

# Finance, Revenue and Bonding Committee

## JOINT FAVORABLE REPORT

**Bill No:** SB-84 / [Bill Status](#) / [Public Hearing Testimony](#)

AN ACT CONCERNING REVENUE ITEMS TO IMPLEMENT THE GOVERNOR'S

**Title:** BUDGET.

**Vote Date:** 3/31/2026

**Vote Action:** Joint Favorable Substitute

**PH Date:** 3/11/2026

**File No.:**

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### SPONSORS OF BILL:

Request of the Governor pursuant to Joint Rule 9.

### REASONS FOR BILL:

This bill carries out numerous revenue provisions and regulatory reforms with the Governor's budget priorities and recommendations. By implementing these adjustments, it hopes to provide more balance toward revenue generation, better economic development, and meet public welfare goals.

### SUBSTITUTE LANGUAGE (IF APPLICABLE):

Refer to the File Copy for SB 84

### RESPONSE FROM ADMINISTRATION/AGENCY:

#### **Bryan Cafferelli, Commissioner, Dept. of Consumer Protection:**

Submitted testimony in support stating The Home Improvement Guaranty Fund that is administered by DCP provides financial assistance to homeowners who have lost money due to fraudulent work performed. That fund is financed by fees from contractors when they annually renew their registration. The fund allows homeowners to recover up to \$25,000 if a registered contractor fails to fulfill contractual obligations. The balance limit of the fund is \$750,000 with the first \$400,000 over that amount being transferred to CPEA with the rest going to the general Fund. Caffarelli explains that in the last two years restitutions have significantly increased and the improvements to processes at DCP have resulted in processing of cases being expeditious. The balance of the HIGF fund has dropped under \$150,000 multiple times resulting in DCP being concerned that they may have to delay payments until the fund becomes solvent. Section 13 of the bill would increase the threshold

of the fund from \$750,000 to \$1 million which would provide DCP the flexibility to pay approved consumer claims.

**Daniel O'Keefe, Commissioner, Dept. of Economic Community & Development:**

Submitted testimony in support stating recent federal changes allow for a 100% deduction for domestic research and experimental expenses. With Section 1 of the bill corporate R&E expenses from 2022 to 2025 can be amortized over five years. Beginning 2026 the state would fully conform to federal treatment and keep CT competitive in a knowledge-based economy. CT would become an innovation friendly environment with SB 84. Section 5 would allow eligible firms to apply to DECD for an R&D tax credit up to \$1.5 million. The credit would be equal to 6% of eligible costs with a \$25 million annual cap for the policy. These would strengthen CT's innovation economy by lowering the cost of developing new products.

**Joshua Wojcik, Interim Secretary, Office of Policy & Management:**

Submitted testimony in support stating the bill provides some of the Governors major policy initiatives such as a one-time tax rebate to address affordability issues and expands the research and development tax credit program to pass-through entities. The bill would reduce the hospital provider tax that will benefit the state and hospital industry. Wojcik explains the tax rebate ranges from \$200 to \$400 based on the filing status and AGI level in tax year 2024. The relief would affect 1.6 million taxpayers or 2.2 million individuals putting %500 million back into CT residents. The tax credit for corporate entities is 1-6% of qualifying R&D expenditures but limited to \$1.5 million tax credit per business per year. Wojcik states this would make the state business climate more competitive with other states and allow for companies to invest in the future of CT. The bill would also decouple CT corporation business tax code from the federal change in Public Law 119-21 requiring a 39-year amortization for QPP. It would be a technical correction to include the new bonus depreciation for QPP that would retain revenue beginning in FY 2028 and allow for immediate expensing of domestic R&E expenditures. They explain that regardless of decoupling or conforming to the federal R&E spending there would not be a direct revenue loss but a timing shift of revenue instead. CT business competitiveness would be maintained while generating \$66.8 million in revenue for the General Fund in FY 2027. The bill would eliminate application and renewal fees to reduce the financial barriers to in demand professions. The fees range from \$50 to \$375 per year and the change would benefit nearly over 163,000 workers. The professionals affected would include nurses, dental hygienists, paramedics, therapists, and teachers. It would result in \$15.9 million in fee relief in FY 2027 and the Hospital Provider Tax would reduce their tax by \$275 million beginning in FY 2027. The inpatient hospital tax would be reduced from 6.0 % to 4.1 % in FY 2027. The bill would also repeal the tax structure from 2025 legislative session for nursing homes, reduce the Municipal Revenue sharing fund subsidy, reduce the General Fund revenue transfer from FY 2026 to FY 2027, transfer \$1.6 million of revenue from the General Fund to the Mashantucket Pequot Mohegan Fund, allow home improvement Guaranty fund to retain an additional \$250,000 and lastly provide a municipal option to exempt up to 30% of assessed value for ADU the year the construction was completed.

