

General Assembly

January Session, 2025



AN ACT CONCERNING HEALTH BENEFITS FOR STATE MARSHALS.

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

1 Section 1. Subsections (a) to (l), inclusive, of section 5-259 of the 2 general statutes are repealed and the following is substituted in lieu 3 thereof (*Effective October 1*, 2025):

4 (a) The Comptroller, with the approval of the Attorney General and 5 of the Insurance Commissioner, shall arrange and procure a group 6 hospitalization and medical and surgical insurance plan or plans for (1) 7 state employees, (2) members of the General Assembly who elect 8 coverage under such plan or plans, (3) participants in an alternate 9 retirement program who meet the service requirements of section 5-162 10 or subsection (a) of section 5-166, (4) anyone receiving benefits under 11 section 5-144 or from any state-sponsored retirement system, except the 12 teachers' retirement system and the municipal employees retirement 13 system, (5) judges of probate and Probate Court employees, (6) the 14 surviving spouse, and any dependent children of a state police officer, a 15 member of an organized local police department, a firefighter or a 16 constable who performs criminal law enforcement duties who dies 17 before, on or after June 26, 2003, as the result of injuries received while 18 acting within the scope of such officer's or firefighter's or constable's 19 employment and not as the result of illness or natural causes, and whose 20 surviving spouse and dependent children are not otherwise eligible for

a group hospitalization and medical and surgical insurance plan. 21 22 Coverage for a dependent child pursuant to this subdivision shall 23 terminate no earlier than the end of the calendar year during whichever 24 of the following occurs first, the date on which the child: Becomes 25 covered under a group health plan through the dependent's own 26 employment; or attains the age of twenty-six, (7) employees of the 27 Capital Region Development Authority established by section 32-601, 28 [and] (8) the surviving spouse and dependent children of any employee 29 of a municipality who dies on or after October 1, 2000, as the result of 30 injuries received while acting within the scope of such employee's 31 employment and not as the result of illness or natural causes, and whose 32 surviving spouse and dependent children are not otherwise eligible for 33 a group hospitalization and medical and surgical insurance plan, and 34 (9) state marshals. For purposes of [this] subdivision (8) of this 35 subsection, "employee" means any regular employee or elective officer 36 receiving pay from a municipality, "municipality" means any town, city, 37 borough, school district, taxing district, fire district, district department of health, probate district, housing authority, regional workforce 38 39 development board established under section 31-3k, flood commission 40 or authority established by special act or regional council of 41 governments. For purposes of subdivision (6) of this subsection, 42 "firefighter" means any person who is regularly employed and paid by 43 any municipality for the purpose of performing firefighting duties for a 44 municipality on average of not less than thirty-five hours per week. The 45 minimum benefits to be provided by such plan or plans shall be 46 substantially equal in value to the benefits that each such employee or 47 member of the General Assembly could secure in such plan or plans on 48 an individual basis on the preceding first day of July. The state shall pay 49 for each such employee and each member of the General Assembly 50 covered by such plan or plans the portion of the premium charged for 51 such member's or employee's individual coverage and seventy per cent 52 of the additional cost of the form of coverage and such amount shall be 53 credited to the total premiums owed by such employee or member of 54 the General Assembly for the form of such member's or employee's 55 coverage under such plan or plans. On and after January 1, 1989, the

state shall pay for anyone receiving benefits from any such state-56 57 sponsored retirement system one hundred per cent of the portion of the 58 premium charged for such member's or employee's individual coverage 59 and one hundred per cent of any additional cost for the form of 60 coverage. The balance of any premiums payable by an individual 61 employee or by a member of the General Assembly for the form of 62 coverage shall be deducted from the payroll by the State Comptroller. 63 The total premiums payable shall be remitted by the Comptroller to the insurance company or companies or nonprofit organization or 64 65 organizations providing the coverage. The amount of the state's 66 contribution per employee for a health maintenance organization option 67 shall be equal, in terms of dollars and cents, to the largest amount of the 68 contribution per employee paid for any other option that is available to 69 all eligible state employees included in the health benefits plan, but shall 70 not be required to exceed the amount of the health maintenance 71 organization premium.

