

July 1, 2024

152nd General Assembly
January 2023 to June 2024
Health Care Industry Related Legislation

To view the bill and current status click on the Bill#.

Delaware Senate Bills

[SB 2](#) (Lockman)

Introduced: 4/19/2023

An Act to amend Titles 11, 24 and 29 of the Delaware Code relating to **Deadly Weapons**. This Act does the following: (1) Creates an application process to obtain a handgun-qualified purchaser permit to authorize the purchase of a handgun. While an applicant will incur costs related to fingerprinting and required training, a fee will not be charged to obtain the permit. A holder of a valid concealed carry permit, a qualified law-enforcement officer, and a qualified retired law-enforcement officer are not required to obtain or present a handgun-qualified purchaser permit. (2) Prohibits a licensed importer, manufacturer, or dealer, as well as unlicensed persons, from selling or transferring a handgun to an individual unless the individual has a handgun-qualified purchaser permit. (3) Requires that an applicant complete a firearms training course within 5 years before the date of application, similar to what is required by Delaware's concealed carry permit law. (4) Makes clear that § 904A of Title 24 is not intended to prohibit law-enforcement officials from keeping records. (5) Requires the Department of Safety and Homeland Security to develop and administer a firearms training voucher program for low-income residents to provide low-income residents with a voucher to cover the costs of the firearms training course required under Section 1 of this Act. (6) Makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Act is not implemented until the earlier of the following: (1) Six months from the date of the Act's enactment. (2) The date of publication in the Register of Regulation of a notice by the Director of the State Bureau of Identification that the necessary processes have been established for implementation of the handgun qualified purchaser permit under Section 1 of this Act and the firearms training course under Section 5 of this Act.

Status: Substituted in Senate

[SS 1 for SB 2 with HA 2, HA 6, HA 10, HA 11](#) (Lockman) Introduced 5/2/2023

An Act to amend Title 11, Title 24, and Title 29 of the Delaware Code relating to **Deadly Weapons**. This Act is a substitute for Senate Bill No. 2. Like Senate Bill No. 2 this Act does all of the following: (1) Creates an application process to obtain a handgun qualified purchaser permit to authorize the purchase of a handgun. While an applicant will incur costs related to fingerprinting and required training, a fee will not be charged to obtain the permit. A holder of a valid concealed carry permit, a qualified law-enforcement officer, and a qualified retired law-enforcement officer are not required to obtain or present a handgun qualified purchaser permit. (2) Prohibits a licensed importer, manufacturer, or dealer, as well as unlicensed persons, from selling or transferring a handgun to an individual unless the individual has a handgun qualified

purchaser permit. (3) Requires that an applicant complete a firearms training course within 5 years before the date of application, similar to what is required by Delaware's concealed carry permit law. (4) Makes clear that § 904A of Title 24 is not intended to prohibit law-enforcement officials from keeping records. (5) Requires the Department of Safety and Homeland Security to develop and administer a firearms training voucher program for low-income residents to provide low-income residents with a voucher to cover the costs of the firearms training course required under Section 1 of this Act. (6) Makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Act differs from Senate Bill No. 2 as follows: (1) By increasing the time a handgun qualified purchaser permit is valid from 180 days to 1 year. (2) By requiring the Superior Court to schedule the de novo hearing within 15 days of the filing of the appeal rather than to hold the hearing within 21 days of the filing of the appeal. (3) By extending the implementation timeline of Sections 1 and 5 of this Act from a maximum of 6 months from the date of the Act's enactment to a maximum of 18 months from the date of the Act's enactment.

HA 2: Extends from 1 year to 2 years the length of time a handgun qualified purchaser permit is valid from the date of issue. Makes a technical correction to language relating to the JP Court appeal process. Allows for local law-enforcement agencies to ensure surrender or removal of handguns purchased with a revoked permit. Removes the firearms training course voucher program and makes corresponding technical changes. Adds an explicit severability provision.

HA 6: numerous professions provide and require training equal to or in excess of that required by the original bill. Likewise, certified instructors and competitive shooters enjoy much higher levels of knowledge, experience and competency than is required by the training requirements contained in the original bill. This amendment recognizes that fact and provides an exemption for certain professionals and individuals for whom the training requirements contained in the original bill would represent meaningless redundancy and an unnecessary waste of time, money and human resources while adding no additional safety to the community. This amendment would eliminate from the training requirement the redundancy represented by the requirements of the original bill for certain qualified individuals, reduce the cost to the applicant and make the permitting process more effective, meaningful, accepted and respected by the general public.

HA 10: clarifies what information may be retained by SBI and explicitly exempts application and permit information from the Freedom of Information Act.

HA 11: requires that a person identified in House Amendment No. 6 is exempt from the training requirement only if the firearm training they undertake as part of their employment meets the requirements for training set forth in this Act.

Status: Signed into Law 5/16/2024

SB 8 (Mantzavinos)

Introduced: 3/16/2023

An act to amend Title 6 of the Delaware Code relating to **Medical Debt**. This Act protects patients from unfair debt collection practices for medical debt, including prohibiting large health care facilities from charging interest and late fees, requiring facilities to offer reasonable payment plans, limiting the sale of debt to debt collectors unless an agreement is made to keep protections in place, providing minimum time before certain collections actions may be taken,

limiting liability for the medical debt of others, and preventing the reporting of medical debt to consumer credit reporting agencies for at least one year after the debt was incurred. Violations of the provisions of this Act are considered Prohibited Trade Practices and Consumer Fraud violations.

Status: Substituted in Senate

[SS 1 for SB 8](#) (Mantzavinos)

Introduced 5/9/2023

An Act to Amend Title 6 of the Delaware Code relating to **Medical Debt**. This Act is a substitute for Senate Bill No. 8. Like Senate Bill No. 8, this act protects patients from unfair debt collection practices for medical debt, including prohibiting large health care facilities from charging interest and late fees, requiring facilities to offer reasonable payment plans, limiting the sale of debt to debt collectors unless an agreement is made to keep protections in place, providing minimum time before certain collections actions may be taken, limiting liability for the medical debt of others, and preventing the reporting of medical debt to consumer credit reporting agencies for at least one year after the debt was incurred. Violations of the provisions of this Act are considered Prohibited Trade Practices and Consumer Fraud violations. This Act differs from Senate Bill No. 8 as it requires large health-care facilities to provide information to uninsured patients regarding eligibility and the application process for medical assistance. This information must be provided at the time of service or prior to discharge and again with each billing statement. It also creates a minimum threshold for eligibility for payment plans, and it reduces the timeframe in which a bill under a payment plan may be first due. This Act also defines “medical assistance” and “time of service,” which were not defined in Senate Bill No. 8.

Status: Substituted in Senate

[SS 2 for SB 8 with SA, HA 1](#) (Mantzavinos) Introduced 6/13/2023

An Act to Amend Title 6 of the Delaware Code relating to **Medical Debt**. This Act is the second substitute for Senate Bill No. 8. Like Senate Bill No. 8 and its first substitute, this Act protects patients from unfair debt collection practices for medical debt, including prohibiting large health care facilities from charging interest and late fees, requiring facilities to offer reasonable payment plans, limiting the sale of debt to debt collectors unless an agreement is made to keep protections in place, providing minimum time before certain collections actions may be taken, limiting liability for the medical debt of others, and preventing the reporting of medical debt to consumer credit reporting agencies for at least one year after the debt was incurred. Violations of the provisions of this Act are considered Prohibited Trade Practices and Consumer Fraud violations. Senate Substitute 1 for Senate Bill No. 8 differed from Senate Bill No. 8 as it required large health-care facilities to provide information to uninsured patients regarding eligibility and the application process for medical assistance. This information must be provided at the time of service or prior to discharge and again with each billing statement. It also created a minimum threshold for eligibility for payment plans, and it reduced the timeframe in which a bill under a payment plan may be first due. The first substitute also defined “medical assistance” and “time of service,” which were not defined in Senate Bill No. 8. This Substitute differs from Senate Substitute 1 in that it changes which medical providers are subject to this Act; it increases the threshold of outstanding debt that requires a payment plan to be offered to patients; it extends the amount of time allowed to provide the medical assistance notice; it refines the definition of medical assistance; it removes examples of companies that are currently credit reporting agencies; it removes a requirement that medical assistance information be printed in any

patient's primary language; it adds a requirement that providers make oral interpretation services available to patients for anything provided under this chapter; it clarifies that the Division of Child Support Services nor anyone filing a child support action is a medical debt collector; it clarifies that anything charged to a credit card is not medical debt; it removes the minimum time before the first payment under a payment plan is due. It also adds Section 2 making this Act effective 6 months after enactment. **SA 1** clarifies the definitions of medical creditor and medical debt collector and makes a technical correction. **HA 1** makes a technical correction.
Status: Signed into Law 9/11/2023

[SB 9 with SA 1, HA 1](#) (McBride)

Introduced: 5/8/2023

An act to amend Title 16 of the Delaware Code relating to **Lead-Based Paint**. Although lead-based paint is prevalent in many Delaware residences and causes extraordinary neurological damage in children, including seizures, behavioral disorders, developmental delays, and cognitive disabilities, Delaware does not have a comprehensive system to eliminate lead-based paint from those residences where children are still exposed to lead. This Act creates such a system, including: (1) Creating a system by which all properties where a child who is found to have high blood lead levels live are promptly screened for lead-based paint and, where that paint is found, treated to abate or remediate the lead-based paint. (2) Prohibiting landlords of properties where the State has paid for lead-based paint abatement from raising rents on those properties for a period of 3 years. (3) Taking steps to ensure that neither landlords nor local governments present unreasonable delays to the abatement of lead-based paint. (4) Creating a dedicated fund for abatement and remediation of lead-based paint hazards so that all levels of state government can be held accountable for funding lead-based paint abatement efforts. (5) Expanding the duties of the Childhood Lead Poisoning Prevention Advisory Committee to include a plan for prompt inspection and, where necessary, abatement or remediation of lead-based paint in all pre-1978 rental properties. **SA 1** does all of the following: (1) Makes clear that the State assumes that when a child has an elevated blood lead level there is exposed lead paint in the house and is, therefore, doing an inspection rather than a risk assessment. (2) Makes clear that the owner of any multi-unit property or property that has been rented to a third party may pay the Delaware State Lead-Based Paint Program's costs of abatement or remediation and, if the owner does so, the prohibition on rental fee increases does not apply to the owner. **HA 1** requires the Department of Finance to investigate funding sources for the Delaware State Lead-Based Paint Program and provide a report of the findings of the investigation by January 1, 2024, to the Governor, Chair and Vice-Chair of the Joint Finance Committee, and Director and Librarian of the Division of Research of Legislative Council.

Status: Signed into Law 7/17/2023

[SB 10](#) (Townsend)

Introduced: 6/8/2023

An act to amend Title 18 of the Delaware Code relating to **Health Insurance & Pre-authorization Requirements**. This legislation is the Delaware Pre-Authorization Reform Act of 2023. Section 1 of the Act applies to Health Insurance Contracts regulated under Chapter 33 of Title 18. Section 1 provides that changes in coverage terms for a health-care service or in the clinical criteria used to conduct pre-authorization reviews for a health-care service will not apply until the next plan year, for any covered person who received pre-authorization for the service prior to the change. It also requires the Delaware Department of Insurance to publish on its website information concerning the aggregate number of pre-authorization approvals, denials,

and appeals for each insurer, health-benefit plan, or health-care service corporation using pre-authorization review. In addition, Section 1 sets qualifications for who may make determinations with regard to requests for pre-authorization of health-care services and appeals of adverse determinations; a timeline and required contents for the notification of an outcome of appeal of an adverse determination or a notification that additional information is necessary to make the determination of appeal; and requirements for any utilization review entity used to perform pre-authorization review by an insurer, health-benefit plan, or health-service corporation. Section 1 also shortens the timelines for the determination of pre-authorization requests and notification to the health-care provider of the determination. For requests for pre-authorization of non-urgent health-care services not submitted electronically, the utilization review entity must notify the health-care provider within 4 days of receipt of the request; for requests submitted electronically, notification must be given within 72 hours of receipt. For requests for pre-authorization for urgent health-care services, notification must be given within 24 hours of receipt. By January 1, 2024, insurers, health-benefit plans, health-service corporations, and utilization review entities must accept and respond to electronic pre-authorization requests through the same platform as the electronic request was submitted. Further, an insurer, health-benefit plan, or health-service corporation may not deny or limit coverage of a service already provided on the grounds that pre-authorization was not obtained, if such services would have been covered had pre-authorization been obtained. In addition, Section 1 extends the time period that a pre-authorization is valid for from 60 days to 7 months. If a covered person changes insurers, health-benefit plans, or health-service corporations, the new insurer, health-benefit plan, or health-service corporation must comply with any existing pre-authorizations during the first 60 days of the new coverage. Finally, Section 1 provides that no more than 1 pre-authorization may be required for a single episode of care, and that if pre-authorization is granted as to a health-care services that is part of a group of services for which a bundled payment is charged, pre-authorization for the other health-care services included in the group is deemed to be approved as well. Section 2 of the Act applies to Group and Blanket Health Insurance under Chapter 35 of Title 18 and makes the same changes to pre-authorization standards and procedures that Section 1 of the Act makes to Health Insurance Contracts regulated under Chapter 33 of Title 18. Section 3 of the Act provides that the State Employee Benefits Committee established under § 9602 of the Title 29 of the Delaware Code must ensure that carriers administering plans for group health insurance comply with the requirements and provisions for pre-authorization set forth in Chapter 33, Subchapter II and Chapter 35, Subchapter V of Title 18. Section 4 of the Act provides that the Act will take effect on January 1 of the calendar year following enactment and will apply to policies, contracts, or certificates issued or renewed after that effective date. Section 5 of the Act provides that the Department of Health and Social Services must, to the extent feasible, assure that contracts awarded to carriers providing health insurance relating to Medicaid assistance comply with the requirements and provisions for pre-authorization set forth in Chapter 33, Subchapter II and Chapter 35, Subchapter V of Title 18. Section 6 of the Act provides that the Department of Insurance will promulgate a uniform pre-authorization form within 180 days of enactment. Section 7 provides that this Act is known as the "Delaware Pre-Authorization Reform Act of 2023."

Status: Introduced and Assigned to Banking, Business, Insurance & Technology Committee in Senate

[SB 13](#) (McBride)

Introduced: 3/19/2024

An Act to amend Titles 16 & 30 of the Delaware Code relating to **Hospital Quality Assessments and Establishment of a Hospital Quality & Health Equity Fund and Hospital Quality & Health Equity Assessment Commission**. Healthcare facility assessments are currently the second largest source of funding for states' shares of Medicaid costs, behind general funds. Today, 49 states have at least one facility assessment in place, including Delaware, while 34 states and Washington D.C. have 3 or more provider taxes. Delaware is one of only 6 states without a facility assessment on hospitals, causing the state to miss out on critical Medicaid funding that most states are already able to access. This Act creates the Hospital Quality Assessment, which places a 3.58% assessment on Delaware hospitals' net patient revenues. Net funds generated by the Hospital Quality Assessment must be utilized in one of two ways, with the exception of 10% that may be used to support existing Medicaid obligations: (1) 53.5% must be used to increase the inpatient and outpatient payments to hospitals. (2) 46.5% must be deposited into the Hospital Quality and Health Equity Fund, to be used to develop or enhance funding for Medicaid initiatives, unlocking federal matching dollars. Funds may not be used to supplant or replace appropriations for programs in existence on the effective date of this Act. This Act also creates the Hospital Quality and Health Equity Assessment Commission, which includes state agency and hospital representation. The Commission is required to meet at least annually to monitor the implementation of the assessment. If the Centers for Medicare & Medicaid Services (CMS) determines that either the assessment or the expenditure of money does not satisfy eligibility requirements for federal financial participation or that modifications are necessary to assure continued eligibility for federal financial participation, the Commission shall develop and approve modifications to Chapter 66 of Title 30 of the Delaware Code and Subchapter II of Chapter 10 of Title 16 of the Delaware Code and submit the modifications to the General Assembly. These modifications will take effect as of July 1 of the ensuing fiscal year unless rejected in full by an act of the General Assembly. This Act requires a greater than majority vote for passage because § 11 of Article VIII of the Delaware Constitution requires the affirmative vote of three-fifths of the members elected to each house of the General Assembly to impose or levy a tax or license fee. This Act may be cited as the "Protect Medicaid Act of 2024".
Status: Substituted in Senate

[SS 1 for SB 13 with HA 1](#) (McBride)

Introduced: 5/23/2024

An Act to amend Titles 16 & 30 of the Delaware Code relating to **Hospital Quality Assessments and Establishment of a Hospital Quality & Health Equity Fund and Hospital Quality & Health Equity Assessment Commission**. Healthcare facility assessments are currently the second largest source of funding for states' shares of Medicaid costs, behind general funds. Today, 49 states have at least one facility assessment in place, including Delaware, while 34 states and Washington D.C. have 3 or more provider taxes. Delaware is one of only 6 states without a facility assessment on hospitals, causing the state to miss out on critical Medicaid funding that most states are already able to access. This Act is a substitute for Senate Bill No. 13. Like Senate Bill No. 13, this Act creates the Hospital Quality Assessment, which places a 3.58% assessment on Delaware hospitals' net patient revenues. Funds generated by the Hospital Quality Assessment must be utilized in one of two ways: (1) To increase the inpatient and outpatient payments to hospitals. (2) To develop or enhance funding for Medicaid initiatives, unlocking federal matching dollars. Funds may not be used to supplant or replace appropriations for programs in existence on the effective date of this Act, except for 25% of these funds, which

may be used to support the general operations of the Medicaid program. Like Senate Bill No. 13, this Act also creates the Hospital Quality and Health Equity Assessment Commission (“Commission”), which includes state agency and hospital representation. The Commission is required to meet at least annually to monitor the implementation of the assessment. If the Centers for Medicare & Medicaid Services (CMS) determines that either the assessment or the expenditure of money does not satisfy eligibility requirements for federal financial participation or that modifications are necessary to assure continued eligibility for federal financial participation, the Commission shall develop and approve modifications to Subchapters II and III of Chapter 10 of Title 16 of the Delaware Code and submit the modifications to the General Assembly. This Act differs from Senate Bill No. 13 as follows: (1) By directing the Department of Health and Social Services (“Department”) to administer the Hospital Quality Assessment. (2) By establishing a different method of calculating the assessment for a hospital that begins or ceases hospital operations or does not conduct hospital operations through a calendar year or fiscal year. (3) By prohibiting a hospital subject to the Hospital Quality Assessment from passing on the cost of the assessment to any patient, insurer, self-insured program, or other responsible party. (4) By requiring a hospital subject to the Hospital Quality Assessment to attest in writing to the Department that an oral or written, formal or informal agreement or arrangement does not exist to share, redirect, or redistribute Medicaid payments which would result in violation of federal or state law. (5) By updating the split in percentages of the funds collected from the Hospital Quality Assessment to reflect the wide range of federal match levels for services. The expected amount to be collected by the Assessment does not change as the result of the update. (6) By requiring the Registrar of Regulations to publish in the Register of Regulations a certification by the Commission under § 1034(d) and (e) of Title 16 of the Delaware Code, as contained in this Act. (7) By providing that appointments of members of the Minority Caucus of the House of Representatives and Senate are to be made by the Speaker of the House of Representatives and President Pro Tempore of the Senate, respectively. (8) By making modifications to the requirements for meetings of the Commission. (9) By providing that modifications to Subchapters II and III of Chapter 10 of Title 16 of the Delaware Code recommended by the Commission take effect as of July 1 of the ensuing fiscal year unless rejected in full by an act of the General Assembly before that ensuing fiscal year. This Act requires a greater than majority vote for passage because § 11 of Article VIII of the Delaware Constitution requires the affirmative vote of three-fifths of the members elected to each house of the General Assembly to impose or levy a tax or license fee. This Act may be cited as the “Protect Medicaid Act of 2024”. **HA 1** removes the ability of the Hospital Quality and Health Equity Assessment Commission to make statutory changes directly. The Commission will instead submit recommendations on statutory changes to the General Assembly for additional action. This amendment also specifies that Commission meetings must follow open meeting requirements except that the Commission may hold private meetings if commercial or financial information of a privileged or confidential nature is under discussion. This amendment requires reports in 2025 and 2026 from the hospitals that have or will receive increased payments through the operation of this legislation describing how the funds have or will be used. This amendment updates the split in percentages of the funds used for increased payments to hospitals versus other approved uses of the funds.

Status: Signed into Law 10/1/2024

[SB 22](#) (Huxtable)

Introduced: 3/21/2024

An Act to amend Title 31 of the Delaware Code relating to **Establishing the Delaware Workforce Housing Program**. This Act establishes the “Delaware Workforce Housing Program” (DWHP). Modeled after the Downtown Development District Program, the DWHP allows a qualified workforce housing investor to be reimbursed through a grant up to 20 percent of the capital costs associated with workforce housing units they create. To be eligible for a grant, the project must be located in Investment Levels 1 and 2 as established by the Delaware Strategies for State Policies and Spending. A grant may not be awarded for a project that is also intended to qualify for a federal low-income or state low-income housing tax credit. This program will be administered by the Delaware State Housing Authority (DSHA) and requires the DSHA to provide an annual report on the effectiveness of the program. The Act provides the DSHA with the power to adopt regulations for the DWHP.

Status: Substituted in Senate

[SS 1 for SB 22](#) (Huxtable)

Introduced: 4/24/2024

An Act to amend Title 31 of the Delaware Code relating to **Establishing the Delaware Workforce Housing Program**. This Act establishes the “Delaware Workforce Housing Program” (DWHP). Modeled after the Downtown Development District Program, the DWHP allows a qualified workforce housing investor to be reimbursed through a grant up to 20 percent of the capital costs associated with workforce housing units they create. To be eligible for a grant, the project must be located in Investment Levels 1 and 2 as established by the Delaware Strategies for State Policies and Spending. A grant may not be awarded for a housing unit that also uses a federal low-income or state low-income housing tax credit. This program will be administered by the Delaware State Housing Authority (DSHA) and requires the DSHA to provide an annual report on the effectiveness of the program. The Act provides the DSHA with the power to adopt regulations for the DWHP. The substitute bill differs from Senate Bill No. 22 by changing most references to the word “affordable” and replacing it with the word “workforce.” Accordingly, the substitute bill modifies “affordable housing unit” to “workforce housing unit” and modifies “qualified affordable housing investment” to “qualified workforce housing investment.” The change in terminology is to avoid confusion within the housing industry, where the word “affordable” is generally accepted to mean housing for a median income level of 80% and below. To be clear, this Act provides workforce housing for median income levels of 100% and below. References to “affordable” have been changed to “workforce” to reflect this distinction throughout the Act. The substitute further clarifies that, although DSHA may not award a DWH Grant for a housing unit that would also use a federal low-income or state low-income housing tax credit, DSHA may approve DWH Grants for workforce housing units in a multiple unit housing project so long as the DWH Grants are awarded to those specific units that do not use federal low-income or state low-income housing tax credits. The substitute allows for DSHA to use part of the allocations for the administrative costs of the DWHP.

Status: Signed into Law 8/9/2024

[SB 24](#) (Hoffner)

Introduced: 1/20/2023

An Act to amend Title 14 of the Delaware Code relating to the **Seizure Safe Schools Act**. This Act requires all schools with a student diagnosed with a seizure disorder to train at least 2 employees in the administration of rescue medication or treatment prescribed to treat a student with a seizure disorder. Training includes the administration of a manual dose of prescribed

electrical stimulation using a Vagus Nerve Stimulator magnet. A school nurse employed full-time by a school is not required to meet these training requirements but may serve as 1 of the 2 required employees that are trained in the administration of seizure rescue medications....

Status: Introduced and Assigned to Education Committee in Senate

[SB 27](#) (Sturgeon)

Introduced: 1/10/2023

An Act to amend Title 10 of the Delaware Code relating to **Limitation of actions for work, labor or personal services**. This Act increases the statute of limitations for filing an action for recovery upon a claim for unpaid wages from 1 year to 2 years, making it consistent with the statute of limitations under the federal Fair Labor Standards Act, 29 U.S.C. §§ 201, et seq. Many employees who are terminated spend the first period of unemployment attempting to secure other employment. After this focus on finding employment ends, 1 year may have passed or be about to pass, preventing employees who are owed wages from a previous employer from seeking legal redress. This Act applies to claims when the date of the accruing of the cause of action on which the action is based is on or after the effective date of this Act. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 4/26/2023

[SB 28](#) (McBride)

Introduced: 1/12/2023

An Act to amend Title 22 of the Delaware Code and Chapter 420 of Volume 83 of the Laws of Delaware relating to **Dentistry and Dental Hygiene**. This Act provides that if a dentist holds a community health license to care for underserved populations through a federally-qualified health center or a government-operated dental clinic and continues to practice in compliance with § 1132B(b) of Title 24 of the Delaware Code, the dentist's license is renewable and shall be renewed biennially by the State Board of Dentistry and Dental Hygiene. This Act also extends the due date for the Dental Care Access Task Force's report to April 1, 2023.

Status: Signed into Law 1/26/2023

[SB 29 with SA 1](#) (Townsend)

Introduced: 1/12/2023

An Act to amend Title 29 of the Delaware Code relating to the **State Employee Benefits Consolidation Act**. To foster sustainability in state retiree healthcare benefits and the development of a plan for strong benefits beyond the current Medicare Supplement plan offered through January 1, 2024, this Act does all of the following: 1. Expands the membership of the State Employee Benefits Committee by adding a state retiree to the Committee and adding an additional representative from public sector union organizations; 2. Requires the Controller General to provide comprehensive biannual public reports to the General Assembly regarding the work of the State Employee Benefits Committee; and 3. Establishes the Retiree Healthcare Benefits Advisory Subcommittee of the State Employee Benefits Committee, whose membership will include three state retirees and four members of the General Assembly, and whose charge includes holding public meetings and issuing recommendations to the Governor and the General Assembly by May 1, 2023. **SA 1** precludes appointed members of the State Employee Benefits Committee from attending Committee meetings through a designee. This amendment also precludes appointed members of the Retiree Healthcare Benefits Advisory Subcommittee from attending Subcommittee meetings through a designee. The amendment adds to the duties of the Retiree Healthcare Benefits Advisory Subcommittee, by requiring the Subcommittee to evaluate

options that would allow state retirees to maintain their current coverage, similar to residents in other states that offer a choice to buy into a Medicare Supplement plan.

Status: Signed into Law 1/26/2023

[SB 31](#) (Townsend)

Introduced: 1/18/2023

An Act to amend Title 18 of the Delaware Code relating to **Primary Care Coverage**. This Act corrects a technical error in SB 227 (149th General Assembly) by establishing requirements for group and blanket health insurance plans that align with existing requirements for individual and State employee health insurance plans. As introduced, SB 227 specified that coverage for chronic care management under all 3 of these health insurance plan types cannot be subject to patient deductibles, copayments, or fees. Senate Amendment 1 to SB 227 made various intentional changes to SB 227 but also accidentally deleted the line that applied this chronic care management requirement to group and blanket plans. SB 227, as amended, passed both chambers unanimously. As a result, since January 1, 2019, there has been an unintentional difference in the requirements between the plan types. This Act corrects that divergence. This Act applies to policies, contracts, or certificates issued, renewed, modified, altered, amended, or reissued after December 31, 2023.

Status: Signed into Law 5/12/2023

[SB 32 with SA 1](#) (Poore)

Introduced: 1/18/2023

An Act to amend Title 14 of the Delaware Code relating to **Education**. The bill adds visual impairments including blindness to the list of programs to be conducted on a 12-month schedule. **SA 1** places limits on the number of hours and days of student and teacher attendance for programs for children with certain disabilities. This amendment limits the number of teacher work days for Division of Visually Impaired teachers to not more than 226 days.

Status: Signed into Law 8/3/2023

[SB 33](#) (Gay)

Introduced: 1/18/2023

An Act to amend Title 29 of the Delaware Code relating to the **Department of Services for Children, Youth and their Families**. This bill adopts a key recommendation of the Child Protection Accountability Commission Caseloads and Workloads final report approved on November 20, 2019, that Division of Family Services (DFS) caseload standards be reduced from 18 to 12 families per worker. Due to the volume of work generated by a caseload of 18 families, workers are significantly restricted in the time they can spend on critical case activities such as family engagement, assessment of safety, and face-to-face contact with children and families.

Status: Signed into Law 6/9/2023

[SB 35 with SA 2](#) (Walsh)

Introduced: 1/20/2023

AN ACT TO AMEND THE LAWS OF DELAWARE RELATING TO THE BOND AND CAPITAL IMPROVEMENTS ACT OF THE STATE OF DELAWARE AND CERTAIN OF ITS AUTHORITIES FOR THE FISCAL YEAR ENDING JUNE 30, 2023. **SA 2** removes language permitting a community workforce agreement to include a bona fide legal citizen of the State workforce requirement.

Status: Signed into Law 1/26/2023

[SB 36](#) (Mantzavinos)

Introduced: 1/26/2023

An Act to amend Titles 11 and 16 of the Delaware Code relating to **911 Dispatchers**. This Act provides a definition for 911 Dispatchers. While referenced in other sections of the Code, including being identified as a first responder in § 4319 of Title 11 for purposes of confidentiality of communications by first responders for critical incident stress management services, Dispatchers have not otherwise been defined.

Status: Signed into Law 9/21/2023

[SB 40](#) (Sokola)

Introduced: 1/26/2023

A BOND AND CAPITAL IMPROVEMENTS ACT OF THE STATE OF DELAWARE AND CERTAIN OF ITS AUTHORITIES FOR THE FISCAL YEAR ENDING JUNE 30, 2024; AUTHORIZING THE ISSUANCE OF GENERAL OBLIGATION BONDS OF THE STATE; APPROPRIATING FUNDS FROM THE TRANSPORTATION TRUST FUND; AUTHORIZING THE ISSUANCE OF REVENUE BONDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING SPECIAL FUNDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING GENERAL FUNDS OF THE STATE; REPROGRAMMING CERTAIN FUNDS OF THE STATE; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AND AMENDING CERTAIN STATUTORY PROVISIONS.