**NATURE AND SOURCES OF SUPPORT:**

**Allie Rinaldi Executive Director, Independent Electrical Contractors of New England**

Allie Rinaldi submits testimony in strong support for professional licensing, apprenticeship training, and examination standards that ensure public safety in the electrical trades. They

share their appreciation for the recognition of skilled trades requiring licensing and advocate for maintaining a nominal renewal fee for journeymen licenses and believe that eliminating the fee could lead to lapsed licenses and increased fines. Allie goes on to share their belief that contractor licenses should be treated differently, as they pertain to business owners employing journeypersons. It is important to preserve the integrity of the electrical industry in Connecticut and IEC-NE is in support of this section of SB 84.

**Joyce E Rioux, ConnOTA Government Affairs, CT Occupational Therapy**

Joyce supports the intent of SB 84 to reduce occupational licensure renewal fees, however, she urges the committee to also adopt a “right-sizing” approach that lowers fees by 30-40% to align Connecticut with regional norms. This approach balances cost reduction with maintaining transparent, stable regulatory systems and fiscal accountability by tying fees to actual administrative costs. It also preserves funding for essential programs like HAVEN-CT, which supports healthcare practitioners’ mental health and substance use challenges. Joyce emphasizes that re-sizing fees will strengthen workforce capacity by reducing financial barriers and encouraging licensure retention, while requesting occupational therapy practitioners be included in any final fee-elimination language if full elimination proceeds.

**Trinity Health of New England**

***Robert Roose, MD, MPH, President***

***Valeria Powell-Stafford, President***

Trinity Health submits testimony in support of SB 84, which aims to eliminate certain occupational license applications and renewal fees to aid in the recruitment and retention of healthcare professionals. The organization, which includes several hospitals and a wide range of health services, emphasizes the importance of investing in the healthcare workforce by removing financial barriers to licensure. They believe this will make Connecticut more attractive to essential healthcare workers amid ongoing workforce shortages. Additionally, Trinity Health encourages the inclusion of more healthcare professionals, such as pharmacists and respiratory therapists, to further support the care delivery system in the state.

**Support for Early Childhood Education Endowment section of SB 84**

**Kathleen Callahan, MSW Director of Policy & Civic Engagement, Connecticut Cradle to Career Coalition**

Kathleen submits testimony urging the committee to protect and strengthen the Early Childhood Education Endowment in SB 84. She emphasizes that the endowment provides a critical long-term strategy to stabilize and expand early childhood care as well as education in Connecticut. It addresses high childcare costs and low wages for educators. Kathleen goes on to highlight how this endowment is crucial in supporting families, educators, and the state’s workforce, especially amid uncertain federal funding, and stresses how sustaining this investment will help grow the fund, expand access, and stabilize providers, ultimately benefiting children’s development and the state’s economic future.

**Eva, Bermudez Zimmerman, Coalition Director, Child-Care for Connecticut**

Eva expresses gratitude for the establishment of the endowment but emphasizes that it must be adequately funded to be effective. The ongoing childcare crisis, with families paying increasing fees and early educators receiving low wages, underscores the need for substantial, long-term investments. She warns that underfunding the endowment could hinder

its ability to provide meaningful support to families and providers, turning it into a symbol of progress rather than a functional solution to the childcare challenges facing Connecticut.

**Maryam Elahi, President & CEO, Community Foundation of Eastern Connecticut**

Maryam urges full funding of the Early Childhood Education Endowment and highlights the foundation's extensive work addressing child poverty and the critical challenges families face due to the high cost of childcare, which often forces parents out of the workforce. She emphasizes that investing in early childhood education yields long-term benefits, including improved child outcomes, stronger workforce participation, and economic growth. She considers this endowment to be a vital, strategic investment to creating a more stable, affordable, and higher quality system of childcare.