72 (b) The insurance coverage procured under subsection (a) of this 73 section for active state employees, employees of the Connecticut 74 Institute for Municipal Studies, anyone receiving benefits from any such 75 state-sponsored retirement system, [and] members of the General 76 Assembly <u>and state marshals</u>, who are over sixty-five years of age, may 77 be modified to reflect benefits available to such employees or members 78 pursuant to Social Security and medical benefits programs administered 79 by the federal government, provided any payments required to secure 80 such benefits administered by the federal government shall be paid by 81 the Comptroller either directly to the employee or members or to the 82 agency of the federal government authorized to collect such payments.

(c) On October 1, 1972, the Comptroller shall continue to afford
payroll deduction services for employees participating in existing
authorized plans covering state employees until such time as the
employee elects in writing to be covered by the plan authorized by
subsection (a) of this section.

88 (d) Notwithstanding the provisions of subsection (a) of this section,

89 the state shall pay for a member of any such state-sponsored retirement 90 system, or a participant in an alternate retirement program who meets 91 the service requirements of section 5-162 or subsection (a) of section 5-92 166, and who begins receiving benefits from such system or program on 93 or after November 1, 1989, eighty per cent of the portion of the premium 94 charged for his individual coverage and eighty per cent of any 95 additional cost for his form of coverage. Upon the death of any such 96 member, any surviving spouse of such member who begins receiving 97 benefits from such system shall be eligible for coverage under this 98 section and the state shall pay for any such spouse eighty per cent of the 99 portion of the premium charged for his individual coverage and eighty 100 per cent of any additional cost for his form of coverage.

101 (e) Notwithstanding the provisions of subsection (a) of this section, 102 vending stand operators eligible for membership in the state employees 103 retirement system pursuant to section 5-175a shall be eligible for 104 coverage under the group hospitalization and medical and surgical 105 insurance plans procured under this section, provided the cost for such 106 operators' insurance coverage shall be paid by the Department of Aging 107 and Disability Services from vending machine income pursuant to 108 section 17a-818.

109 (f) The Comptroller, with the approval of the Attorney General and 110 of the Insurance Commissioner, shall arrange and procure a group 111 hospitalization and medical and surgical insurance plan or plans for any 112 person who adopts a child from the state foster care system, any person 113 who has been a foster parent for the Department of Children and 114 Families for six months or more, and any dependent of such adoptive 115 parent or foster parent who elects coverage under such plan or plans. 116 The Comptroller may also arrange for inclusion of such person and any 117 such dependent in an existing group hospitalization and medical and 118 surgical insurance plan offered by the state. Any adoptive parent or 119 foster parent and any dependent who elects coverage shall pay one 120 hundred per cent of the premium charged for such coverage directly to 121 the insurer, provided such adoptive parent or foster parent and all such 122 dependents shall be included in such group hospitalization and medical

123 and surgical insurance plan. A person and his dependents electing 124 coverage pursuant to this subsection shall be eligible for such coverage 125 until no longer an adoptive parent or a foster parent. An adoptive parent 126 shall be eligible for such coverage until the coverage anniversary date 127 on or after whichever of the following occurs first, the date on which the 128 child: Becomes covered under a group health plan through the 129 dependent's own employment; or attains the age of twenty-six. As used 130 in this section "dependent" means a spouse or natural or adopted child 131 if such child is wholly or partially dependent for support upon the 132 adoptive parent or foster parent.

133 (g) Notwithstanding the provisions of subsection (a) of this section, 134 the Probate Court Administration Fund established in accordance with 135 section 45a-82, shall pay for each probate judge and each probate court 136 employee not more than one hundred per cent of the portion of the 137 premium charged for the judge's or employee's individual coverage and 138 not more than seventy per cent of any additional cost for the judge's or 139 employee's form of coverage. The remainder of the premium for such 140 coverage shall be paid by the probate judge or probate court employee 141 to the State Treasurer. Payment shall be credited by the State Treasurer 142 to the fund established by section 45a-82. The total premiums payable 143 shall be remitted by the Probate Court Administrator directly to the 144 insurance company or companies or nonprofit organization or 145 organizations providing the coverage. The Probate Court Administrator 146 shall issue regulations governing group hospitalization and medical 147 and surgical insurance pursuant to subsection (b) of section 45a-77.