Status: Introduced and Assigned to Capital Improvement Committee in Senate

[SB 43](#) (Richardson)

Introduced: 2/17/2023

An Act to amend Titles 11 of the Delaware Code relating to the **Display of Human Trafficking Public Awareness Signs**. This Act adds additional State facilities and categories of establishments to § 787 of Title 11 which would be required to display public awareness signs about human trafficking. This Act provides definitions of some of the existing State facilities and categories of establishments where public awareness signs are required to be displayed, as well as some of the new State facilities and categories added by this Act. This Act repeals the requirement to display public awareness signs at “emergency care providers” and “adult entertainment facilities” in favor of using the terms “wellness center” and “adult entertainment establishment”, which are defined in this Act. This Act also includes specific locations on the premises where establishments that are hotels, casinos, restaurants with liquor licenses, poultry processing plants, massage establishments, and shopping malls must display a public awareness sign. **SA 1**, which does all the following: (1) Removes the mandate that the Department of Labor (Department) conduct enforcement. The Department still has enforcement authority but may exercise its discretion in whether to pursue enforcement. (2) Changes enforcement to a complaint-based system whereby the Department may inspect an establishment about which it receives a complaint. While the complaint-based system may be the main way that the Department will receive notice of possible noncompliance with public awareness sign requirements, the Department may still initiate inspections independent of a report from the Delaware Anti-Trafficking Action Council or a complaint. (3) Changes the enforcement process and timeframes as follows: When the Department conducts enforcement, it shall provide public awareness signs, if needed, to an establishment to immediately enable compliance with the public awareness sign display requirements. If, within 3 years, the Department determines the establishment is exhibiting the same, or a substantially similar, noncompliance identified in the warning notice, then the Department shall assess a civil penalty against the noncompliant

establishment. (4) Removes the safe harbor provision since all establishments will now receive copies of the proper signage during inspection, if new signs are needed. (5) Updates the civil penalty to conform to the changes made in the enforcement process and timeframes. (6) Names this Act the "Signs of Hope Act". This name reflects the purpose that the human trafficking public awareness signs serve: a way to reach, give hope, and save victims of human trafficking. (7) Removes repetitive language and corrects a grammatical error, was Placed with the Bill.

Status: *Substituted in Senate*

[SS 1 for SB 43](#) (Richardson)

Introduced: 6/1/2023

An Act to amend Titles 11 of the Delaware Code relating to the **Display of Human Trafficking Public Awareness Signs**. This Act is a substitute for Senate Bill No. 43. Both this Act and SB 43 add additional State facilities and categories of establishments to § 787 of Title 11 which would be required to display public awareness signs about human trafficking. The additional State facilities and categories are as follows: (1) State service centers. (2) Wellness centers. (3) Residential childcare facilities. (4) Transitional and independent living service providers for youth aging out of foster care. (5) Shelters for victims of domestic violence or sexual assault or individuals experiencing homelessness or food insecurity. (6) Hotels. (7) Convenience stores along a major highway. (8) Gas stations along a major highway. (9) Casinos. (10) Restaurants with liquor licenses. (11) Poultry processing plants. (12) Bus or train stations. (13) Bars. (14) Massage establishments. (15) Shopping malls. This Act is also the same as SB 43 in that it: (1) Provides definitions of some of the existing State facilities and categories of establishments where public awareness signs are required to be displayed, as well as some of the new State facilities and categories added by SB 43 (and retained by this Act). (2) Includes specific locations on the premises where establishments that are hotels, casinos, restaurants with liquor licenses, poultry processing plants, massage establishments, and shopping malls must display a public awareness sign. (3) Adjusts the process by which the Delaware Anti-Trafficking Action Council (Council) may designate establishments required to display public awareness signs. SB 43 and this Act allow the Council to promulgate regulations to designate other categories of establishments that must display public awareness signs in addition to the categories required under § 787 and this Act; designate a specific location on the premises for a category of establishments where a public awareness sign must be displayed; and change requirements for what must be included in a "public awareness sign", as defined in this Act. (4) Requires the Council to annually publish a list of categories of establishments that must display a public awareness sign and any specific location requirements for the purposes of providing notice. (5) Clarifies that enforcement fines are civil penalties. (6) Distinguishes between the responsibilities of the Council and establishments, as well as rewrites the responsibilities to clarify the current law regarding the display of public awareness signs. (7) Establishes an enforcement process, including the requirement that establishments will receive a warning before any civil penalties are assessed. The Department of Labor may promulgate regulations. (8) Requires the Department of Labor to submit an annual report about enforcement to the Council and the General Assembly. (9) This Act takes effect immediately and is to be implemented 1 year from the date of this Act's enactment to allow for the promulgation of regulations by the Department of Labor and the Council, as well as to ensure public awareness signs will be ready for distribution before implementation. (10) This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Act differs from Senate Bill No. 43 by: (1) Removing the mandate that the Department of Labor (Department) conduct enforcement.

The Department still has enforcement authority but may exercise its discretion in whether to pursue enforcement. (2) Changing enforcement to a complaint-based system whereby the Department may inspect an establishment about which it receives a complaint. While the complaint-based system may be the main way that the Department will receive notice of possible noncompliance with public awareness sign requirements, the Department may still initiate inspections independent of a report from the Delaware Anti-Trafficking Action Council or a complaint. (3) Changing the enforcement process and timeframes as follows: When the Department conducts enforcement, it shall provide public awareness signs, if needed, to an establishment to immediately enable compliance with the public awareness sign display requirements. If, within 3 years, the Department determines the establishment is exhibiting the same, or a substantially similar, noncompliance identified in the warning notice, then the Department shall assess a civil penalty against the noncompliant establishment. (4) Removing the safe harbor provision since all establishments will now receive copies of the proper signage during inspection, if new signs are needed. (5) Updating the civil penalty to conform to the changes made in the enforcement process and timeframes. The civil penalty is as follows: if an establishment does not correct the same, or a substantially similar, noncompliance identified in the warning notice, the establishment owner is subject to a civil penalty of not more than \$500. On a second or subsequent failure by an establishment to correct the same, or a substantially similar, noncompliance identified in the warning notice, the establishment owner is subject to a civil penalty of not more than \$2,500. The current fine under § 787 is \$300 per violation. (6) Naming this Act the "Signs of Hope Act". This name reflects the purpose that the human trafficking public awareness signs serve: a way to reach, give hope, and save victims of human trafficking. (7) Removing repetitive language and correcting a grammatical error. To make compliance with and enforcement of this Act feasible, a fiscal note is attached to this bill to finance the creation of the public awareness signs, which will be provided free to State of Delaware facilities and establishments and to fund a Department of Labor enforcement position.
Status: Signed into Law 9/11/2023

[SB 45](#) (Brown)

Introduced: 2/17/2023

An Act to amend Titles 19 of the Delaware Code relating to **Unemployment Compensation**. Under current Delaware law, if a labor dispute constitutes a lockout, employees are immediately eligible for unemployment benefits. Additionally, current law permits an individual to collect unemployment benefits beginning the third week of a labor dispute, other than a lockout. This Act mandates that the 2-week disqualification period does not apply if either: (1) The labor dispute is caused by the failure or refusal of the employer to comply with an agreement or contract between the employer and the individual, including a collective bargaining agreement with a union representing the individual, or a State or federal law pertaining to hours, wages, or other conditions of work. (2) The employer hires a permanent replacement worker for the individual's position. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Out of Committee in Senate

[SB 51 with HA 1, HA 2, HA 4](#) (Paradee) Introduced: 2/17/2023

An Act to amend Titles 16 of the Delaware Code relating to the **Use of Single-Service Plastic Implements and Polystyrene Containers in Food Establishments**. This Act prohibits food establishments from providing consumers with ready-to-eat food or beverages in polystyrene

foam containers or with single-service plastic coffee stirrers, cocktail picks, or sandwich picks. It also prohibits food establishments from providing single-service plastic straws, unless requested by a consumer. These restrictions take effect on July 1, 2025. This Act provides the following exemptions to the prohibitions on single-service plastic implements and polystyrene foam containers: 1. The definition of "polystyrene foam food service packaging" excludes coolers or ice chests used for the processing or shipping of seafood and containers used to contain, transport, or package raw, uncooked, or butchered meat, poultry, fish, seafood, eggs, fruits, or vegetables. 2. The prohibition on plastic straws does not apply to patients or residents of hospitals or long-term care facilities and for plastic straws that are attached to pre-packaged goods, such as juice boxes. 3. The restriction on providing ready-to-eat food in polystyrene foam food service packaging does not apply to any of the following: • Fire companies. • Health-care providers that provide long-term, acute, and outpatient health-care services. • Nonprofit organizations, including religious institutions. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. **HA 1** removes the exceptions for fire companies and nonprofit organizations from the prohibition on providing ready-to-eat food in polystyrene foam food service packaging. **HA 2** narrows the health-care provider exception from the prohibition on providing ready-to-eat food in polystyrene foam food service packaging to only food provided to a patient or resident. **HA 4** adds whereas clauses to Senate Bill No. 51 which provide additional information regarding the impact on and longevity of polystyrene in landfills. It clarifies that a food establishment's license may not be suspended or revoked for violation of this chapter and delays the penalty provision to 1 year after the effective date and defines a violation of the chapter as a "core item" under the Delaware Food Code. Finally, it directs that by December 31, 2023, the DSWA shall submit a report regarding the use of and potential substitutes for polystyrene foam from food establishments and other sources, and the disposal challenges and recycling options for waste polystyrene foam, identifying steps which can be considered in order to achieve the goal of reducing or eliminating polystyrene foam being added to landfills or open dumps in the State. This amendment is identical to HA 3 for SB 51 except that the word "administrative" is added at line 14 to clarify that the penalty for violation of this Act is administrative and not criminal.

Status: Signed into Law 8/22/2023

[SB 52](#) (Pinkney)

Introduced: 3/1/2023

An Act to amend Title 29 of the Delaware Code relating to the **Sterile Needle and Syringe Exchange Program**. This Act directs the State's current needle exchange program to take a needs-based approach. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 8/9/2023

[SB 55 with SA 1](#) (Poore)

Introduced: 3/1/2023

An Act to amend Title 29 of the Delaware Code establishing the **Delaware Rare Disease Advisory Council**. This bill establishes the Delaware Rare Disease Advisory Council which, among other things, is intended to educate medical professionals, government agencies, legislators, and the public about rare diseases. There are about 7,000 known rare diseases, and they create major public health challenges. The Advisory Council is charged with engaging in activities intended to benefit rare disease patients in Delaware, including encouraging and securing funding for the development of new treatments for rare diseases. **SA 1** makes the

following changes to Senate Bill No. 55: 1) It establishes the Rare Disease Advisory Council within the Office of the Lt. Governor instead of the Department of Health and Social Services. 2) It amends the provision about the hospital administrator appointee to the Council by requiring that the appointee be from an acute care hospital in Delaware. 3) It increases the size of the Council from 11 members to 14 members, by adding the following: a) a second Delaware resident, who either has a rare disease or has experience caring for a person with a rare disease, b) an administrator from a biopharma manufacturer, and c) a licensed genetic counselor. 4) It establishes that staffing support for the Council will be provided by the University of Delaware Institute for Public Administration.

Status: Signed into Law 7/26/2023

[SB 58](#) (McBride)

Introduced: 3/1/2023

An Act to relating to the **Removal of Copay Requirements for Families in Need**. Since the COVID-19 public health emergency, the Department has not charged copays for Delaware Families earning up to 200% of the federal poverty level and has reimbursed purchase of care providers for 15 absent days per child per month. These practices have been successful in stabilizing families and providing early learning programs for Delaware's needy families and children.

Status: Assigned to Finance Committee in Senate

[SB 59](#) (Gay)

Introduced: 3/1/2023

An Act to **Establish a Statewide Rate of Purchase of Care for Child Care Providers**. This bill directs the Department to pay a statewide rate to all childcare providers that is aligned with the New Castle County rate through existing program funds. This service provides support for families with children birth to 12 years of age with access to childcare to enable the caretaker to hold a job, obtain training or meet the special needs of the parent or child. The bill would pay licensed childcare providers statewide at the reimbursement rate of New Castle County as determined by the 2021 Delaware Local Child Care Market Rate Survey.

Status: Assigned to Finance Committee in Senate

[SB 66 with SA 1, HA 1](#) (Buckson)

Introduced: 3/23/2023

An Act to amend Title 20 of the Delaware Code relating to the **Public Health Emergency Planning Commission**. This Act adds the Senate Minority Leader and the House Minority Leader as members of the Public Health Emergency Planning Commission (Commission). This Act also requires the Commission to meet within 30 days of the initiation a state of emergency due to a public health emergency for the purposes of discussing and evaluating, in an advisory capacity to the Governor, the response to the public health emergency. The Commission would be required to continue meeting at least every 30 days until the termination of the state of emergency due to a public health emergency. This Act also defines the term "Commission" in the subchapter-level definition section since the term "Commission" is used in multiple places within Subchapter V of Chapter 31 of Title 20. This Act also adds Commission governance procedures, including length of terms, filling vacancies, and defining quorum. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual, including updating agency names. **SA 1** does the following: (1) Changes the term length from 4 years to 2 years for the Delaware medical community representative and the physician members of the Public Health Emergency Planning Commission (Commission). This

change was made to have the term length coincide with the biennial review of the public health emergency plan. (2) Adds a physician who is board certified in infectious disease as a member of the Commission in place of an emergency medicine physician. **HA 1** adds the Director of the Office of Management and Budget to the Emergency Planning Commission.

Status: Signed into Law 9/14/2023

[SB 68 \(Gay\)](#)

Introduced: 4/19/2023

An Act to amend Title 21 of the Delaware Code relating to **Occupant Protections**. This Act revises Delaware's child safety seat requirements which currently requires an "appropriate" car seat or booster. Under this Act, children under 2 years and under 30 pounds must be seated in a rear-facing seat with a 5-point harness. Children under 4 years and under 40 pounds must be seated in either a forward facing or rear-facing seat with a 5-point harness. Children between the ages of 4 and 16, must be seated in a booster based upon the manufacturer's guidelines or a seatbelt. This Act removes the existing fine for the first offense and requests law enforcement to provide a referral to the Office of Highway Safety car seat fitting station for guidance and education regarding proper use of a child restraint. Under this Act, the Department of Safety and Homeland Security is required to implement an awareness campaign within 180 days of enactment. The remainder of the Act will not take effect until 1 year following its enactment.

Status: Signed into Law 6/30/2023

[SB 72 \(Poore\)](#)

Introduced: 3/29/2023

An Act to amend Title 30 of the Delaware Code relating to **Personal Income Tax**. The purpose of this chapter is to allow residents of Delaware who are active members of a labor organization to claim a tax credit equal to the annual cost of maintaining their membership in the labor organization, not to exceed \$500.

Status: Substituted in Senate

[SS 1 for SB 72 \(Poore\)](#)

Introduced: 5/10/2023

An Act to amend Title 30 of the Delaware Code relating to **Personal Income Tax**. This Act is a substitute for Senate Bill No. 72. Senate Bill No. 72 would have provided Delaware residents who are active members of a labor organization to claim a tax credit equal to the annual cost of maintaining their membership in the labor organization, not to exceed \$500. This Act differs from Senate Bill No. 72 by providing that members of a labor organization may claim a tax deduction for their expenses, rather than a tax credit. **SA 1**, which provides that the state tax deduction for union dues expires upon the expiration and non-extension of the suspension of miscellaneous itemized deductions under the federal Tax Cuts and Jobs Act (TCJA). The suspension of miscellaneous itemized deductions under the TCJA is currently scheduled to expire after the tax year ending December 31, 2025, was Placed with the Bill.

Status: Substituted in Senate

[SS 2 for SB 72 \(Poore\)](#)

Introduced: 5/18/2023

An Act to amend Title 30 of the Delaware Code relating to **Personal Income Tax**. In 2017, the federal Tax Cuts and Jobs Act (TCJA), Public Law No. 115-97, suspended many itemized deductions from individual federal taxes until January 1, 2026, including the itemized deduction for costs to maintain membership in a labor organization. Senate Bill No. 72 created a tax credit for resident individuals equal to the annual cost, not to exceed \$500, to the individual to maintain

membership in a labor organization. Senate Substitute No. 1 for Senate Bill No. 72 made the annual cost to a resident individual to maintain membership in a labor organization an itemized tax deduction, not to exceed \$500. Senate Amendment No. 1 to SS 1 for SB 72 sunset this itemized deduction when the federal tax deduction for costs to maintain membership in a labor organization is restored. Like SS 1 for SB 72, Senate Substitute No. 2 for Senate Bill No. 72 creates an itemized tax deduction for the annual cost to a resident individual to maintain membership in a labor organization. SS 2 for SB 72 differs from SS 1 for SB 72 as follows: 1. It does not allow an individual to take this deduction if the individual has taken a deduction on their federal income tax return for any cost to maintain membership in a labor organization. 2. It clarifies that this exemption does not include payments that are not deductible under federal law for amounts paid to or through a labor organization for employee benefits, pension contributions, other compensation, or that were used in connection with lobbying or political expenditures, or settlement or investigatory costs or assessments of a government entity. 3. Does not define “labor organization”, because under § 1101 of Title 30, it has the same meaning as when used in federal law in reference to federal income taxes. If an individual deducts any cost to maintain membership in a labor organization from their federal income tax return, that deduction flows through to the state return. By limiting this deduction to individuals who have not taken a deduction on their federal income tax return for any cost to maintain membership in a labor organization, SS 2 for SB 72 does not need to sunset, because if federal law restores or creates a similar deduction in the future and an individual uses that deduction, the individual cannot claim the same deduction again on their state income tax return. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 8/31/2023

[SB 74 with SA 1](#) (Hansen)

Introduced: 4/19/2023

An Act to amend Title 24 of the Delaware Code relating to **Health Records**. This Act establishes requirements for the handling of treatment records for all of the following health-care providers under Title 24: 1. Advanced Practice Registered Nurses (certified nurse practitioners), Chapter 19. 2. Licensees under the Board of Mental Health and Chemical Dependency Professionals, Chapter 30: mental health professional counselors and associate counselors, chemical dependency professionals, marriage and family therapists, professional art therapists. 3. Psychologists, Chapter 35. 4. Licensed Clinical Social Workers, Chapter 39. Under current law, a patient or client does not have a right or clear procedure by which to obtain a copy of their record when one of these practitioners closes a practice, dies, terminates a patient relationship, or is incapacitated. The requirements established under this Act are modeled on the patient record requirements and procedures for physicians and correspond with the changes that would be enacted under House Bill No. 105 (152nd). These requirements and procedures also apply when a patient or client requests copies of their records. Under existing law, the governing boards established under these chapters have authority to promulgate regulations, if necessary, to address intersections between the requirements under this Act and professional codes of ethics. Sections 5 through 8 of this Act make technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual and corrects the spelling of the word “healthcare” to be consistent throughout these chapters. **SA 1** adds the provisions in HA 1 to HB 105 (152nd), which require the notice of an office closure to include the date services will cease and that when an office closes, notice must be provided to the applicable governing body

explaining how former patients or clients may obtain their records. It also delays the effective date of SB 74 for 6 months. In addition to the requirements under HA 1 to HB 105, this Amendment requires the patient's or client's written consent before providing records to a new provider.

Status: Signed into Law 6/30/2023

[SB 80](#) (McBride)

Introduced: 4/6/2023

An Act to amend Title 29 of the Delaware Code relating to **Immigration Status Requirements for Professional Licenses**. This Act codifies the current practice in Delaware of not requiring proof of citizenship or a specific immigration status on an application for a professional license. By affirmatively providing eligibility for professional licenses regardless of immigration status, this Act brings Delaware into compliance with a federal requirement in place since August 22, 1996, under 8 U.S.C.S. § 1621(d), and provides public notice of this policy.

Status: Substituted in Senate

[SS 1 for SB 80](#) (McBride)

Introduced: 5/2/2023

An Act to amend Title 29 of the Delaware Code relating to **Immigration Status Requirements for Professional Licenses**. Senate Bill No. 80 codifies the current practice in Delaware of not requiring proof of citizenship or a specific immigration status on an application for a professional license. By affirmatively providing eligibility for professional licenses regardless of immigration status, Senate Bill No. 80 brings Delaware into compliance with a federal requirement in place since August 22, 1996, under 8 U.S.C.S. § 1621(d), and provides public notice of this policy. Senate Bill No. 80 also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. Senate Substitute No. 1 for Senate Bill No. 80 differs from Senate Bill No. 80 by also codifying the current practice of allowing an applicant for a professional license who does not have a social security number to submit instead, an attestation stating that if the applicant obtains a social security number in the future, the applicant will update their application with that social security number.

Status: Signed into Law 8/31/2023

[SB 81](#) (Townsend)

Introduced: 4/6/2023

An Act to amend Title 10 of the Delaware Code relating to **Wrongful Death Actions**. This statutory addition to Delaware's Wrongful Death Act will permit the spouse, parents, children, and siblings of a deceased person to recover punitive damages when the actions resulting in the death of another person were maliciously intended or the result of willful or wanton misconduct by the at fault party. Punitive damages are intended to deter the at fault party from future similar conduct and to punish the at fault party for reckless conduct. Presently, an estate can recover punitive damages under a survival action pursuant to 10 Del C. § 3701. A survival action involves the death of an individual as the result of the at fault party where that individual suffers for a period of time before dying. Whereas, a wrongful death action involves the instantaneous death of an individual as the result of the at fault party. This led to cases where the issue of whether a defendant faced punitive damages depended not on the defendant's own actions, but on whether the deceased had suffered long enough for a survival action. This Act also clarifies the definitions of "child" and "parent."

Status: Signed into Law 7/17/2023

[SB 85](#) (Lawson)

Introduced: 4/19/2023

An Act to amend Titles 9, 10, 11, 22 and 24 of the Delaware Code relating to **Carrying a Concealed Deadly Weapon**. On June 23, 2022, in *New York State Rifle and Pistol Association v. Bruen*, 142 S. Ct. 2111 (2022), the United States Supreme Court completely and dramatically changed the manner in which state-level gun laws are to be evaluated for constitutional sufficiency. Although not directly addressed in a definitive fashion the way other states' concealed carry laws were, Delaware's concealed carry law was mentioned by the Court in a manner signaling that certain flaws in our law must be immediately addressed. This Act is designed to address those issues raised by the Bruen decision in a manner meant to save Delaware's concealed carry law from a successful constitutional challenge. This Act addresses current constitutional deficiencies while maintaining public safety issues unique to Delaware. Section 20 of Article I of the Delaware Constitution guarantees that "a person has the right to keep and bear arms for defense of self, family home and state...". Both the United States Supreme Court and the Delaware Supreme Court have recognized the right of self-defense to be fundamental and to have pre-dated the formation of our country. As of 2020, there were over 18,600,000 Americans with concealed carry permits and 24,400,000 adults living in states where no permit is required to carry a concealed firearm, which is a 420% increase in the number of adults living in states allowing the public carrying of a firearm since 1988. As of the beginning of 2021, there were 18 states where no permits were required to carry a concealed firearm, 25 states that were considered "shall issue" permit states, and 9 states that were considered "may issue" permit states. This Act brings Delaware law concerning the carrying of concealed deadly weapons into conformity with Section 20 of Article I of the Delaware Constitution by allowing a person who is 21 years of age or older and not a prohibited person under either Delaware law or the laws of the United States to carry a deadly weapon concealed on or about their person for the purpose of defending self, family, home, and State. In addition, this Act makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual and conforming amendments in other provisions of the Delaware Code to account for the removal of the requirement to obtain a license to carry a concealed deadly weapon.

Status: Introduced and Assigned to Judiciary Committee in Senate

[SB 86](#) (Sokola)

Introduced: 4/19/2023

An Act to amend Title 21 of the Delaware Code relating to **Rules of the Road**. Currently, every adult operating or riding as a passenger on a motorcycle is required to have a helmet in their possession and wear eye protection while operating or riding a motorcycle and every person up to 19 years of age must wear a helmet and eye protection. This Act requires that everyone who obtains a new endorsement for a motorcycle on or after the effective date of this Act, or someone riding with the newly endorsed person, to wear a helmet and eye protection for the first 2 years after the newly endorsed person receives the endorsement. In 2022, Delaware experienced 10 motorcycle fatalities where the rider was not wearing a helmet. Over the last 5 years, among crashes involving a Delaware licensed motorcycle rider, 25% of fatal and serious injury crashes involved a rider in their first 2 years of having a motorcycle endorsement. Helmets and eye protection are already required for those operating with a temporary motorcycle instruction permit as required under § 2703 of Title 21 of the Delaware Code and no passengers are allowed. Nineteen states and the District of Columbia currently require all motorcyclists to wear a helmet. According to research from the National Highway Traffic Safety Administration, helmets are highly effective in protecting motorcycle riders' heads in crashes and significantly

reduce deaths and serious head injuries in crashes. This Act creates a civil penalty for violation of the helmet law, both the existing law and the law created by this Act.

Status: Signed into Law 6/30/2023

[SB 98 with HA 1](#) (Poore)

Introduced 4/25/2023

An Act to amend Title 16 of the Delaware Code relating to the **Delaware health Care Commission Health Care Provider Loan Repayment Program**. This Act allows Dental Clinicians possessing a DDS or DMDS to participate in the Health Care Provider Loan Repayment grant program. The Act also extends the time in which providers may apply for a Health Care Provider Loan Repayment grant from six months to two years following completion of their graduate education. **HA 1** makes changes to the definition of new primary care and dental provider.

Status: Signed into Law 8/31/2023

[SB 101](#) (Hansen)

Introduced 4/26/2023

An Act to amend Title 16 of the Delaware Code relating to **the Uniform Controlled Substances Act**. This Bill amends the Uniform Controlled Substances Act to establish quantity tiers specific to drug offenses involving fentanyl. This update to the UCSA accounts for the high potency and lethality of fentanyl relative to other substances in its current statutory category, and the rise in deaths and suffering related to fentanyl throughout Delaware communities.

Status: Introduced and Assigned to Health & Social Services Committee in Senate

[SB 102](#) (Townsend)

Introduced 4/26/2023

An Act to amend Title 29 of the Delaware Code related to the **Prevailing Wage**. This Act closes a loophole in the prevailing wage statute that was being used to pay workers below the prevailing wage by performing work offsite instead of onsite, regardless of whether it was necessary to do so. This bill also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Substituted in Senate

[SS 1 for SB 102](#) (Townsend)

Introduced: 5/12/2023

An Act to amend Title 29 of the Delaware Code related to the **Prevailing Wage**. This Act closes a loophole in the prevailing wage statute that was being used to pay workers below the prevailing wage by performing work offsite instead of onsite, regardless of whether it was necessary to do so. This bill also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 7/26/2023

[SB 106](#) (Gay)

Introduced 5/3/2023

An Act to amend Title 16 of the Delaware Code relating to **Maternal Mental Health**. This Act modernizes and expands the concept of maternal mental health by replacing the definition of maternal depression with the more encompassing definition of perinatal mood and anxiety disorder. This Act contemplates treatment for any caregiver who may be affected by perinatal mood and anxiety disorder. This Act avoids use of gender-based pronouns as recommended by the Legislative Drafting Manual.

Status: Substituted in Senate

[SS 1 for SB 106](#) (Gay)

Introduced 6/8/2023

An Act to amend Title 16 of the Delaware Code relating to **Maternal Mental Health**. This Act modernizes and expands the concept of maternal mental health by replacing the definition of maternal depression with the more encompassing definition of perinatal mood and anxiety disorder. This Act contemplates treatment for any caregiver who may be affected by perinatal mood and anxiety disorder. This Act avoids use of gender-based pronouns as recommended by the Legislative Drafting Manual.

Status: Signed into Law 9/24/2024

[SB 116](#) (McBride)

Introduced 5/9/2023

An Act to amend Title 24 of the Delaware Code relating to a **Physician Assistants Licensure Compact**. This Act adopts the PA Licensure Compact, which is an interstate occupational licensure compact for physician assistants (PAs). The purpose of the Compact is to strengthen access to medical services and enhance the portability of a license to practice as a physician assistant while safeguarding the safety of patients and complementing the existing authority of state licensing boards to license and discipline physician assistants. Under the Compact, a physician assistant licensed in a Compact member state may obtain a privilege to practice in another Compact member state. Physician assistants using a Compact privilege to practice in another state must adhere to laws and regulations of practice in that state and are under the jurisdiction of the regulatory board of the state in which they are practicing. The Compact contemplates the establishment of a PA Compact Commission, which will consist of one delegate from each member state and will administer the Compact, and a data system, for the purpose of maintaining a coordinated data and reporting system containing licensure, adverse action, and investigative information on licensed physician assistants in participating states. The Compact will take effect on the date of enactment by the seventh state. Currently, 1 state has enacted the Compact and at least 4 states, not including Delaware, are considering legislation to enact the Compact.

Status: Signed into Law 7/21/2023

[SB 119](#) (Gay)

Introduced 5/10/2023

An Act to amend Title 13 and Title 31 of the Delaware Code relating to **Guardianship of a Child**. This Act amends Chapter 23, Title 13 relating to guardianship and permanent guardianship of a child. The Act does all of the following: 1. Repeals § 351, Title 31, and embeds the requirement for assessments of non-relative guardianship petitioners in Chapter 23, Title 13, the statute for guardianship of a child. 2. Revises the definition of relative for Chapter 23, Title 13, to include the relationships outlined in § 351, Title 31 for whom assessment is not required. This revision also expands eligibility for relative permanent guardianship petitioners. 3. Clarifies that when a parent consents to guardianship, a reason for establishing the guardianship is still required. 4. Moves the parental consent provision previously in § 2353(c) to § 2353(a)(1). 5. Creates separate grounds for granting guardianship when parental rights have been terminated and are vested in DSCYF or a licensed agency. 6. Requires parental consent or a Court order for a guardian or permanent guardian to relocate a child if it will materially affect a parent's visitation. This provision mirrors the relocation provision in § 734, Title 13. 7. Adds an individual with whom a child in DSCYF custody is placed as a person eligible to serve as a permanent guardian. 8. Clarifies that either a TPR ground or a parent's consent is required to

grant a permanent guardianship. 9. Clarifies that a permanent guardianship petitioner must have the child placed with them for 6 months immediately preceding the filing of the petition. This requirement is also expanded to include relatives, unless the court finds just cause to waive the requirement for a relative petitioner. 10. Provides judicial discretion, where extraordinary circumstances are found, to grant permanent guardianship to a foster parent or individual with whom a child in DSCYF custody is placed when none of the other exceptions apply. 11. Makes minor technical changes to conform existing law to the standards of the Delaware Legislative Drafting Manual, including replacing "and/or" with the appropriate conjunction and using gender silent language.

Status: Signed into Law 7/31/2023

[SB 123](#) (Mantzavinos)

Introduced 5/11/2023

An act to amend Title 16 of the Delaware Code relating to **Patient Abuse**. This Act provides that any adult day care facility required to be licensed under Chapter 1 of Title 16 is subject to the existing reporting obligations for facilities under Subchapter III of Chapter 11 of Title 16 of the Delaware Code.

Status: Signed into Law 9/21/2023

[SB 124](#) (Gay)

Introduced 5/11/2023

An act to amend Title 16 of the Delaware Code relating to the reporting of **Child Abuse and Neglect**. This Act clarifies when reports of child abuse or neglect, including suspected human trafficking of a child, are required to be made orally to the Department's report line and when they may be made via the Department's online reporting portal. This Act also clarifies that licensed professionals who make reports may not remain anonymous.

