



General Assembly

Substitute Bill No. 7109

January Session, 2025



***AN ACT CONCERNING IMPLEMENTING CERTAIN
RECOMMENDATIONS OF THE TRANSFORMING CHILDREN'S
BEHAVIORAL HEALTH POLICY AND PLANNING COMMITTEE AND
ABUSE INVESTIGATIONS INVOLVING BEHAVIORAL ANALYSTS.***

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

- 1 Section 1. (*Effective July 1, 2025*) (a) As used in this section, "Certified
2 Community Behavioral Health Clinics Planning Grant" means a grant
3 program funded by the federal Substance Abuse and Mental Health
4 Services Administration to support state-certified behavioral health
5 clinics.
- 6 (b) The Commissioner of Social Services, in consultation with the
7 Commissioners of Mental Health and Addiction Services and Children
8 and Families, shall use moneys from the Certified Community
9 Behavioral Health Clinics Planning Grant to support development of:
10 (1) Reimbursement for acuity-based care coordination service to
11 improve behavioral outcomes for children, (2) a value-based payment
12 model that provides financial incentives to providers when outcomes
13 improve for children in their care and holds such providers accountable
14 for poor outcomes, and (3) a system to help providers and clients better
15 navigate behavioral health care resources and requirements.
- 16 (c) Not later than November 1, 2025, the Commissioner of Social

17 Services shall file a report, in accordance with the provisions of section
18 11-4a of the general statutes, with the joint standing committees of the
19 General Assembly having cognizance of matters relating to children,
20 human services and public health on the expenditure of planning grant
21 funds and any improvement to behavioral outcomes attributable to the
22 expenditure of grant funds pursuant to subsection (b) of this section.

23 Sec. 2. (NEW) (*Effective July 1, 2025*) (a) As used in this section,
24 "Intensive In-Home Child and Adolescent Psychiatric Services", or
25 "IICAPS", means in-home psychiatric treatment administered by the
26 Yale Child Study Center at the Yale School of Medicine for families with
27 children or adolescents who have serious emotional disturbances, and
28 are at risk for hospitalization.

29 (b) The Commissioner of Social Services shall consult with the Yale
30 Child Study Center to review IICAPS and other evidence-based
31 alternatives that focus on delivering positive outcomes for children with
32 behavioral health issues in a sustainable manner while considering the
33 needs and time demands on children and families enrolled in the
34 center's IICAPS program. Not later than October 1, 2025, the
35 commissioner shall report, in accordance with the provisions of section
36 11-4a of the general statutes, the results of the review to the
37 Transforming Children's Behavioral Health Policy and Planning
38 Committee established pursuant to section 2-137 of the general statutes.
39 The report shall include recommendations concerning IICAPS models
40 that may be used to deliver Medicaid-funded behavioral health care in
41 the state.

42 (c) The Transforming Children's Behavioral Health Policy and
43 Planning Committee established pursuant to section 2-137 of the general
44 statutes, within available appropriations, may contract with the Yale
45 Child Study Center to determine what additional federal funding and
46 reimbursements may be available for IICAPS model development and
47 to conduct a randomized trial of the Yale Child Study Center model to
48 determine whether it may qualify federally as an evidence-based
49 treatment program.

50 Sec. 3. Subdivision (4) of subsection (a) of section 38a-514b of the
51 general statutes is repealed and the following is substituted in lieu
52 thereof (*Effective January 1, 2026*):

53 (4) "Behavioral therapy" means any interactive behavioral therapies
54 derived from evidence-based research and consistent with the services
55 and interventions designated by the Commissioner of Social Services
56 pursuant to subsection (e) of section 17a-215c, including, but not limited
57 to, applied behavior analysis, cognitive behavioral therapy, or other
58 therapies supported by empirical evidence of the effective treatment of
59 individuals diagnosed with autism spectrum disorder, that are: (A)
60 Provided to [children less than twenty-one] individuals under twenty-
61 six years of age; and (B) provided or supervised by (i) a licensed
62 behavior analyst, (ii) a licensed physician, or (iii) a licensed
63 psychologist. For the purposes of this subdivision, behavioral therapy is
64 "supervised by" such licensed behavior analyst, licensed physician or
65 licensed psychologist when such supervision entails at least one hour of
66 face-to-face supervision of the autism spectrum disorder services
67 provider by such licensed behavior analyst, licensed physician or
68 licensed psychologist for each ten hours of behavioral therapy provided
69 by the supervised provider.