**The following individuals also submitted testimony requesting that the Early Childhood Education Endowment be funded at \$300 million as proposed in the Governor's Budget**

Ashley Gaudiano, CT ECFC Co-Chair

Carmen Lanche, Comunidades Sin Fronteras CT

Courtney Parkerson, Director, The Connecticut Project

Elizabeth Quinonez, Senior Director, Cora's Kids Family Childcare Initiative.

Jane Roets, Wethersfield Town Council, and a Perinatal Mental Health Specialist

**Support for the Tobacco & Health Trust Fund**

**Ruth Canovi, MPH Director, Advocacy American Lung Association in Connecticut**

Ruth Canovi, Director of Advocacy for the American Lung Association in Connecticut, supports Senate Bill 84 for continuing the \$12 million transfer to the Tobacco and Health Trust Fund (THTF) from the Master Settlement Fund. She emphasizes the ongoing public health crisis caused by tobacco use in Connecticut, including its significant healthcare costs and high usage rates among youth and young adults. Canovi highlights that investing in tobacco prevention and cessation programs not only saves lives but also reduces costs, citing studies showing substantial returns on investment. She urges sustained and increased funding, ideally at CDC-recommended levels, to combat tobacco industry influence, prevent youth addiction, and address health inequities, while commending the THTF Board's efforts and advocating against past budget sweeps that have depleted the fund.

**Bryte Johnson, Connecticut Government Relations Director, American Cancer Society Cancer Action Network**

The American Cancer Society Cancer Action Network (ACS CAN) supports maintaining the Governor's proposed \$12 million funding for Connecticut's tobacco control programs in FY 2027 but strongly urges increasing this to the CDC-recommended \$32 million annually. Tobacco use remains the leading cause of preventable death and cancer in the state, with significant health and economic costs. Comprehensive, well-funded tobacco prevention and cessation programs have proven effective nationwide in reducing tobacco use, preventing youth addiction, and saving lives and healthcare costs. ACS CAN emphasizes the urgent need for sustained, increased investment to protect public health, counter aggressive tobacco industry marketing, and ensure Connecticut's future generations grow up tobacco-free.

**Jim Williams, Government Relations, American Heart Association in Connecticut**

Jim Williams, Government Relations Director for the American Heart Association in Connecticut, urges support for increasing the state's tobacco control funding to the CDC-recommended \$32 million annually. He highlights Connecticut's history of underfunding tobacco control despite receiving over \$400 million yearly from the Master Settlement Agreement and tobacco taxes. Williams emphasizes the significant human and financial toll of tobacco use in Connecticut, including 4,900 annual deaths and billions in healthcare and productivity costs. He cites studies demonstrating that comprehensive tobacco prevention and cessation programs not only save lives but also deliver substantial healthcare savings, urging the Finance Committee to fully fund these critical efforts.

**Support for Section 5 that extends the R&D tax credits for qualifying small businesses.**

**Alison Carey Lynch, Vice President, Carey Manufacturing**

Allison submitted testimony in support of SB 84 and expressed strong support on Section 5, involving the proposal of extending the research and development (R&D) tax credit to qualifying small businesses. She shares how many dynamic businesses within the state are driving innovation, such as manufacturers, biotech startups, and tech firms, are small or mid-sized and currently cannot fully benefit from the R&D credit. Thus, creating an uneven playing field for those businesses. She highlights her company's \$500,000 investment in tooling innovation, which would be accelerated by the tax credit, aiding cash flow, risk offset, and job creation. She concluded by sharing her beliefs that this extension of the R&D tax credit would better align with Connecticut's advanced industrial base and foster growth for small businesses.

**Joseph J. Carlone Jr., Linemaster Switch Corporation, President, and CEO**

Joseph testifies in support of section 5 of SB 84. He shares how Connecticut's economy thrives on innovation, with many high-growth companies, including Linemaster, which is actively investing in advanced manufacturing and new technologies. Currently, pass-through entities cannot fully access the R&D tax credit, creating an uneven playing field. Joseph shares details about Linemaster's investments in R&D for medical applications and advanced manufacturing technologies, and how the extension of the R&D tax credit would help to offset financial risk, improve cash flow, and encourage workforce expansion.