Status: Signed into Law 7/31/2023

[SB 127](#) (Mantzavinos)

Introduced 5/11/2023

An act to amend Title 16 of the Delaware Code relating to **Patient Abuse**. This Act adds different levels of criminal liability based on the specifics of a case for directors or managers of facilities who fail to take corrective action to protect patients or residents from criminal activity.

Status: Introduced and Assigned to Health & Social Services in Senate

[SB 141](#) (Huxtable)

Introduced: 5/19/2023

An act to amend Title 24 of the Delaware Code relating to the **Board of Speech/Language Pathologists, Audiologists, and Hearing Aid Dispensers**. This Act establishes updated, detailed standards for the practice of hearing aid dispensing. Definitions are added to specify that the standards and requirements pertaining hearing aid dispensing apply to prescription hearing aids only and not to over-the-counter hearing aids. Hearing aid dispenser licensure requirements consist of a high school diploma, six months of on-the-job training, and a national exam. Currently, hearing aid dispensers are expressly prohibited from making medical diagnoses or audiologic evaluations, as set forth in 24 Del. C. § 3702(7). Input from stakeholders demonstrated that HADs were practicing outside the permissible scope of practice. Impermissible activities include cerumen management (wax removal), which is considered invasive, and treating tinnitus (ringing in the ears), which can indicate more complex medical issues. These conditions are appropriately treated by a physician, preferably a hearing specialist. Further, HADs frequently use medical diagnosis codes to ensure payment from insurance

carriers, which conflicts with the medical diagnosis prohibition in the current law. A new scope of practice definition delineates permissible and prohibited activities and identifies when referral to a physician is required. This Act also clarifies that a speech/language pathologist applicant must present a certificate of clinical competence issued by the American Speech-Language-Hearing Association (ASHA). Audiologist applicants are not subject to this requirement. The distinction is that ASHA evaluates the speech/language pathologist's practicum and clinical fellowship, which are requirements for licensure. In contrast, an audiologist applicant is only required to establish receipt of a doctoral degree and successful completion of a national licensure examination. This Act clarifies that audiologists licensed prior to July 10, 2009 do not need to meet the educational requirement of a doctoral degree as long as they have maintained Delaware licensure. This Act further amends provisions relating to examinations to comport with current practice. This Act revises the reciprocity requirements in the interests of clarity. This Act sets forth requirements for licensure of applicants who were educated outside of the United States. This Act removes the definitions of audiology aide and speech pathology aide on the basis that the Board does not license aides. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/21/2023

[SB 143](#) (Mantzavinos)

Introduced: 5/19/2023

An act to amend Title 18 of the Delaware Code relating to **Health Insurance**. This Act makes several changes intended to improve the claims payment process by health insurers. Specifically, the Act: (i) codifies the definition of "clean claim" adopted in Department of Insurance regulations; (ii) requires an insurer to treat erroneously denied claims as timely filed without the provider having to resubmit the claim; (iii) requires carriers that engaged in coordination of benefits verify an insured's other coverage is effective for the date and type of service associated with the applicable claim before taking any recovery action against a provider; (iv) requires that a carrier who recovers payment from a provider through coordination of benefits and thereafter receives reimbursement for the same claim from another insurer issue notice to the provider of the payment so that the provider may seek payment for the amount recovered; (v) allows a provider 12 months to submit a claim for reimbursement after a retroactive denial by a carrier; (vi) requires prompt payment of clean claims within 30 days and after a successful appeal by a provider from a carrier's denial of payment, with interest accruing on late payments. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Introduced and Assigned to Banking, Business, Insurance & Technology Committee in Senate

[SB 145 with SA 1](#) (Sturgeon)

Introduced: 6/1/2023

An act to amend Title 19 of the Delaware Code relating to **Damages for Employment Discrimination**. This Act increases the limits on the dollar amount of awards of compensatory or punitive damages, or both, in cases of employment discrimination, establishing specific caps based on the number of the respondent's employees. This Act also clarifies that the Superior Court may order equitable relief available under Title VII of the Civil Rights Act of 1964, as well as back pay and front pay, which is an award made for the period between the date of judgment and the date of reinstatement. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. **SA 1** revises the

limits on damage awards by doing all of the following: 1. Keeps the limit for respondents with 4 to 14 employees the same as current law. 2. Establishes a new category of respondents with 15 through 100 employees. 3. Lowers the amount the limits are increased by this Act for respondents with more than 15 employees.

Status: Signed into Law 9/11/2023

[SB 146](#) (Sturgeon)

Introduced: 6/1/2023

An act to amend Title 19 of the Delaware Code relating to **Discrimination in Employment**. Under current law, an individual can file a charge of employment discrimination by sending the verified charge to the Delaware Department of Labor (Department). This Act clarifies that a verified charge of discrimination is deemed to be filed on the date it is sent to the Department. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/11/2023

[SB 147](#) (Sturgeon)

Introduced: 6/1/2023

An act to amend Title 11 of the Delaware Code relating to **Computer-Related Offenses**. The existing computer crimes of unauthorized access, theft of computer services, misuse of computer system, and destruction of computer equipment contain elements broad enough to include actions employees may take to investigate or document an employer's violation of state or federal employment laws. In addition to criminal penalties, a civil action for treble damages may be brought against a person who violates these laws. Sometimes, when employees seek to investigate, explore, or pursue employment laws by providing evidence obtained from that employer's computer systems, an employer will threaten to sue the employee because the employee's possession of this evidence could be found to be a violation of these computer crimes. Because the potential damages for violating the computer crimes exceeds the compensation the employee would receive if their claim under the employment law is successful, the employee does not pursue their claim. This Act creates a narrow exception to these crimes so that a person is not guilty of a crime under §§ 932, 933, 935, or 936 of Title 11, if all of the following apply: (1) The employee's actions were only for the purpose of investigating, exploring, or pursuing a claim by an employee that the employer violated a state or federal employment law protecting the rights of employees. (2) Information obtained by the employee was only disclosed for the purpose of investigating, exploring, or pursuing a claim by an employee that the employer violated a state or federal employment law protecting the rights of employees. This Act also clarifies that if an exemption under § 942 of Title 11 applies, a civil action under § 941 of Title 11 cannot be brought against a person for a violation of §§ 932, 933, 935, or 936 of Title 11.

Status: Substituted in Senate

[SS 1 for SB 147 with SA 1](#) (Sturgeon)

Introduced: 1/18/2024

An act to amend Title 11 of the Delaware Code relating to **Computer-Related Offenses**. This Act creates a narrow exception to the computer crimes under §§ 932, 933, and 935 of Title 11 because these crimes contain elements broad enough to include actions employees may take to document or report an employer's violation of state or federal employment laws protecting the rights of employees. In addition to criminal penalties, § 941 of Title 11 allows a civil action for treble damages against an employee for a violation of any provision of §§ 932, 933, or 935 of

Title 11. Like Senate Bill No. 147, Senate Substitute No. 1 for SB 147, does all of the following: 1. Provides that an employee is not guilty of a crime under §§ 932, 933, or 935 of Title 11 if the employee's actions were taken to pursue a claim by an employee that the employer violated a state or federal employment law protecting the rights of employees and the information obtained by the employee was only disclosed for this purpose. 2. Clarifies that if an exemption to a crime under §§ 932, 933, or 935 of Title 11 applies, an employer may not bring a civil action under § 941 of Title 11 against a current or former employee for a violation of §§ 932, 933, or 935 of Title 11. Senate Substitute No. 1 for SB 147 differs from SB 147 by making the following revisions to clarify the narrow intent of this Act: 1. Does not include § 936 of Title 11, destruction of computer equipment, under this exemption. 2. Replaces the words "investigating, exploring, or pursuing" with "reporting or filing". 3. Requires that the employee accessed computer services or systems as authorized for the employee's use in the course of the employee's employment. **SA 1** replaces the word "filing" with "pursuing" to include all steps in a judicial or administrative proceeding regarding the employee's claim that the employer violated a state or federal employment law protecting the rights of employees.

Status: Assigned to Judiciary Committee in House

[SB 148](#) (Sturgeon)

Introduced: 6/1/2023

An act to amend Title 24 of the Delaware Code relating to the **Topical Medical Waste Reduction Act**. This Act allows a practitioner with the authority to prescribe medication to give the unused portion of topical medication used during treatment to a patient upon discharge or the conclusion of the visit. This Act is based on the Model Act created by the American Academy of Ophthalmology, which has been adopted in Illinois. During a procedure, practitioners may use only a few drops or small amount of medication from a container. Because regulations governing the ability to dispense the remaining portion of stock-item medications can be unclear or appear overly burdensome, many facilities do not allow the practitioner to dispense that container to the patient to take home with them. Instead, the practitioner must write a prescription for the patient and the medication that remains in the container is discarded. By allowing patients to take home provider-dispensed medication, this Act reduces waste and health-care costs and by eliminating the extra burden of going to the pharmacy to fill a prescription, this Act will better ensure medication compliance. This Act is known as "The Topical Medical Waste Reduction Act". This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 8/9/2023

[SB 150](#) (Mantzavinos)

Introduced: 6/1/2023

An act to amend Title 16 of the Delaware Code relating to **Dementia Care Services in Long-Term Care Facilities**. This Act defines dementia care services and activity services, and it requires that all long-term care facilities that offer dementia care services have sufficient staff to meet the needs of each resident, including a sufficient number of dedicated activity staff. This Act also requires that the staff who work with residents receiving dementia care services complete dementia care services training and identifies certain requirements for such training.

Status: Substituted in Senate

[SS 1 for SB 150](#) (Mantzavinos)

Introduced: 5/13/2024

An act to amend Title 16 of the Delaware Code relating to **Dementia Care Services in Long-Term Care Facilities**. This Act is a substitute for Senate Bill No. 150. Like Senate Bill No. 150, this Act requires included facilities have sufficient staff to meet the needs of each resident and requires dementia care services training for staff. This Act differs from Senate Bill No. 150 in the following ways: (1) it removes the definition of activity services; (2) it defines direct care, secured memory care unit, and memory care services; (3) it requires that assisted living facilities providing dementia care services to residents in a secured memory care unit create a staffing plan that ensures the facility has sufficient staff to meet the scheduled, reasonably foreseeable unscheduled, and evolving needs of residents and; (4) it charges the Department of Health and Social Services with reviewing the staffing plan during each annual inspection and during any other inspection in which the Department deems it relevant; (5) it revises initial dementia care services training requirement by limiting the requirement to individuals that provide care in a secured memory care unit of an assisted living facility, creating separate training requirements, both in terms of duration and content, for individuals that provide direct care and non-direct care to residents receiving dementia care services in secured memory care units of assisted living facilities; (6) it revises the annual dementia care services training requirement to mirror initial dementia services training requirements; (7) it establishes dementia care services training requirements for individuals employed by temporary staffing agencies; (8) it gives the Department of Health and Social Services the discretion to accept other required dementia care services training to satisfy the dementia care services training requirements; (9) it details the transferability of training between facilities and temporary staffing agencies; and (10) it narrows the scope from all long-term care facilities to only assisted living facilities.

Status: Substituted in Senate

[SS 2 for SB 150 with SA 1](#) (Mantzavinos) Introduced: 5/14/2024

An act to amend Title 16 of the Delaware Code relating to **Dementia Care Services in Long-Term Care Facilities**. This Act is a substitute for Senate Bill No. 150. Like Senate Bill No. 150, this Act requires included facilities have sufficient staff to meet the needs of each resident and requires dementia care services training for staff. This Act differs from Senate Bill No. 150 in the following ways: (1) it removes the definition of activity services; (2) it defines direct care, secured memory care unit, and memory care services; (3) it requires that assisted living facilities providing dementia care services to residents in a secured memory care unit create a staffing plan that ensures the facility has sufficient staff to meet the scheduled, reasonably foreseeable unscheduled, and evolving needs of residents and; (4) it charges the Department of Health and Social Services with reviewing the staffing plan during each annual inspection and during any other inspection in which the Department deems it relevant; (5) it revises initial dementia care services training requirement by limiting the requirement to individuals that provide care in a secured memory care unit of an assisted living facility, creating separate training requirements, both in terms of duration and content, for individuals that provide direct care and non-direct care to residents receiving dementia care services in secured memory care units of assisted living facilities; (6) it revises the annual dementia care services training requirement to mirror initial dementia services training requirements; (7) it establishes dementia care services training requirements for individuals employed by temporary staffing agencies; (8) it gives the Department of Health and Social Services the discretion to accept other required dementia care services training to satisfy the dementia care services training requirements; (9) it details the transferability of training between facilities and temporary staffing agencies; and (10) it narrows

the scope from all long-term care facilities to only assisted living facilities. **SA 1** clarifies the definition of secured memory care unit.

Status: Signed into Law 8/1/2024

[SB 151](#) (Mantzavinos)

Introduced: 6/1/2023

An act to amend Title 6 of the Delaware Code relating to **Mandatory Disclosure of Information in Long-Term Care Facilities Offering Dementia Care Services**. This Act requires that all long-term care facilities that advertise, market, or otherwise promote that the facility provides dementia care services must complete a written notice on a form prepared by the Department of Health and Social Services. The Act identifies the required content that must be included in the written notice, establishes required dissemination procedures of the written notice for long-term care facilities, and authorizes DHSS to promulgate rules and regulations to carry out these provisions. Violations of this Act are Consumer Fraud violations.

Status: Substituted in Senate

[SS 1 for SB 151](#) (Mantzavinos)

Introduced: 5/17/2024

An act to amend Title 6 of the Delaware Code relating to **Mandatory Disclosure of Information in Long-Term Care Facilities Offering Dementia Care Services**. This Act is a substitute for Senate Bill No. 151. Like Senate Bill No. 151, this Act requires included facilities to disclose information related dementia care services in the form determined by the Department of Health and Social Services, and it establishes requirements for the dissemination of that information. Like Senate Bill No. 151, any violation of this Act is an unlawful practice under § 2513 of Title 6 and a violation of subchapter II of Chapter 25 of Title 6 of the Delaware Code. This Act differs from Senate Bill No. 151 in the following ways: (1) it narrows the scope of the disclosure requirements to apply only to assisted living facilities that advertises, markets, or otherwise represents that the facility provides dementia care services; (2) it revises the definition of dementia care services, and defines direct care, memory care services, and secured memory care unit; (3) it replaces the term agent with the term authorized representative; (4) it revises the list of information that must be included in the disclosure form; (5) it clarifies the Department's and the facility's role in preparing and completing the disclosure; (6) it removes the requirement that an included facility must publish the disclosure on the facility's website; and (7) it grants the Department of Health and Social Services the authority to investigate potential violations and refer cases to the Department of Justice.

Status: Signed into Law 8/1/2024

[SB 152](#) (Mantzavinos)

Introduced: 6/1/2023

An act to amend Title 16 of the Delaware Code relating to the **Rights of Long-Term Care Facility Residents**. This Act expands the rights of long-term care facility residents by ensuring that long-term care facility residents are entitled to care that recognizes cultural differences and preferences and that long-term care facility residents are made aware of their rights in a language and format that is accessible to the resident. This Act also requires the Department of Health and Social Services to prepare a standardized notice listing all rights detailed in § 1121 of Title 16 in a language and format that is accessible to each resident or their authorized representative. This bill also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/11/2023

[SB 153](#) (McBride)

Introduced: 6/1/2023

An act to amend Titles 12, 14, 16 and 29 of the Delaware Code relating to **Behavioral Health**. This Act makes changes to provisions related to behavioral health and the Division of Substance Abuse and Mental Health to reflect current practices.

Status: Signed into Law 9/11/2023

[SB 158](#) (Gay)

Introduced: 6/1/2023

An act to amend Title 11 of the Delaware Code relating to **Address Confidentiality**. This Act permits an individual who is a reproductive health care services provider or employee to apply for participation in Delaware's Address Confidentiality Program, which allows participants to keep their actual address confidential by applying to the Department of Justice for a substitute address to which all mail will be delivered. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 8/9/2023

[SB 159](#) (Sokola)

Introduced: 6/1/2023

An act to amend Title 29 of the Delaware Code relating to the **Blood Bank**. This Act removes membership with the Blood Bank of Delaware as a recognized benefit by the State due to changes in policies in how hospitals and insurance companies bill for blood replacement and blood replacement procedures.

Status: Signed into Law 5/16/2024

[SB 160](#) (Walsh)

Introduced: 6/23/2023

A BOND AND CAPITAL IMPROVEMENTS ACT OF THE STATE OF DELAWARE AND CERTAIN OF ITS AUTHORITIES FOR THE FISCAL YEAR ENDING JUNE 30, 2024; AUTHORIZING THE ISSUANCE OF GENERAL OBLIGATION BONDS OF THE STATE; APPROPRIATING FUNDS FROM THE TRANSPORTATION TRUST FUND; AUTHORIZING THE ISSUANCE OF REVENUE BONDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING SPECIAL FUNDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING GENERAL FUNDS OF THE STATE; REPROGRAMMING CERTAIN FUNDS OF THE STATE; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AND AMENDING CERTAIN STATUTORY PROVISIONS.

Status: Signed into Law 6/30/2023

[SB 165 with SA 1, SA 2](#) (Poore)

Introduced: 6/6/2023

An act to amend Title 24 of the Delaware Code relating to **Pharmacy**. This Act amends Chapter 25, Title 24 of the Delaware Code relating to the Practice of Pharmacy. The amendments authorize pharmacists to engage in “collaborative pharmacy practice” with one or more “practitioners” meaning individuals who are authorized by law to prescribe drugs in the course of professional practice. Pharmacists may also do so pursuant to a “collaborative pharmacy practice agreement,” which means a written and signed agreement between one or more pharmacists and one or more practitioners that provides for a collaborative pharmacy practice. **SA 1** deletes the word “adult” from line 28 of Senate Bill No. 165, and thus allows pharmacists to administer immunizations to minors pursuant to a valid prescription or physician-approved protocol

approved by a duly licensed Delaware physician. **SA 2** clarifies "practitioners" who administer injectable medications, biologicals and immunizations are engaged in the "practice of pharmacy" as defined in the original bill.

Status: Signed into Law 8/17/2023

[SB 167](#) (Pinkney)

Introduced: 6/8/2023

An act to amend Title 10 of the Delaware Code relating to **Confidential Communications Involving First Responders, Civilian Employees, or Their Families**. This Act establishes a wellness program designed to improve the well-being of first responders and first responders' immediate family members, as well as civilian employees of police, fire, and emergency medical services agencies and their immediate family members, through the provision of wellness program services by trained peer support members. Wellness program services may include counseling, spiritual guidance, and education about financial resources, health resources, legal assistance, and stress management services. This Act extends the confidentiality privileges to include communications made by a first responder, the first responder's immediate family member, a civilian employee, or a civilian employee's immediate family member, to a trained peer support member providing wellness program services through a state, county, or municipal law-enforcement, fire, or emergency medical agency's wellness program. This Act adds chaplains to definition of "first responders". This Act defines "civilian employee". This Act updates the definitions section to account for the creation of the wellness program. This Act also revises the confidentiality exception in § 4319(d)(4) of Title 10. In current Code, the exception applies in certain instances where the first offender uses critical incident stress management (CISM) services to commit or attempt to commit "a crime or fraud or mental or physical injury to the first responder who received critical incident stress management services or another individual". This Act replaces the quoted phrase with "'crime', as defined under § 233 of Title 11, or fraud." This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. The technical changes include combining the privileges to refuse to disclose any matter and refuse to produce any object or record that are covered in § 4319(b) and (c) of Title 11 in current Code into a single subsection, § 4319(b) of Title 10. This Act updates subsection (c) so that it only contains 1 subject: that the privileges in subsection (b) only apply if the proceedings, communications, or records, including information, are obtained during the provision of critical incident stress management (CISM) services or wellness program services.

Status: Signed into Law 9/21/2023

[SB 175](#) (Townsend)

Introduced: 6/13/2023

An act to amend Title 29 of the Delaware Code relating to **Appropriations for Post-Retirement Health Insurance Premiums**. The Other Post-Employment Benefits Fund (OPEB Fund) is used to pay the State's benefits for post-retirement health insurance under the State employees' pension plan. This Act requires that every year, at least 1% of the grand total of all General Fund operating budget appropriations for the prior fiscal year is appropriated to the OPEB Fund. The total amount of the contributions to the OPEB Fund is not allowed to exceed the annual required contribution, which is actuarially determined by the Board of Pension Trustees. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 7/17/2023

[SB 178](#) (McBride)

Introduced: 6/15/2023

An act to amend Title 19 of the Delaware Code relating to **Comparable Private Plans under the Family and Medical Leave Program**. Under § 3716(e) of Title 19, the Family and Medical Leave Program (FMLP) allows the Department of Labor (Department) to approve private benefits in existence on May 10, 2022, as a private plan under the FMLP, for applications submitted by January 1, 2024. This Act revises the appeal process when the Department denies an application under § 3716(e) so that the hearing is conducted by the Secretary of the Department instead of the Family and Medical Leave Insurance Appeal Board (Appeals Board). The primary function of the Appeals Board is to conduct hearings on denials of individual claims for benefits under the FMLP, but individuals will not be eligible for these benefits until January 1, 2026. Thus, the Appeals Board does not otherwise need to be established in 2023, and the expertise members need is in areas other than those needed for appeals of decisions under § 3716(e) of Title 19.

Status: Signed into Law 8/31/2023

[SB 181](#) (Walsh)

Introduced: 6/15/2023

An act to amend Title 19 of the Delaware Code relating to the **Delaware Contractor Registration Act**. This Act provides that a contractor is jointly or severally liable for a violation of the Delaware Contractor Registration Act by a subcontractor.

Status: Introduced and Assigned to Labor Committee in Senate

[SB 182](#) (Walsh)

Introduced: 6/15/2023

An act to amend Title 19 of the Delaware Code relating to the **Delaware Contractor Registration Act**. This Act does all of the following: (1) Grants the Department discretion to reject or accept an application that is incomplete or contains inaccurate information. (2) Permits a contractor to submit a new application for registration if the Department rejected the application because it was incomplete or contains inaccurate information.

Status: Substituted in Senate

[SS 1 for SB 182](#) (Walsh)

Introduced: 6/20/2023

An act to amend Title 19 of the Delaware Code relating to the **Delaware Contractor Registration Act**. This Act is a substitute for Senate Bill No. 182. Like Senate Bill No. 182, this act does all of the following: (1) Grants the Department discretion to reject or accept an application that is incomplete or contains inaccurate information. (2) Permits the contractor to submit a new application for registration if the Department rejected the application because it was incomplete or contains inaccurate information. This Act differs from Senate Bill No. 182 in that it makes a technical correction to remove unnecessary language added to § 3607(b)(2) of Title 19 by Senate Bill No. 182.

Status: Signed into Law 8/31/2023

[SB 185 with SA 1](#) (Mantzavinos)

Introduced: 6/15/2023

An act to amend Title 24 of the Delaware Code relating to **Continuing Education**. This Act extends the date that the requirements created by Senate Bill 283 in the 151st become effective to allow the Division of Professional Regulation more time to implement these requirements. **SA 1**

clarifies the date for when the Act applies to doctors' licenses and changes the date for when the Act applies to nurses' licenses.

Status: Signed into Law 8/31/2023

[SB 189with SA 1](#) (Poore)

Introduced: 6/16/2023

An act to amend Title 16 of the Delaware Code relating to the **Uniform Controlled Substances Act and Drug Testing Strips**. This Act adds xylazine and its isomers, esters, ethers, salts and salts of isomers, esters and ethers to Schedule III of the Delaware Uniform Controlled Substances Act and expands the authorization for the distribution of testing strips to determine the presence of controlled substances. According to the United States Drug Enforcement Administration, the emergence of xylazine across the United States appears to be following the same path as fentanyl, starting in the Northeast and then spreading to the South and working its way into drug markets westward, and the low cost of xylazine contributes to xylazine's increased presence in the nation's illegal drug supply. Xylazine is approved only for veterinary use, xylazine is a non-opioid with increasing presence as an adulterant, often in conjunction with opioids, in the illicit drug supply. When used alone and in conjunction with other drugs, xylazine is implicated as a cause or contributing cause of death in the United States. When used in conjunction with an opioid, such as heroin or fentanyl, xylazine may worsen respiratory depression in the event of a drug overdose, and because xylazine is not an opioid, naloxone is not known to be effective at reversing overdoses, and there is no known antidote or reversal agent for xylazine overdose in humans. This Act also exempts testing strips from the drug paraphernalia statute and expands the limitations on liability for lay individuals and organizations that provide a drug testing strip to an individual who uses drugs to reduce the likelihood of the individual experiencing harm. This Act becomes effective upon the expiration of the Emergency Order issued by the Secretary of State placing Xylazine in Schedule III of the Uniform Controlled Substance Act or November 29, 2023, whichever is earlier. **SA 1** provides that the Act sunsets on November 29, 2024.

Status: Signed into Law 8/17/2023

[SB 194 with SA 1](#) (McBride)

Introduced: 6/26/2023

An act to amend Title 24 of the Delaware Code relating to **Practice of Pharmacy**. This Act allows pharmacists, under protocol approved by the Division of Public Health, to provide HIV pre-exposure and post-exposure prophylaxis treatments. **SA 1:** 1. It clarifies the requirement for training required prior to the first time a pharmacist initiates therapy under this Act. 2. It changes the language for the type of negative test required to make it a test that is approved by the U.S. FDA. 3. It clarifies the requirements for action to be taken if a patient tests positive and adds the requirement, if approved by the patient, to send the test results to a primary care provider if the patient has one.

Status: Signed into Law 9/24/2024

[SB 195](#) (Pinkney)

Introduced: 6/28/2023

An act to amend Title 16 of the Delaware Code relating to the **Delaware Medical Orders for Scope of Treatment Act**. The Delaware Medical Orders for Scope of Treatment "DMOST" was enacted in 2016 under HB 64 (148th). The DMOST form allows Delawareans to plan ahead for health-care decisions, express their wishes in writing, and both enable and obligate health care professionals to act in accordance with a patient's expressed preferences. A DMOST form is

different than an Advance Health-Care Directive because a DMOST form contains portable medical orders that respect the patient's goals for care in regard to the use of CPR and other medical interventions. Currently, DMOST is being underutilized, despite efforts by advocates and the creation of a statewide, electronic registry for DMOST forms hosted by the Delaware Health Information Network (DHIN). This Act will improve the utilization of DMOST forms by health-care practitioners, health-care providers, emergency-care providers, and patients and their families by creating a DMOST Program at the Department of Health and Social Services (DHSS). This Act expands upon DHSS' current responsibilities under DMOST by doing all of the following: 1. Providing ongoing education and training for health-care practitioners, health-care providers, emergency-care providers, and patients and their families. 2. Maintaining a website for information and education about DMOST. 3. Working with the DHIN to maintain the electronic registry. 4. Coordinating with the National POLST Collaborative regarding current best practices and research. (POLST, which stands for Physician Orders for Life-Sustaining Treatment, was the name given to the first tool developed for honoring patients' wishes for end of life treatment in 1991.) 5. Creating a DMOST Steering Committee, consisting of a broad group of stakeholders, to evaluate and improve the DMOST Program and the use of DMOST forms. The DMOST Steering Committee must produce an annual report containing data about the use of DMOST forms, trainings, public education and outreach, and current challenges and recommendations to improve the DMOST Program. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/26/2024

[SB 196](#) (Poore)

Introduced: 6/29/2023

An act to amend Title 16 of the Delaware Code relating to **24/7 Emergent Physician Care Centers**. This legislation establishes a voluntary certification program for 24/7 Emergent Physician Care Centers and is designed to help Delawareans chose the right level of walk-in, medical care. The importance of 24/7 Physician Care Centers in the delivery of urgent and emergent health care services in times of crisis was exhibited during the recent COVID-19 Pandemic. Currently, Delawareans have no assistance in determining the varying levels of services available at urgent care facilities. This legislation creates the category of and defines the minimum level of services necessary for 24/7 Emergent Physician Care Centers. The minimum requirements for 24/7 Emergent Physician Care Centers include being open 24 hours a day, 7 days a week, having a Delaware licensed physician and registered nurse on site at all times, providing lab and diagnostic imaging services, providing on-site splinting, fracture care and suturing, and not refusing care to any person due to inability to pay or lack of identification.

Status: Introduced and Assigned to Health & Social Services Committee in Senate

[SB 199](#) (Mantzavinos)

Introduced: 1/4/2024

An Act to amend Title 6 of the Delaware Code relating to **Large Health Care Facilities**. This Act further clarifies the application of the provisions of this chapter [Medical Debt Protection Act].

Status: Signed into Law 9/26/2024

[SB 204](#) (McBride)

Introduced: 1/9/2024

An Act to amend Title 31 of the Delaware Code relating to **Dental Care for Adult Medicaid Recipients**. Before October 1, 2020, Delaware was 1 of only 3 states that did not offer some

form of adult dental coverage through Medicaid. With the enactment of Senate Substitute No. 1 for Senate Bill 92 (150th General Assembly) (Chapter 187 of Volume 82 of the Laws of Delaware) and Senate Bill No. 237 (150th General Assembly) (Chapter 290 of Volume 82 of the Laws of Delaware), Delaware began providing dental care benefits to eligible Medicaid recipients in an amount not to exceed \$1,000 per year, with the potential for an additional \$1,500 per year for emergency care with the approval of the Department of Health and Social Services ("Department"). This Act streamlines the Medicaid Adult Dental benefit by consolidating the emergency and non-emergency benefits into a single benefit of \$2,500.

Status: Assigned to Finance Committee in Senate

[SB 207](#) (Poore)

Introduced: 1/17/2024

An Act to amend Chapter 170, volume 84 of the Laws of Delaware relating to the **Uniform Controlled Substances Act & Drug Testing Strips**. This Act eliminates the sunset provision contained in Chapter 170 Volume 84 of the Laws of Delaware related to xylazine.

Status: Signed into Law 6/20/2024

[SB 208](#) (Mantzavinos)

Introduced: 1/17/2024

An Act to amend Title 18 of the Delaware Code relating to **Medical Negligence Insurance & Litigation**. This bill amends Chapter 68 of Title 18, related to medical negligence insurance and litigation, to repeal those provisions of the law that are expired or that are no longer used as a matter of practice in medical negligence litigation.

Status: Signed into Law 8/29/2024

[SB 209](#) (Poore)

Introduced: 1/18/2024

An Act to amend Title 29 of the Delaware Code relating to the **Division of Forensic Science & the Definition of Next of Kin**. This act adds adult sibling of a decedent to the definition of next of kin in Chapter 47 of Title 29 of the Delaware Code relating to the Division of Forensic Science. This expansion of the definition of next of kin will, for example, allow the Medical Examiner to release the personal property of a decedent to an adult sibling of a decedent, when there is no other next of kin. It will also allow the Medical Examiner to provide a copy of a postmortem examination report to an adult sibling, upon written request, when there is no other next of kin.