70 Sec. 4. Subdivision (4) of subsection (a) of section 38a-488b of the
71 general statutes is repealed and the following is substituted in lieu
72 thereof (*Effective January 1, 2026*):

73 (4) "Behavioral therapy" means any interactive behavioral therapies
74 derived from evidence-based research and consistent with the services
75 and interventions designated by the Commissioner of Social Services
76 pursuant to subsection (e) of section 17a-215c, including, but not limited
77 to, applied behavior analysis, cognitive behavioral therapy, or other
78 therapies supported by empirical evidence of the effective treatment of
79 individuals diagnosed with autism spectrum disorder, that are: (A)
80 Provided to [children less than twenty-one] individuals under twenty-
81 six years of age; and (B) provided or supervised by (i) a licensed
82 behavior analyst, (ii) a licensed physician, or (iii) a licensed

83 psychologist. For the purposes of this subdivision, behavioral therapy is
84 "supervised by" such licensed behavior analyst, licensed physician or
85 licensed psychologist when such supervision entails at least one hour of
86 face-to-face supervision of the autism spectrum disorder services
87 provider by such licensed behavior analyst, licensed physician or
88 licensed psychologist for each ten hours of behavioral therapy provided
89 by the supervised provider.

90 Sec. 5. (*Effective July 1, 2025*) (a) As used in this section, "urgent crisis
91 center" has the same meaning as provided in section 19a-179f of the
92 general statutes. The Commissioner of Health Strategy, in consultation
93 with the Insurance Commissioner and the Commissioner of Children
94 and Families, shall review private health insurance coverage for
95 treatment of children at urgent crisis centers.

96 (b) Not later than October 1, 2025, the Commissioner of Health
97 Strategy shall file a report, in accordance with the provisions of section
98 11-4a of the general statutes, with the Transforming Children's
99 Behavioral Health Policy and Planning Committee established pursuant
100 to section 2-137 of the general statutes. The report shall include the
101 commissioner's analysis of claims data concerning private health
102 insurance coverage of urgent crisis center services and
103 recommendations to improve affordable access to such services.

104 Sec. 6. Subsection (b) of section 17a-101 of the general statutes is
105 repealed and the following is substituted in lieu thereof (*Effective October*
106 *1, 2025*):

107 (b) The following persons shall be mandated reporters: (1) Any
108 physician or surgeon licensed under the provisions of chapter 370, (2)
109 any resident physician or intern in any hospital in this state, whether or
110 not so licensed, (3) any registered nurse, (4) any licensed practical nurse,
111 (5) any medical examiner, (6) any dentist, (7) any dental hygienist, (8)
112 any psychologist, (9) any school employee, as defined in section 53a-65,
113 (10) any social worker, (11) any person who holds or is issued a coaching
114 permit by the State Board of Education, is a coach of intramural or

115 interscholastic athletics and is eighteen years of age or older, (12) any
116 individual who is employed as a coach or director of youth athletics and
117 is eighteen years of age or older, (13) any individual who is employed
118 as a coach or director of a private youth sports organization, league or
119 team and is eighteen years of age or older, (14) any paid administrator,
120 faculty, staff, athletic director, athletic coach or athletic trainer employed
121 by a public or private institution of higher education who is eighteen
122 years of age or older, excluding student employees, (15) any police
123 officer, (16) any juvenile or adult probation officer, (17) any juvenile or
124 adult parole officer, (18) any member of the clergy, (19) any pharmacist,
125 (20) any physical therapist, (21) any optometrist, (22) any chiropractor,
126 (23) any podiatrist, (24) any mental health professional, (25) any
127 physician assistant, (26) any person who is a licensed or certified
128 emergency medical services provider, (27) any person who is a licensed
129 or certified alcohol and drug counselor, (28) any person who is a
130 licensed marital and family therapist, (29) any person who is a sexual
131 assault counselor or a domestic violence counselor, as defined in section
132 52-146k, (30) any person who is a licensed professional counselor, (31)
133 any person who is a licensed foster parent, (32) any person paid to care
134 for a child in any public or private facility, child care center, group child
135 care home or family child care home licensed by the state, (33) any
136 employee of the Department of Children and Families or any person
137 who, in the performance of such person's duties, has regular contact
138 with and provides services to or on behalf of children pursuant to a
139 contract with or credential issued by the Department of Children and
140 Families, (34) any employee of the Office of Early Childhood who is
141 responsible for the licensing of child care centers, group child care
142 homes, family child care homes or youth camps, (35) any paid youth
143 camp director, assistant director and staff member who is twenty-one
144 years of age or older, (36) the Child Advocate and any employee of the
145 Office of the Child Advocate, (37) any person who is (A) a licensed
146 behavior analyst, or (B) a person working in a professional capacity with
147 children under the clinical supervision of a licensed behavior analyst,
148 (38) any family relations counselor, family relations counselor trainee or
149 family services supervisor employed by the Judicial Department, (39)

