



General Assembly

***Substitute Bill No. 1394***

*January Session, 2025*



***AN ACT CONCERNING THE PROVISION OF HEALTH CARE SERVICES TO INMATES IN CORRECTIONAL INSTITUTIONS.***

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

1       Section 1. (NEW) (*Effective from passage*) The Department of Public  
2       Health, in collaboration with the Department of Correction, shall  
3       annually evaluate the health care services and mental health care  
4       services provided to inmates in correctional institutions in the state to  
5       assess, from a public health and a corrections perspective, whether (1)  
6       best practices utilized in the provision of such services at health care  
7       facilities and mental health care facilities are being utilized in the  
8       provision of such services at such correctional institutions, and (2) best  
9       practices in the provision of such services in correctional institutions,  
10      which best practices have been identified by a national commission on  
11      correctional health care or a national association of practitioners in the  
12      correctional profession, are being utilized in the provision of such  
13      services at such correctional institutions. Not later than January 1, 2026,  
14      and annually thereafter, the Commissioner of Public Health shall report,  
15      in accordance with the provisions of section 11-4a of the general statutes,  
16      to the joint standing committee of the General Assembly having  
17      cognizance of matters relating to public health on such evaluation.

18      Sec. 2. (*Effective from passage*) Not later than January 1, 2026, the  
19      Correction Ombuds appointed pursuant to section 18-81jj of the general

20 statutes shall report, in accordance with the provisions of section 11-4a  
21 of the general statutes, to the joint standing committee of the General  
22 Assembly having cognizance of matters relating to public health  
23 regarding the provision of health care services and mental health care  
24 services to inmates of correctional institutions, including, but not  
25 limited to, the number of personnel needed in correctional institutions  
26 to (1) provide an appropriate level of health care to inmates, and (2)  
27 inform inmates and their family members and representatives  
28 regarding the (A) provision of health care services and mental health  
29 care services in correctional institutions, and (B) method by which such  
30 family members and representatives may inquire of a correctional  
31 institution about the inmate's health or health care services or mental  
32 health care services received by the inmate.

33       Sec. 3. (*Effective from passage*) (a) There is established a task force to  
34 study barriers in the recruitment and retention of health care and mental  
35 health care personnel within the Department of Correction.

36       (b) The task force shall consist of the following members:

37       (1) Two appointed by the speaker of the House of Representatives,  
38 one of whom is a representative of a collective bargaining unit that  
39 represents health care personnel within the Department of Correction;

40       (2) Two appointed by the president pro tempore of the Senate;

41       (3) One appointed by the majority leader of the House of  
42 Representatives;

43       (4) One appointed by the majority leader of the Senate;

44       (5) One appointed by the minority leader of the House of  
45 Representatives;

46       (6) One appointed by the minority leader of the Senate;

47       (7) The chairpersons and ranking members of the joint standing  
48 committee of the General Assembly having cognizance of matters

49 relating to public health, or the chairpersons' and ranking members'  
50 designees;

51 (8) The Commissioners of Correction, Public Health, Mental Health  
52 and Addiction Services and Administrative Services, or the  
53 commissioners' designees;

54 (9) The Secretary of the Office of Policy and Management, or the  
55 secretary's designee; and

56 (10) A representative of a collective bargaining unit representing  
57 health care personnel within the Department of Correction, who shall  
58 be appointed by the Governor.

59 (c) Any member of the task force appointed under subdivision (1),  
60 (2), (3), (4), (5), (6) or (7) of subsection (b) of this section may be a member  
61 of the General Assembly.

62 (d) All initial appointments to the task force shall be made not later  
63 than thirty days after the effective date of this section. Any vacancy shall  
64 be filled by the appointing authority.

65 (e) The speaker of the House of Representatives and the president pro  
66 tempore of the Senate shall select the chairpersons of the task force from  
67 among the members of the task force. Such chairpersons shall schedule  
68 the first meeting of the task force, which shall be held not later than sixty  
69 days after the effective date of this section.

70 (f) The administrative staff of the joint standing committee of the  
71 General Assembly having cognizance of matters relating to public  
72 health shall serve as administrative staff of the task force.

73 (g) Not later than January 1, 2026, the task force shall submit a report  
74 on its findings and recommendations to the joint standing committee of  
75 the General Assembly having cognizance of matters relating to public  
76 health, in accordance with the provisions of section 11-4a of the general  
77 statutes. The task force shall terminate on the date that it submits such  
78 report or January 1, 2026, whichever is later.

79       Sec. 4. (*Effective from passage*) Not later than January 1, 2026, the  
80 Commissioner of Correction shall report, in accordance with the  
81 provisions of section 11-4a of the general statutes, to the joint standing  
82 committee of the General Assembly having cognizance of matters  
83 relating to public health regarding the policies of the Department of  
84 Correction concerning (1) the provision of health care services and  
85 mental health care services to inmates of correctional institutions, (2)  
86 communication with health care providers and mental health care  
87 providers outside of the department regarding an inmate's medical  
88 history while in a correctional institution, including, but not limited to,  
89 obtaining and disclosing an inmate's medical and mental health records  
90 when appropriate, and (3) a primary care provider's ability to obtain a  
91 former inmate's medical and mental health history and records from the  
92 department after an inmate's discharge from a correctional institution.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section
Sec. 2	<i>from passage</i>	New section
Sec. 3	<i>from passage</i>	New section
Sec. 4	<i>from passage</i>	New section

**Statement of Legislative Commissioners:**

In Section 1(2), "as" was changed to "which best practices have been" for clarity; and in Section 4, the second instance of the words "medical and mental health" was deleted to avoid repetition.

**PH**           *Joint Favorable Subst.*