Status: Signed into Law 6/20/2024

[SB 212](#) (Brown)

Introduced: 1/25/2024

An Act to amend Title 29 of the Delaware Code relating to the **Bureau of Health Equity**. This Act codifies the Bureau of Health Equity (BHE) in the Division of Public Health, which includes the Office of Minority Health and the Office of Women's Health to ensure that "everyone in Delaware will achieve their full health potential by eliminating health disparities, particularly among all racial and ethnic minority groups." Of note, the bill includes language that the Bureau shall provide cultural competency training. It shall also collaborate with partners to promote health equity including the PCRC and the OCBHCD.

Status: Substituted in Senate

[SS 1 for SB 212](#) (Brown)

Introduced: 3/11/2024

An Act to amend Title 29 of the Delaware Code relating to the **Bureau of Health Equity**. Like Senate Bill No. 212, Senate Substitute No. 1 for Senate Bill No. 212 codifies the Bureau of Health Equity (BHE) in the Division of Public Health, which includes the Office of Minority Health and the Office of Women’s Health. The purpose of the BHE is to ensure that everyone in Delaware will achieve their full health potential by eliminating health disparities, particularly among all racial and ethnic minority groups. The BHE works with communities to address social determinants of health, focusing on prevention, health, and wellness in the broader population instead of treatment focused on individuals. Health disparities are preventable differences in the quality of health or health care between 2 or more groups of people based on a shared characteristic of the individuals within each group, such as race, ethnicity, or socioeconomic status and the differences between the groups regarding access to health care or burdens, prevalence, or incidence of disease or violence. Delaware has been recognized nationally for successfully reducing some health disparities, including being the first state to virtually erase racial disparities in colorectal cancer screening and treatment, by combining individual patient assistance from nurse navigators and care coordinators with community-based outreach efforts that used trusted messengers, including leaders of faith-based communities. However, 10 years after achieving this success with colorectal cancer screening and treatment, many health disparities remain in Delaware. Codifying the BHE ensures that this critical work continues. In addition, this Act identifies the Primary Care Reform Collaborative and the Office of Value-Based Health Care Delivery as state entities that the BHE should collaborate with because these entities are addressing health disparities through insurance payments to providers. This Act also makes technical corrections to § 7905 of Title 29. Senate Substitute No. 1 for Senate Bill No. 212 differs from Senate Bill No. 212 as follows: • Changes the Delaware Code designation for the BHE to § 7905B to avoid confusion with § 7905A in Chapter 79A of Title 29. • Revises the definition of “health disparity”. • Adds that a purpose of the BHE is to promote conditions that are vital to promote health and well-being. • Removes the requirement that the BHE provide training on cultural competency because this is no longer a function that the BHE has the expertise or staff to provide.

Status: Signed into Law 8/12/2024

[SB 215 with SA 1, SA 2](#) (Manzavinos)

Introduced: 2/26/2024

An Act to amend Title 16 of the Delaware Code relating to **State Inspections of Long-Term Care Facilities**. This Act requires the Department of Health and Social Services to inspect long-term care facilities on an annual basis. **SA 1** changes the effective date provision in Section 2 of the Bill to make the Act effective 90 days after its enactment into law. **SA 2** changes the inspection requirements for long-term care facilities in Senate Bill 215 to mirror the inspection requirements in federal regulations.

Status: Signed into Law 8/1/2024

[SB 216 with SA 1](#) (Manzavinos)

Introduced: 2/26/2024

An Act to amend Title 16 of the Delaware Code relating to **Long Term Care Facilities and Services and Civil Penalties**. This Act increases the civil penalties for violations of the statutes in Title 16, Chapter 11 related to Long Term Care Facilities and the regulations adopted pursuant to it. For violations that the Department determines pose a serious threat to the health and safety of a resident, the minimum penalty in Section 1109 of Title 16 is increased from \$1,000 per

violation to \$2,000, and the maximum penalty is increased from \$10,000 to \$20,000 per violation. Each day of a continuing violation constitutes a separate violation. For violations that do not constitute a serious threat to the health and safety of a resident, the maximum penalty is increased from \$5,000 to \$10,000 per violation. The civil penalties in Section 1109(a)(2) for violations that pose a serious threat to the health and safety of a resident were established in 1998 and have not been increased since then. The maximum civil penalty in Section 1109(c) for violations that do not constitute a serious threat to the health and safety of a resident was set at \$10,000 in 1998, but was later reduced to \$5,000 in 2000, and has not been increased since then. This Act also repeals the provision which places a cap on the civil penalties for continuing violations. **SA 1** restores the language in the existing Delaware Code, at lines 38 to 40 of the bill, about civil penalties for continuing violations and increases the civil penalties in the existing Delaware Code for continuing violations.

Status: Signed into Law 8/1/2024

[SB 217](#) (Mantzavinos)

Introduced: 2/26/2024

An Act to amend Title 14 of the Delaware Code relating to **Financial Assistance for Education**. This Act creates a professional loan-to-grant incentive program to encourage Delawareans to pursue careers in nursing at long-term care facilities. Funding for the incentive program is to be appropriated annually by the General Assembly, in an amount not less than \$1 million. Qualifying nursing students who agree to fulfill a 4-year service obligation at a long-term care facility may apply for loans to assist with expenses associated with (a) prelicensure education at a (i) State Board of Nursing approved nursing education program that is authorized to prepare persons for licensure as a registered nurse or a (ii) State Board of Nursing approved practical nursing education program, or (b) a graduate-level education at an advanced practice registered nurse program accredited by a national accrediting body. Individuals who have been employed for at least 1 year as a nurse in a Delaware long-term care facility and who have obtained qualified educational loans are eligible to apply for loan repayment under this Act. Loan repayment will be subject to the availability of funds and will be allocated at the discretion of the Delaware Higher Education Office. An applicant may receive only 1 loan payment per year, not to exceed \$5,000, and may not receive more than 4 loan repayments under this program. The program will be administered by the Delaware Higher Education Office.

Status: Introduced and Assigned to Education Committee in Senate

[SB 220](#) (McBride)

Introduced: 2/29/2024

An Act to amend Title 18 of the Delaware Code relating to **Health Insurance for Children and Persons on Medicaid**. Medicaid is generally the “payer of last resort,” meaning that Medicaid only pays claims for covered items and services if there are no other liable third-party payers for the same items and services. When Medicaid beneficiaries have one or more additional sources of coverage for health care services, third-party liability (TPL) rules govern the legal obligation of such third parties. Section 1902(a)(25)(A) of the Social Security Act defines third-party payers as health insurers, managed care organizations, and group health plans, among others. The federal Consolidated Appropriations Act of 2022 (CAA 2022), enacted March 15, 2022, increased state flexibility with respect to TPL. Section 202 of the CAA, 2022 amended section 1902(a)(25)(I) of the Act to require a state plan for medical assistance to provide assurances satisfactory to the Secretary that the state has state laws in place that bar responsible third-party payers (other than Medicare plans) from refusing payment for an item or service solely on the

basis that such item or service did not receive prior authorization under the third-party payer's rules. Specifically, if the responsible third party requires prior authorization for an item or service furnished to a Medicaid-eligible individual, the responsible third party must accept the authorization provided by the state that the item or service is covered under the state plan (or waiver of such plan) for such individual, as if such authorization was made by the third party for such item or service. Authorization by the state means that the item or service an individual received (and for which third-party reimbursement is being sought) is a covered service or item under the Medicaid state plan (or waiver of such plan) for that individual. The effective date for this new federal provision is January 1, 2024, with an exception for states that first need to pass state legislation to comply with the change in law. This bill is intended to update the provisions of Title 18, § 4003 to make them consistent with federal law contained in the Consolidated Appropriations Act of 2022.

Status: Signed into Law 4/30/2024

SB 223 (Walsh)

Introduced: 2/29/2024

An Act to amend Titles 16 & 18 of the Delaware Code relating to **Paramedic Services**. This Act is the product of the work of stakeholders who, with the encouragement of Senate Concurrent Resolution No. 50 (152nd General Assembly), met to examine how to integrate mobile-integrated healthcare and community paramedicine into existing regulatory structures in this State. Mobile-integrated healthcare and community paramedicine are innovative patient-centered models for the delivery of health care services that utilize mobile resources to deliver care and services to patients in an out-of-hospital environment in coordination with healthcare facilities or other healthcare providers. As part of mobile-integrated healthcare and community paramedicine programs, emergency medical services provider agencies across the country of all sizes and types are partnering with hospitals, primary care physicians, nurses, and mental health and social services providers on innovative programs that both navigate patients to the right level of care as well as achieve goals of improved care and lower costs. Clinical research studies comparing patients in traditional hospitals with patients who received hospital-level care at home through mobile-integrated healthcare and community paramedicine programs have found that those who received in-home care experienced fewer readmissions, lower mortality rates, reduced falls, and higher patient satisfaction rates. Based on temporary federal law enacted to relieve strain on healthcare systems caused by the COVID-19 pandemic, hospitals in this State developed relationships with emergency medical services provider agencies to implement mobile-integrated healthcare and community paramedicine programs. However, this temporary federal authorization will end on December 31, 2024. Many states have acted ahead of the expiration of this federal authorization to incorporate mobile-integrated healthcare and community paramedicine programs into existing regulatory structures. This Act integrates mobile-integrated healthcare and community paramedicine programs into existing regulatory structures in this State by authorizing the establishment of mobile-integrated healthcare and community paramedicine programs in this State through the Office of Emergency Medical Services ("Office") in the Department of Health and Social Service's Division of Public Health ("Division"). Specifically, this Act does the following: (1) Authorizes an organization licensed as or actively seeking licensure as an emergency medical services provider agency to apply to the Office to establish a mobile-integrated healthcare or community paramedicine program. (2) Requires the Office to review applications to establish mobile-integrated healthcare or community paramedicine programs and make recommendations to the Director of the Division, who is required to approve

applications that meet the requirements established by this Act and regulations adopted by the Office. (3) The Office is required to establish standards, approved by the Board of Medical Licensure and Discipline, for the establishment and operation of mobile-integrated healthcare or community paramedicine programs This Act takes effect immediately for purposes of the Office of Emergency Medical Services preparing to implement this Act, but is not implemented until the date of publication in the Register of Regulations of a notice by the Director of the Office of Emergency Medical Services that the Office is prepared to implement this Act. The changes to the definition section, § 9802 of Title 16 of the Delaware Code, in Sections 2 and 3 of this Act are identical. These changes had to be made twice as § 9802 of Title 16 currently has 2 versions, one effective until July 17, 2028, and one effect as of July 17, 2028. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual and, in Section 5 of this Act, to correct an internal reference in § 6701B of Title 18 of the Delaware Code affected by changes in Sections 2 and 3 of this Act.

Status: Signed into Law 9/24/2024

[SB 225](#) (Sokola)

Introduced: 1/25/2024

An Act making **Appropriations for the Expense of the State Government for the Fiscal Year ending June 30, 2025**; specifying certain procedures, conditions and limitations for the expenditure of such funds; and amending certain pertinent statutory provisions. This Bill is the Fiscal Year 2025 Appropriations Act.

Status: Introduced and Assigned to Finance Committee in Senate

[SB 226](#) (Sokola)

Introduced: 1/25/2024

An Act of making a **one-time Supplemental Appropriation for the Fiscal Year Ending June 30, 2025** to the Office of Management & Budget. This Act appropriates \$91,776,567 to provide one-time funded projects through the Office of Management and Budget.

Status: Introduced and Assigned to Finance Committee in Senate

[SB 229](#) (Sturgeon)

Introduced: 2/29/2024

An Act to amend Title 19 of the Delaware Code relating to **An Employee's Right to Inspect Personnel Files**. This Act extends the right of employees to inspect their own personnel files to former employees. Under this Act, an employer must permit a former employee to inspect the employee's own personnel files that exist at the time of the request. This Act does not create or change any requirements regarding the length of time that an employer must retain personnel files of former employees. This Act also updates the specific information included in personnel files that an employee may inspect and makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Assigned to Labor Committee in Senate

[SB 232](#) (Gay)

Introduced: 3/6/2024

An Act to amend Title 18 of the Delaware Code relating to **Insurance Coverage for Contraceptives**. In light of the Federal Drug Administration's recent approval of over-the-counter non-emergency contraceptive pills, this bill expands the contraceptive coverage laws to include over-the-counter non-emergency contraceptive pills.

Status: Signed into Law 8/29/2024

An Act to amend Titles 19 and 29 of the Delaware Code relating to the **Service Worker Protection Act**. This Act establishes employment protections for certain service employees during changes of ownership by requiring all of the following: 1. Notice to affected service employees at covered locations at least 15 days before a service contract is terminated, services are contracted out, or the property where they are employed is sold or transferred. This notice must state the event triggering the notice, information about the new awardee, purchaser, or transferee, and the service employee's rights under this Act. 2. The successor employer must retain all affected service employees at a covered location for a 90-day transition period. The successor employer may not reduce any affected service employee's work hours in order to circumvent the protections under this Act and requires that a successor employer give an affected service employee a written offer of employment in English, Spanish, and in any language that is the first language spoken by at least 5% of the affected service employees. 3. Copies of the required notice and offer of employment must also be sent to the employee's collective bargaining representative, if any. This Act applies as follows: 1. To contractors who enter into a service contract for a covered location, if the contractor employs more than 4 service employees anywhere in the United States. 2. To service employees at covered locations. "Service employees" are individuals employed or assigned to a covered location on a full or part-time basis for at least 60 days in connection with the care or maintenance of a building or property, specific services at an airport, or food preparation services at a school that is an agency under § 6902 of Title 29. Service employees do not include managerial or professional employees, employees regularly scheduled to work less than 16 hours per week, or individuals who work on structural, electric, HVAC, or plumbing projects that require a permit. 3. To service contracts at the following locations: • A multi-family residential building with more than 50 units. • A commercial center, commercial or office complex, or office building occupying more than 100,000 square feet. • A cultural center or complex, including museums, convention centers, arenas, or performance halls. • An industrial site. • A pharmaceutical lab. • An airport or train station. • A health care facility that provides long-term, acute, or outpatient health-care services as these services are defined in § 7971 of Title 29. • A warehouse or distribution center. • A building operated by a State agency subject to the procurement requirements under Chapter 69 of Title 29. A successor employer may only retain fewer than all of the affected service employees during the transition period if the successor employer: 1. Finds that fewer service employees are required to perform the work than the predecessor employer had employed. 2. Retains service employees by seniority within each job classification. 3. Maintains a preferential hiring list of those service employees not retained. 4. Hires any additional service employees from the preferential hiring list, in order of seniority, until all affected service employees have been offered employment. A service employee who has been discharged or otherwise not retained in violation of the requirements under this Act may bring an action against a successor employer or an awarding authority and these violations are subject to punitive damages as follows: 1. For a first violation, an amount not exceeding \$2,500. 2. For a second or subsequent violation, an amount not exceeding \$5,000. 3. Each work week during which there is a day when a violation occurs constitutes a separate violation. 4. A court may also order back pay, compensatory damages, issue injunctive relief requiring that the successor employer comply with requirements under this Act and award the service employee reasonable attorney fees and costs. This Act takes effect 90 days after enactment and applies to all contracts entered into or renewed after its enactment into law and is known as "The Service Worker Protection Act". **SA 1** clarifies when

individuals performing work on building, structural, electric, HVAC, or plumbing projects are excluded from the definition of “service employee” by including work that requires a license under Title 24.

Status: Signed into Law 9/30/2024

[SB 236 with HA 1](#) (Hansen)

Introduced: 3/6/2024

An Act to amend Title 21 of the Delaware Code relating to **License Plates and Parking Permits**. This bill: (a) extends the expiration date for any new issuance or renewal of an ADA placard from 3 years to 8 years for a specific person with a diagnosis of a permanent disability and changing the minimum age from 85 to 80 years or older, (b) extends the validity for a temporary disability from 5 weeks to 180 days, and (c) defines additional medical professionals acceptable to certify a disability application. **HA 1** corrects a technical error that would have changed the eligibility for a temporary disability placard.

Status: Signed into Law 7/17/2024

[SB 240](#) (Hoffner)

Introduced: 3/13/2024

An Act to amend Title 16 of the Delaware Code relating to **Home Care Data**. This Act requires the Division of Medicaid and Medical Assistance (“Division”) to produce a report by March 31, 2025, that documents home care services as measured using the most common billing codes for the home care industry. The Act identifies the specific billing codes which are defined as “qualified home care codes.” The Act creates a duty for the Division to provide an annual report on March 31 of every year to document the use of home care services in the State by tracking the use of qualified home care codes. Additionally, an independent, third-party organization will be identified to create an annual report.

Status: Assigned to Finance Committee in Senate

[SB 248](#) (McBride)

Introduced: 3/21/2024

An Act to amend Title 19 of the Delaware Code relating to **Family and Medical Leave Insurance Program**. This Act clarifies that for purposes of the Family and Medical Leave Insurance Program, where an employee is co-employed by an employee leasing company or a professional employment organization, "employer" refers to the employer client of the employee leasing company or professional employment organization, and not to the employee leasing company or professional employment organization. This Act also defines "collective bargaining agreement" for purposes of the Family and Medical Leave Insurance Program and excludes from the definition of "employee" individuals who are covered by a collective bargaining agreement as a member of a labor organization, who receive employment benefits through the labor organization, and who, due to the nature of the industry in which they work, may never qualify as a covered individual under the Family and Medical Leave Insurance Program.

Status: Substituted in Senate

[SS 1 for SB 248](#) (McBride)

Introduced: 4/17/2024

An Act to amend Title 19 of the Delaware Code relating to **Family and Medical Leave Insurance Program**. This Act clarifies that for purposes of the Family and Medical Leave Insurance Program, where an employee is leased by an employee leasing company or a professional employment organization, "employer" refers to the employer client of the employee leasing company or professional employment organization, and not to the employee leasing

company or professional employment organization. This Act is a substitute for and differs from Senate Bill No. 248 by omitting language concerning whether individuals covered by certain collective bargaining agreements are "employees" for purposes of the Program.

Status: Signed into Law 6/30/2024

[SB 254](#) (Brown)

Introduced: 3/21/2024

An Act to amend Title 16 of the Delaware Code relating to **Food Deserts**. This Act creates the Delaware Grocery Initiative. It directs the Office of State Planning Coordination ("Office") to study food insecurity in urban and rural food deserts. The Act defines a food desert and directs the Office to expand access to healthy foods in food deserts by providing financial assistance to grocery stores, independently owned for-profit grocery stores, cooperative grocery stores, non-profit grocery stores as well as grocery stores owned and operated by local governmental units. The Act provides the Office with authority to enter into contracts, grants, or other agreements to administer grants and other financial support, including technical assistance. It further authorizes the Office to adopt and promulgate rules and regulations to implement and administer this initiative.

Status: Substituted in Senate

[SS 1 for SB 254](#) (Brown)

Introduced: 6/6/2024

An Act to amend Title 16 of the Delaware Code relating to **Food Deserts**. This Act creates the Delaware Grocery Initiative. The Delaware Grocery Initiative is a healthy foods initiative that seeks to provide financial assistance to eligible food resources as designated by the bill. The Act defines food deserts and eligibility requirements for the initiative. The Act authorizes the Division of Small Business to implement the grant and financial support system. This substitute bill does the following: 1. Adds the following terms in the definition section of the Act: Council, food resource, Healthy Foods Retail Initiative, Program, and specialty grocer. 2. Modifies the definition of food desert. 3. Removes terms of grocery store, rural tract, and urban tract in lieu of the new definitions of food resource and food desert. 4. Designates the Division of Small Business, instead of the Office of State Planning, as the agency authorized to implement the Delaware Grocery Initiative and authorizes the Division of Small Business to adopt rules. 5. Replaces the grocery and food desert study with a food access strategy. 6. Subject to appropriation, creates a food access strategy to address food insecurity and requires submission of a report to the General Assembly and the Governor by June 1, 2025.

Status: Signed into Law 8/29/2024

[SB 261](#) (Townsend)

Introduced: 4/11/2024

An Act to amend Title 16 of the Delaware Code relating to the **Delaware Health Facilities Authority**. This Act amends Delaware Code provisions which govern the Delaware Health Facilities Authority (DHFA). The changes to Sections 9203(6) and 9205 confirm that the DHFA's purpose and authority is to finance projects in the State of Delaware and not elsewhere. The change to Section 9204(a) confirms that appointed members of the DHFA "hold over" following the expiration of their terms until their successors have been appointed and accepted appointment, addressing a practical issue that has arisen previously. The change to Section 9204(b) cures an arguable ambiguity, clarifying that appointed members of the DHFA also may hold positions as DHFA officers. The change to Section 9208 corrects a minor technical error.

Status: Signed into Law 9/26/2024

[SB 270](#) (Paradee)

Introduced: 4/16/2024

An Act to amend Title 29 of the Delaware Code relating to **Budget & Fiscal Regulations**. Establishing a Budget Stabilization Fund, Defending Deposit & Withdrawal Standards for the Fund, and Imposing Deposit & Withdrawal Norms Throughout the Annual Governor's Recommended Budget Process. This Act is the statutory recognition of the recommendations set forth in the June 2, 2023, report of the DEFAC Benchmark Evaluation and Review Panel. This Act builds on the State's existing appropriation limit methodology by formalizing and maintaining the flexibility inherent in the Budget Stabilization Fund process currently enabled by Executive Order No. 21, approved on June 30, 2018, and the last 6 operating budget acts, including § 65 of the fiscal year 2024 Operating Budget Act. Acknowledging this process in statute includes defining rules for deposits to and withdrawals from the Budget Stabilization Fund and adding an objective and stable measure of sustainable budget growth through an advisory index comprised of certain State economic indicators. This Act requires that only the Governor's recommended Budget Appropriation Bill consider this methodology and detail proposed plans, if any, deemed necessary or desirable in relation to state revenues or reserve funding.

Status: Signed into Law 6/30/2024

[SB 272 with SA 1](#) (Poore)

Introduced: 4/23/2024

An Act to amend Titles 18 & 29 of the Delaware Code relating to **Health Insurance**, and Title 31 of the Delaware Code relating to **Pharmacist Care**. Pharmacists in Delaware provide some of the same medical services as physicians, advance practice registered nurses, and physician assistants, including immunizations. The General Assembly has recently added to the services that pharmacists may provide, including prescribing birth control, testing and treating for a variety of conditions, and prescribing pre-exposure and post-exposure HIV prophylaxis. However, health insurance plans do not currently recognize pharmacists as a provider type that may seek reimbursement for these services, despite already providing coverage for the same services if they were obtained from other providers. This could lead to many pharmacists not providing such expanded services due to the lack of insurance coverage. This Act requires health insurance providers to provide the same reimbursement to pharmacists that is already provided other providers performing the same services at the same rates as advance practice registered nurses and physician assistants. This bill also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. **SA 1:** (1) adds a definition of the term "carrier"; (2) deletes the language on lines 24-25, 40-41, and 54-55 which provided that when payment is made for health care services performed by a licensed pharmacist, no payment or reimbursement may be paid to a physician or osteopath for the services performed by the licensed pharmacist; and (3) expands upon the circumstances where a service is performed by a licensed pharmacist and reimbursed by a carrier, the licensed pharmacist must be granted such rights of participation, plan admission, and registration as may be granted by the carrier to include a physician, advance practice registered nurse, or physician assistant performing such a service.

Status: Signed into Law 9/24/2024

[SB 273](#) (Buckson)

Introduced: 5/2/2024

An Act to amend Titles 3 and 16 of the Delaware Code relating to **Milk and Milk Products**.

This Act legalizes the sale and distribution of raw milk and products derived from raw milk by dairy producers directly to consumers for human consumption. This Act also removes the unused definitions of “Delaware fresh milk” and “northeastern fresh milk” from Subchapter VI of Title 3. The definition of “fresh milk” under current § 3175 of Title 3 is retained. The sale of raw milk, which is unprocessed, unpasteurized, and unhomogenized, is currently prohibited by Section 9 of the current United States Department of Health and Human Services' Grade "A" Pasteurized Milk Ordinance, as amended, which the Delaware Department of Health and Social Services adopted by regulation. However, consumers are increasingly demanding the opportunity to purchase raw milk in Delaware, rather than traveling to other states that permit raw milk sales. Allowing raw milk and products derived from raw milk to be sold in Delaware will respond to that demand while also providing new economic opportunities for Delaware dairy producers. These economic benefits can be significant; the Raw Milk Institute estimates that raw milk producers can earn a profit that is nearly 10 times what they earn for regular milk sales. To achieve these benefits and meet consumer demand, this Act creates a raw milk permit to be issued and enforced by the Department of Agriculture and exempts raw milk permit holders from the State of Delaware Milk Code provided they comply with all requirements of the Act. This Act provides that no raw milk or product derived from raw milk may be sold in Delaware other than by a raw milk permit holder or an individual under the direct supervision of a raw milk permit holder, such as an employee. The sale or distribution of raw milk and products derived from raw milk must be made directly by the permit holder or individual under the supervision of the permit holder to the consumer and not for purposes of resale. This Act also establishes requirements for signage and labeling informing consumers that raw milk is unprocessed, unpasteurized, and unhomogenized and may contain harmful bacteria. The Department of Agriculture, in consultation with the Department of Health and Social Services, is responsible for promulgating regulations to administer the raw milk permit program and for ensuring compliance with this Act. This Act goes into effect on enactment and is to be implemented the earlier of the following: (1) 1 year from the date of the Act’s enactment. (2) Notice by the Secretary of Agriculture published in the Register of Regulations that final regulations to implement this Act have been adopted. This Act may be cited as “The Consumer Choice Milk Act”.

Status: Signed into Law 9/26/2024

[SB 295](#) (Gay)

Introduced: 5/8/2024

An Act to amend Title 19 of the Delaware Code relating to **Special Employment Practices**.

This Act strengthens the current practice of obtaining service letters for employment in childcare facilities to protect children from workers who have engaged in prior acts that are prohibited by the Office of Childcare Licensing. The Act does all of the following: 1. Requires service letters used for childcare facilities ask previous employers whether they would have any concerns about the employee providing care to children. 2. Requires service letters used for childcare facilities ask previous employers whether the employee was ever warned, reprimanded, suspended, or discharged for any violations found in the Department of Education's Regulations for Early Care and Education and School-Age Centers. 3. Requires the Office of Childcare Licensing to report

any suspected failure of an employer to adhere to the requirements of a service letter to the Department of Labor for review and possible civil penalties. 4. Clarifies the Department of Labor is the only party that can seek civil enforcement under this section. 5. Makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/30/2024

[SB 296 with HA 1](#) (Gay)

Introduced: 5/9/2024

An Act to amend Title 6 of the Delaware Code relating to **Antitrust**. This Act amends the Delaware Antitrust Act (“DAA”) (Chapter 21, Title 6 of the Code) to provide indirect purchasers who have been harmed by violations of the Delaware Antitrust Act the ability to sue for damages. Indirect purchasers of a product or service in the chain of distribution are often the ones who bear the burden of any overcharges from antitrust violations such as price-fixing. Direct purchasers and others in the chain of distribution of the affected product or service often have the ability to pass the overcharge through the chain of distribution to end users. This will align Delaware with at least 36 other states which currently allow for a cause of action for damages for indirect purchasers. Often, end users who make purchases in Delaware, primarily Delaware residents and businesses, are excluded from making claims against multimillion dollar settlement funds set up to compensate indirect purchasers for transactions made in other states that do authorize lawsuits for damages for indirect purchasers. To avoid complicated proof issues related to the pass through of any overcharge through the chain of distribution of a product or service, the Act creates a presumption that any overcharge paid by the first purchaser as a result of a violation of the DAA is passed through to the end user. Also, to simplify issues of proof, the Act provides a plaintiff may elect 25% of the consideration paid for the goods or services in connection with the transaction affected by an illegal restraint of trade as an alternative liquidated damage amount to actual harm. To allow Delaware consumers and businesses to fully take advantage of the remedies provided by this Act, the Act creates a private right of action. Delaware is one of only 2 states that do not provide for a private right of action under their state antitrust law of general applicability. Currently, only the Attorney General has a right to bring actions under the DAA and the Attorney General does not have the resources to review or participate in every national antitrust action. This will ensure Delaware indirect purchasers receive the benefits of private enforcement of the DAA. Section 2 of the Act creates a Delaware state law equivalent to Section 2 of the Sherman Antitrust Act, the federal antitrust statute, which establishes three offenses commonly termed “monopolization,” “attempted monopolization,” and “conspiracy to monopolize.” Delaware is only 1 of 9 states that does not have a state law equivalent to Section 2 of the Sherman Act and its addition to the DAA is needed to ensure the remedies under the DAA including a right of recovery for indirect purchasers are available to the Attorney General and to Delaware consumers and businesses. Section 3 of the Act modifies the confidentiality restrictions of materials produced to the Attorney General pursuant to an investigative demand. It would allow for the materials to be shared with the Attorney General’s agents such as consultants, experts, electronic discovery platform vendors and economists which would be necessary for the Attorney General to decide on whether the law has been violated and how best to remedy the violation. The Act would also allow the Attorney General to share materials produced pursuant to an investigative demand with federal or state law enforcement officers that agree to keep the information confidential and use it only for official law enforcement purposes. Likewise, the Act requires the Attorney General to keep materials

provided by other law enforcement officers received under similar process confidential. These provisions will make it easier for the Attorney General to work together with other federal and state law enforcers in enforcing state and federal antitrust laws. Section 4 of the Act provides an alternative calculation for civil penalties for violations of the Delaware Antitrust Act. Under certain facts and circumstances, the current maximum penalty for a violation of the DAA may be lower than the amount of the gain a violator may obtain by violating the DAA making any penalty a cost of doing business and an insufficient deterrent to violate the law. The alternative calculation provides for an assessment of a civil penalty of up to twice the gross gain or loss associated with the violation. This is like the alternative method for calculating federal criminal fines for the same conduct. Section 4 also authorizes a Court to award investigative costs, expert witness fees, and attorneys' fees to the Attorney General when the Attorney General successfully brings a law enforcement action to enforce the DAA. Currently, a Court may only award attorney's fees and expert costs to the Attorney General when the Attorney General brings an action on behalf of a public body or natural persons. Section 5 of the Act creates a right for indirect purchasers who have been harmed by violations of the DAA to sue for damages. It creates a presumption that overcharges paid by the first purchaser as a result of such violations are passed to the end user and allows a plaintiff to seek liquidated damages in the amount of 25% of the consideration paid, as an alternative to seeking damages for actual harm incurred. Section 6 of the Act clarifies that the Court of Chancery has exclusive jurisdiction of all state court actions or proceedings under the DAA. The Act also makes several clarifications throughout the DAA to recognize it is often federal courts exercising supplemental jurisdiction deciding claims arising under the DAA. **HA 1** makes technical corrections to Senate Bill No. 296.

Status: Signed into Law 9/30/2024

[SB 300](#) (Gay)

Introduced: 5/13/2024

An Act to amend Title 6 of the Delaware Code relating to **Crisis Pregnancy Centers**. This Act requires crisis pregnancy centers in this state to provide notice if the center is not licensed by this state as a medical facility and does not have a licensed medical provider who provides or directly supervises, in person, the provision of services. A violation of this Act is an unlawful practice under § 2513 of Title 6 and a violation of Subchapter II, Chapter 25 of Title 6.