148 (h) For the purpose of subsection (g) of this section, "probate judge" 149 or "judge" means a duly elected probate judge who works in such 150 judge's capacity as a probate judge at least twenty hours per week, on 151 average, on a quarterly basis and certifies to that fact on forms provided 152 by and filed with the Probate Court Administrator, on or before the 153 fifteenth day of April, July, October and January, for the preceding 154 calendar quarter; and "probate court employee" or "employee" means a 155 person employed by a probate court for at least twenty hours per week.

(i) The Comptroller may provide for coverage of employees of 156 157 municipalities, nonprofit corporations, community action agencies and 158 small employers and individuals eligible for a health coverage tax credit, retired members or members of an association for personal care 159 160 assistants under the plan or plans procured under subsection (a) of this 161 section, provided: (1) Participation by each municipality, nonprofit 162 corporation, community action agency, small employer, eligible 163 individual, retired member or association for personal care assistants 164 shall be on a voluntary basis; (2) where an employee organization 165 represents employees of a municipality, nonprofit corporation, 166 community action agency or small employer, participation in a plan or 167 plans to be procured under subsection (a) of this section shall be by mutual agreement of the municipality, nonprofit corporation, 168 community action agency or small employer and the employee 169 170 organization only and neither party may submit the issue of 171 participation to binding arbitration except by mutual agreement if such binding arbitration is available; (3) no group of employees shall be 172 173 refused entry into the plan by reason of past or future health care costs 174 or claim experience; (4) rates paid by the state for its employees under 175 subsection (a) of this section are not adversely affected by this 176 subsection; (5) administrative costs to the plan or plans provided under 177 this subsection shall not be paid by the state; (6) participation in the plan 178 or plans in an amount determined by the state shall be for the duration 179 of the period of the plan or plans, or for such other period as mutually 180 agreed by the municipality, nonprofit corporation, community action 181 agency, small employer, retired member or association for personal care 182 assistants and the Comptroller; and (7) nothing in this section or section 183 12-202a, 38a-551 or 38a-556 shall be construed as requiring a 184 participating insurer or health care center to issue individual policies to 185 individuals eligible for a health coverage tax credit. The coverage 186 provided under this section may be referred to as the "Municipal Employee Health Insurance Plan". The Comptroller may arrange and 187 188 procure for the employees and eligible individuals under this subsection 189 health benefit plans that vary from the plan or plans procured under 190 subsection (a) of this section. Notwithstanding any provision of part V

191 of chapter 700c, the coverage provided under this subsection may be 192 offered on either a fully underwritten or risk-pooled basis at the 193 discretion of the Comptroller. For the purposes of this subsection, (A) 194 "municipality" means any town, city, borough, school district, taxing 195 district, fire district, district department of health, probate district, 196 housing authority, regional workforce development board established 197 under section 31-3k, regional emergency telecommunications center, 198 tourism district established under section 32-302, flood commission or 199 authority established by special act, regional council of governments, 200 transit district formed under chapter 103a, or the Children's Center 201 established by number 571 of the public acts of 1969; (B) "nonprofit 202 corporation" means (i) a nonprofit corporation organized under 26 USC 203 501 that has a contract with the state or receives a portion of its funding 204 from a municipality, the state or the federal government, or (ii) an 205 organization that is tax exempt pursuant to 26 USC 501(c)(5); (C) 206 "community action agency" means a community action agency, as 207 defined in section 17b-885; (D) "small employer" means a small 208 employer, as defined in section 38a-564; (E) "eligible individuals" or 209 "individuals eligible for a health coverage tax credit" means individuals 210 who are eligible for the credit for health insurance costs under Section 211 35 of the Internal Revenue Code of 1986, or any subsequent 212 corresponding internal revenue code of the United States, as from time 213 to time amended, in accordance with the Pension Benefit Guaranty 214 Corporation; (F) "association for personal care assistants" means an 215 organization composed of personal care attendants who are employed 216 by recipients of service (i) under the home-care program for the elderly 217 under section 17b-342, (ii) under the personal care assistance program 218 under section 17b-605a, (iii) in an independent living center pursuant to sections 17a-792 to 17a-794, inclusive, or (iv) under the program for 219 220 individuals with acquired brain injury as described in section 17b-260a; 221 and (G) "retired members" means individuals eligible for a retirement 222 benefit from the Connecticut municipal employees' retirement system.

