal impact.

Section 22 allows a DPH-licensed hospital to provide inpatient or outpatient mental health services without having to obtain a license from the Department of Children and Families (DCF). A potential

workload reduction will result for DCF to the extent that hospitals operating outpatient psychiatric clinics for children or extended day treatment facilities choose to not renew or pursue DCF-licensure, but no savings are anticipated.²

Section 23 requires DPH to establish a process to request a short-form death certificate that does not include the decedent's cause of death, which results in a General Fund cost of \$26,000 in FY 26 and \$1,000 in FY 27 (and annually thereafter). A one-time cost of \$25,000 would be necessary to develop and modify the Electronic Death Registry System. Additionally, an ongoing annual cost of approximately \$1,000 is needed to print new short-form death certificates for deaths that occurred prior to implementation of the electronic registry.

The Out Years

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

² Current DCF licensees include six that are affiliated with hospitals.