Status: Signed into Law 9/26/2024

[SB 301](#) (Gay)

Introduced: 5/13/2024

An Act to amend Title 14 of the Delaware Code relating to **Providing Medication Abortion Prescription Drugs and Emergency Contraception**. This Act requires public universities in this state to provide access to medication for the termination of pregnancy and emergency contraception. The medication and contraception must be provided on-site, but consultation to provide them may be performed by a provider at the student health center, through telehealth services, or by a provider who is associated with a university-contracted external agency. This Act takes effect on July 1, 2025.

Status: Substituted in Senate

[SS 1 for SB 301](#) (Gay)

Introduced: 6/12/2024

An Act to amend Title 14 of the Delaware Code relating to **Providing Medication Abortion Prescription Drugs and Emergency Contraception**. Like Senate Bill No. 301, this Act, Senate Substitute No. 1 for Senate Bill No. 301 requires public universities in this state to

provide access to medication for the termination of pregnancy and emergency contraception. The medication and contraception must be provided on-site, but consultation to provide them may be performed by a provider at the student health center or by a provider who is associated with a university-contracted external agency. This Act takes effect on July 1, 2025. Senate Substitute No. 1 for Senate Bill No. 301 differs from SB 301 as follows: - Defines the term "student." - Provides an exception for a university that does not have a student health center, including requirements that the university provide information and referral services to students and ensure that the university's health services website provides specified information relating to reproductive services. - Adds a requirement that universities maintain confidentiality of information a student provides relating to a request for a referral. - Removes references to private institutions of postsecondary education.

Status: Signed into Law 9/26/2024

[SB 306 with SA 1, SA 2](#) (Poore)

Introduced: 5/16/2024

An Act to amend Title 19 of the Delaware Code relating to **Workplace Safety Program**. This Act makes technical changes and updates to the Delaware workplace safety program. Under current law, qualifying employers who pay \$3,161 or more in annual workers' compensation premiums may be eligible for lower insurance premiums under the workplace safety program. The Act changes that criteria to employers who currently qualify for the uniform experience rating plan as approved by the Insurance Commissioner or who otherwise qualify for the program pursuant to parameters set by the Insurance Commissioner by regulation. In addition, the Act provides that in determining safety credits for a qualified employer that was not experience-rated in the policy period expiring immediately prior to application of the safety credit, the formula for calculating safety credits will incorporate amounts determined by the Insurance Commissioner by regulation. **SA 1** clarifies that the Delaware Department of Insurance is the entity that will review workplace safety inspection procedures submitted by insurance carriers issuing workers compensation insurance in Delaware. In addition, the Amendment clarifies that in order to remain in the workplace safety program, an employer must apply for the workplace safety program. each year. SA 2 adds an effective date of 6 months after enactment into law.

Status: Signed into Law 7/17/2024

[SB 309 with SA 1](#) (Gay)

Introduced: 5/16/2024

An Act to amend Titles 12 and 16 of the Delaware Code relating to **Health-Care Decisions**. This Act adopts the Uniform Health-Care Decisions Act of 2023 (UHCDA 2023) to supersede the Uniform Health-Care Decisions Act of 1993, which Delaware enacted in 1996. The UHCDA 2023 was authored by the Uniform Law Commission (ULC) and was developed in a multiyear collaborative and non-partisan process to modernize and expand on the 1993 version of the act. The UHCDA 2023 maintains processes to address how health-care decisions can be made by or on behalf of individuals who lack capacity, including: (1) Allowing individuals to appoint agents to make health-care decisions for them should they become unable to make those decisions for themselves. (2) Allowing individuals to provide their health-care professionals and agents with instructions about their values and priorities regarding their health care and to indicate medical treatment they do or do not wish to receive. (3) Authorizing certain people to make health-care decisions for individuals incapable of making their own decisions, but who have not appointed agents. (4) Setting forth agent, default surrogate, and health-care professional rights and duties.

The UHCDA 2023 reflects substantial changes in how health care is delivered, increases in non-traditional familial relationships and living arrangements, the proliferation of the use of electronic documents, the growing use of separate advance directives exclusively for mental health care, and other recent developments. Some updates to the Act include: (1) Removal of administrative barriers that make the creation of an advance health-care directive more difficult. (2) Addition of provisions to guide determinations of incapacity, which is important because an agent's or default surrogate's (surrogate's) authority to make health-care decisions for a patient typically commences when the patient lacks capacity to make decisions. The Act modernizes the definition of capacity so that it accounts for the functional abilities of an individual and clarifies that the individual may lack capacity to make one decision but retains capacity to make other decisions. (3) Authorizing the use of advance directives exclusively for mental health care. (4) Modernizing default surrogate provisions that allow family members and certain other people close to a patient to make decisions in the event the patient lacks capacity and has not appointed a health-care agent. The new default surrogate provisions update the priority list in the 1993 Act to reflect a broader array of relationships and family structures. They also provide additional options to address disagreements among default surrogates who have equal priority. (5) Clarifying the duties and powers of surrogates. For example, to reduce the likelihood that an individual's health-care needs will go unmet due to financial barriers, the Act authorizes a surrogate to apply for health insurance for a patient who does not have another fiduciary authorized to do so. (6) Modernizing the optional model form to be readily understandable and accessible to diverse populations. The form gives individuals the opportunity to readily share information about their values and goals for medical care. Thus, it addresses a common concern raised by health-care professionals in the context of advance planning: that instructions included in advance directives often focus exclusively on preferences for particular treatments, and do not provide health-care professionals or surrogates with the type of information about patients' goals and values that could be used to make value-congruent decisions when novel or unexpected situations arise. The form addresses these concerns by providing options for individuals to indicate goals and values, in addition to specific treatment preferences. This Act also adopts some of the optional provisions suggested by the ULC, including that an agent or surrogate has limited ability to consent to the long-term placement of an individual in a nursing home without express authorization. Specifically, without express authorization, the agent or surrogate may not consent to the placement for more than 100 days over the individual's contemporaneous objection unless (1) no alternative living arrangement is reasonably feasible or (2) the individual is terminally ill. The ULC suggested 100 days in recognition that the federal Medicare program covers up to 100 days of nursing home care for qualified beneficiaries. This Act does not authorize mercy killing, assisted suicide, or euthanasia. In addition to style changes throughout, this Act makes some modifications to the UHCDA 2023 that are consistent with Act and should not disrupt uniform interpretation. These modifications include: (1) Revising language to conform to Delaware court practices. (2) Providing surrogates with the authority to file insurance or benefit claims on behalf of the individual and to appeal such outcomes, in addition to the UHCDA 2023 allowance for a surrogate to apply for insurance or benefits on behalf of the individual. As under the UHCDA 2023, a surrogate does not have the duty to perform these actions and may only do so if no other fiduciary is authorized to do so. (3) Creating an additional disqualification that disallows a potential surrogate from serving if the individual has a pending Protection From Abuse petition against the potential surrogate, the individual has a Protection From Abuse order against the potential surrogate, or the potential surrogate is the subject of a

civil or criminal order prohibiting or limiting contact with the individual. Section 2 of this Act adds a new Chapter 25B to the Delaware Code. Chapter 25B will contain Delaware-specific supplements to the UHCDA 2023. These Delaware-specific additions are being placed within their own chapter to promote uniform interpretation of the UHCDA 2023. Chapter 25B includes § 2502B, which relates to health-care institution authorization to petition for guardianship for an individual to whom the institution is providing care. Section 2502B reinforces the work of the Non-Acute Medical Guardianship Task Force, created by Senate Concurrent Resolution No. 30 by the 150th General Assembly. That task force’s work resulted in the current § 2519 of Title 16, which offers a process and timeline whereby health-care institutions can take steps to help obtain a guardianship for patients who no longer require acute care and can be transferred to another type of health-care setting. While § 2502B retains the ability for a health-care institution to address the discharge of long-term stay patients without an authorized decisionmaker, it modifies the powers in the current § 2519 by doing all of the following: (1) Allowing health-care institutions to petition of the appointment of a guardian in instances beyond where an individual no longer needs acute care. (2) Reiterating that the health-care institution may only petition if they believe there is no less restrictive alternative that will meet the individual’s needs. (3) Streamlining notice requirements and changing who must receive these notices so that a health-care institution does not send a notice if there is a reasonably available surrogate. If there is a reasonably available surrogate and there is a dispute between the surrogate and the health-care institution about the treatment or level of care needed by an individual, then the parties should seek judicial relief under § 2526 of the UHCDA 2023 as opposed to using the guardianship process. The new Chapter 25B also contains a provision to encourage public awareness and use of advance mental health-care directives. Sections 3 through 11 of this Act update the Delaware Code in light of the adoption of the UHCDA 2023 by updating internal citations, updating terms to match the terms used in the UHCDA 2023, and ensuring a consistent list of default surrogate decisionmakers. This Act is effective immediately and is to be implemented 1 year from the date of enactment. **SA 1** does all of the following: 1. Combines the list of health-care professionals who may make capacity determinations and the requirements for making those determinations into a single list and makes corresponding internal citation changes. 2. Corrects a typographical error. 3. Since 50% of all holders of Delaware driver's licenses and identification cards have already indicated their preferences about organ donation via their driver’s license or identification card, the Optional Form is amended to remind individuals that they may have already indicated their preference and to reinforce that no decision needs to be inserted in this part of the form. 4. Clarifies that § 2523 of Title 16 must not be construed to provide immunity for health care that does not meet the generally accepted health-care standards applicable to the health-care professional or institution. This clarification is made because § 2523 covers process decisions, such as whether a professional complies or doesn't comply with a directive or instruction, not the underlying health care or the quality of that health care. 5. Makes this Act effective 1 year from the Act's enactment and corresponding changes.

Status: Signed into Law 9/30/2024

[SB 314 with SA 1](#) (Pinkney)

Introduced: 5/24/2024

An Act to amend Title 24 of the Delaware Code relating to the **Board of Social Work Examiners**. This Act removes “supervision” from the scope of practice of a master’s social worker. This Act also prohibits a master’s social worker from providing supervision to a licensed clinical social worker applicant. The Board of Social Work Examiners (Board) determined that a

master's social worker lacks the education and experience needed to provide clinical supervision. Under this Act, an applicant for licensure as a licensed clinical social worker may still obtain supervision from a licensed psychologist or licensed psychiatrist where a licensed clinical social worker is not available, under the Board's rules and regulations. This Act also adds a grandfathering provision so that an applicant or licensed clinical social worker who started or completed supervision with a master's social worker on or before the enactment date of this Act satisfies the supervision requirement under § 3907(b)(4) of this title as long as the applicant or licensed clinical social worker is otherwise in compliance with § 3907(b)(4) of this title. The grandfathering provision also allows a master's social worker who is supervising an applicant as of the enactment date of this Act to continue supervision under the applicant completes the 2-year supervised experience requirement. **SA 1:** Senate Bill No. 314 removes "supervision" from the scope of practice of a master's social worker and prohibits a master's social worker from providing supervision to a licensed clinical social worker applicant. Senate Bill No. 314 includes a grandfathering provision for applicants and licensed clinical social workers who received or are receiving their supervision from a master's social worker. This Amendment revises the grandfather clause to limit the amount of time that an applicant who is applying for licensure as a licensed clinical social worker may continue to receive supervision from a master's social worker. The amendment will require an applicant who will not complete the 2-year supervised experience requirement on or before 180 days after the enactment of this Act to continue any necessary supervision under the supervision of a licensed clinical social worker, licensed psychologist, or licensed psychiatrist, in accordance with § 3907(b)(4) of this title. To correspond with this change, the Amendment also limits the amount of time that a master's social worker may continue supervision of an applicant to no longer than 180 days after the enactment of this Act.

Status: *Signed into Law 9/26/2024*

[SB 315](#) (Richardson)

Introduced: 6/6/2024

An Act to amend Title 16 of the Delaware Code relating to **Gender Transition Procedures**. This Act prohibits gender transition surgery for children due to the potential for an irrevocable procedure occurring when there is a significant probability that children will come to identify with their biological gender. This Act prohibits the use of public funds and insurance coverage for gender transition surgery for children. This Act provides for enforcement of the Act as follows: (1) By providing for compensatory damages, injunctive relief, declaratory relief, or any other appropriate relief. (2) By making a referral for or provision of gender transition procedures to a child unprofessional conduct for which a physician or healthcare professional making the referral for or provision of gender transition procedures to a child is subject to discipline by the appropriate licensing entity or disciplinary review board with jurisdiction over the physician or healthcare professional in this State.

Status: *Introduced and Assigned to Health & Social Services Committee in Senate*

[SB 317](#) (Richardson)

Introduced: 6/6/2024

An Act to amend Title 24 of the Delaware Code relating to the **Offer of an Ultrasound and Auscultation Services before Terminating a Pregnancy**. This Act requires a health-care practitioner to offer a patient ultrasound imaging and auscultation of fetal heart tone services before terminating a pregnancy. The patient is free to choose not to view the ultrasound or listen to the auscultation of fetal heart tone. This Act is known as "The Woman's Right to Know Act."

Status: Introduced and Assigned to Legislative Oversight & Sunset Committee in Senate

[SB 319](#) (Mantzavinos)

Introduced: 6/6/2024

An Act to amend Title 24 of the Delaware Code relating to **Continuing Education**. This Act changes the requirements for continuing education for doctors related to Alzheimer’s disease or other dementias to require that doctors must only complete 2 hours of this continuing education once. Doctors who do not have direct patient interactions with adult populations over the age of 25 or do not currently practice within the State of Delaware are exempt from this requirement.

Status: Signed into Law 9/30/2024

[SB 320](#) (Huxtable)

Introduced: 6/6/2024

An Act to amend Title 24 of the Delaware Code relating to the **Board of Speech/Language Pathologists, Audiologists, and Hearing Aid Dispensers**. This Act creates a new license category of speech/language pathology assistant that is licensed and regulated by the Board of Speech/Language Pathologists, Audiologists, and Hearing Aid Dispensers. This addition is needed to address the shortage of speech/language pathology services in the State, particularly in public schools. The speech/language pathology assistant must practice under the supervision of a licensed speech/language pathologist. The parameters of that supervision will be specified in rules and regulations. A speech/language pathology assistant will be able to support and supplement the services provided by the supervising speech/language pathologist subject to the limits of the permissible scope of practice. This Act specifies that to qualify for licensure, the speech/language pathology assistant must hold certification issued by the American Speech-Language-Hearing Association (ASHA). The requirements for that certification include education, clinical experience, and successful completion of an examination. The applicant must also meet this State’s requirements as set forth in this Act.

Status: Signed into Law 9/19/2024

[SB 321](#) (Hoffner)

Introduced: 6/6/2024

An Act to amend Title 12 of the Delaware Code relating to **Rights of Adults under Guardianship**. This Act codifies rights afforded to persons with disabilities that are under guardianships pursuant to Chapters 39 and 39A in Title 12 of the Delaware Code. This Act also grants persons with disabilities the ability to motion the Court of Chancery for equitable relief for any violations of these rights. **SA 1**, which adds the Delaware Division of Health Care Quality as an appropriate agency for a person with a disability under guardianship to make a report of abuse, neglect, exploitation, or violation of personal rights, was placed with the Bill.

Status: Introduced and Assigned to Judiciary Committee in Senate

[SB 325](#) (Paradee)

Introduced: 6/18/2024

AN ACT MAKING **APPROPRIATIONS FOR THE EXPENSE OF THE STATE GOVERNMENT FOR THE FISCAL YEAR ENDING JUNE 30, 2025**; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AND AMENDING CERTAIN PERTINENT STATUTORY PROVISIONS. This Bill is the Fiscal Year 2025 Appropriations Act.

Status: Signed into Law 6/30/2024

[SB 326](#) (Paradee)

Introduced: 6/18/2024

AN ACT MAKING A **ONE-TIME SUPPLEMENTAL APPROPRIATION FOR THE FISCAL YEAR ENDING JUNE 30, 2025** TO THE OFFICE OF MANAGEMENT AND BUDGET. This Act appropriates \$168,362,517 to provide one-time funded projects through the Office of Management and Budget.

Status: Signed into Law 6/30/2024

[SB 327](#) (Paradee)

Introduced: 6/27/2024

An Act making appropriations for certain **Grants-In-Aid for the Fiscal Year ending June 30, 2025**; specifying certain procedures, conditions and limitations for the expenditure of such funds; amending the Fiscal Year 2025 Appropriations Act; amending the Fiscal Year one-time Supplemental Appropriations Act; and amending certain statutory provisions. This Act provides supplementary appropriations to certain Grants-in-Aid recipients for Fiscal Year 2025. Section 1 – Government Units and Senior Centers \$ 34,521,948 Section 2 – One-Times and Community Agencies \$ 51,643,425 Section 3 – Fire Companies and Public Service Ambulance Companies \$ 11,634,433 Section 4 – Veterans Organizations \$ 698,220 GRAND TOTAL \$ 98,498,026.

Status: Signed into Law 6/30/2024

[SB 331](#) (Poore)

Introduced: 6/13/2024

An Act to amend Title 16 of the Delaware Code relating to **Uniform Controlled Substances Act**. This Act revises §§ 4732 and 4733 of the Uniform Controlled Substances Act, Subchapter III, Chapter 47, Title 16 of the Delaware Code, pertaining to the regulation of the manufacture, distribution and dispensing of controlled substances. The revisions provide that out-of-state practitioners who wish to prescribe controlled substances in Delaware pursuant to a practice privilege, interstate compact license, telehealth registration, or military registration, must obtain a Delaware controlled substance registration. This Act will ensure that these out-of-state practitioners are subject to Delaware regulation with respect to prescribing controlled substances to Delaware patients.

Status: Signed into Law 8/29/2024

[SB 332](#) (Sokola)

Introduced: 6/13/2024

An Act to amend Title 16 of the Delaware Code relating to a **Wholesale Prescription Drug Importation Program**. This Act requires the Department of Health and Social Services, in consultation with persons interested in the sale and pricing of prescription drugs as well as interested federal and state officials and agencies, to design and implement a wholesale prescription drug importation program for the benefit of, and that generates savings for, Delaware residents. The Act establishes requirements for the program including all of the following: (1) The Department must become or contract with a state wholesaler and seek federal certification and approval to import eligible prescription drugs. (2) The program must comply with federal regulations and import from Canadian suppliers only those eligible prescription drugs that do not violate patent laws, that are not controlled substances, and for which importation creates substantial cost savings. (3) The Department must ensure that eligible prescription drugs imported under the program are not distributed, dispensed, or sold outside of Delaware. (4) Before submitting the proposed program to the federal government for certification, the Department must submit the proposal to the General Assembly. (5) The program must have an audit procedure to ensure compliance with the Act's requirements and requires submission of an annual report to the General Assembly to track the program's progress.

Status: Introduced and Assigned to Executive Committee in Senate

Delaware House Bills

[HB 1](#) (Osienski)

Introduced: 1/20/2023

An Act to amend Title 16 of the Delaware Code relating to **Marijuana**. This Act removes all penalties for use or possession of a personal use quantity of marijuana and marijuana accessories. It further specifies that the adult sharing of a personal use quantity or less of marijuana is legal activity for those 21 years of age or older and that those 21 or older may possess, use, display, purchase, or transport accessories and personal use quantities of marijuana without penalty. When transporting in a vehicle, those items must be in a closed container or otherwise not readily accessible to anyone inside the vehicle. The statute also specifies certain activities which remain unlawful. Finally, the definition of "personal use quantity" of marijuana is updated to include not only 1 ounce or less of leaf marijuana, but also equivalent amounts of marijuana product in other forms.

Status: Became law on 4/24/2023 without the signature of the Governor

[HB 2 with HA 1, HA 2](#) (Osienski)

Introduced: 1/20/2023

An Act to amend Titles 4, 11, 16 and 30 of the Delaware Code relating to **Creation of the Delaware Marijuana Control Act**. The Delaware Marijuana Control Act regulates and taxes marijuana for recreational use in much the same manner as alcohol. It creates a framework for production, manufacture, and sale in a legal recreational marijuana industry..... **HA 1:** 1) Removes language relating to alcoholic liquor testing. (2) Corrects a typographical error. (3) Reinserts language relating to terms and conditions of employment with respect to marijuana that was present in previous versions of this bill. (4) Makes technical corrections relating to canopy grow area and licensing. (5) Gives the Division of Revenue power to set the form and manner of marijuana tax payments and the manner the tax appears on a consumer's receipt at the time of sale. (6) Extends the privacy protections given to other tax returns and reports to the marijuana tax. (7) Replaces the Department of Justice with the Criminal Justice Council as the administrator of the Justice Reinvestment Fund. (8) Adds cross-references to Chapter 30 relating to the hierarchy of rules for tax administration, procedures and enforcement. (9) Adds a quarterly report from the Commissioner to the General Assembly regarding progress towards timely implementation of the Act. **HA 2** makes technical corrections and clarifications requested by the Office of the Governor.

Status: Became law on 4/27/2023 without the signature of the Governor

[HB 3 with HA 1](#) (Longhurst)

Introduced: 4/25/2023

An Act to amend Title 14 relating to **School Attendance**. According to a recent CDC survey, the COVID pandemic exacerbated an existing mental health crisis for students. One in 5 school aged children has a mental health condition, and 45% of children may have experienced a traumatic event. This bill provides for excused absences for the mental or behavior health of a student and requires that any student taking more than 2 such excused absences will be referred to a behavioral health specialist. This bill provides a supplemental tool to identify students struggling with mental and behavioral health issues and legitimizes these struggles faced by many students. Moreover, this bill makes clear that the mental and behavioral health of students is a priority in

this State. **HA 1** clarifies that after the second absence, the student must be referred to a school-based mental or behavioral health specialist. The amendment also requires the Department of Education to provide the technical ability so the Act can be implemented seamlessly.

Status: Signed into Law 8/16/2023

[HB 4 with HA 2](#) (Longhurst)

Introduced: 4/25/2023

An Act to amend Title 14 of the Delaware Code relating to **Mental Health Services for School Trauma**. This Act is Nolan's Law. The purpose of this legislation is to provide more behavioral health supports to school districts and charter schools in the aftermath of a school-connected traumatic event, which is defined as the death of any student, educator, administrator, or other building employee of a public school. The Department of Education is charged with developing guidance, best practices, and written resources for schools dealing with a school-connected traumatic event. The Department must consult with behavioral health specialists and school-based mental health professional organizations such as NAMI, Delaware, Delaware Association of School Psychologists, Delaware School Counselors Association, and the School Social Workers Association of Delaware. The Department must finalize these items by January 1, 2024. This legislation also requires the Department to cover the costs of grief counseling offered to students for up to thirty days after a school-connected traumatic event. In an effort to create a more standardized approach for the occurrence of a school-connected traumatic event, this bill charges each school district and charter school to establish a detailed crisis response policy that must meet a minimum number of required policies and procedures. Policies must be adopted by the school district or charter and distributed to the Department of Education by September 1, 2024. **HA 2** expands the definition of "school-connected traumatic event" to include any "other traumatic event that affects a significant portion of the students in the school. It also specifies that the Department of Education is responsible only for grief counseling provided at the school and extends the period during which the Department must cover the cost of grief counseling to 45 days, with an option to renew for an additional 45 days. Finally, it requires that the Department provide a report each year to the JFC chairs and Education Committee chairs detailing the costs of grief counseling provided pursuant to this section.

Status: Signed into Law 8/16/2023

[HB 5](#) (Longhurst)

Introduced 4/25/2023

An Act to amend Title 31 of the Delaware Code relating to **Reimbursement of School-Based Behavioral Health Services**. The State's Medicaid Plan still limits the reimbursement of Medicaid-covered, school-based behavioral health services to those provided under an Individualized Educational Program (IEP) or Individualized Family Service Plan (IFSP), despite federal policy changes that allow for these services to be provided as a medical necessity without IEP or IFSP documentation. This bill would charge the Department of Health & Social Services to apply to the Centers for Medicare and Medicaid Services for a State Plan Amendment that would allow for reimbursement of medically necessary behavioral health services without IEP or IFSP documentation. Local education agencies must use the reimbursed funds to further invest in school-based behavioral health supports.

Status: Substituted in House

[HS 1 for HB 5 with HA 1](#) (Longhurst)

Introduced: 2/29/2024

An Act to amend Title 31 of the Delaware Code relating to **Reimbursement of School-Based Behavioral Health Services**. The State’s Medicaid Plan still limits the reimbursement of Medicaid-covered, school-based behavioral health services to those provided under an Individualized Educational Program (IEP) or Individualized Family Service Plan (IFSP), despite federal policy changes that allow for these services to be provided as a medical necessity without IEP or IFSP documentation. This bill would charge the Department of Health & Social Services to apply to the Centers for Medicare and Medicaid Services for a State Plan Amendment that would allow for reimbursement of medically necessary behavioral health services without IEP or IFSP documentation. Local education agencies must use the reimbursed funds to further invest in school-based behavioral health supports. This House Substitute differs from the original HB 5 in that the deadline for application for a State Plan Amendment is extended to January 1, 2025. It also allows the Department of Education, the administrator of all reimbursements, to retain up to 5% of federal reimbursement dollars in order to defray administrative costs. Remaining funds shall be reimbursed to the local education agencies providing the services. **HA 1**, which removes the provision allowing the Department of Education to retain 5% of federal reimbursements to defray administrative costs and rephrases the requirement that reimbursements be used for school-based behavioral health programs and services was placed with the Bill.

Status: Signed into Law 8/7/2024

[HB 6](#) (Longhurst)

Introduced 4/25/2023

An Act to amend Title 14 of the Delaware Code relating to **School Mental Health Services**. This Act requires the State to fund a Mental Health Professional and Mental Health Coordinator position for each district and charter school by the 2024-25 school year. The Mental Health Professional and Mental Health Coordinator must develop partnerships with community-based organizations, work to establish collaborative relationships with the school, families, and local community, create an implementation plan, and undertake an assessment of the district's mental health needs.

Status: Introduced and Assigned to Education Committee in House

[HB 7](#) (Longhurst)

Introduced 4/25/2023

An Act to Amend Title 31 of the Delaware Code Relating to **Pediatric Inpatient Behavioral Health Enhancement**. This Act requires Delaware Medicaid to provide an enhancement to the acute care per diem rate for psychiatric facilities for hard to place pediatric behavioral health inpatients. The per diem enhancement is limited to an inpatient stay of 14 days. The applicability of the per diem enhancement is determined based on whether admission criteria is met. This Act also creates a Quality Oversight Committee designed to identify quality metrics for facilities admitting patients as well as provide biennial recommendations to the General Assembly’s Joint Finance Committee regarding eligibility categories and enhancement rates.

Status: Stricken in House

[HB 11 with HA 1](#) (Heffernan)

Introduced: 5/2/2023

An Act to amend Title 16 of the Delaware Code relating to **County Building Codes**. This Act requires new commercial buildings with a foundation footprint of 50,000 square feet or greater to meet certain requirements to ensure that their roof is able to support solar energy infrastructure. **HA 1** makes clear that solar-ready zones must comply with Appendix CA Solar-Ready Zone—

Commercial of the International Energy Conservation Code or ASHRAE Standard 90.1, both of which are building standards. This amendment requires that the total solar-ready zone area shall not be less than 40 percent of the roof area, which is consistent with Appendix CA Solar-Ready Zone—Commercial of the International Energy Conservation Code, and erroneously omitted from House Bill No. 11.

Status: Signed into Law 8/3/2023

[HB 15 with HA 1](#) (Longhurst)

Introduced: 2/29/2024

An Act to amend Title 18 of the Delaware Code relating to **Ovarian Cancer**. This Act requires all individual, blanket, and group health insurance policies to cover annual ovarian cancer screening tests for women at risk for ovarian cancer. It further expands the scope of monitoring tests available to women subsequent to ovarian cancer treatment. **HA 1** adds having a family history of breast cancer in a male relative or a personal history of polycystic ovarian cancer to the definition of “at risk for ovarian cancer.” It also strikes references to experimental or investigative services.

Status: Signed into Law 3/21/2024

[HB 16 with HA 1](#) (Longhurst)

Introduced: 2/29/2024

An Act to amend Titles 29 & 31 of the Delaware Code relating to **Ovarian Cancer**. This Act requires that Medicaid and State employee health plans cover: (1) ovarian cancer monitoring tests for women treated for ovarian cancer; and (2) annual screening tests for women at risk for ovarian cancer. **HA 1** adds a family history of breast cancer in a male relative and a personal history of polycystic ovarian syndrome to the definition of "at risk for ovarian cancer".

Status: Signed into Law 10/9/2024

[HB 17](#) (Morrison)

Introduced: 2/29/2024

An Act to amend Title 19 of the Delaware Code relating to **Sick Time & Safety Leave**. This Act requires all employers in the State to provide employees with a minimum of 1 hour of earned sick time and safety leave for every 30 hours worked. For employers with 9 or fewer employees, the time may be unpaid, job-protected time instead of paid time. Accrued earned sick time and safety leave may be used by the employee for time off with pay at the employee’s same wage and benefit rate to deal with the mental and physical health needs of either the employee or an employee’s family member and other specified purposes. Earned sick time and safety leave may also be used to address the consequences of domestic violence for such things as meeting with lawyers, obtaining services from victim service organizations, temporary relocation and the like. Employers may cap the number of hours earned per year at 40, the carryover from one year to the next at 40 hours, and the maximum earned sick and safety leave an employee has access to at any one time at 40 hours. Employers may require employees to have been employed at least 90 days before they may take earned sick leave and safety time. Employers whose benefits packages already meet the minimum requirements of this Act are not required to offer anything additional. The Department of Labor will promulgate regulations governing operation of the Act and will enforce the provisions of the Act. Employers who violate the Act are subject to civil penalty of no less than \$2,000 nor more than \$20,000. Employers are prohibited from discriminating against an employee who complains to the Department that an employer has violated the Act. Where discrimination or retaliation is found to have occurred a penalty between \$20,000 and \$50,000 may be applied.

