

2019 Connecticut legislative session: What happened

Connecticut's General Assembly debated an unusually large number of health-related proposals this year. Some were new and some have been debated for years. Some passed, some were rejected, and some are on hold for next year. As of this writing, only the minimum wage increase bill has been signed into law by the Governor. The others are making their way to his desk.

Healthcare legislation that passed

Policymakers reached a [\\$43 billion state budget deal](#) to cover the next two fiscal years, on-time before the end of the session.

The budget **partially restores HUSKY parents' eligibility cuts** from 2016. Eligibility will increase to 160% of the Federal Poverty Level (\$34,128 for a family of three this year). Still well below the original level, it would restore coverage for 4,000 working parents in our state.

Several provisions of the budget **begin to tie healthcare payments to quality**. Payments to hospitals for patients readmitted within 30 days after discharge for the same or similar diagnosis will be reduced by 15%. The two children's hospitals are exempt from this provision. Medicare's similar program has been very successful in reducing readmissions; [Connecticut hospitals have not performed well](#) on Medicare readmissions or on [patient safety](#). Supplemental hospital payments will be tied to quality performance and DSS will implement value-based hospital payments to address obstetrical and other quality issues. The state will also set quality standards for Medicaid methadone maintenance payments with penalties up to 10%.

Some new **insurance provisions to help consumers** include limiting out-of-pocket costs to no more than the costs of the services, prohibiting insurer policies that do not allow providers and others to disclose health costs and alternative treatments to consumers, broadens protections from "surprise bills", requires that insurers cover medically necessary emergency care, expands breast ultrasound coverage and eliminates out-of-pocket costs for breast ultrasounds and mammograms.

Areas of concerns include **four new healthcare licensure categories**; expanding the healthcare workforce often raises costs. New categories include community health workers, associate licensed professional counselors, associate marital and family therapists, and art therapists.

The budget also creates a High Deductible Health Plan task force, but unfortunately it includes no consumer representatives. The budget includes nursing home rate increases, e-cigarette taxes, and eases the hospital provider tax.

After years of debate, [a bill to raise the age to purchase tobacco products](#) and e-cigarettes to 21 passed on the final day of the session.

Also after years, a bill to [allow the practice of dental therapy](#) passed this year. **Dental therapists** are dental hygienists with at least 18 months of additional training. Dental therapy is “performing educational, preventive, and therapeutic services.” Under the new law dental therapists must practice under the supervision of a dentist and only in public health settings. Licensure of dental therapists has reportedly expanded access to quality dental care in other states.

[Under a new law](#), **the minimum wage in Connecticut will rise** to \$15 in 2023. This bill has been signed by the Governor. There is growing evidence about the [health benefits of increasing the minimum wage](#).

The legislature passed [paid family and medical leave benefits](#) giving workers up to 12 paid weeks off to care for a new baby or seriously ill loved one beginning in 2021.

What didn't pass

After several iterations, policymakers [ran out of time](#) to craft a **public option health insurance plan**. Unfortunately, [associated good provisions also didn't make the deadline](#). The final version would have allowed **importation of drugs from Canada** providing significant relief from the greatest driver of rising healthcare costs in Connecticut. Also lost was a **tax on prescription opioids**, a proposal for **reinsurance** that could stabilize premiums, and an ambitious, complex and probably premature reporting system on healthcare costs.

Other health-related proposals this year that didn't pass include a general **sugary beverage tax** to lower obesity rates, a Connecticut **individual mandate**, legalizing **recreational marijuana use**, and removing **religious exemptions for childhood vaccine** requirements. Any or all of these concepts could come back again next year.