150 any victim services advocate employed by the Office of Victim Services
151 within the Judicial Department, (40) any employee of a juvenile justice
152 program operated by or pursuant to a contract with the Court Support
153 Services Division of the Judicial Department, and (41) any person
154 employed, including any person employed under contract and any
155 independent ombudsperson, to work at a juvenile detention facility or
156 any other facility where children under eighteen years of age are
157 detained and who has direct contact with children as part of such
158 employment.

159 Sec. 7. (NEW) (*Effective October 1, 2025*) (a) Notwithstanding any
160 provision of the general statutes, not later than five business days after
161 the Commissioner of Children and Families concludes an investigation,
162 conducted pursuant to section 17a-101g of the general statutes, of a
163 report of child abuse or neglect in which (1) the alleged perpetrator of
164 such abuse or neglect is a behavior analyst licensed pursuant to chapter
165 382a of the general statutes who works with children, or (2) the child is
166 an alleged victim of a crime described in section 53a-70, 53a-70a, 53a-71,
167 53a-72a, 53a-72b or 53a-73a of the general statutes, and the alleged
168 perpetrator of such crime is a behavior analyst licensed pursuant to
169 chapter 382a of the general statutes who works with children, the
170 Commissioner of Children and Families shall notify the Department of
171 Public Health of the results of such investigation and provide any
172 records relating to such investigation to the Department of Public
173 Health, regardless of whether such records were created by the
174 Department of Children and Families. The Commissioner of Children
175 and Families shall provide such notification and records regardless of
176 whether the child was a patient of a behavior analyst. Upon receiving
177 such notification and any such records, the Department of Public Health
178 shall treat such notification as a complaint, conduct an investigation of
179 the behavior analyst and take any disciplinary action, in accordance
180 with sections 19a-17 and 20-185m of the general statutes, that the
181 Commissioner of Public Health deems appropriate. If, after such
182 proceedings, the Commissioner of Public Health takes disciplinary
183 action against the behavior analyst, or if the disciplinary action is

184 resolved through voluntary surrender by a behavior analyst of a license
185 or an agreement not to renew or reinstate a license, the Commissioner
186 of Public Health shall notify the employer of the behavior analyst, if
187 known, if such behavior analyst was employed as a behavior analyst at
188 the time of the complaint.

189 (b) If a behavior analyst licensed pursuant to chapter 382a of the
190 general statutes is convicted of (1) a crime involving an act of child abuse
191 or neglect, as described in section 46b-120, 53-21, 53a-71 or 53a-73a of
192 the general statutes against any person, or (2) a crime, as described in
193 section 53a-70, 53a-70a, 53a-72a or 53a-72b of the general statutes,
194 against a victim, as described in subdivision (2) of subsection (a) of
195 section 17a-101a of the general statutes, the state's attorney of the
196 judicial district where such conviction occurred shall notify the
197 Commissioner of Public Health, in writing, of such conviction. Not later
198 than seventy-two hours after the receipt of such notification, the
199 Commissioner of Public Health shall suspend the behavior analyst's
200 license pending completion of proceedings and, if such behavior analyst
201 is currently employed as a behavior analyst at the time of the complaint,
202 notify the behavior analyst's employer, if known, of such suspension
203 and proceedings.

204 Sec. 8. (NEW) (*Effective October 1, 2025*) Each employer of a behavior
205 analyst, licensed pursuant to chapter 382a of the general statutes, shall
206 provide to each patient of a behavior analyst, or, if the patient is under
207 eighteen years of age, such patient's parents or legal guardians, (1) the
208 behavior analyst's license number, and (2) instructions regarding the
209 manner in which to report complaints regarding the conduct of the
210 behavior analyst to the Department of Public Health.

211 Sec. 9. (*Effective from passage*) (a) There shall be an advisory committee
212 to advise the Council on Medical Assistance Program Oversight,
213 established pursuant to section 17b-28 of the general statutes, on a
214 statutory and regulatory framework for the delivery of applied behavior
215 analysis services to children by all providers, including, but not limited
216 to, providers enrolled in Medicaid.