**Christopher Davis, Vice President of Public Policy, CBIA**

Submitted testimony in support of certain sections but with reservations on other sections. Davis explained they support section 5 that allows pass-through entities to earn R&D Tax Credit. Pass-through entities with less than \$70 million in sales can earn a 6% R&D credit that is capped at \$1.5 million per firm and \$25 million statewide. Those businesses often fund research internally and operate on tight margins, while being unable to absorb. They give an example of a \$2 million investment generating a \$120,000 credit which could fund an additional engineer or new equipment. CBIA also supports sections 14-28 that eliminate application and renewal fees for high demand occupations. Fees range from \$65 to \$375 for professionals such as nurses and electricians. The policy outlined in these sections would reduce barriers to entry and workforce shortages. Section 1 allows immediate expensing of research expenses going forward and aligns with recent federal changes. Davis states they have reservations with section 2 which requires corporate bonus depreciation deductions for qualified production property to be amortized over 39 years regardless of expenses. The provision will remove potential competitive advantage and decouples from federal policy. Section 3 would reduce total collections from the hospital industry but asks for there to be

continued dialogue about alternative approaches. They have further reservations with section 8 that makes a one-time adjustment to the volatility cap threshold. This would follow a previous modification that was made last year and opens the door for further fiscal guardrail erosion.

**Jim Gildea, Chair, Government Affairs, ManufactureCT**

Jim highlights the results from a recent ManufactureCT survey, he notes that current R&D credits primarily benefit larger C corporations, giving them more of an advantage in reinventing in innovation and growth. Smaller manufacturers face greater financial risks and challenges without access to these kinds of tax credits. This section of the bill would provide more fairness and allow all Connecticut manufacturers to invest in innovation, boosting job creation, expanding the tax base, and give more strength to the state's long-term economic competitiveness.

**Jenna Grasso, Policy Director, CBIA**

Submitted testimony in support of section 5 stating it allows qualifying biotechnology businesses to apply for R&D tax credit. The life sciences sector contributes \$7.1 billion to CT's GDP with 40% of them being in R&D. Since small companies do not have corporate income tax liability, they could not use the existing R&D credit. Section 5 allows them to now apply and establishes a credit equal to 6% of R&D expenses incurred during the taxable year. This strengthens the life-science industry in CT.

**Meredith Shay, International Cordage East, dba InCord, President and CEO**

Meredith submits testimony in support of Section 5 of SB 84. She shares how many innovative Connecticut companies, small and mid-size manufacturers like InCord, invest in many R&D activities such as equipment and structural engineering, which directly impact product quality and safety. She fully supports extending the tax credit for research and development as it would help improve cash flow, reduce innovation risks, encourage reinvestment, and accelerate skilled hiring.

**Nikki Spirito, Unified Sports Inc., VP of Finance**

Nikki highlights that many innovative companies within the state, like Unified Sports Inc, currently cannot fully access this kind of tax credit, thus creating unfairness between small and mid-sized companies and much larger ones. Unified Sports invests significantly in research and development and access to this type of tax credit would better improve cash flow, reduce innovation risks, encourage reinvestment, and help hire and retain their most skilled workers.

**NATURE AND SOURCES OF OPPOSITION:**

**Drew Michael McWeeney, Assistant Professor, CT State Community College**

Drew submits testimony in opposition of the bill, he specifically expresses concerns about section 20-195c which he does not believe mental health professionals such as marriage and family therapists and licensed professional counselors are unequipped to handle family matters beyond therapeutic treatment. He argues that these professions are not prepared with the certain knowledge regarding early childhood education, which he believes is crucial for addressing family dynamics. He highlights the potential risks of allowing these professionals to make significant decisions in custody cases and advocates for recognizing

early childhood education practitioners as qualified mental health professionals to serve as guardian and custody evaluators.

**Merrill Gay, Executive Director, CT Early Childhood Alliance**

Submitted testimony in opposition stating a childcare center in Manchester closed leaving 40 families with no arrangements. Last year SB 1 created the Early Childhood Endowment that made a promise that as of July 1<sup>st</sup>, 2027, they wouldn't pay more than 7% of their income for care for families with income under \$100,000. If you include expansion in costs with a 10% draw you would need \$1.1 billion in the endowment by the 2027 deadline. They state that accepting the Governor's proposal is a failure to be protective. If there is not enough in the Endowment, then the only options would be to fund fewer slots or pay less per slot. With less funding there will be more phone calls from parents who no longer have a subsidized spot. If programs get their contracts renewed at lower rates, then many programs will be dying a slow death, and there will be a repeat of closings such as the one in Manchester.

