



March 11, 2026

RECOMMENDED SUBSTITUTE LANGUAGE IN SECTION 4 of both H.B. No. 5044 and S.B. No. 450:

Testimony of the Connecticut Association of Health Care Facilities / Connecticut Center for Assisted Living (CAHCF/CCAL) concerning S.B. No. 450 (RAISED) AN ACT CONCERNING THE STANDARD OF CARE FOR IMMUNIZATION and H.B. No. 5044 (COMM) AN ACT ESTABLISHING CONNECTICUT VACCINE STANDARDS /

We recommend substitute language be adopted in Section 4 of both bills as the Connecticut Uniform Administrative Procedures Act (C.G.S. 4-168(h)) now authorizes a state agency an accelerated and expedited technical regulation amendment process when it is necessary to conform an existing regulation with an amendment to the general statutes, and this would be the case as the Department of Public Health moves to conform the existing nursing facility immunization regulations with the C.G.S. 19a-7f immunization standards proposed to be amended in both bills.

Specifically, Section 4-168(h) of the general statutes provides (*emphasis added*): “*An agency may make technical amendments to an existing regulation or repeal an existing regulation to.... (4) amend an existing regulation solely to conform the regulation to amendments to the general statutes, provided the amendments to the regulation do not entail any discretion by the agency.... The agency may adopt any such amendments to or repeal of a regulation in accordance with the requirements of subsection (a) of this section or may proceed without prior notice, public comment period or hearing, provided the agency has posted such amendments to or repeal of the regulation on the eRegulations System.*”

Therefore, we recommend the following substitute language be adopted in both H.B. No. 5044 and S.B. No. 450:

“Section 4. Section 19a-522 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

(a) The [commissioner] Commissioner of Public Health, in consultation with the Commissioner of Social Services, shall adopt regulations, in accordance with chapter 54, concerning the health, safety and welfare of patients in nursing home facilities, classification of violations relating to such facilities, medical staff qualifications, record-keeping, nursing service, dietary service, personnel qualifications and general operational conditions. The regulations shall: (1) [Assure] Ensure that

each patient admitted to a nursing home facility is protected by adequate immunization against respiratory viral diseases, including, but not limited to, influenza and pneumococcal disease in accordance with the [recommendations of the National Advisory Committee on Immunization Practices, established by the Secretary of Health and Human Services] schedules for active immunization included in the standard of care for immunization established pursuant to section 19a-7f, as amended by this act; (2) specify that each patient be protected annually against influenza and be vaccinated against pneumonia in accordance with the [recommendations of the National Advisory Committee on Immunization] standard of care for immunization established pursuant to section 19a-7f, as amended by this act; and (3) provide appropriate exemptions for patients for whom such immunizations are medically contraindicated and for patients who object to such immunization on religious grounds.

(b) In accordance with subsection (h) of section 4-168 of the general statutes, the Commissioner of Public Health, in consultation with the Commissioner of Social Services, may make technical amendments to the nursing facility immunization regulations promulgated under section 19a-522 of the general statutes as may be necessary to conform the regulations with the immunization standards in section 19a-7f of the general statutes, as amended by this Act, and may proceed without prior notice, public comment period or hearing, provided the Commissioner of Public Health has posted such amendments to or repeal of the regulation on the eRegulations System.”

[(b)] (c) Nursing home facilities or residential care homes may not charge the family or estate of a deceased self-pay patient beyond the date on which such patient dies. Nursing home facilities or residential care homes shall reimburse the estate of a deceased self-pay patient, within sixty days after the death of such patient, for any advance payments made by or on behalf of the patient covering any period beyond the date of death. Interest, in accordance with subsection (a) of section 37-1, on such reimbursement shall begin to accrue from the date of such patient's death.”

Because the Connecticut Uniform Procedures Act (C.G.S. 4-168(h)) now authorizes the Department of Public Health a fast-track expedited process (“*without prior notice, public comment period or hearing*”) to conform the existing nursing facility immunization regulations with the new 19-7f amended standards, it is unnecessary as proposed in both H.B. No. 5044 and S.B. No. 450 to additionally authorize the Department of Public Health with broad regulatory policy and procedures authorities for an indefinite period of time to implement any necessary conforming nursing facility immunization regulatory revisions.

Thank you for this opportunity to submit this written testimony.

For additional information on this testimony, please contact Matthew Barrett, President and CEO of CAHCF/CCAL, at mbarrett@cahcf.org.