217 (b) The advisory committee's review shall include, but need not be
218 limited to: (1) Current legislative and regulatory oversight of such
219 services, (2) potential statutory and regulatory frameworks for oversight
220 of such services, including, but not limited to, the need for any
221 regulatory structure to include expertise in the provision of child care
222 and applied behavior analysis services to children with autism spectrum
223 disorder, (3) whether employees of any entity delivering child care or
224 applied behavior analysis services to children should be mandated
225 reporters of suspected abuse or neglect of such children, (4) whether
226 employees of applied behavior analysis services providers should
227 submit to comprehensive background checks, and (5) a rate-setting
228 structure to ensure adequate Medicaid reimbursement rates to ensure
229 reasonably prompt access to such services for children and families.

230 (c) The advisory committee shall consist of the following members:

231 (1) The chairpersons and ranking members of the joint standing
232 committees of the General Assembly having cognizance of matters
233 relating to public health, human services and children, or their
234 designees;

235 (2) The Commissioner of Early Childhood, or the commissioner's
236 designee;

237 (3) The Commissioner of Public Health, or the commissioner's
238 designee;

239 (4) The Commissioner of Social Services, or the commissioner's
240 designee;

241 (5) The Commissioner of Children and Families, or the
242 commissioner's designee;

243 (6) The Commissioner of Developmental Services, or the
244 commissioner's designee;

245 (7) The Commissioner of Education, or the commissioner's designee;

- 246 (8) The Child Advocate, or the Child Advocate's designee;
- 247 (9) The Secretary of the Office of Policy and Management, or the
248 secretary's designee;
- 249 (10) A representative of the Autism Spectrum Disorder Advisory
250 Council, selected by the cochairpersons of the council;
- 251 (11) One appointed by the House chairperson of the joint standing
252 committee of the General Assembly having cognizance of matters
253 relating to public health, who shall be a representative of an entity that
254 provides applied behavior analysis services to children;
- 255 (12) One appointed by the Senate chairperson of the joint standing
256 committee of the General Assembly having cognizance of matters
257 relating to public health, who shall be a parent of a child with autism
258 spectrum disorder;
- 259 (13) One appointed by the Senate chairperson of the joint standing
260 committee of the General Assembly having cognizance of matters
261 relating to human services, who shall be a representative of an
262 organization dedicated to advocacy for children with autism spectrum
263 disorder;
- 264 (14) One appointed by the House chairperson of the joint standing
265 committee of the General Assembly having cognizance of matters
266 relating to human services, who shall be a parent of a child with autism
267 spectrum disorder;
- 268 (15) One appointed by the House chairperson of the joint standing
269 committee of the General Assembly having cognizance of matters
270 relating to children, who shall be a board-certified behavior analyst who
271 provides services to children; and
- 272 (16) One appointed by the Senate chairperson of the joint standing
273 committee of the General Assembly having cognizance of matters
274 relating to children, who shall be a psychiatrist with expertise in the
275 delivery of services to children with autism spectrum disorder.

276 (d) Any member of the advisory committee appointed under
277 subdivision (11), (12), (13), (14), (15) or (16) of subsection (c) of this
278 section may be a member of the General Assembly.

279 (e) All initial appointments to the advisory committee shall be made
280 not later than thirty days after the effective date of this section. Any
281 vacancy shall be filled by the appointing authority.

282 (f) The advisory committee shall hold its first meeting within sixty
283 days of the effective date of this section and choose a chairperson from
284 among its members. The Joint Committee on Legislative Management
285 shall provide administrative support to such chairperson and advisory
286 committee.

287 (g) Not later than November 1, 2025, the advisory committee shall
288 submit a report on its review and recommendations, in accordance with
289 the provisions of section 11-4a of the general statutes, to the Council on
290 Medical Assistance Program Oversight, the Governor and the joint
291 standing committees of the General Assembly having cognizance of
292 matters relating to children, human services and public health. The
293 advisory committee shall terminate on the date that it submits such
294 report or November 1, 2025, whichever is later.

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>July 1, 2025</i>	New section
Sec. 3	<i>January 1, 2026</i>	38a-514b(a)(4)
Sec. 4	<i>January 1, 2026</i>	38a-488b(a)(4)
Sec. 5	<i>July 1, 2025</i>	New section
Sec. 6	<i>October 1, 2025</i>	17a-101(b)
Sec. 7	<i>October 1, 2025</i>	New section
Sec. 8	<i>October 1, 2025</i>	New section
Sec. 9	<i>from passage</i>	New section

APP Joint Favorable Subst.