**Joseph Sokolovic, Vice Chair of the Bridgeport Board of Education**

Joseph submits testimony arguing that SB 84 prioritizes short-term political tactics over meaningful reform and does not address Connecticut's inequitable tax system. He is concerned over not increasing taxes on more wealthy people within the state or capital income and for relying on a temporary rebate that does not solve long-term issues such as rent increase, property taxes, or underfunded schools and how all this could disproportionately affect cities such as Bridgeport.

**The following testified in opposition to the increase in the hospital tax.**

**Sharon Adams, Eastern Regional President, Nuvance Health**

Sharon Adams submits testimony on behalf of Nuvance Health, who are in opposition to the hospital tax provisions within SB 84. They advocate for a more effective approach to maximize federal resources for patient care in the state of Connecticut. Sharon shares that hospitals will contribute \$920 million in taxes under the proposed budget. They are concerned that exempting Waterbury Hospital from the tax while allowing it to benefit from Medicaid payments undermines the fairness to other hospitals. Sharon emphasizes the need for a collective approach to maximize federal revenue while ensuring equitable support for all contributing hospitals.

**The Connecticut Hospital Association**

The association submits testimony opposing the hospital tax provisions in the bill. They advocate for a better approach to maximize federal resourcing for patient care. The Connecticut Hospital Association emphasizes the critical role of hospitals in delivering quality care and supporting economic growth, while navigating financial challenges. Hospitals will pay upwards of \$820 million in taxes this fiscal year with a proposed increase to \$920 million in FY 2027. They raise concerns about Waterbury Hospitals exemption from the tax while still receiving Medicaid payments. They argue for a new perspective on the hospital tax that focuses on maximizing federal dollars for all hospitals to address the \$1.5 billion annual loss from providing Medicaid care, while maintaining the state's revenue share.

**Melissa Riley, Director, Office of Government Affairs, Hartford Healthcare**

On behalf of Hartford Healthcare, Melissa submits testimony with concerns that the proposed allocation of hospital tax revenue fails to adequately address critical issues such as Medicaid

underpayment and access to affordable care. Hospitals are set to pay \$820 million in taxes in FY 26, with a proposed increase to \$920 million in FY 27; however, only \$40 million of this increase is allocated to support hospitals, with \$15 million going to an exempted hospital. They highlight a \$1.5 billion Medicaid shortfall that could jeopardize care access and shifts financial burdens to private employers and insurers. Hartford HealthCare advocates for a comprehensive solution that dedicates tax revenue to support hospitals, address chronic Medicaid underfunding, and ensures sustainable healthcare access for all Connecticut residents.

**Patrick Charmel, President & CEO, Griffin Hospital**

Patrick submits testimony on behalf of Griffin Hospital highlights that Connecticut's proposed \$100 million increase in the Hospital Provider Tax to \$920 million, disproportionately benefits the state, which would see its share rise from \$508 million to \$561 million, while hospitals receive only a \$25 million increase, totaling about \$150 million less than the state would gain. He believes this structure undermines the federal goal of provider tax programs to ensure sufficient Medicaid reimbursement. The state faces a \$1.5 billion annual Medicaid shortfall, leading to cost-shifting onto commercial insurers and higher healthcare costs for consumers. Financial pressures on hospitals are mounting due to reduced Medicaid expansion, increased uninsured rates, and lower payments from Medicaid Advantage plans. Griffin Hospital urges more collaboration to maximize federal Medicaid revenue, fully allocate tax proceeds to hospital patient care, include all willing hospitals in the tax program, secure a stable five-year federal agreement, and maintain the state's current tax benefit share without expansion.

**Chris O'Connor, Chief Executive Officer, Yale New Haven Health**

Chris submits testimony highlighting that Connecticut hospitals pay \$820 million in hospital taxes this fiscal year, with a proposed \$100 million increase that benefits the state's General Fund. Yale New Haven Health shares how they align with the Connecticut Hospital Association, arguing that the tax should maximize federal reimbursement and support hospitals, as the system faced a \$430 million Medicaid shortfall last year, with only 56% of costs covered. Chris emphasizes the need to address the \$1.5 billion annual loss from Medicaid care, advocating for a tax structure that enhances patient care funding while preserving the state's share of tax revenue.

