

**STATE OF CONNECTICUT**

**BY HIS EXCELLENCY**

**NED LAMONT**

**EXECUTIVE ORDER NO. 7DD**

**PROTECTION OF PUBLIC HEALTH AND SAFETY DURING COVID-19 PANDEMIC AND RESPONSE – EXPANSION OF HEALTHCARE WORKFORCE**

**WHEREAS**, on March 10, 2020, I issued a declaration of public health and civil preparedness emergencies, proclaiming a state of emergency throughout the State of Connecticut as a result of the coronavirus disease 2019 (COVID-19) outbreak in the United States and confirmed spread in Connecticut; and

**WHEREAS**, pursuant to such declaration, I have issued thirty (30) executive orders to suspend or modify statutes and to take other actions necessary to protect public health and safety and to mitigate the effects of the COVID-19 pandemic; and

**WHEREAS**, COVID-19 is a respiratory disease that spreads easily from person to person and may result in serious illness or death; and

**WHEREAS**, the World Health Organization has declared the COVID-19 outbreak a pandemic; and

**WHEREAS**, the risk of severe illness and death from COVID-19 is higher for individuals who are 60 or older and for those who have chronic health conditions; and

**WHEREAS**, to reduce the spread of COVID-19, the United States Centers for Disease Control and Prevention and the Connecticut Department of Public Health recommend implementation of community mitigation strategies to increase containment of the virus and to slow transmission of the virus, including cancellation of gatherings of ten people or more and social distancing in smaller gatherings; and

**WHEREAS**, there is a significant need for the expansion of the healthcare workforce in Connecticut to respond adequately to the COVID-19 pandemic; and

**WHEREAS**, such expansion of the healthcare workforce would benefit from permitting additional out-of-state healthcare providers to provide telehealth services to Connecticut residents; and

**WHEREAS**, Executive Order No. 7G increased availability of telehealth services pursuant to the Coronavirus Preparedness and Response Supplemental Appropriations Act of 2020 (Public

Law 116-123) by modifying and suspending several provisions of section 19a-906 of the Connecticut General Statutes; and

**WHEREAS**, since the issuance of Executive Order No. 7G, the Coronavirus Aid, Relief, and Economic Security Act, or CARES Act (Public Law 116-136), was enacted into law; and

**WHEREAS**, several of the provisions of the CARES Act further expand the use and coverage of telehealth services and supersede provisions of Executive Order No. 7G; and

**WHEREAS**, the required expansion of the healthcare workforce to respond to COVID-19 pandemic would be enhanced by suspension of certain administrative requirements and could thereby make more fully trained but unlicensed providers available more quickly; and

**WHEREAS**, to avoid delays in providing healthcare services, the Secretary of Health and Human Services has recommended the suspension of requirements for written agreements to meet supervision requirements; and

**WHEREAS**, the federal Center for Medicare and Medicaid Services has suspended temporarily the physician supervision requirements for Certified Registered Nurse Anesthetists; and

**WHEREAS**, as a result of distancing and other protection measures enacted to limit the transmission of COVID-19, people with professional and occupational licensure through the Department of Public Health may be unable to safely satisfy their continuing education requirements for licensure in a timely manner; and

**WHEREAS**, cancellation of school classes to reduce COVID-19 transmission and compliance with other protective measures in response to the COVID-19 pandemic may delay face-to-face assessments for children who need them to assess eligibility for additional services or delay observations to determine eligibility of young children for Part B IDEA Services; and

**WHEREAS**, continuing remote early intervention services for such children beyond the age where they would normally lose eligibility will limit in-person contact related to such assessments and observations, and thereby reduce the risk of transmission of COVID-19;

**NOW, THEREFORE, I, NED LAMONT**, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and the laws of the State of Connecticut, do hereby **ORDER AND DIRECT**:

1. **Additions to Definition of Telehealth Provider.** Section 19a-906(a)(12) of the Connecticut General Statutes is modified to add any dentist licensed under Chapter 379, behavior analyst licensed under Chapter 382a, genetic counselor licensed under Chapter 383d, music therapist licensed under Chapter 383f, art therapist licensed under Chapter 383g, and veterinarian licensed under Chapter 384 to the definition of telehealth provider.

2. **Flexibility for Medicaid-Enrolled Providers and In-Network Providers for Commercial Fully Insured Health Insurance to Perform Telehealth Through Additional Methods.**

Section 5 of Executive Order No. 7G issued on March 21, 2020, and the provisions of Section 19a-906 of the Connecticut General Statutes and any associated regulations, rules and policies regarding the delivery of telehealth are modified or suspended as follows:

- a. The definition of "telehealth" in Section 19a-906(a)(11) is modified to provide that telehealth providers that are Medicaid-enrolled providers providing covered telehealth services to established patients who are Medicaid recipients, or telehealth providers that are in-network providers for commercial fully-insured health insurance providing covered telehealth services to patients, may engage in telehealth through the use of audio-only telephone;
- b. The requirements of Section 19a-906(a)(12) for the licensure, certification, or registration of telehealth providers are suspended for such telehealth providers that are Medicaid-enrolled providers or in-network providers for commercial fully-insured health insurance providing telehealth services to patients, in accordance with any related orders issued by the Commissioner of Public Health pursuant to her established authority as a result of this declared public health and civil preparedness emergency and in accordance with Sections 19a-131a and 28-9.
- c. The requirement in Section 19a-906(f) that the provision of telehealth services and health records maintained and disclosed as part of a telehealth interaction shall comply with the provisions of the Health Insurance Portability and Accountability Act of 1996 P.L.104-191, as amended from time to time (HIPAA), is modified to permit telehealth providers that are Medicaid enrolled providers or in-network providers for commercial fully insured health insurance providing telehealth services to patients to utilize additional information and communication technologies consistent and in accordance with any direction, modification or revision of requirements for HIPAA compliance as related to telehealth remote communications as directed by the United States Department of Health and Human Services, Office of Civil Rights during the COVID-19 pandemic.
- d. Notwithstanding paragraphs a through c herein, a provider who elects to provide telehealth services for a patient who is not a Medicaid beneficiary or a member covered by a fully-insured commercial plan, may engage in "telehealth" services as defined in such paragraphs for