Status: Substituted in House

[HS 1 for HB 17](#) (Morrison)

Introduced: 4/11/2024

An Act to amend Title 19 of the Delaware Code relating to **Sick Time & Safety Leave**. This Act requires all employers in the State to provide employees with a minimum of 1 hour of earned sick time and safety leave for every 30 hours worked. For employers of fewer than 10 employees, the time may be unpaid, job-protected time instead of paid time. Accrued earned sick time and safety leave may be used by the employee for time off with pay at the employee's same wage and benefit rate to deal with the mental and physical health needs of either the employee or an employee's family member and other specified purposes. Earned sick time and safety leave may also be used to address the consequences of domestic violence for such things as meeting with lawyers, obtaining services from victim service organizations, temporary relocation and the like. Employers may cap the number of hours earned per year at 40, the carryover from one year to the next at 40 hours, and the maximum earned sick and safety leave an employee has access to at any one time at 40 hours. Employers may require employees to have been employed at least 90 days before they may take earned sick leave and safety time. Employers whose benefits packages already meet the minimum requirements of this Act are not required to offer anything additional. The Department of Labor will promulgate regulations governing operation of the Act and will enforce the provisions of the Act. Employers who violate the Act are subject to civil penalty of no less than \$1,000 nor more than \$5,000. Employers are prohibited from discriminating against an employee who complains to the Department that an employer has violated the Act. Where discrimination or retaliation is found to have occurred a penalty between \$1,000 and \$5,000 may be applied. **HA 1** clarifies that the law will take effect for those covered by a collective bargaining agreement in effect on January 1, 2027 on the expiration date in the contract or when the contract is subject to renewal/amendment /extension. In this case, the law might not take effect for some unionized employees for many years, if they are covered by a very long contract term. **HA 2** removes closure of a family member's school or other facility and time to attend school-related functions and events from permissible uses of sick time and safety leave and makes conforming changes. **HA 3** changes the definition of "small business" to "an employer that employed less than 25 employees in this State during the previous 12 months." **HA 1, HA 2 & HA 3** were placed with the Bill.

Status: Assigned to Appropriations Committee in House

[HS 1 for HB 22](#) (Yearick)

Introduced: 3/12/2024

An act to amend Title 11 of the Delaware Code relating to **Assault**. School personnel report that school safety is a significant issue that affects whether or not they stay in the profession. This Act makes recklessly or intentionally causing physical injury to an employee, contractor, or subcontractor of a public or private elementary school or secondary school an assault in the second degree. This Act may be cited as "The School Personnel Protection Act". This Act is a substitute for and differs from House Bill No. 22 by specifying that the person must recklessly or intentionally cause physical injury to the employee, contractor, or subcontractor while on school property or at a school-sponsored event in order for the provision to apply.

Status: Adopted in lieu of the original bill HB 22, and Assigned to Education Committee in House

[HB 24 with HA 1](#) (Longhurst)

Introduced: 2/29/2024

An Act to amend Title 30 of the Delaware Code relating to **Charitable Donations and Income Tax Returns**. This Act creates a new charitable donation option on the Delaware income tax return. It allows taxpayers to direct a donation to the SL24: Unlock the Light Foundation out of their state tax refund or in addition to the payment of owed tax. The Foundation works to educate the community to end the stigma, myths, and barriers surrounding mental health and to encourage productive conversations regarding mental health and wellness; provide uninsured and underinsured young people the means to get the critical and ongoing health services they need through the SL24 Mental Health Scholarship program; and provide access to trained Peer24 Team Members, Support Groups, and safe spaces like Sean's House and Sean's Rooms; The Act also removes the statutory limitation on the number of charitable funds that may be included on the income tax return. **HA 1** restores the 21 charitable organization limit for the tax return and strikes an existing charitable donation option because that organization has been dissolved.
Status: Signed into Law 6/27/2024

[HB 41](#) (Dorsey Walker) Introduced: 1/5/2023
An Act to amend Title 6 of the Delaware Code relating to the **Digital Right to Repair Act**. This bill creates the Delaware Digital Right to Repair Act. Currently when an electronic product such as a phone or electronic game breaks, it is only allowed to be repaired by the manufacturer. Parts are not available whether you are a consumer or a local repair shop. This act requires the manufacturer to make parts, documentation, tools, and updates available on fair and reasonable terms. **HA 1** which inserts language excluding motor vehicle manufacturers, manufacturers of motor vehicle equipment, and motor vehicle dealers from the bill was placed with the Bill.
Status: Out of Committee in House

[HB 45](#) (Williams) Introduced: 1/11/2023
An Act to amend Title 14 of the Delaware Code relating to **Developmental Screening**. This Act amends Chapter 30A of Title 14 to clarify that screening will not be conducted if a parent declines developmental screening or notifies the licensee that the child is already receiving early intervention services or special education and related services. It further clarifies that the childcare provider will conduct the screening where the parent or guardian fails to do so only upon receipt of parental consent. Because this section of the code has a version that is effective until July 1, 2024, and a version that is effective thereafter, the change appears in both versions to make clear that it is intended to change the pre and post-July 1, 2024 versions.
Status: Signed into Law 5/12/2023

[HB 46](#) (Bush) Introduced: 1/12/2023
An Act to amend Title 18 of the Delaware Code relating to **Credit for Reinsurance**. This bill reflects the National Association of Insurance Commissioner's revisions to the Model Credit for Reinsurance Act giving the Commissioner express regulatory authority to address the handling and treatment of reinsurance agreements entered into, directly or indirectly, with life and health insurer-affiliated captives, special purpose vehicles or similar entities, including the authority to promulgate model regulations adopted by the NAIC that are required for the Department to meet accreditation.
Status: Signed into Law 5/25/2023

[HB 49](#) (Osienski) Introduced: 1/13/2023

An Act to amend Title 19 of the Delaware Code relating to **Unemployment Benefits and Employer Assessments**. This Act provides post-pandemic related relief to both claimants receiving unemployment benefits and employers who are assessed unemployment taxes. This bill will increase the maximum weekly benefit amount payable to claimants seeking unemployment compensation benefits from the Delaware Department of Labor, Division of Unemployment Insurance from \$400.00 a week to \$450.00 a week. The funds necessary to pay the increased weekly benefit amounts will be paid from the Unemployment Trust Fund. Delaware currently pays unemployment claimants less per week in benefits than claimants are paid in each neighboring state. The maximum weekly benefit amount has not changed since 2019. The Governor's agreement to allow federal pandemic funds to be used to replace the funds in the Unemployment Trust Fund that were depleted from the surge of pandemic related claims has made the Unemployment Trust Fund sufficiently solvent so as to allow the Department to offer unemployment tax relief measures to Delaware employers for a one-year period during calendar year 2023, at a time when employers continue to face post-pandemic rising economic challenges, supply chain problems, and difficulty in staffing. This Act will provide temporary relief to employers who pay unemployment tax assessments by reducing the new employer tax rates, reducing or holding constant overall employer tax rates, and reducing the maximum earned rate. This Act will also temporarily simplify the tax rate schedules that are used to calculate unemployment assessments paid by employers. The Department estimates that these unemployment tax assessment changes will reduce the tax obligation of employers an estimated \$50 million in 2023. The various tax assessment relief provisions set forth in Sections 2 and 3 of this Act are retroactive to January 1, 2023 and are intended to be in effect for the full calendar year 2023.

Status: Signed into Law 1/26/2023

[HB 52](#) (Minor-Brown)

Introduced: 1/18/2023

An Act to amend Title 11 of the Delaware Code relating to the **Adult Correction Healthcare Review Committee**. This bill adds a Delaware licensed psychiatrist as a voting member of the Adult Correction Healthcare Review Committee.

Status: Signed into Law 4/6/2023

[HB 54](#) (Williams)

Introduced: 1/19/2023

An Act to amend Titles 18, 29 and 31 of the Delaware Code relating to **Insurance Coverage of Epinephrine Autoinjectors**. Currently, all health insurance plans subject to requirements under Delaware law must include at least 1 formulation of epinephrine autoinjectors on the lowest tier of the carrier's drug formulary for individuals who are 18 years of age or younger. This Act expands this requirement to all covered individuals, regardless of age, by January 1, 2024. This Act also makes a technical correction to §§ 3571Y of Title 18 to add standard language about applicability, which is already in § 3370D of Title 18.

Status: Signed into Law 2/25/2023

[HB 55](#) (Phillips)

Introduced: 1/19/2023

An Act to amend Title 6 and 31 of the Delaware Code relating to **Individuals who are Homeless**. This Act is the Bill of Rights for Individuals Experiencing Homelessness to ensure that all individuals, regardless of housing status, have equal opportunity to live in decent, safe, sanitary, and healthful accommodations and enjoy equality of opportunities. To that end, this Act

sets forth the rights of individuals experiencing homelessness and creates a process by which the State Human and Civil Rights Commission and the Division of Human Relations may accept and investigate complaints of discriminatory treatment, attempt conciliation, and refer enforcement actions to the Department of Justice where necessary.

Status: *Substituted in House*

[HS 1 for HB 55](#) (Phillips)

Introduced: 3/14/2023

An Act to amend Title 6 and 31 of the Delaware Code relating to **Individuals who are Homeless**. This Act is the Bill of Rights for Individuals Experiencing Homelessness to ensure that all individuals, regardless of housing status, have equal opportunity to live in decent, safe, sanitary, and healthful accommodations and enjoy equality of opportunities. To that end, this Act sets forth the rights of individuals experiencing homelessness and creates a process by which the State Human and Civil Rights Commission and the Division of Human Relations may accept and investigate complaints of discriminatory treatment, attempt conciliation, and refer enforcement actions to the Department of Justice where necessary. This Substitute differs from the original House Bill No. 55 in that it expands the definition of “individuals experiencing homelessness” to include those who may be staying with different friends or family without a permanent home and it eliminates a reference to voting rights, since such rights are addressed elsewhere in the Code.

Status: *Substituted in House*

[HS 2 for HB 55](#) (Phillips)

Introduced: 3/21/2024

An Act to amend Title 6 and 31 of the Delaware Code relating to **Individuals who are Homeless**. This Act is the Bill of Rights for Individuals Experiencing Homelessness to ensure that all individuals, regardless of housing status, have equal opportunity to live in decent, safe, sanitary, and healthful accommodations and enjoy equality of opportunities. To that end, this Act sets forth the rights of individuals experiencing homelessness and creates a process by which the State Human and Civil Rights Commission and the Division of Human and Civil Rights may accept and investigate complaints of discriminatory treatment, attempt conciliation, and refer enforcement actions to the Department of Justice where necessary. This Substitute differs from the original House Bill No. 55 in that it expands the definition of “individuals experiencing homelessness” to include those who may be staying with different friends or family without a permanent home and it eliminates a reference to voting rights, since such rights are addressed elsewhere in the Code.

Status: *Assigned to Judiciary Committee in House*

[HB 56](#) (Williams)

Introduced: 1/19/2023

An Act to amend Titles 14 and 30 of the Delaware Code relating to **Tax Treatment of Certain Student Loan Repayments**. This Act makes a loan repayment under the Speech Language Pathologist Student Loan Repayment Program, the High Needs Educator Loan Payment Program, and the Mental Health Services Student Loan Repayment Program non-taxable for state income tax purposes.

Status: *Introduced and Assigned to Education Committee in House*

[HB 59](#) (Shupe)

Introduced: 3/2/2023

An Act to amend Title 16 of the Delaware Code relating to **Establishing a Program for the Installation of Residential Drinking Water Purification Systems**. This Act establishes a

residential drinking water purification system program to be administered through the Department of Health and Social Services.

Status: Introduced and Assigned to Health & Human Development Committee in House

[HB 60](#) (Romer)

Introduced: 1/19/2023

An Act to amend Titles 18, 29 and 31 of the Delaware Code relating to **Breast Cancer Screening and Diagnostic Procedures**. This Act requires that all insurance policies issued or renewed in this State include coverage of supplemental and diagnostic breast examinations on terms that are at least as favorable as the coverage of annual screening mammograms. The Act covers all group, blanket, and individual health insurance policies as well as the State employee healthcare plan and Medicaid.

Status: Substituted in House

[HS 1 for HB 60 with HA 1](#) (Romer)

Introduced: 5/16/2023

An Act to amend Titles 18, 29 and 31 of the Delaware Code relating to **Breast Cancer Screening and Diagnostic Procedures**. To prevent Delawareans from facing exorbitant costs for potentially life-saving screenings and follow-up tests, and to allow providers to use clinical judgement in the use of breast cancer examination tools based on established national standards, this Act requires that all insurance policies issued or renewed in this State include coverage of supplemental and diagnostic breast examinations on terms that are at least as favorable as the coverage of annual screening mammograms. The Act covers all group, blanket, and individual health insurance policies (except specified accident, specified disease, hospital indemnity, Medicare supplement, long-term care or other limited benefit health insurance policies) as well as the State employee healthcare plan and Medicaid. This substitute bill differs from the original bill in that it makes technical corrections, excludes certain health, and adds to the definition of breast MRI. **HA 1** changes the application date to December 31, 2024.

Status: Signed into Law 7/26/2023

[HB 64](#) (Ramone)

Introduced: 3/2/2023

An Act to amend Title 29 of the Delaware Code relating to **Health Care Insurance & Retirement Benefits**. This bill authorizes coverage for the spouse of a survivor who qualified to receive a deceased pensioner's retirement benefits prior to May 15, 2012.

Status: Introduced and Assigned to Administration Committee in House

[HB 65](#) (Heffernan)

Introduced: 1/20/2023

An Act to amend Title 29 of the Delaware Code relating to **Bereavement Leave**. According to the Mayo Clinic, miscarriages occur in about 20% of all pregnancies, and generally, in the first 12 weeks. According to the Centers for Disease Control, 1 out of every 100 American pregnancies ends in stillbirth. Black women have a significantly higher risk of miscarrying—43% higher when compared to white women. Black mothers are also more than twice as likely to experience stillbirth compared to Hispanic and white mothers. This bill provides State employees who suffer a miscarriage, stillbirth or other loss, a maximum of 5 days of paid bereavement leave. This Act shall be known as the "Sloane Hajek Act of 2023".

Status: Signed into Law 6/30/2023

[HB 70](#) (Dorsey Walker)

Introduced: 1/25/2023

An Act to amend Title 11 of the Delaware Code relating to the **Death Penalty**. This Act eliminates the death penalty in Delaware. As such, the penalty for a person who is convicted of first-degree murder for an offense that was committed after the person's 18th birthday is imprisonment for the remainder of the person's natural life without benefit of probation or parole or any other reduction.

Status: Signed into Law 9/26/2024

[HB 71 with HA 1](#) (Schwartzkopf) Introduced: 3/2/2023

An Act to amend Title 16 of the Delaware Code relating to the **Lyme Disease Education Oversight Board**. This bill clarifies that the goal and function of the Lyme Disease Education Oversight Board includes Lyme Disease and other tick-related diseases. This Act supersedes the previous sunset provision that established the Board in House Bill 291 from the 148th General Assembly (80 Del. Laws c. 402 § 1) and extends the Board's existence until 2032 unless otherwise provided by a subsequent act of the General Assembly. **HA 1** makes technical changes by changing "tick-related diseases" to "tickborne diseases". This amendment also clarifies that the Lyme Disease Oversight Board expires on August 29, 2032 unless otherwise provided by a subsequent act of the General Assembly.

Status: Signed into Law 4/12/2023

[HB 73](#) (Osienski) Introduced: 3/2/2023

An Act to amend Title 19 of the Delaware Code relating to **Civil Actions to Recover Overpaid Unemployment Benefits**. This Act clarifies that when H.B. 149 of the 150th General Assembly was enacted, removing the 5-year statute of limitations for the Department of Labor to bring civil actions to recover unemployment overpayment debts, the General Assembly intended to entirely remove all statutes of limitations notwithstanding any other debt collection statute of limitations in the law or provided in Title 10 of the Delaware Code. This Act will not apply to overpayment debts that accrue 3 years or more prior to the date of enactment.

Status: Substituted in House

[HS 1 for HB 73](#) (Osienski) Introduced: 6/15/2023

An Act to amend Title 19 of the Delaware Code relating to **Civil Actions to Recover Overpaid Unemployment Benefits**. This House Substitute No. 1 for House Bill 73 provides a 5-year statute of limitations for the Department of Labor to bring civil actions to recover nonfraud overpayment debts and no period of limitations to recover fraud overpayment debts. This portion of the Substitute will apply to overpayment debts for which the statute of limitations has not yet run, which includes those that accrued less than 3 years prior to the enactment of this Act. This Substitute expressly codifies the current law that there is no deadline for the Department to collect overpayment debts by offset of future benefits, by state Department of Revenue offset or by federal Treasury offset of tax refunds, the last of which is mandated by federal law. Finally, this Substitute creates an overpayment waiver program, effective retroactively to the start of the COVID-19 pandemic, to give the Department authority to waive non-fraud overpayments of traditional unemployment benefits resulting from either Department error or claimants receiving certain low-income public assistance.

Status: Signed into Law 9/14/2023

[HB 74](#) (Morrison) Introduced: 3/2/2023

An Act to amend Title 16 of the Delaware Code relating to **Mandatory Reporting of Child Abuse**. This Act abrogates the privilege between priest and penitent in a sacramental confession relating to child abuse and neglect. It requires priests to report child abuse and neglect or to give or accept evidence in a judicial proceeding relating to child abuse or neglect.

Status: Introduced and Assigned to Judiciary Committee in House

[HB 75](#) (Schwartzkopf)

Introduced: 1/26/2023

AN ACT MAKING APPROPRIATIONS FOR THE EXPENSE OF THE STATE GOVERNMENT FOR THE FISCAL YEAR ENDING JUNE 30, 2024; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AND AMENDING CERTAIN PERTINENT STATUTORY PROVISIONS.

Status: Introduced and Assigned to Appropriations Committee in House

[HB 76](#) (Schwartzkopf)

Introduced: 1/26/2023

AN ACT MAKING A ONE-TIME SUPPLEMENTAL APPROPRIATION FOR THE FISCAL YEAR ENDING JUNE 30, 2024 TO THE OFFICE OF MANAGEMENT AND BUDGET.

Status: Introduced and Assigned to Appropriations Committee in House

[HB 80](#) (Minor-Brown)

Introduced: 3/2/2023

An Act to amend Title 31 of the Delaware Code relating to **Coverage of Doula Services**. This Act requires that doula services be covered by Medicaid in Delaware by January 1, 2024. It follows up on HB 343 from the 151st General Assembly which required the Division of Medicaid and Medical Assistance to submit a plan for implementing this coverage and draws on that completed report.

Status: Signed into Law 8/9/2023

[HB 83](#) (Williams)

Introduced: 3/14/2023

An Act to amend Title 14 of the Delaware Code relating to **Oral Health Screenings**. This Act requires every public school and charter school to provide students enrolled in kindergarten, who have not been seen by a dentist by time of school enrollment, with an oral health screening by the last student attendance day of each school year. Notification to the primary teacher and parent or guardian must be done within 7 school days and a copy of the oral health screening results sent home. A referral to a dentist, if required, will be provided by the Bureau of Oral Health and Dental Services. The Division of Public Health (DPH), through the Delaware Smile Check Program, offers school-based oral screenings, at no cost to the school districts, schools, including charter schools, or the students. This Act takes effect for the 2024-2025 school year.

Status: Substituted in House

[HS 1 for HB 83](#) (Williams)

Introduced 4/26/2023

An Act to amend Title 14 of the Delaware Code relating to **Oral Health Screening**. This Act requires every public school and charter school to provide students enrolled in kindergarten with an oral health screening by the last student attendance day of each school year. Notification to the parent or guardian must be done and a copy of the oral health screening results sent home. A referral to a dentist, if required, will be provided by the Bureau of Oral Health and Dental Services. The Division of Public Health (DPH), through the Delaware Smile Check Program, offers school-based oral screenings, at no cost to the school districts, schools, including charter

schools, or the students. This Substitute Bill takes out the requirement to advise teachers of the results of the oral health screenings, including Special Education Coordinators and Educational Diagnosticians of students with an IEP. This Substitute Bill also removes any follow-up requirements, by the school, with the student's parent or guardian. The Substitute Bill also makes the school requirements, under this Act, contingent on the Delaware Smile Check Program remaining in effect or a comparable program to provide free oral health screenings to all enrolled kindergarten students. This Act takes effect for the 2024-2025 school year.

Status: Signed into Law 8/3/2023

[HB 89](#) (Baumbach)

Introduced: 3/17/2023

An Act to amend Title 30 of the Delaware Code and Chapter 118 of Volume 83 of the Laws of Delaware relating to **Personal Income Taxes**. Section 1 of this Act increases the standard deduction for personal income tax purposes of resident individuals and spouses of this State for tax years beginning after December 31, 2023. Section 3 of this Act increases the monetary filing thresholds resulting from the increases the standard deduction under Section 1. Sections 2 and 4 of this Act increase the refundable earned income tax credit to 7.5% of the corresponding federal earned income tax credit for tax years beginning on or after January 1, 2023, and clarify that a previously enacted refundable earned income tax credit of 4.5% of the corresponding federal earned income tax credit took effect for tax years beginning on or after January 1, 2021. **SA 1** deletes Section 1 of House Bill No. 89, which was intended to increase the standard deduction for Delaware income tax purposes. **SA 2** deletes Sections 1 and 3 of House Bill No. 89 to remove the provisions related to the standard deduction for Delaware income tax purposes. **SA 1 & SA 2 were placed with the Bill**

Status: Out of Committee in Senate

[HB 90](#) (Williams)

Introduced: 3/16/2023

An act to amend Title 6 of the Delaware Code relating to **Medical Debt**. This Act requires large health-care facilities to provide information to uninsured patients regarding eligibility and the application process for medical assistance. Information must be provided at the time of service or prior to discharge, and again with each billing statement. When patients receive emergency care, information must be provided within 5 days of discharge. This Act becomes effective 1 year from the date of its enactment or when final regulations are adopted by the Secretary, whichever occurs first.

Status: Introduced and Assigned to Economic Development/Banking/Insurance & Commerce Committee in House

[HB 99 with HA 1](#) (Heffernan)

Introduced 4/27/2023

An Act to amend Titles 7 and 29 of the Delaware Code relating to **Climate Change**. This Act, known as the Delaware Climate Change Solutions Act of 2023, follows the issuance of Delaware's Climate Action Plan in 2021, and establishes a statutory target of greenhouse gas emissions reductions over the medium and long term to mitigate the adverse effects of climate change due to anthropogenic greenhouse gas emissions on the State. The Act establishes a process of regular updates to the Climate Action Plan to serve as the framework to achieve the targeted emissions reductions and develop resilience strategies for the State, creates Climate Change Officers in certain Key Cabinet-Level Departments who will assist DNREC in the ongoing implementation of the Climate Action Plan, requires State agencies to consider climate

change in decision-making, rulemaking, and procurement, and requires an Implementation Report every 2 years on the progress of the State towards meeting the statutory targets. **HA 1** does all of the following: (1) Adjusts a “Whereas” clause for additional considerations to meet the State's climate goals; (2) Adjusts the timing of when DNREC would promulgate offset regulations; (3) Renames the Scientific Committee on Climate Scenarios to the Technical Climate Advisors; (4) Adjusts the list of recommendations by the Department in the Climate Action Plan to include offsets; (5) Requires that the names of the individuals who are Technical Climate Advisors be publicly posted at all times; (6) Adjusts to whom the Climate Action Plan and Climate Action Plan implementation reports are to be sent.

Status: Signed into Law 8/3/2023

[HB 102](#) (Bush)

Introduced on 3/30/2023

An Act to amend Title 17 of the Delaware Code Relating to **Entrance Permits**. This Act expedites the issuance of a temporary entrance permit for commercial and economic development projects. The Act also makes technical changes to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 6/20/2023

[HB 104 with HA 1](#) (Bush)

Introduced 3/30/2023

An Act to Amend Title 29 of the Delaware Code Relating to **Land Use Planning**. The state’s pre-application process for land use process, known as PLUS, was created 20 years ago and has served to increase coordination among state and local agencies. In doing so, it has fulfilled its intent of providing predictability and consistency for the development community, especially in the area of major projects. Given that success, this bill assists in expediting the process for economic development projects in the State of Delaware with some exemptions from the PLUS process. A project located in Investment Level 1 or 2 under the Strategies for State Policies and Spending that is consistent with local zoning and any local comprehensive plan that will create full-time jobs is exempt from the pre-application process unless required by the local government or requested by the applicant. **HA 1** deletes the phrase “or otherwise” and replaces it with “or by ordinance” and deletes the phrase “or where an applicant voluntarily requests to participate under subsection (b) of this section” since it is duplicative of what is contained in subsection (b) of this section.

Status: Signed into Law 6/20/2023

[HB 105 with HA 1](#) (Williams)

Introduced: 4/6/2023

An act to amend Title 24 of the Delaware Code relating to the **Medical Practices Act**. This Act requires physicians who are discontinuing business, leaving the State, or terminating a patient-physician relationship for any other reason to notify affected patients at least thirty days prior to the discontinuation of services via first class mail and an electronic message if electronic communication is available. It removes the requirement that physicians ending a patient-physician relationship publish a notice in a newspaper of daily circulation. Notice sent to patients must include information about how the patient may obtain their medical records and information about other physician services in the area that are available to patients who will require continued medical care. This Act further adds that a patient receive notice by electronic message, if available, when a physician dies and has not transferred patient records to another health-care provider. Finally, this Act makes technical changes to create consistency with those

sections being amended by SB 74 of the 152nd General Assembly, relating to the transfer of medical records in other health-care professions. **HA 1** requires that physicians provide the Board of Medical Licensure and Discipline notice of how patients may obtain their old medical records when a physician's medical practice closes or the physician dies. It also clarifies that when a physician notifies a patient that the patient-physician relationship will be discontinued, the notice shall include the date the physician services will be discontinued. Finally, this Amendment makes this Act effective 6 months after its enactment.

Status: Signed into Law 8/9/2023

[HB 108](#) (Matthews)

Introduced: 4/5/2023

An act to amend Title 21 of the Delaware Code relating to **Driver's Licenses**. This Act does all of the following: (1) Allows for all licensed independent practitioners that are treating a driver for a medical condition to report findings which allows for Nurse Practitioner, Physician Assistant, or Physician to sign Division paperwork and mirrors verbiage found in Title 13; (2) Updates the name of Medical Council to Board of Medical Licensure and Discipline which ensures compliance with code in handling of individual cases; and (3) Changes the Secretary of Health and Social Services to Secretary of Transportation for determining the status of driver's license for individuals with a potential medical condition which allows for quicker response and ensures the confidentiality of a driver.

Status: Introduced and Assigned to Transportation Committee in House

[HB 110](#) (Minor-Brown)

Introduced: 3/31/2023

An act to amend Title 18, 29 & 31 of the Delaware Code relating to **Insurance Coverage for Termination of Pregnancy**. Section 1 amends Title 31 to require all health benefit plans delivered or issued for Medicaid to cover services related to the termination of pregnancy. Coverage provided under this section is not subject to any deductible, coinsurance, copayment, or any other cost-sharing requirement and may not impose restrictions on services inconsistent with Subchapter IX, Chapter 17, of Title 24. It also moves the definition of "carrier" out of individual provisions and into the general definition section for the chapter. Sections 2 and 3 amend Title 18 to require both individual and group health carriers to cover services related to the termination of pregnancy with identical cost-sharing prohibitions. Additionally, Sections 2 and 3 make clear that a religious employer may obtain an exclusion from the carrier if the requirements conflict with the organization's bona fide religious beliefs and practices. Section 4 amends Title 29 to charge the State Employee Benefits Committee with the duty to ensure that state employee plans provide coverage for services related to the termination of pregnancy. Coverage shall not be subject to any deductible, coinsurance, copayment, or any other cost-sharing requirement and shall not impose restrictions on such services inconsistent with protections placed in Subchapter IX, Chapter 17, of Title 24. This Act takes effect January 1 following its enactment into law.

Status: Substituted in House

[HS 1 for HB 110](#) (Minor-Brown)

Introduced: 5/11/2023

An act to amend Title 18, 29 & 31 of the Delaware Code relating to **Insurance Coverage for Termination of Pregnancy**. Section 1 amends Title 31 to require all health benefit plans delivered or issued for Medicaid to cover services related to the termination of pregnancy. Coverage provided under this section is not subject to any deductible, coinsurance, copayment,

or any other cost-sharing requirement and must cover the full scope of services permissible under the law. It also moves the definition of “carrier” out of individual provisions and into the general definition section for the chapter. Sections 2 adds a definition of “religious employer.” Sections 3 and 4 amend Title 18 to require both individual and group health carriers to cover services related to the termination of pregnancy with identical cost-sharing prohibitions. Certain types of limited coverage plans are exempt from the requirement, and HDHP and catastrophic plans are exempt from the cost-sharing prohibitions if such requirements would cause them to lose their status and treatment under federal law. A religious employer may obtain an exclusion from the carrier if the requirements conflict with the organization’s bona fide religious beliefs and practices. Section 5 amends Title 29 to require coverage for services related to the termination of pregnancy under the state employee health plan. Coverage shall not be subject to any deductible, coinsurance, copayment, or any other cost-sharing requirement and shall apply to the full scope of services permissible under the law. The changes to Medicaid and the state employee health plan are effective January 1 of the year following enactment. The changes to insurance requirements for private group, blanket, and individual coverage are effective for policies issued, renewed, or altered after January 1, 2025. This substitute differs from the original bill as follows: (1) It makes several technical corrections; (2) It limits the permissible applications of referral, prior authorization, and in-network requirements to ensure full and timely access to covered services; (3) It explicitly states that the State will fund coverage of services for Medicaid recipients that are required under this Act for which federal funding may not be used; (4) It adds a definition of religious employer and requires a religious employer to cover services when the life or health of the mother is at risk; (5) It changes the effective and application dates of the coverage requirements.

Status: *Substituted in House*

[HS 2 for HB 110](#) (Minor-Brown)

Introduced: 4/11/2024

An act to amend Title 18, 29 & 31 of the Delaware Code relating to **Insurance Coverage for Termination of Pregnancy**. Section 1 amends Title 31 to require all health benefit plans delivered or issued for Medicaid to cover services related to the termination of pregnancy. Coverage provided under this section is not subject to any deductible, coinsurance, copayment, or any other cost-sharing requirement and must cover the full scope of services permissible under the law. It also moves the definition of “carrier” out of individual provisions and into the general definition section for the chapter. Section 2 adds a definition of “religious employer” to Title 18. Sections 3 and 4 amend Title 18 to require both individual and group health carriers to cover services related to the termination of pregnancy with identical cost-sharing prohibitions. Certain types of limited coverage plans are exempt from the requirement, and HDHP and catastrophic plans are exempt from the cost-sharing prohibitions if such requirements would cause them to lose their status and treatment under federal law. A religious employer may obtain an exclusion from the carrier if the requirements conflict with the organization’s bona fide religious beliefs and practices. Section 5 amends Title 29 to require coverage for services related to the termination of pregnancy under the state employee health plan. Coverage shall not be subject to any deductible, coinsurance, copayment, or any other cost-sharing requirement and shall apply to the full scope of services permissible under the law. The changes to Medicaid and the state employee health plan are effective January 1 of the year following enactment. The changes to insurance requirements for private group, blanket, and individual coverage are effective for policies issued, renewed, or altered after December 31, 2025. This substitute differs from the

original bill as follows: (1) It makes several technical corrections; (2) It limits the permissible applications of referral, prior authorization, and in-network requirements to ensure full and timely access to covered services; (3) It requires federal funds to be used for Medicaid services wherever the use of federal funds is allowed and specifies State funds will otherwise be used for covered services; (4) It adds a definition of religious employer and requires a religious employer to cover services when the life or health of the covered individual is at risk; (5) It changes the effective and application dates of the coverage requirements; (6) It caps the benefit at \$750 per year per covered individual for Medicaid; and for private insurance it allows the benefit to be limited to \$750 per covered individual per year. The bill also makes a technical change by moving the definition of “carrier” out of individual sections of Chapter 5 of Title 29 and into the general definitions section for that chapter.

