

OFFICE OF FISCAL ANALYSIS

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sHB-7157

AN ACT CONCERNING VARIOUS REVISIONS TO THE PUBLIC
HEALTH STATUTES.

AMENDMENT

LCO No.: 10024

File Copy No.: 628

House Calendar No.: 389

OFA Fiscal Note

Cost

The amendment makes various changes to the underlying bill that result in a cost that may exceed \$100,000 in FY 26, as described below.

Section 23 is modified so that the Department of Public Health (DPH) must only produce a short-form death certificates upon request for deaths occurring after January 1, 2021, resulting in a cost reduction of \$1,000 in FY 26 and annually thereafter. This removes the need for DPH to print new short-form death certificates for deaths that occurred prior to implementation of the Electronic Death Registry System.

Sections 43 and 44 authorize the Commissioner of Public Health to disclose information and data from the Infant Mortality Review Program to the Child Advocate, as well as authorize the Child Advocate to share information with the Commissioner about infant deaths as related to the program. This results in no fiscal impact, as it allows for the exchange of data between the two agencies to better inform their existing work.

Section 45 expands the scope and responsibilities of the Working Group to Study Pediatric Hospice Services, resulting in no fiscal impact to the state. The working group has the necessary expertise and resources to carry out the required duties.

Primary Analyst: NB
Contributing Analyst(s): LD, LG, JP, ES

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Section 46 directs the Governor to proclaim an annual Connecticut Liver Health Day, resulting in no fiscal impact.

Sections 47 - 48 require the Office of Health Strategy (OHS) to study various changes to how patient information is shared with the Statewide Health Information Exchange (HIE), as well as what kind of information is available. This study can be completed by the Health Information Technology Advisory Council with support from the HIE and does not have a fiscal impact. These sections additionally make various technical changes to the statutes regarding the HIE and its duties, which do not result in a fiscal impact.

Section 49 establishes a working group to assess and provide recommendations regarding: (1) regulatory requirements concerning sewage disposal; and (2) balancing the costs associated with the development of housing and a risk-based approach to protecting public health and the environment. This results in no fiscal impact, as the working group has the expertise needed to meet the requirements of the amendment.

Section 50 extends the deadline for the Commissioner of Public Health to provide notice of intent to amend regulations concerning small community sewerage systems and certain subsurface sewage disposal systems until July 1, 2026. This results in no fiscal impact.

Section 51 requires the State Department of Education (SDE) to establish a mental and behavioral health awareness and treatment pilot program in Priority School Districts. This results in a cost to SDE that may exceed \$100,000 in FY 26 to purchase an electronic mental and behavioral health treatment tool. The cost is dependent on the tool SDE chooses to provide and any associated contracts.

Section 52 eliminates privileged communications between psychologist and patient, resulting in no fiscal impact.

Additionally, the amendment makes various other clarifying, definitional, and technical changes which result in no fiscal impact.

The preceding Fiscal Impact statement is prepared for the benefit of the members of the General Assembly, solely for the purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department