such patient, provided that any provider engaging in telehealth services under this section must, prior to engaging in such services, determine whether a patient is covered by a health plan other than Medicaid or a fully-insured commercial plan, and whether such plan provides coverage for such telehealth services. A provider who receives payment under such health plan shall not bill a patient for any additional charges beyond the reimbursement received under such health plan. A provider who determines that payment or coverage for telehealth services as described in this order is not available under a health plan other than Medicaid or a fully-insured commercial plan or who determines a patient is uninsured, shall accept as reimbursement for any telehealth service as payment in full, the amount that Medicare reimburses for such service, provided that if the provider determines that the patient is uninsured or otherwise unable to pay for such services, the provider shall offer financial assistance, if such provider is otherwise required to provide financial assistance under state or federal law.

- e. Any related regulatory requirement that any telehealth services described herein be provided from a provider's licensed facility is hereby waived.
3. **Additions to Permissible Out-of-State Healthcare Providers.** Section 19a-131j(a) of the Connecticut General Statutes is modified to additionally allow the Commissioner of Public Health to issue an order to suspend, for a period not to exceed sixty consecutive days, the requirements for licensure, certification or registration, pursuant to chapters 376a (occupational therapist), 376b (alcohol and drug counselor), 376c (radiographer, radiologic technologist, radiologist assistant and nuclear medicine technologist), 379 (dentist), 379a (dental hygienist), 382a (behavior analyst), 383d (genetic counselor), 383f (music therapist), 383g (art therapist), 384b (dietician-nutritionist), and 399 (speech and language pathologist).
  4. **Participation in Intern, Resident Physician, or United States Medical Officer Candidate Training Programs Prior to Permit Issuance.** Section 20-11a of the Connecticut General Statutes is modified to allow a person to participate in an intern or resident physician program or United States Medical Officer candidate training program prior to issuance of a permit by the Department of Public Health provided that the hospital administrator documents that the person has satisfied the requirements for such a permit set forth in the statute.
  5. **Participation in Resident Physician Assistant Program Prior to Permit Issuance.** Section 20-12h of the Connecticut General Statutes is modified to allow a person to participate in a resident physician assistant program in a short-term hospital that provides a postgraduate medical education program accredited by the

Accreditation Council for Graduate Medical Education, without a license or temporary permit issued pursuant to section 20-12b or a training permit issued by the Department of Public Health, provided that the hospital administrator documents that the person is to be appointed a resident physician assistant in such hospital and has satisfied the requirements of subdivisions (1), (2) and (5) of subsection (a) of section 20-12b.

6. **Temporary Suspension of Physician Assistant Supervision Restrictions.** Section 20-12a of the Connecticut General Statutes is modified to suspend the supervision requirements for physician assistants authorized to practice in the State of Connecticut set forth in Subsection (7)(A) subparts (iii) through (v), inclusive, and (7)(B) subparts (iii) through (v), inclusive, of said Section.
7. **Temporary Suspension of In-Person Supervision Requirement for Advanced Practice Registered Nurses.** Section 20-87a(b)(2) of the Connecticut General Statutes is modified to suspend the requirement that a physician, medically directing the prescriptive activity of an advanced practice registered nurse who is prescribing and administering medical therapeutics during surgery, must be physically present in the institution, clinic or other setting where the surgery is being performed.
8. **Provision of Services by Respiratory Care Therapist and Respiratory Care Technician Students.** Section 20-162q(c) of the Connecticut General Statutes is modified to allow a respiratory care therapist student or a respiratory care technician student as specified in said subsection to provide services in accordance with the requirements of said subsection except that the services are not required to be a component of such person's course of study.
9. **Suspension of Continuing Education Requirement for Health Care Providers.** The continuing education requirements in Chapters 370, 373, 376, 376a, 376b, 376c, 378, 379, 379a, 380, 381, 381a, 383, 383a, 383b, 383c, 384, 383d, 384a, 384c, 385, 387a, 388, 397a, 398, 399 and Section 19a-515 of the General Statutes are suspended for one (1) year for occupations and professions with annual education requirements, and for the other occupations and professions within said statutes, the continuing education completion period and reporting requirements are suspended for six (6) months. The continuing education requirements are modified as stated above for each person for the continuing education year in which March 10, 2020 lies for him or her.
10. **Modification of Thirty-Six Month Age Limit for Birth-to-Three Services.** Section 17a-248 of the Connecticut General Statutes, and any associated regulations, rules, and policies are modified to authorize the Commissioner of the Office of Early Childhood to temporarily expand the definition of “eligible

children” to include children who turn older than thirty-six months of age, who are presently engaged in early intervention services and not already determined to be eligible for services under the Individuals with Disabilities Education Act (IDEA) Part B, to further supplement access to services during the period of school class cancelations due to this civil preparedness and public health emergency. The Commissioner may issue any order deemed necessary to implement this order.

Unless otherwise specified herein, this order shall take effect immediately and remain in effect for the duration of the public health and civil preparedness emergency, unless earlier modified, extended or terminated.

Dated at Hartford, Connecticut, this 22<sup>nd</sup> day of April, 2020.



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Ned Lamont  
Governor



By His Excellency's Command



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Denise W. Merrill  
Secretary of the State