
OLR Bill Analysis

HB 5241

AN ACT ESTABLISHING A TRIPLE BOTTOM LINE JUSTICE DEMONSTRATION PILOT PROGRAM.

SUMMARY

This bill requires the Department of Public Health (DPH) commissioner, in consultation with the Department of Energy and Environmental Protection (DEEP) commissioner, to establish, by January 1, 2027, a Triple Bottom Line Justice (TBLJ) demonstration pilot program to address health, environmental, and economic challenges in communities. By January 1, 2030, they must also develop and implement a plan to increase the use of certain diagnostic codes to at least 20% of all health insurance claims.

The bill also requires DPH, in consultation with DEEP and the organization running the TBLJ pilot program, to design and implement an education program for providers, hospital systems, patients, and communities on the use of “ICD-10 Z codes,” which are the subset of diagnostic codes in the most recent edition of the International Classification of Diseases that document social, economic, and environmental factors that affect health and health-related outcomes.

EFFECTIVE DATE: October 1, 2026

TBLJ PILOT PROGRAM

The bill requires the DPH commissioner to (1) create the TBLJ pilot program in a city with a population over 148,000 according to the most recent decennial U.S. census (i.e. Bridgeport) and (2) contract with an existing community-led redevelopment organization in the city to run the program. Under the bill, “TBLJ” is the integration of evidence-based practice, rule of law, and meaningful community engagement to tackle health, environmental, and economic challenges faced by communities.

The program must serve as a proof-of-concept for TBLJ programming

related to ICD-10 Z codes and “Brownfields to Healthfields (B2H),” which is community-led brownfield redevelopment to transform contaminated properties in areas with pollution, disease, poverty, and violence into uses that strengthen children, family and community resiliency, equity, and vitality.

Under the bill, the TBLJ pilot program must have the following three goals:

1. describe B2H environmental remediation methods and outcomes in order to produce educational curriculum and programming that may be applied to other Connecticut communities;
2. support the use of ICD-10 Z codes to assess the potential to generate additional resources that support health care for communities experiencing “environmental and climate stressors” (see below); and
3. detail the integrated environmental, health, and economic benefits of B2H and potential state cost savings generated by federal and state brownfields funding.

The DPH commissioner, in consultation with the DEEP commissioner, must report on the pilot program’s findings and recommendations to the Environment, Insurance and Real Estate, and Public Health committees by January 1, 2028. The pilot program ends when the commissioner submits this report.

DIAGNOSTIC CODES PLAN

The bill requires the codes used in the plan to be ICD-10 Z codes that the DPH commissioner, in consultation with the DEEP commissioner, identify as relevant to “environmental and climate stressors,” which under the bill, are physical, chemical, biological, or climate-related conditions in the external environment that adversely impact human physical and mental health, including, to, air, land, and water pollution, extreme heat, and severe weather events.

Beginning by January 1, 2027, and until January 1, 2030, the DPH

commissioner must report on the plan annually to the Environment, Insurance and Real Estate, and Public Health committees. The report must include (1) the utilization rate of ICD-10 Z codes in the prior calendar year, (2) climate and environmental health trends based on the utilization rate of codes relevant to environmental and climate stressors, and (3) recommendations to increase the utilization rate.

COMMITTEE ACTION

Public Health Committee

Joint Favorable

Yea 20 Nay 11 (03/09/2026)