

Public Health Committee JOINT FAVORABLE REPORT

Bill No.: SB-1394

AN ACT CONCERNING THE PROVISION OF HEALTH CARE SERVICES TO

Title: INMATES IN CORRECTIONAL INSTITUTIONS.

Vote Date: 3/5/2025

Vote Action: Joint Favorable Substitute

PH Date: 3/3/2025

File No.:

Disclaimer: *The following JOINT FAVORABLE Report is prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose.*

SPONSORS OF BILL:

The Public Health Committee.

REASONS FOR BILL:

Beginning on January 1, 2026, this bill requires the following:

- The Commissioner of the Department of Public Health (DPH) to evaluate and report annually to the Public Health Committee on the health care services provided to inmates in Connecticut's correctional institutions.
- Requires the Correction Ombudsman to issue reports on the health care services provided to inmates including the number of personnel needed to deliver services, as well as to inform the inmates and their families regarding these matters.
- Creates a task force to study issues regarding recruitment and retention of health care personnel within the Department of Correction (DOC) and report to the Public Health Committee.

Finally, this bill requires the DOC to report to the Public Health Committee its policies on the following:

- The number of health care and mental health services provided to inmates.
- Any communication with outside providers regarding an inmate's medical history including obtaining medical records.
- The ability of the inmate's primary care provider to obtain a former inmate's medical history and records after the inmate's discharge.

The substitute language adds the Commissioner of the Department of Mental Health and Addiction Services (DMHAS) to the task force.

RESPONSE FROM ADMINISTRATION/AGENCY:

Manisha Juthani, MD, Commissioner of the CT Department of Public Health (DPH):

Commissioner Juthani explained the challenges faced by the Department regarding continuity and coordination in providing health care in this highly specialized area further complicated by incarceration. DPH lacks the expertise to make an evaluation from a corrections perspective as DPH currently provides no oversight of such facilities. In addition, such evaluations would require the Department to hire additional personnel; costs that are not included in the Governor's proposed budget. Finally, DPH is aware of two accrediting bodies that specialize in correctional health care that the Committee may want to consult with regarding best practices and protecting patient well-being in these facilities:

- The National Commission on Correctional Health Care (NCCHC)
- The American Correctional Association

Martin Looney, President Pro Tempore, CT General Assembly (CGA):

Senator Looney believes that the inmates are serving their prison sentences for their actions. Inadequate medical care is cruel and unusual punishment which is not part of their sentences. Inadequate care, long wait times and insufficient staffing is unacceptable.

DeVaughn Ward, Interim Correction Ombudsman:

DPH routinely inspects medical facilities across the state to ensure compliance with staffing and equipment. Extending this oversight to DOC's facilities would have minimal financial impact and would improve health and safety outcomes in these facilities. The Ombudsman also included the following recommendations to enhance the bill:

- Include mental health services.
- Remove the term "correctional perspective" from line 5 as DPH lacks subject matter in this area.
- The focus of the bill should include infectious disease, facility inspections and drinking water safety.
- Finally, ensure sufficient staffing and funding of the Office of the Ombudsman to fulfill its responsibilities as stated in section 2 of the bill by providing adequate resources not included in the Governor's budget.

NATURE AND SOURCES OF SUPPORT:

Gretchen Raffa, Chief Policy and Advocacy Officer, Planned Parenthood of Southern New England:

Ms. Raffa points out that most incarcerated women are parents and are of reproductive age which has important implications for their health care needs. Access to quality sexual and reproductive health care should be a guaranteed right for everyone including those who are under DOC control. Planned Parenthood strongly supports measures that improve access to quality care for all. This is an urgent matter of reproductive and racial justice as the number of incarcerated women, particularly women of color, continues to increase across the country.

Connecticut Citizens Action Group, CCAG:

People who are incarcerated need responsive and quality health care and our correctional system needs a comprehensive assessment to ensure we are providing it.

Kathy Flaherty, Executive Director, CT Legal Rights Project, Inc.:

This bill is aimed at improving health care services for incarcerated individuals. While we support this bill, we recommend three additions to the language:

- The Committee explicitly incorporate a provision to include mental health services.
- Add the Commissioner of the Department of Mental Health and Addiction Services (DMHAS) to the proposed task force.
- Clarify " best practices" by referencing standards from a nationally accredited organization such as the National Commission on Correctional Health Care (NCCHC).

Christina Damiana, Public Policy Manger, Mental Health Connecticut:

Ms. Damiana believes that if we are serious about fixing this broken system, the bill as written does not go far enough. To do so, she recommends the following be considered:

- Mental health and substance abuse are fundamental to the well-being of this population.
- Any effort to correct the system without input from DMHAS is missing a crucial perspective.
- The committee should add a mandate to require the use of nationally recognized accreditation standards such as those from the National Commission on Correctional Health Care (NCCHC).

The following submitted testimony requesting similar additions to the bill as expressed above in Ms. Flaherty's and Ms. Damiana's testimonies:

- Thomas Burr, National Alliance on Mental Illness (NAMI).
- 22 Connecticut residents from across the state.

NATURE AND SOURCES OF OPPOSITION:

None expressed.

Reported by: Kathleen Panazza

Date: March 7, 2025