Status: Signed into Law 9/9/2024

[HB 114](#) (Harris)

Introduced: 3/24/2023

An act to amend Title 16 & 25 of the Delaware Code relating to **Recovery Housing**. Substance use disorder constitutes a severe threat to the health and welfare of the citizens of Delaware. Recovery residences address the needs of individuals in recovery from substance use disorder by providing a safe and healthy living environment and a community of supportive recovering peers to which residents are accountable. Recovery residences support the recovery of individuals with substance use disorder and help prevent relapse, criminal justice system involvement, and overdose. Ensuring the certification of recovery residences according to nationally recognized evidence-based standards protects residents and communities from the harm caused by poorly managed or fraudulent recovery residences. This Act institutes a voluntary certification process for recovery residences under standards and procedures that uphold evidence-based best practices and support a safe, healthy, and effective recovery environment. This Act establishes residents' rights of a recovery residence and protects residents against unreasonable and unfair practices in setting and collecting fees and other residence payments. This Act provides training and technical assistance for recovery residence operators and staff. This Act enables the data collection needed to study the effectiveness of Delaware’s recovery residences. Furthermore, this Act establishes penalties for recovery residences engaged in kickbacks, inducements, patient brokering, and other unethical practices. This Act also excludes a certified recovery house admission agreement from the provisions of the Landlord-Tenant Code.

Status: Substituted in House

[HS 1 for HB 114 with SA 1](#) (Harris)

Introduced: 6/1/2023

An act to amend Title 16 & 25 of the Delaware Code relating to **Recovery Housing**. Substance use disorder constitutes a severe threat to the health and welfare of the citizens of Delaware. Recovery residences address the needs of individuals in recovery from substance use disorder by providing a safe and healthy living environment and a community of supportive recovering peers to which residents are accountable. Recovery residences support the recovery of individuals with substance use disorder and help prevent relapse, criminal justice system involvement, and overdose. Ensuring the certification of recovery residences according to nationally recognized evidence-based standards protects residents and communities from the harm caused by poorly managed or fraudulent recovery residences. This Act institutes a voluntary certification process for recovery residences under standards and procedures that uphold evidence-based best practices and support a safe, healthy, and effective recovery environment. This Act establishes

residents' rights of a recovery residence and protects residents against unreasonable and unfair practices in setting and collecting fees and other residence payments. This Act provides training and technical assistance for recovery residence operators and staff. This Act enables the data collection needed to study the effectiveness of Delaware's recovery residences. This Act also excludes a certified recovery house admission agreement from the provisions of the Landlord-Tenant Code. **SA 1** requires that certified recovery houses collect and report data on the destinations of former residents who complied with a request to leave or were removed from the certified recovery house. This Amendment also corrects a typographical error and revises § 5102(6) of Title 25 to use the term "certified recovery house" because that is the defined term under § 2201A of Title 16.

Status: Signed into Law 8/1/2023

[HB 118 w/ HA 1, HA 2, SA 1](#) (Hensley) Introduced: 4/6/2023

An act to amend Title 16 of the Delaware Code relating to the **Prohibition of Smoking in Vehicles when a Minor is in the Vehicle**. Due to continuing concerns over the negative health effects secondhand smoke will have on the youth of Delaware, this bill adds Smoking Restrictions within vehicles if a person under the age of eighteen (18) is in the vehicle. Also, it makes clear that a police officer will not stop or detain a car solely on suspicion of having violated this Statute. **HA 1** removes a potential conflict between House Bill 118 and the rest of the Chapter by refining the chapter's exception to private vehicles. **HA 2** clarifies that State and Local Police have the power to enforce this section of the Code. **SA 1**- House Bill No. 118 prohibits smoking in a vehicle if a person is not the sole occupant of the vehicle and a person in the vehicle is under 18 years of age. This Amendment lowers that age to under 16 years. This Amendment also rewrites House Amendment No. 1 to HB 118. Like HA 1 to HB 118, this Amendment revises the existing exceptions to the Clean Indoor Air Act under § 2904 of Title 16 so that these exceptions do not apply when a passenger in the vehicle is under the age when the restriction under § 2909 of Title 16 applies. In addition, this Amendment makes technical corrections to § 2904 to conform existing law to the standards of the Delaware Legislative Drafting Manual, including all of the following: 1. Uses standard language to introduce and explain the applicability of the paragraphs. 2. Corrects punctuation at the end of each paragraph and adds Oxford commas to lists within paragraphs. 3. Revises the exceptions under § 2904(1) into a list for clarity. 4. Corrects the spelling of the word "fundraising".

Status: Signed into Law 9/20/2023

[HB 119 w/ HA 1, HA 1 to HA 1, HA 2](#) (Dukes) Introduced: 4/6/2023

An act to amend Title 21 of the Delaware Code relating to **Rules of the Road**. Delaware is one of five states that does not have an open container law, which is in direct violation of federal regulations. This Bill bans open containers of alcoholic beverages in motor vehicles and provides a civil penalty for an offense. A violation of this section would not be entered on an individual's driving record. **HA 1** clarifies that only the operator of a motor vehicle may be found in violation of the open container law. Passengers are not liable for violations under this section. **HA 1 to HA 1** removes the phrase "or unsealed," from the prohibition on open containers. **HA 2** removes "unsealed" containers or receptacles from the bill's prohibitions. The prohibition on "open" containers remains.

Status: Assigned to Corrections & Public Safety Committee in Senate

[HB 120 with SA 2](#) (Cooke)

Introduced: 4/20/2023

An act to amend Title 21 of the Delaware Code relating to **Rules of the Road**. Speeding is a contributing factor in many serious injury motor vehicle crashes and roadway fatalities. This Act adds operating a motor vehicle at a speed of 90 miles an hour or more to the definition of reckless driving. **SA 2** creates a new penalty scheme for those convicted of the charge of Reckless Driving when it is based on speeding at more than 90 miles per hour.

Status: Signed into Law 6/30/2023

[HB 125](#) (Moore)

Introduced: 4/20/2023

An act to amend Title 14 of the Delaware Code relating to **Free School Meals**. During the COVID-19 pandemic the U.S. Department of Agriculture eased program restrictions to allow for free breakfast and lunch for all students. With the expiration of U.S. Department of Agriculture waivers on June 30, 2022, Delaware schools participating in the USDA School Breakfast Program and National School Lunch Program were required to return to pre-pandemic policies as they related to free breakfast and lunch meals. At present some Delaware schools and school districts provide free breakfast and lunch meals for all students because the schools qualify for Community Eligibility Provisions based on the percentage of students from low-income households. These schools are reimbursed by the U.S. Department of Agriculture using a formula. This Act would require all schools to offer all students free breakfast and lunch every school day. The Department would reimburse all schools for all expenses not reimbursed by the U.S. Department of Agriculture. The amount of reimbursement, by the Department, for each budget year, for each participating school, will be equal to the federal free reimbursable rate multiplied by the total number of eligible meals that the participating school serves during the applicable budget year minus the total amount of reimbursement for eligible meals served that the participating school receives under the School Breakfast Program and National School Lunch Program. This Act takes effect 30 days after publication in the Register of Regulations of the notice by the Controller General that funds have been appropriated to implement this Act.

Status: Substituted in House

[HS 1 for HB 125](#) (Moore)

Introduced: 4/17/2024

An act to amend Title 14 of the Delaware Code relating to **Free School Meals**. During the COVID-19 pandemic the U.S. Department of Agriculture eased program restrictions to allow for free breakfast and lunch for all students. With the expiration of U.S. Department of Agriculture waivers on June 30, 2022, Delaware schools participating in the USDA School Breakfast Program and National School Lunch Program were required to return to pre-pandemic policies as they related to free breakfast and lunch meals. At present, some Delaware schools and school districts provide free breakfast and lunch meals for all students because the schools qualify for Community Eligibility Provisions based on the percentage of students from low-income households. These schools are reimbursed by the U.S. Department of Agriculture using a formula. This House Substitute differs from House Bill No. 125 in that it requires all schools to only offer students who qualify for a reduced-price meal a free breakfast and lunch every school day as opposed to all students regardless of whether they qualify for a reduced-price meal. This Substitute bill also requires all schools and local education agencies who qualify, to participate in the federal Community Eligibility Provision. The Department would reimburse all schools for all

expenses not reimbursed by the U.S. Department of Agriculture. The amount of reimbursement, by the Department, for each budget year, for each participating school, will be equal to the federal free reimbursable rate multiplied by the total number of eligible meals that the participating school serves during the applicable budget year minus the total amount of reimbursement for eligible meals served that the participating school receives under the School Breakfast Program and National School Lunch Program. This Act takes effect 10 days after publication in the Register of Regulations of the notice by the Controller General that funds have been appropriated to implement this Act beginning with the 2026-2027 school year.

Status: Substituted in House

[HS 2 for HB 125](#) (Moore)

Introduced: 5/2/2024

An act to amend Title 14 of the Delaware Code relating to **Free School Meals**. This House Substitute bill eliminates any reference to § 4137 in Title 11 since it will remain as a separate section in the Delaware Code. This House Substitute requires all public schools to offer only students who qualify for a reduced-price meal, under the federal School Breakfast Program and National School Lunch Program, a free breakfast and lunch every school day. This House Substitute also eliminates a requirement that all schools and local education agencies, who qualify, must participate in the federal Community Eligibility Provision, under 42 U.S.C. §1759a (a)(1)(F) since there is no such federal mandate. This Act also removes the requirement that a parent or guardian for each student complete a household income form since that requirement is already set forth in this title. This Substitute bill also removes the delayed effective date. This Act will take effect beginning the school year following its enactment.

Status: Signed into Law 7/23/2024

[HB 126](#) (Neal)

Introduced: 4/21/2023

An Act to amend Title 29 of the Delaware code relating to the **Clean Water for Delaware Act**. This Act clarifies to whom the annual report must be sent and the date that the report must be submitted.

Status: Signed into Law 8/3/2023

[HB 128](#) (Baumbach)

Introduced: 4/21/2023

An Act to amend Title 30 of the Delaware code relating to **Personal Income Tax**. This Act creates the following new tax brackets for taxable years after December 31, 2023.

Status: Out of Committee in House

[HB 133 with HA 1](#) (Dorsey Walker)

Introduced: 4/28/2023

An Act to amend Title 18 of the Delaware code relating to **Line-of-Duty Death Benefits**. First responders, including law enforcement officers, firefighters, emergency medical services (EMS) clinicians, and public safety telecommunicators, are crucial to ensuring public safety and health. First responders are at elevated risk for suicide because of the environments in which they work, their culture, and stress, both occupational and personal. This stress can be associated with a specific incident or an accumulation of day-to-day stress. Occupational stress in first responders is associated with increased risk of mental health issues, including hopelessness, anxiety, depression, post-traumatic stress, as well as suicidal behaviors such as suicidal ideation (thinking about or planning suicide) and attempts. Even during routine shifts, first responders can experience stress due to the uncertainty in each situation. During emergencies, disasters,

pandemics, and other crises, stress among first responders can be magnified. Relationship problems have also been linked to a large proportion of suicides among the general population (42%). Because first responders can have challenging work schedules and extreme family-work demands, stress caused by relationship problems may also be magnified in this worker group. Suicide is ranked second for causes of death for law enforcement officers. As of December, 2022, there were 133 law enforcement suicides, and in 2021, there were 160. In November, 2022 alone, there were 9 police officer suicides in this country, including one from Delaware. Law enforcement officers face a 54 percent higher risk of suicide than the general population. An officer involved in a high stress event has a 70% chance of suicide following the next incident if intervention is not sought, but with intervention, the number drops to 3%. Police officers are also at an elevated risk for depression, substance abuse, and post-traumatic stress disorder. Law enforcement officers and firefighters are more likely to die by suicide than in the line of duty. A study of more than 1,000 firefighters found that nearly 50% had suicidal thoughts at some point during their career, and about 16% reported one or more suicide attempts. A survey of EMTs and paramedics in the United States found that 37% had contemplated suicide, and 6.6% had attempted it. EMS providers are 1.39 times more likely to die by suicide than the public. Studies have found that between 17% and 24% of public safety telecommunicators have symptoms of PTSD and 24% have symptoms of depression. A study in Massachusetts found that the suicide rate for corrections officers was at least 7 times higher than the national suicide rate. Another study showed that 10% of corrections officers considered taking their own life, and about 1 in 3 are dealing with PTSD and depression. For the National Guard, there were 117 suicides in 2021 compared to 121 in 2020. This bill makes clear that suicide is a death in the line of duty for Delaware's first responders, police officers, firefighters, correctional officers, and probation officers, and the National Guard. **HA 1** makes clear there is a rebuttable presumption that a suicide of a first responder is a death in the line of duty, whether the first responder is on active duty or not at the time of the suicide, and the burden is on the employer to demonstrate that such death was not a death in the line of duty by a preponderance of the evidence. This amendment adds 9-1-1 dispatchers and retired first responders to the definition of a covered person.

Status: Assigned to Appropriations Committee in House

[HB 136](#) (Minor-Brown)

Introduced 5/2/2023

An Act to amend Title 30 of the Delaware Code relating to **Personal Income Tax**. While the exact number of nurse vacancies in Delaware fluctuates, healthcare providers agree that the current shortage is unsustainable. Nursing shortages lead to error, higher morbidity, and mortality rates. The American Association of Colleges of Nursing (AACN) outlines a number of contributing factors impacting the current national nursing shortage. One was a lack of nursing school faculty - including the preceptors that provide supervision and instruction for clinical practice. Since Delaware's nursing education programs must require clinical learning experiences provided by these preceptors, nursing students have difficulty completing the required coursework necessary for degree and licensure. Section 1. This bill provides a nonrefundable tax credit of up to \$1,000 and up to \$5,000 for individual qualifying preceptors and clinical preceptors. Section 2. This Act shall be effective for tax years beginning on or after January 1, 2024.

Status: Assigned to Appropriations Committee in House

[HB 137](#) (Griffith)

Introduced 5/4/2023

An Act to amend Title 14 of the Delaware Code relating to **Pupil and Student Identification Cards**. This Act corrects the Delaware crisis text number and the National Suicide Prevention call or text line that is required to be printed on pupil identification cards for all public schools serving pupils in grades 7 to 12 and for all students attending public institutions of higher learning in Delaware. This Act takes effect for the 2023-2024 school year.

Status: Signed into Law 7/21/2023

[HB 140 with HA 1](#) (Baumbach)

Introduced 5/2/2023

An Act to amend Title 16 of the Delaware Code relating to **End-of-Life Options**. This Act permits a terminally ill individual who is an adult resident of Delaware to request and self-administer medication to end the individual's life in a humane and dignified manner if both the individual's attending physician or attending advanced practice registered nurse (APRN) and a consulting physician or consulting APRN agree on the individual's diagnosis and prognosis and believe the individual has decision-making capacity, is making an informed decision, and is acting voluntarily. This Act uses terms and definitions that are consistent with other Delaware laws in Title 16, specifically Chapter 25 (regarding advance health-care directives) and Chapter 25A (regarding Delaware Medical Orders for Scope of Treatment). This Act provides the following procedural safeguards: 1. No one may request medication to end life on behalf of another individual. 2. An individual cannot qualify for medication to end life under this chapter solely because of the individual's age or disability. A mental illness or mental health condition is not a qualifying condition under this Act and a mental illness or mental health condition may be the reason that an individual does not have decision-making capacity and is thus, ineligible for medication to end their life in a humane and dignified manner. 3. Both the individual's attending physician or attending APRN and a consulting physician or consulting APRN must confirm that the individual has a terminal illness and a prognosis of 6 months or less to live, has decision-making capacity, is making an informed decision, and is acting voluntarily. 4. The individual's attending physician or attending APRN must also provide specific disclosures to the individual to ensure that the individual is making an informed decision, including the presentation of all end of life options which include comfort care, palliative care, hospice care, and pain control. 5. The individual must be evaluated by a psychiatrist or a psychologist if either the attending or consulting physicians or APRNs are concerned that the individual lacks decision-making capacity. 6. The individual must complete a witnessed form requesting medication to end life and there are limitations on who can witness the signing of the form. 7. The attending physician or attending APRN must offer the individual the opportunity to rescind the request for medication to end life before writing a prescription for the medication. 8. Two waiting periods must pass before the attending physician or attending APRN may prescribe the medication to end life. 9. The attending physician or attending APRN must provide the qualified patient with instructions about the proper safe-keeping and disposal of unused medication to end life in a humane and dignified manner under applicable state or federal guidelines. The United States Food and Drug Administration guidelines include using a medication collection site or a medication disposal pouch, that deactivates and renders drugs ineffective. 10. An insurer or health-care provider may not deny or alter health-care benefits otherwise available to an individual based upon the availability of medication to end life or otherwise coerce or require a request for medication to end life as a condition of receiving care. 11. A health-care institution may prohibit a physician or

APRN from prescribing medication under this Act on the health-care institution's premises and a physician or APRN may to refuse to prescribe medication under this Act. 12. A request or prescription for or the dispensing of medication under this Act does not constitute elder abuse, suicide, assisted-suicide, homicide, or euthanasia. 13. People acting in good faith and in accordance with generally accepted health-care standards under this Act have immunity, but those acting with negligence, recklessness, or intentional misconduct do not have criminal or civil immunity. 14. The Department of Health and Social Services (DHSS) must develop rules and regulations to collect information regarding compliance with this Act and require health-care providers to file a report when medication to end life in a humane and dignified manner is prescribed or dispensed. DHSS may review samples of records maintained under this Act. The information DHSS collects must include the information necessary to assess a physician's or APRN's compliance with their responsibilities under this Act and DHSS has explicit authority to share information with the Division of Professional Regulation if DHSS suspects that a health-care provider failed to comply with the requirements under this Act. 15. DHSS must complete an annual statistical report of information collected under this Act, similar to public reports available in other states such as New Jersey where this end of life option is available. This report has the following purposes: • To assist the DHSS in its oversight responsibilities for this Act. • To assist the public in learning how well this new law is operating. 16. The Department of State may also promulgate regulations or develop forms and protocols necessary under this Act. 17. Allows the Office of Controlled Substances to provide reports of data in the prescription monitoring program to DHSS to assess compliance with this Act. This Act takes effect when final regulations required under this Act have been promulgated or July 1, 2024, whichever occurs earlier. This Act is known as "The Ron Silverio/Heather Block End of Life Options Law" in memory of Ron Silverio and Heather Block, who were passionate advocates that passed away without this option becoming available to them. **HA 1** extends the implementation deadline for this Act from July 1, 2024, to July 1, 2025.

Status: Vetoed by the Governor 9/20/2024

HB 150 (Griffith)

Introduced 5/10/2023

An Act to amend Title 31 of the Delaware Code relating to **Medical Coverage for All Delaware Children**. This bill is the Cover All Delaware Children Act. Many children who are undocumented do not have access to routine or preventative healthcare, including vaccinations and physicals, because they cannot afford the services. Instead, they may rely upon emergency room visits when untreated conditions worsen. Providing publicly funded healthcare coverage to low-income children greatly improves their health and long-term outcomes. Medicaid coverage is linked to fewer chronic conditions, better overall health, improved oral health, and fewer hospitalizations and emergency room visits. This Act directs the Department of Health and Social Services to develop and operate a limited medical assistance program for children in Delaware who are not otherwise covered, including children who are not documented. A child resident in the state whose family income is low enough that they would qualify on that basis for Medicaid or CHIP coverage but is not eligible for Medicaid or other federally funded coverage, is eligible for coverage and medical care under this Act. The coverage would be co-extensive with that provided by CHIP and Medicaid, except that it would not include in-patient care at a hospital or other healthcare facility. The Act also directs the State to submit a plan amendment to the Centers for Medicare & Medicaid Services so that the state can take advantage of the federal CHIP option to include coverage of pregnant women regardless of immigration status.

Status: Assigned to Appropriations Committee in House

[HB 152](#) (Carson)

Introduced 6/2/2023

An Act to amend Title 29 of the Delaware Code relating to the **Membership of the State Employee Benefits Committee**. This Act revises the membership of the State Employee Benefits Committee by removing the Delaware retiree appointed by the Governor and adding 2 members who are eligible to receive health care insurance under Chapter 52 of Title 29 under a pension or retirement plan. The President Pro Term of the Senate and the Speaker of the House of Representatives each appoint 1 of these members. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Out of Committee in House

[HB 154 with HA 1, HA 4, SA 1](#) (Griffith) Introduced 5/12/2023

An Act to amend Title 6 of the Delaware Code relating to **Personal Data Privacy and Consumer Protection**. This bill creates the Delaware Personal Data Privacy Act. The Act delineates a consumer's personal data rights and provides that residents of this State will have the right to know what information is being collected about them, see the information, correct any inaccuracies, or request deletion of their personal data that is being maintained by entities or people. This Act is modeled after existing frameworks for data privacy in other jurisdictions. This Act will apply to entities that conduct business in the State of Delaware who controlled or processed the personal data of not less than 35,000 consumers or controlled or processed the personal data of not less than 10,000 consumers and derived more than 20 percent of their gross revenue from the sale of personal data. This Act requires Delaware Department of Justice to engage in public outreach to educate consumers and the business community about the Act beginning at least 6 months prior to the effective date of the Act. **HA 1** provides that nonprofit organizations which are dedicated exclusively to preventing and addressing insurance crime are not covered by the Act. This amendment also provides that a consumer has the right to obtain a list of the categories of third parties to which the controller has disclosed the consumer's personal data. **HA 4** makes changes to certain definition and makes changes to the enforcement provisions. **SA 1** makes the following changes to House Bill No. 154: 1) On lines 104 through 106, amends the definition of "Publicly available information"; 2) On line 124, deletes the reference to "national origin"; 3) After line 163, adds to the list of entities that the Bill does not apply to; 4) After line 203, adds to the list of information and data that the Bill does not apply to; and 5) On line 485, deletes the phrase "collect data directly from consumers" and substitutes "collect consumer data."

Status: Signed into Law 9/11/2023

[HB 160](#) (Longhurst)

Introduced: 5/16/2023

An Act to amend Title 16 of the Delaware code relating to **988 Behavioral Health Crisis Intervention Services**. The National Suicide Hotline Designation Act of 2020 established 988 as the universal phone number for "the national suicide prevention and mental health crisis hotline system operating through the National Suicide Prevention Lifeline." This Act provides the framework to maximize the benefits of 988 and provide crucial support to Delawareans in need through the implementation of a practical, modern, and comprehensive, integrated crisis care system. Under this Act, the proposed integrated crisis care system consists of a statewide 24/7 behavioral health crisis communications center capable of telephonic, text, and chat to

receive communications made to 988. This Act requires the Division of Substance Abuse and Mental Health to ensure the availability of mobile crisis teams to respond to individuals in crisis and crisis stabilization programs operated by community-based providers to provide a place for an individual in crisis to go. To implement this framework, this Act establishes the Behavioral Health Crisis Services Board to provide additional oversight and input on the development of the system. This Act establishes the Behavioral Health Crisis Communications Center, a statewide and continuously operated communications hub for taking 988 and other communications related to behavioral health. The Center is under a partnership between the Division of Substance Abuse and Mental Health and the Department of Children, Youth, and Their Families to provide services to Delawareans of all ages. This Act establishes dedicated funding sources for behavioral health crisis services and creates the Behavioral Health Crisis Intervention Services Fund. Specifically, this Act establishes a 60-cent per month per line fee on phone lines and a 60-cent one-time fee on prepaid services. This Act requires a greater than majority vote for passage because § 11 of Article VIII of the Delaware Constitution requires the affirmative vote of three-fifths of the members elected to each house of the General Assembly to impose or levy a tax or license fee.

Status: Substituted in House

[HS 1 for HB 160](#) (Longhurst)

Introduced: 6/6/2023

An Act to amend Title 16 of the Delaware Code relating to **988 Behavioral Health Crisis Intervention Services**. The National Suicide Hotline Designation Act of 2020 established 988 as the universal phone number for "the national suicide prevention and mental health crisis hotline system operating through the National Suicide Prevention Lifeline." This Act provides the framework to maximize the benefits of 988 and provide crucial support to Delawareans in need through the implementation of a practical, modern, and comprehensive, integrated crisis care system. This Act is a substitute for House Bill No. 160. Like House Bill No. 160 this Act does the following: (1) Created the Behavioral Health Crisis Services Board ("Board") to provide oversight and input on the development of an integrated behavioral health crisis care system in this State. (2) Imposes a behavioral health crisis intervention services surcharge on business and residential telephone services, wireless telephone services, and prepaid wireless telephone services. The surcharge will create a dedicated funding source for behavioral health crisis services. The Behavioral Health Crisis Intervention Services Fund is created to receive the surcharge funds. Specifically, this Act establishes a 60-cent per month per line fee on phone lines and a 60-cent one-time fee on prepaid services. This Act differs from House Bill No. 160 as follows: (1) Models the behavioral health crisis intervention services surcharge after the existing E-911 surcharge and prepaid wireless E911 surcharge created under Chapter 101 of Title 16 of the Delaware Code. (2) Removes the creation of the Behavioral Health Crisis Communication Center and instead directs the Board to develop and recommend a plan for establishing, operating, and maintaining a behavioral health crisis communications center. The Board must submit the plan to the Governor and General Assembly within 12 months from the effective date of this Act. (3) Makes changes to the definition of "mobile crisis team". (4) Makes changes to the composition of the Board to add the Executive Director of the Ability Network of Delaware and the Executive Director of each of Delaware's Lifeline Centers. This Act requires a greater than majority vote for passage because § 11 of Article VIII of the Delaware Constitution requires the affirmative vote of three-fifths of the members elected to each house of the General Assembly to impose or levy a tax or license fee.

Status: Substituted in House

[HS 2 for HB 160](#) (Longhurst)

Introduced: 6/16/2023

An Act to amend Title 16 of the Delaware Code relating to **988 Behavioral Health Crisis Intervention Services**. The National Suicide Hotline Designation Act of 2020 established 988 as the universal phone number for "the national suicide prevention and mental health crisis hotline system operating through the National Suicide Prevention Lifeline." This Act provides the framework to maximize the benefits of 988 and provide crucial support to Delawareans in need through the implementation of a practical, modern, and comprehensive, integrated crisis care system. This Act is a second substitute for House Bill No. 160. Like House Bill No. 160 this Act does the following: (1) Created the Behavioral Health Crisis Services Board ("Board") to provide oversight and input on the development of an integrated behavioral health crisis care system in this State. (2) Imposes a behavioral health crisis intervention services surcharge on business and residential telephone services, wireless telephone services, and prepaid wireless telephone services. The surcharge will create a dedicated funding source for behavioral health crisis services. The Behavioral Health Crisis Intervention Services Fund is created to receive the surcharge funds. Specifically, this Act establishes a 60-cent per month per line fee on phone lines and a 60-cent one-time fee on prepaid services. Like House Substitute No. 1 to House Bill No. 160, this Act does all of the following: (1) Models the behavioral health crisis intervention services surcharge after the existing E-911 surcharge and prepaid wireless E911 surcharge created under Chapter 101 of Title 16 of the Delaware Code. (2) Removes the creation of the Behavioral Health Crisis Communication Center and instead directs the Board to develop and recommend a plan for establishing, operating, and maintaining a behavioral health crisis communications center. The Board must submit the plan to the Governor and General Assembly within 12 months from the effective date of this Act. (3) Makes changes to the definition of "mobile crisis team". (4) Makes changes to the composition of the Board to add the Executive Director of the Ability Network of Delaware and the Executive Director of each of Delaware's Lifeline Centers. This Act differs from House Substitute No. 1 to House Bill No. 160 as follows: (1) Exempts State government from the behavioral health crisis intervention services surcharge. (2) Removes a provision that would permit an increase in the behavioral health crisis intervention services surcharge collected for prepaid wireless telecommunication services if the General Assembly increased the behavioral health crisis intervention services surcharge collected for residential and business telephone service, wireless service, and nontraditional communication service. (3) Removes the "crisis intervention service" definition. (4) Removes "Providing crisis intervention services." from the list of eligible expenditures for the Behavioral Health Crisis Intervention Services Fund and replaces it with "Establishing, operating, or contracting for crisis teams for adults and children.". This Act requires a greater than majority vote for passage because § 11 of Article VIII of the Delaware Constitution requires the affirmative vote of three-fifths of the members elected to each house of the General Assembly to impose or levy a tax or license fee.

Status: Signed into Law 8/16/2023

[HB 161](#) (Bush)

Introduced: 5/16/2023

An Act to amend Title 29 of the Delaware Code relating to **Energy Efficiency Investment Fund**. This Act allows the Department of Natural Resources and Environmental Control to assist more small businesses and organizations in making energy efficiency improvements to

their facilities by raising the proportion of those projects that can be funded through grants or loans by the Energy Efficiency Investment Fund. Currently, assistance is capped at 30% of the project cost up to \$250,000, leaving an applicant to come up with the remaining 70% or more. This can be prohibitive for smaller entities. By raising the eligible proportion of the project cost to 60%, without changing the maximum funding, the Department can help more small businesses, local governments, and nonprofits reduce their operating costs and environmental impact.

Status: Signed into Law 7/21/2023

[HB 162](#) (Lynn)

Introduced: 5/16/2023

An Act to amend Titles 9, 12, 16, 24 and 29 of the Delaware Code relating to **Human Remains**. This Act authorizes the process of natural organic reduction to be used in this State. Natural organic reduction is the gentle, respectful process that accelerates the decomposition of human remains to soil. This process uses large vessels to hold human remains together with straw, wood chips, or other natural materials for about 30 days. The human remains and organic materials, mixed together with warm air, are periodically turned and the process eventually results in reduction of the human remains to a soil material that can then be provided to the deceased individual's family. Natural organic reduction is considered a more eco-friendly cremation alternative, forgoing the usage of formaldehyde and the release of carbon dioxide and mercury into the atmosphere. The process also uses 1/8 the energy of cremation. Section 3 of this Act removes "and by the Attorney General or a deputy attorney general" from § 3163 of Title 16, which was overlooked when Chapter 164 of Volume 68 of the Laws of Delaware was enacted, removing similar language in § 3159 of Title 16. Section 12 of this Act replaces the citation to § 3162 of Title 16 with a citation to § 3159. Section 3162 was transferred to § 3159 when Chapter 31 was reenacted by Chapter 274 of Volume 68 of the Laws of Delaware, but this citation was overlooked. This Act takes effect the earlier of 1 year from the date of the Act's enactment or notice in the Register of Regulations that final regulations to implement this Act have been adopted. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Act requires a greater than majority vote for passage because § 28 of Article IV of the Delaware Constitution requires the affirmative vote of two-thirds of the members elected to each house of the General Assembly to expand the scope of an existing crime within the jurisdiction of the Court of Common Pleas, Family Court, or Justice of the Peace Court.

