
OLR Bill Analysis

sHB 7048

AN ACT CONCERNING THE OFFICE OF HEALTH STRATEGY'S RECOMMENDATIONS REGARDING REVISIONS TO THE HEALTH CARE CABINET.

SUMMARY

By law, the Health Care Cabinet, which is within the Office of Health Strategy (OHS), must advise the governor on various issues related to the state's health care system. This bill updates the cabinet's membership by:

1. removing the governor's nonprofit liaison (or the liaison's designee) as a non-voting member and adding, as a voting member, a representative of a statewide association of community nonprofits appointed by the governor (in practice, Governor Malloy created the nonprofit liaison position in his administration but Governor Lamont did not carry it forward into his);
2. reducing the initial term of a separate existing gubernatorial appointee from four to three years;
3. adding the Behavioral Health Advocate (or the advocate's designee) as an ex-officio voting member;
4. shifting, from the appointed board members themselves to the OHS commissioner, the authority to appoint two voting members; and
5. removing obsolete references to appointments by the Sustinet Health Partnership.

Under the bill, the governor's appointee representing community nonprofits serves a three-year term. Under existing law, after initial terms expire, subsequent terms are for four years.

The bill also makes other technical and conforming changes, including removing certain obsolete language on the cabinet's duties.

EFFECTIVE DATE: Upon passage

BACKGROUND

Health Care Cabinet Duties

By law, the cabinet must advise the governor on developing an integrated health care system for Connecticut. Among other related tasks, it must:

1. evaluate the means of ensuring an adequate health care workforce in the state;
2. identify short- and long-range opportunities, issues, and gaps created by the enactment of federal health reform; and
3. advise the governor on specific issues, such as the quality, affordability, and sustainability of the state's health care system.

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 23 Nay 9 (03/05/2025)