(j) (1) Notwithstanding any provision of law to the contrary, the existing rights and obligations of state employee organizations and the 225 state employer under current law and contract shall not be impaired by 226 the provisions of this section. (2) Other conditions of entry for any group 227 into the plan or plans procured under subsection (a) of this section shall 228 be determined by the Comptroller upon the recommendation of a 229 coalition committee established pursuant to subsection (f) of section 5-230 278, except for such conditions referenced in subsection (g) of this 231 section. (3) Additional determinations by the Comptroller on (A) issues 232 generated by any group's actual or contemplated participation in the 233 plan or plans, (B) modifications to the terms and conditions of any 234 group's continued participation, (C) related matters shall be made upon 235 the recommendation of such committee. (4) Notwithstanding any provision of law to the contrary, a municipal employer and an employee 236 237 organization may upon mutual agreement reopen a collective 238 bargaining agreement for the exclusive purpose of negotiating on the 239 participation by such municipal employer or employee organization in 240 the plan or plans offered under the provisions of this section.

(k) The Comptroller shall submit annually to the General Assembly a
review of the coverage of employees of municipalities, nonprofit
corporations, community action agencies, small employers under
subsection (i) of this section and eligible individuals under subsection
(i) of this section beginning February 1, 2004.

(l) (1) Effective July 1, 1996, any deputies or special deputies
appointed pursuant to section 6-37 of the general statutes, revision of
1958, revised to 1999, or section 6-43, shall be allowed to participate in
the plan or plans procured by the Comptroller pursuant to subsection
(a) of this section. Such participation shall be voluntary and the
participant shall pay the full cost of the coverage under such plan.

(2) (A) Effective [December 1, 2000] October 1, 2025, any state marshal
who works as a state marshal for fewer than twenty hours per week, on
average, shall be allowed to participate in the plan or plans procured by
the Comptroller pursuant to subsection (a) of this section. Such
participation shall be voluntary and the participant shall pay the full
cost of the coverage under such plan.

(B) Effective October 1, 2025, any state marshal who (i) works as a 258 259 state marshal at least twenty hours per week, on average, on a quarterly basis, (ii) is actively engaged in either (I) service of process under a 260 261 waiver of fees issued pursuant to section 52-259b, (II) service of process 262 of orders of protection issued pursuant to section 46b-15 or 46b-16a, or 263 (III) service of capias mittimus orders issued by a family support 264 magistrate pursuant to section 46b-231, (iii) certifies to those facts in clauses (i) and (ii) of this subparagraph on forms provided by and filed 265 with the State Marshal Commission on or before the fifteenth day of 266 267 April, July, October and January for the preceding calendar quarter, and 268 (iv) does not have access to coverage under a health benefit plan that is available (I) through the employer of such state marshal's spouse and 269 has an actuarial value that is equivalent to the actuarial value of the plan 270 271 or plans procured by the Comptroller pursuant to subsection (a) of this 272 section, or (II) through the municipal employees' retirement system 273 established by part II of chapter 113 shall be allowed to participate in 274 the plan or plans procured by the Comptroller pursuant to subsection (a) of this section. Such participation shall be voluntary and the 275 276 participant shall pay the same amount for the coverage under such plan 277 under the same terms and conditions as active state employees in accordance with the provisions of the State Employees Bargaining 278 279 Agent Coalition agreement.

(3) Effective December 1, 2000, any judicial marshal shall be allowed
to participate in the plan or plans procured by the Comptroller pursuant
to subsection (a) of this section. Such participation shall be voluntary
and the participant shall pay the full cost of the coverage under such
plan unless and until the judicial marshals participate in the plan or
plans procured by the Comptroller under this section through collective
bargaining negotiations pursuant to subsection (f) of section 5-278.

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

Section 1 October 1, 2025 5-259(a) to (l)

Statement of Legislative Commissioners:

Subsec. (l)(2)(A) and (B) were rewritten for clarity and accuracy.

LAB Joint Favorable Subst. -LCO