**Shannon R. Sullivan, President and CEO, Connecticut Children's**

CT Children's submits testimony emphasizing the critical importance of the hospital tax participation for the health system's financial stability and the access to care for children across the state. Despite being the only independent children's hospital in the nation not historically subject to the hospital tax, CT Children's now participates following the removal of its exemption, with the goal of improving Medicaid reimbursement and generating federal revenue. Medicaid payments currently cover just over half of the hospital's costs, significantly less than adult hospitals, contributing to financial challenges that limit staff hiring and service expansion. Shannon urges support for increased Medicaid funding and to maintain the hospital's inclusion in the provider tax to ensure children receive the specialized, accessible care they need for a healthier future.

**Stamford Health**

***Michael Veillette, CFO, Stamford Health***

***Ben Wade, Chief Strategy Officer, Stamford Health***



Stamford Health opposes the hospital tax provisions within SB 84, citing concerns that the proposed \$100 million tax increase will harm hospitals that face significant financial challenges, including \$1.5 billion in annual Medicaid underpayment and \$5.5 billion in cumulative losses from the existing hospital to the local economy and \$173 million in uncompensated care. The bill allocates only \$40 million to support hospitals from the tax increase, with a substantial portion going toward Waterbury Hospital, while not really committing to improving Medicaid rates. Stamford Health stresses the need for a fairer financial system for hospitals that maximize federal revenue and support patient care.

## GENERAL COMMENTS

### **Patrick O'Brien, Connecticut Voices for Children**

Patrick submits testimony with recommendations regarding a few sections of SB 84. He requests including the expansion of tax conformity to decouple from certain federal provisions, such as the qualified small business stock exclusion and federal estate tax exemption, while advocating for timely conformity analysis to enhance tax fairness and preserve revenue. He also suggests replacing the proposed one-time sales tax rebate with a permanent, refundable Connecticut Child Tax Credit for more effective financial support for low-and middle-income families. Additionally, a temporary adjustment to the volatility cap threshold is recommended, utilizing an inflation-adjusted moving average to generate progressive tax revenue to fund a new state-level Child Tax Credit and essential programs. Lastly, indexing the personal income tax to inflation is proposed to prevent automatic annual tax increases that disproportionately affect lower-income households while benefiting higher-income individuals.

**The following individuals submitted testimony requesting the following professions be included in the licensing fee reductions:** marriage and family therapists, speech-language pathologists, psychologists, licensed behavioral analysts, radiologic technologists, nuclear medicine technologists, registered nurses, licensed practical nurses, advanced practice registered nurses, physical therapists, dental hygienists, occupational therapists and respiratory therapists.

- Gina Abbott, Licensed Clinical Psychologist
- Deborah Augenbraun, Licensed Clinical Psychologist
- Kenneth P. Bangs, PhD, Licensed Psychologist
- Brenda L. Beauchamp, Licensed Psychologist
- Michael Berry, Licensed Psychologist
- Andre P. Bessette, Licensed Psychologist
- Rebecca Cohen, PsyD
- Greg Betz, Licensed Psychologist
- Stacey Blase, PhD, Licensed Psychologist
- Dr. Meghan Butler, Executive Director, Connecticut Psychological Association
- Kathleen Cairns, PsyD Psychologist
- Mark Celano, PhD, Licensed Psychologist
- Alana Coscia, Licensed Psychologist
- Margarita Cossuto, Licensed Psychologist

- Sarah Crawford, Clinical Psychologist
- Kimberly M. Daniels, Psy.D.
- Maryclaire Capetta, President, American Physical Therapy Association
- Bob Deutsch, Licensed Psychologist
- Anthony DiNardo, Licensed Psychologist
- Dr. Jennifer Doran, Immediate Past President; Legislative Co-Chair, Connecticut Psychological Association
- Jill Dorflinger, PhD, Licensed Clinical Psychologist
- Evan B Drake, Licensed Psychologist
- Jaclyn Evans, Licensed Psychologist
- David FitzGerald, Licensed Psychologist
- Mark Frayne, Psychologist
- Mary Margaret Freier, Psychologist
- Jackie Britt-Friedman, Assistant Professor, Yale Child Study Center
- Jamie Ghany, Licensed Psychologist
- Meyer Glaser, Licensed Psychologist
- Brandeis Green, Licensed Psychologist
- Kelsey Hale, Licensed Psychologist
- Sarah Hardy, Licensed Psychologist
- Kim Henderson
- Dr. Anders Hogstrom, Licensed Psychologist
- Alease Holden
- Syed Hussain, MD, Senior VP & Chief Clinical Officer, Trinity Health of New England
- Kyla Kachinsky, Licensed Psychologist
- Kalva Allison, graduate student, Southern Connecticut State University
- Dr. Adam Kaye, radiologist
- Arlene Kaye, Clinical Director of Benhaven Children's Behavioral Services
- Julie Keen, Psy.D., Licensed Psychologist
- Karole Kreutter, Licensed Psychologist
- David Kuhn, Licensed Psychologist
- Mariella LaRosa, Executive Director, HAVEN
- Dr. Mikaru Lasher, Licensed Psychologist
- Jessica Lawson, Licensed Psychologist
- Paula Leshine, Licensed Psychologist
- Dr. Ryan Loss, Licensed Psychologist
- Robert R. MacLean, Licensed Psychologist
- Catherine Marsh, Licensed Psychologist
- Maria Masotta PsyD, Licensed Psychologist
- Jennifer McCullagh
- Bernadette M. Mele, President-Elect of the Connecticut Society of Radiologic Technologists
- Felicia Morgan, Licensed Psychologist
- Wilbur J. Nelson, Jr., Ph.D., Clinical Psychologist
- Brittany Newman, licensed neuropsychologist
- Katherine D Ottaviani, Clinical Fellow
- Laura Palmese, Licensed Psychologist
- Stephanie Pennington, Ph.D., Licensed Psychologist
- Laura Prio, APRN CT, APRN Society – Health Policy Chair
- Lisa Smith, Licensed Psychologist

- Neena Qasba, VP, American Association of University Professors, AAUP-UConn Health Center
- Maria Victoria Ramos, Licensed Psychologist Director of Professional Affairs, Connecticut Psychological Association
- Elizabeth Rathbun, Licensed Psychologist
- April M. Ries, Psy.D., Psychological Services + Care, LLC
- Lindsay Riordan
- Eunice Rivera Miranda, Licensed Psychologist
- Jaime Rodriguez, Licensed Marriage and Family Therapist and Advocacy Chair for the Connecticut Association of Marriage and Family Therapy
- Anne M. Rosin, Ph.D., Licensed Psychologist
- Jennifer Rucci, CSHA
- Dr. Marcy Russo, Co-Chair, Legislative Committee of the Connecticut Psychological Association
- Kimberly Sandor, Executive Director of the Connecticut Nurses' Association.
- Kathryn Scheffel, Supervising Psychologist 1, DMHAS
- Allison Sidel, Licensed Psychologist
- Lara Singer, Licensed Psychologist
- Adrienne G. Smaller, Ph.D, Licensed Psychologist
- Mark Spellmann, Ph.D. Connecticut Psychologist and Legislative Committee Member of the Connecticut Psychological Association
- Liz Stein, Licensed Psychologist
- Ilana Stermann, PsyD, Licensed Psychologist
- Dr. Shauna E. Summers, Licensed Psychologist
- Kimberly Tappen, Licensed Clinical Psychologist, Fairfield University
- Taylor Thorne, Licensed Psychologist
- Dr. Randi Torstenson, Licensed Psychologist
- Andrea Udoff, Licensed Psychologist
- Jodi Urzua, SLP, CT Children's
- Kathleen Wawrzyniak Webb, Licensed Psychologist
- Ashley Weiss, Respiratory Care Practitioner
- Sarah Witteman, SLP Grad Student, SCSU
- Dr. Ericka Woods, Licensed Psychologist
- Julie Wright, Licensed Psychologist
- Christine Yantz and Marianne Barton, Licensed Psychologists
- Olivia Zaino, MA CCC-SLP, CCMC
- Dr. Joy Zelikovsky, Assistant Professor, Southern Connecticut State University
- Julie Zelner, President, Connecticut Speech-Language-Hearing Association

**Reported by: Lawrence Sanchez & Jason Snukis    Date: 4/15/26**