Status: Substituted in House

[HS 1 for HB 162 with HA 3](#) (Lynn)

Introduced: 6/22/2023

An Act to amend Titles 9, 12, 16, 24 and 29 of the Delaware Code relating to **Human Remains**. House Bill 162 authorizes the process of natural organic reduction to be used in this State. Natural organic reduction is the gentle, respectful process that accelerates the decomposition of human remains to soil. This process uses large vessels to hold human remains together with straw, wood chips, or other natural materials for about 30 days. The human remains and organic materials, mixed together with warm air, are periodically turned and the process eventually results in reduction of the human remains to a soil material that can then be provided to the deceased individual's family. Natural organic reduction is considered a more ecofriendly cremation alternative, forgoing the usage of formaldehyde and the release of carbon dioxide and mercury into the atmosphere. The process also uses 1/8 the energy of cremation. Section 3

removes "and by the Attorney General or a deputy attorney general" from § 3163 of Title 16, which was overlooked when Chapter 164 of Volume 68 of the Laws of Delaware was enacted, removing similar language in § 3159 of Title 16. Section 12 of this Act replaces the citation to § 3162 of Title 16 with a citation to § 3159. Section 3162 was transferred to § 3159 when Chapter 31 was reenacted by Chapter 274 of Volume 68 of the Laws of Delaware, but this citation was overlooked. This Act takes effect the earlier of 1 year from the date of the Act's enactment or notice in the Register of Regulations that final regulations to implement this Act have been adopted. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Act requires a greater than majority vote for passage because § 28 of Article IV of the Delaware Constitution requires the affirmative vote of two-thirds of the members elected to each house of the General Assembly to expand the scope of an existing crime within the jurisdiction of the Court of Common Pleas, Family Court, or Justice of the Peace Court. This Substitute No. 1 to HB 162 adds requirements to those already set forth in HB 162 for natural organic reduction facilities and changes the permissible chemical limits for final remains after natural organic reduction. This Substitute also sets forth circumstances that preclude remains from being admitted to a natural organic reduction facility. This Substitute defines "final remains" and "last remains" identically in Title 12 of the Delaware Code to allow for the use of either phrase throughout that Title. This Substitute also makes typographical and technical corrections to conform existing and drafted law to the standards of the Delaware Legislative Drafting Manual. **HA 3** deletes the restriction on remains that were previously embalmed. This Amendment deletes a restriction on remains that the Board of Funeral Services determines are or are reasonably believed to be carrying a viral or other health risk and adds a restriction on remains from an individual who had or is suspected of having a viral or other health risk that the Division of Public Health determines may not be eliminated in the process of natural organic reduction. This Amendment also makes additional technical changes to correct drafting errors.

Status: *Signed into Law 5/16/2024*

[HB 170](#) (Williams)

Introduced: 5/17/2023

An Act to amend Titles 11, 16 & 29 of the Delaware Code relating to **Human Trafficking of Children**. This Act does all of the following regarding suspected human trafficking of children: 1. Ensures the sharing of information between the Child Protection Accountability Commission (CPAC) and the Delaware Anti-Trafficking Action Council. 2. Expressly requires a multidisciplinary response to these cases, similar to child deaths and serious physical injury. 3. Even though human trafficking of children is child abuse, specifically delineates it throughout the child abuse multidisciplinary investigative response. 4. Codifies a review panel and oversight committee within CPAC for these cases, with the same authority, subpoena power, and immunities provided to the system that reviews child abuse deaths and near deaths. 5. Establishes that the Office of the Child Advocate will staff the review panel and oversight committee. This Act also makes minor technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: *Assigned to Appropriations Committee in House*

[HB 171](#) (Heffernan)

Introduced: 5/18/2023

An Act to amend Title 7 of the Delaware Code relating to the Clean Air Act Title V Operating Permit Program. This Act extends the **Clean Air Act Title V Operating Permit Program**

annual fees for facilities in Delaware, which have historically expired and been reauthorized by the General Assembly every three years. Existing statutory authorization to collect fees sunsets on December 31, 2023. This legislation updates the fee assessments based on the work of the Title V Operating Permit Program Advisory Committee and makes additional clarifying updates. For 2024-2026, the total fee will be comprised of a base fee, user fee, and program fee. Base fees are based on the number of staff hours spent on the source’s permitting, compliance, and enforcement activities, while the user fee is based on the source’s air emissions. The program fee will be assessed based on the total base and user fees. This Act authorizes the Department of Natural Resources and Environmental Control to collect Title V annual fees for calendar years 2024 through 2026, at which point the authority sunsets and would need to be reauthorized.
Status: Signed into Law 7/21/2023

[HB 175](#) (Neal)

Introduced: 5/18/2023

An act to amend Titles 9, 21 and 22 of the Delaware Code relating to **Accessible Parking Spaces**. This Act adds provisions to Title 21 defining accessible parking spaces, incorporating federal standards for accessible parking spaces found in the Americans with Disabilities Act and applicable regulations. The Act also provides additional requirements that enhance these standards and better reflect the needs of persons with disabilities in Delaware. The Act increases the penalty associated with violating the statute that prohibits individuals who do not possess a parking placard or special license plate from parking in accessible parking spaces, or in the access aisles located next to accessible parking spaces. This Act adds provisions in Titles 9 and 22 to require county and municipal governments to adopt regulations and ordinances incorporating these requirements for accessible parking spaces, including the requirement that property owners have a permit and process to ensure compliance for new or modified accessible parking spaces, in order to increase compliance and uniformity statewide.

Status: Out of Committee in House

[HB 176](#) (Osienski)

Introduced: 6/1/2023

An act to amend Title 19 of the Delaware Code relating to **Unemployment Compensation Deadlines**. This bill would extend various deadlines in the Unemployment Code. The intent is to provide claimants and employers additional time to receive and prepare a response or appeal of benefit determinations and other important documents that require a response, in an effort to reduce the incidents of late filed appeals and missed deadlines. This would benefit claimants and employers by providing more time, while also reducing the administrative burden to the Division of Unemployment Insurance of responding to late appeals and late filed documents. This bill also makes conforming changes to additional sections of the Unemployment Code that provide for delivery by mail or other delivery methods to provide flexibility to the Division and Board if they decide to send notices and other documents by email or other delivery methods to reduce mailing expenses and increase efficiency. Finally, this bill confirms Superior Court precedent that Code references to “days” mean “calendar days” unless otherwise specified.

Status: Signed into Law 8/9/2023

[HB 177 with HA 1](#) (Heffernan)

Introduced: 5/18/2023

An Act to amend Title 29 of the Delaware Code relating to **Compassionate Leave**. This bill increases the amount of Compassionate Leave for eligible employees of the State upon the death of an immediate family member. **HA 1** removes Section 2 of House Bill No. 177.

Status: Signed into Law 6/30/2023

[HB 182](#) (Griffith)

Introduced: 6/1/2023

An act to amend Titles 11, 13, 16 and 31 of the Delaware Code relating to **Child Abuse**. Sections 1 through 6 of this Act revise the State's existing child abuse laws as follows: (1) Revises Child Abuse in the Third Degree by removing extraneous language and redesignating it as Child Abuse in the Fourth Degree. (2) Revises Child Abuse in the Second Degree by redesignating it as Child Abuse in the Third Degree and making it a class D felony. (3) Revises Child Abuse in the First Degree by removing extraneous language, adding a sentence enhancement for certain aggravating factors, and redesignating it as Child Abuse in the Second Degree. (4) Creates a new crime of Child Abuse in the First Degree, a class A felony, when a person intentionally or recklessly causes serious physical injury to a child and that injury causes permanent disfigurement, permanent impairment of health, or permanent loss or impairment of a bodily organ. (5) Creates a new crime of Child Torture, a class B felony. (6) Creates a new crime of Continuous Child Abuse when a person intentionally or recklessly engages in 3 or more acts of child abuse or child torture over a period of time not less than 3 weeks in duration. Sections 7 through 9 and 11 through 14 of this Act make conforming amendments to the Delaware Code based on the revisions made by Sections 1 through 6 of this Act. Section 10 of this Act designates Child Abuse in the First Degree and Child Abuse in the Second Degree as violent felonies.

Status: Signed into Law 7/31/2023

[HB 183 with HA 1](#) (Griffith)

Introduced: 6/1/2023

An act to amend Title 11 of the Delaware Code relating to **Endangering the Welfare of a Child**. This Act revises the existing crime of endangering the welfare of a child by providing or permitting a child to consume or inhale unprescribed controlled substances in the following ways: 1. Prohibits a person from intentionally, knowingly, or recklessly making controlled substances or prescription drugs available to a child through exposure, consumption, or inhalation. 2. Creates new penalties for endangering the welfare of a child through exposure, consumption, or inhalation of drugs. This Act requires a greater than majority vote for passage because § 28 of Article IV of the Delaware Constitution requires the affirmative vote of two-thirds of the members elected to each house of the General Assembly to expand the scope of an existing crime within the jurisdiction of the Court of Common Pleas, Family Court, or Justice of the Peace Court. **HA 1** clarifies that there is to be a connection between the child's exposure to, consumption of, or inhalation of a controlled substance that is not prescribed to the child by a physician or of a prescription drug that is not a controlled substance but for which a prescription is required and the child's death, serious physical injury, physical injury, or period of altered mental or physical state.

Status: Signed into Law 7/31/2023

[HB 184 with HA 1](#) (Romer)

Introduced: 6/1/2023

An act to amend Title 19 of the Delaware Code relating to **Discrimination in Employment**. Delaware law expressly prohibits employment discrimination based upon surviving domestic violence, sexual assault, or stalking. Such discrimination includes: (1) failing or refusing to hire or discharging an employee because the individual was a victim of domestic violence, sexual offense, or stalking; or (2) failing or refusing to make reasonable accommodations to the

limitations known to the employer and related to domestic violence, a sexual offense, or stalking. Current statute requires the victim of domestic violence, sexual assault, or stalking to provide verification to their employer. This bill provides employers with the option to require verification in order to receive accommodations. **HA 1** clarifies that the employer has the option to request verification from the employee in order for the employee to receive accommodations.

Status: Signed into Law 7/25/2023

[HB 185](#) (Heffernan)

Introduced: 5/18/2023

An Act to amend Title 29 of the Delaware Code relating to **Health Care Insurance & Elimination of the State Share Waiting Period**. This legislation prioritizes recruitment and retention of State employees by removing the 3-month waiting period for the state to pay its share of premium or subscription charges for health care coverage under § 5202 of Title 29 for benefit eligible state employees hired on or after January 1, 2024 by revising the definition of a “regular office or employee.” **SA 1**, which revises the definition of “regular officer or employee” to require a 1-month waiting period for the State to pay its share of premium or subscription charges for health care coverage under § 5202 of Title 29 of the Delaware Code for benefit eligible State employees, was **defeated in Senate**.

Status: Signed into Law 9/21/2023

[HB 186 with HA 1](#) (Romer)

Introduced: 6/2/2023

An Act to amend Title 11 of the Delaware Code relating to **Individuals Required to Register as Sex Offenders for Acts Committed when they were Children**. This Act makes changes to the requirements for placement on the sex offender registry of individuals who are adjudicated delinquent of certain offenses. First, it reduces the number of offenses for which placement on the sex offender registry is mandatory and the Family Court has no discretion to relieve a person adjudicated delinquent from the requirement or to reduce the tier assigned. Mandatory registration is still required for all degrees of rape (first through fourth) and conspiracy or attempt to commit any degree of rape. This Act will also allow an individual placed on the registry to petition the Family Court to be relieved from the registration or placed on a lower tier, either at the conclusion of any required treatment or after the passage of 2 years for most offenses, or after the passage of 5 years for those offenses that still require mandatory registration. The ability to petition for a registry review hearing after the mandated review period will apply to anyone placed on the registry because of a juvenile delinquency adjudication, regardless of the date of that adjudication. **HA 1** ensures that violations of 11 Del. C. § 776 and § 778 are offenses for which placement on the sex offender registry is mandatory.

Status: Signed into Law 10/18/2023

[HB 193](#) (Heffernan)

Introduced: 6/7/2023

An Act to amend Title 16 of the Delaware Code relating to **Concussion Protection in Youth Athletic Activities**. In 2016, the General Assembly passed HB 404, the Concussion Protection in Youth Athletic Activities Act (CPYAAA). This Act clarifies the requirements of CPYAAA and enables the Division of Public Health, in consultation with the State Council for Persons with Disabilities, to promulgate regulations to broadly implement the Act. This Amendment adds the requirement for non-scholastic athletic activity organizations to develop policies and procedures for advising athletes, coaches, officials, parents, and guardians of the signs and symptoms of concussion and explaining the risk of continuing to practice or compete in athletic

events or activities after sustaining a concussion, as well as providing information about returning to academic and athletic events or activities after sustaining a concussion.

Status: Substituted in House

[HS 1 for HB 193](#) (Heffernan)

Introduced: 6/14/2023

An Act to amend Titles 14 and 16 of the Delaware Code relating to **Concussion Protection in Youth Athletic Activities**. In 2016, the General Assembly passed HB 404, the Concussion Protection in Youth Athletic Activities Act (CPYAAA). This Act clarifies the requirements of CPYAAA and enables the Division of Public Health, in consultation with the State Council for Persons with Disabilities, to promulgate regulations to broadly implement the Act. This Amendment adds the requirement for non-scholastic athletic activity organizations to develop policies and procedures for advising athletes, coaches, officials, parents, and guardians of the signs and symptoms of concussion and explaining the risk of continuing to practice or compete in athletic events or activities after sustaining a concussion, as well as providing information about returning to academic and athletic events or activities after sustaining a concussion.

Status: Signed into Law 9/21/2023

[HB 195](#) (Carson)

Introduced: 6/20/2023

AN ACT MAKING APPROPRIATIONS FOR THE EXPENSE OF THE STATE GOVERNMENT FOR THE FISCAL YEAR ENDING JUNE 30, 2024; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AND AMENDING CERTAIN PERTINENT STATUTORY PROVISIONS. This Bill is the Fiscal Year 2024 Appropriations Act.

Status: Signed into Law 6/30/2023

[HB 196](#) (Carson)

Introduced: 6/20/2023

AN ACT MAKING A ONE-TIME SUPPLEMENTAL APPROPRIATION FOR THE FISCAL YEAR ENDING JUNE 30, 2024 TO THE OFFICE OF MANAGEMENT AND BUDGET. This Act appropriates \$194,560,278 to provide one-time funded projects through the Office of Management and Budget.

Status: Signed into Law 6/30/2023

[HB 197](#) (Carson)

Introduced: 6/29/2023

AN ACT MAKING APPROPRIATIONS FOR CERTAIN GRANTS-IN-AID FOR THE FISCAL YEAR ENDING JUNE 30, 2024; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AMENDING THE FISCAL YEAR 2024 APPROPRIATIONS ACT; AMENDING THE FISCAL YEAR 2024 ONE-TIME SUPPLEMENTAL APPROPRIATIONS ACT; AND AMENDING CERTAIN STATUTORY PROVISIONS. This Act provides supplementary appropriations to certain Grants-in-Aid recipients for Fiscal Year 2024. Section 1 – Government Units and Senior Centers \$ 29,361,705 Section 2 – One-Times and Community Agencies \$ 31,912,877 Section 3 – Fire Companies and Public Service Ambulance Companies \$ 10,109,451 Section 4 – Veterans Organizations \$ 608,591 GRAND TOTAL \$ 71,992,624

Status: Signed into Law 6/30/2023

[HB 199](#) (K. Johnson)

Introduced: 6/1/2023

An act to amend Titles 16 and 29 of the Delaware Code relating to **Temporary Nurse Staffing Agencies Serving Long-Term Care Facilities**. This bill grants authority to the Department of Health and Social Services (DHSS) to adopt regulations related to the operation of temporary nurse staffing agencies that staff temporary nurses in long-term care facilities in the State and assigns oversight within DHSS to the Division of Health Care Quality. The bill requires temporary nurse staffing agencies to (1) register annually with the Division of Health Care Quality; (2) validate the qualifications of all provided nurses provided; (3) maintain records of all provided nurses' credentials, job requirements, and required immunizations; and (4) provide all such records upon request to DHSS and to the long-term care facility where the employee is placed. The bill also requires temporary nurse staffing agencies to report annually to DHSS regarding various factors, including its employee placements, costs charged to long-term care facilities, and wages paid to temporary nurses.

Status: Stricken in House

[HB 200 with HA 1](#) (Longhurst)

Introduced 4/25/2023

An Act to amend Title 14 of the Delaware Code relating to **School-Based Mental Health Services**. This Act establishes a mental health services unit for Delaware high schools. The unit is phased in over 3 years, beginning in FY2024, to arrive at a final ratio of 250 full-time equivalent students grades 9-12 for a full-time school counselor, school social worker, or licensed clinical social worker. Additionally, a unit ratio of 700 full time equivalent students for grades 9-12 for employment of a full-time school psychologist. This Act defines "mental health services" as prevention, response, and coordination services delivered to students in high schools. Mental Health disorders are the most common health problem for school aged youth. According to the National Institute of Mental Health (NIMH), one in five youth are affected by a mental health disorder. Additionally, 50% of lifetime mental illnesses begin by age 14. Untreated mental illness leads to negative outcomes including increased risk of dropout, homelessness, substance abuse, other chronic illnesses, incarceration, and possibly suicide. According to the National Alliance on Mental Health, ninety percent of people who have taken their own life have had an underlying mental health condition, and suicides are on the rise. According to the Center for Disease Control and Prevention, suicides are now the second leading cause of death for youth ages 10-14. Delaware schools need trained and experienced mental health professionals to provide prevention and support programs and services to students. This bill will lower ratios of students to counselors and increase access to mental health services for high school students. Districts and charters should prioritize the hiring of school counselors who provide mental health services over those who provide career counseling. Conforming changes are also made to code sections dealing with mental health units for elementary and middle school students. This Act also creates a reimbursement program to encourage current school employees to gain certifications or professional licensure in critical need mental health areas. **HA 1** provides clarification regarding services offered by school counselors and requires applicants for the mental health critical need reimbursement program to commit to working in Delaware schools for at least 3 years following receipt of license or certification.

Status: Signed into Law 8/7/2024

[HB 201 with HA 3, SA 3](#) (Schwartzkopf)

Introduced: 6/2/2023

An Act to amend Title 11 of the Delaware Code relating to **Possession of a Firearm in a Safe School and Recreational Zone**. As of April 4, 2023, 74 people have been killed or injured by

guns in schools this year in 13 separate school shootings. School shootings hit a record high in 2022 with 46 shootings, surpassing 2021's record of 42 shootings. In 2022, 43,450 children experienced a school shooting. The purpose of this bill is to enable a police officer to act immediately when the officer sees or suspects that a person possesses a firearm in a Safe School and Recreation Zone. This Act establishes the crime of Possession of a firearm in a Safe School and Recreation Zone as a class E felony. This bill makes it a crime for a person to possess a firearm in a Safe School and Recreation Zone except a police officer or a constable or active-duty member of the armed forces who are acting in an official capacity within for the Safe School and Recreation Zone. The bill also exempts holders of a valid license to carry concealed weapons but only if the firearm is in a vehicle. The possession of a firearm under this bill does not apply if (1) the person is on private property which is not part of school grounds; (2) the firearm is in a locked container or locked firearms rack that is on or in a motor vehicle; or (3) when engaged in lawful hunting, firearms instruction, or firearm-related sports on public lands not belonging to a school. This bill provides that in addition to other penalties, a student who possesses a firearm in a Safe School and Recreation Zone, shall be expelled for a period of not less than 90 days, but the local school board or charter school board of directors may, on a case-by-case basis, modify the terms of the expulsion. This Act repeals the crime of Possession of a Weapon in a Safe School and Recreation Zone but provides a Savings Clause which enables a prosecution for such crime if the offense occurred before the repeal is enacted. **HA 3** provides that probation and parole officers and certain employees of the Department of Services for Children, Youth and Their Families may carry a firearm within a Safe School and Recreation Zone while acting within their official capacity. This amendment also clarifies the definition of "Safe School and Recreation Zone and firearm to include BB guns. Finally, this amendment provides that a student who possesses a firearm in a Safe School and Recreation Zone shall be expelled for a period of not less than 180 days, but the local school board or charter school board of directors, may on a case-by-case basis, modify the terms of the expulsion to less than 180 days. **SA 3** revises § 1457 of Title 11 to create the offense of possession of a firearm in a Safe Recreation Zone. This Amendment does not change the violation of possession of a firearm in a Safe School Zone as established under this Act.

Status: Signed into Law 8/18/2023

[HB 204 with HA 1, SA 1](#) (K. Johnson) Introduced: 6/6/2023

An Act to amend Titles 16 and 29 of the Delaware Code relating to **Temporary Staffing Agencies Serving Long-Term Care Facilities**. This bill grants authority to the Department of Health and Social Services (DHSS) to adopt regulations related to the operation of temporary staffing agencies that staff temporary nurses and other staff positions in long-term care facilities in the State and assigns oversight within DHSS to the Division of Health Care Quality. The bill requires temporary staffing agencies to (1) register annually with the Division of Health Care Quality; (2) validate the qualifications of all provided staff provided; (3) maintain records of all provided staff's credentials, job requirements, and required immunizations; and (4) provide all such records upon request to DHSS and to the long-term care facility where the employee is placed. The bill also requires temporary staffing agencies to report annually to DHSS regarding various factors, including its employee placements, costs charged to long-term care facilities, and wages paid to temporary staff. This bill is intended to replace HB199. **HA 1** removes the requirement that staffing agency regulations establish maximum rates for temporary staffing

agencies. **SA 1** removes two of the annual reporting requirements for temporary staffing agencies serving long-term care facilities.

Status: Signed into Law 9/19/2024

[HB 220](#) (Wilson-Anton)

Introduced: 6/1/2023

An Act proposing an **Amendment to Article I of the Delaware Constitution relating to Protecting Delaware's Natural Resources**. This is the first leg of an amendment to the Delaware Constitution to conserve, protect and maintain Delaware's natural resources, including its water, air, soil, flora, fauna, ecosystems and climate. This Amendment would create an inherent and inalienable right for all Delawareans to a clean and healthy environment. The Amendment would also declare the State, including all of its branches, agencies, and political subdivisions, as trustee of the State's natural resources. By enacting this amendment Delaware would join other States which have or are seeking similar provisions, in their respective Constitutions, creating the same inherent and inalienable rights for their citizens.

Status: Out of Committee in House

[HB 223 with HA 2, HA 3](#) (Minor-Brown) Introduced: 6/9/2023

An Act to amend Title 24 of the Delaware Code relating to **Continuing Education for Nursing Professionals**. This Act amends the continuing education requirements for nursing professionals, mandating that all nursing professionals receive at least one hour of continuing education in each reporting period on the recognition of sexual or physical abuse, exploitation, or domestic violence of vulnerable populations, or on the reporting obligations under the rules and regulations of the Board of Nursing. The Act removes the requirement for nursing professionals who work in adult gerontology to complete continuing education on the topic of diagnosis, treatment, and care of patients with Alzheimer's disease or other dementias. **HA 2** makes minor changes to the description of the new continuing education requirement and directs licensees to the Child Protection Accountability Commission as a resource for continuing education programming relating to child abuse, exploitation and trafficking. **HA 3** provides an effective date of January 1, 2025.

Status: Signed into Law 10/23/2024

[HB 227 with HA 2](#) (Lambert)

Introduced: 6/14/2023

An Act to amend Titles 16 and 24 of the Delaware Code relating to **Lead Poisoning Prevention**. This Act makes various amendments to the Childhood Lead Poisoning Prevention Act to improve compliance with its testing and reporting requirements. First, this Act requires physicians to take a training program every 2 years relating to the provisions of the Childhood Lead Poisoning Prevention Act. Second, it requires the Division of Public Health to develop electronic forms to be used at a child's 12 and 24 month well visit that record lead screening results and are shared with the Division. Third, it clarifies that laboratories and health care professionals involved in blood lead level analysis must report results to the Division of Public Health. Finally, it requires the Division of Public Health to share data with school nurses relating to whether an enrolled student has been screened for lead poisoning. To better identify those communities in which lead screening numbers are low and to increase community awareness and engagement, **HA 2** clarifies that primary health-care providers must report results to the Division of Public Health for every instance of screening, in addition to the 12 and 24 months scheduled screenings. Along with the results, the forms must contain the provider's information and the

date of screening. It further requires all school districts and charter schools to report the number of students enrolled in kindergarten who have not provided proof of screening, or a certificate signed by a parent stating that screening is contrary to the parent's religious beliefs. Finally, this Amendment removes Sections 3 and 4 from the bill that requires health-care providers to complete a training program every 2 years on their obligations under Chapter 26, the Childhood Lead Poisoning Prevention Act. This Amendment also clarifies that a record of proof of screening shall be kept in each student's school health record.

Status: Signed into Law 8/31/2023

[HB 228](#) (Bush)

Introduced: 6/15/2023

An Act to amend Title 18 of the Delaware Code relating to **Insurance Rate Filings**. Section 1 of the bill amends Delaware's file-and-use statute for insurance rate filings to extend the timeline for filing and reviewing insurers' rate filing by (1) requiring rate filings to be filed at least 60 days in advance of the proposed effective date, and (2) authorizing the Commissioner to extend the timeframe to review the filing and postpone the effective date of the filing pending completion of the extended review. Section 2 of the bill sets forth the process for when the Commissioner proposes to deny a rate filing and requires that a filing may not become effective until a final order is issued. Section 2 of the bill also corrects technical errors in the current law.

Status: Signed into Law 8/31/2023

[HB 230](#) (Neal)

Introduced: 6/15/2023

An Act to amend Titles 10, 13, 24 and 31 of the Delaware Code relating to **Gender-Affirming Health Care**. This Act updates House Bill 455 from the 151st General Assembly by providing the same legal protections afforded providers of contraceptive and abortion services to providers of gender-affirming health care. In summary, this Act does the following: (1) Clarifies that medical professionals who provide gender-affirming health care cannot be disciplined for such services even if such services are illegal or considered to be unprofessional conduct or the unauthorized practice of medicine in another state, so long as such services are lawful in this State; (2) Prohibits health care providers from disclosing communications and records concerning gender-affirming health care without the patient's authorization, with some exceptions; (3) Protects health care providers from out-of-state civil actions relating to gender-affirming health care treatment that is legal in Delaware, including the issuance of a summons or the enforcement of subpoenas relating to such cases; (4) Creates a cause of action for recouperation of out-of-state judgments relating to gender-affirming services that are lawful in Delaware; and (5) Prohibits insurance companies from taking any adverse action against health care professionals who provide gender-affirming health care services. This Act further gives jurisdiction to the Family Courts to determine custody disputes when a child is in the State to receive gender-affirming health care, and the provision of gender-affirming health care is at issue in the custody dispute. It also prohibits the state from enforcing an out-of-state court order that removes a child from a parent because the parent allows the child to receive gender-affirming health care.

Status: Stricken in House

[HB 233](#) (Ramone)

Introduced: 6/16/2023

An Act to amend Title 30 of the Delaware Code relating to **Personal Income Tax**. This Act raises the minimum income to be subject to income tax from \$2,000 to \$2,500. Also, the current

6 income tax brackets are collapsed into 3 brackets, each with a slightly reduced tax rate for most taxpayers.

Status: Introduced and Assigned to Revenue & Finance Committee in House

[HB 236](#) (Osienki)

Introduced: 6/16/2023

An Act to amend Title 19 of the Delaware Code relating to **Employer Assessments**. This Act will continue for calendar year 2024 the temporary relief provided in calendar year 2023 to employers who pay unemployment tax assessments. It will continue to reduce new employer tax rates, hold constant overall employer tax rates from last calendar year, and reduce the maximum earned rate. This Act will also continue the temporary simplification of the tax rate schedules that are used to calculate unemployment assessments paid by employers. The Governor's agreement to use federal pandemic funds to restore the pandemic-depleted Unemployment Trust Fund made the Unemployment Trust Fund sufficiently solvent and is allowing the Department to implement unemployment tax relief measures to Delaware employers for an additional one-year period for calendar year 2024. The Department estimates that these unemployment tax assessment changes will reduce the tax obligation of employers an estimated \$50 million compared to the tax rates absent the temporary relief. This Act also restructures the supplemental assessment that is currently collected from all employers, keeping it at the same rate of 0.2%, but depositing it in the Special Administration Fund instead of the UI Trust Fund. This Act expands the uses for the Special Administration Fund to include future technology needs of the Department and makes technical corrections to the administration provisions of the Special Administration Fund to align with current State Treasurer practices.

Status: Signed into Law 7/25/2023

[HB 240](#) (Lynn)

Introduced: 6/16/2023

An Act to amend Title 16 of the Delaware Code relating to **Child Abuse and Neglect Investigations**. This Act requires that parents and other persons under investigation for child abuse and neglect be given written and oral notice of the allegations made against them; the right to consult counsel prior to speaking with a DSCYF investigator; the right to refuse entry to the DSCYF investigator; the right to withhold consent to medical examinations of the children except as provided in Title 16, Section 906(e)(3); the right to refuse to submit to a drug test; and the right to consult legal counsel prior to signing a safety plan.

Status: Introduced and Assigned to Judiciary Committee in House

[HB 242](#) (Dukes)

Introduced: 6/20/2023

An Act to amend Title 16 of the Delaware Code relating to **Hospital Visitation Policy**. This act shall be known as "The No Patient Left Alone Act." It is intended to mitigate unintended negative impacts on patients and their families during a State of Emergency, pandemic, or infectious disease outbreak. This act would require hospitals to allow limited in-person visitation with patients, within designated parameters and limitations in the act. Hospitals would be able to: restrict the number of visitors a patient could receive daily; require visitors to undergo and pass a specified health screening; and use personal protective equipment while visiting. Hospitals must make personal protective equipment required available for visitors for purchase. Entry could be denied to visitors not complying with the requirements, that failed their health screenings, or who were found to have a communicable disease. Attending physicians would retain the authority to deny in-person visitation if they deemed their patients would be at risk for contracting an

infectious disease or if they believed visitation posed a serious community health risk. Such determinations would be valid for up to seven days and subject to renewal. Hospitals could deny visitation if a federal order, law, or regulation required it. If a prospective hospital visitor were denied in-person visitation with a patient, the hospital would be required, to its best efforts, to develop alternate visitation protocols that would allow visitation to the greatest extent safely possible. This could include, but not be limited to, streaming audio and video. Hospitals could not prohibit in-person visitation by a religious counselor to a seriously ill or dying patient, providing that the counselor complied with all visitation mandates established pursuant to this act. A visit by a religious counselor would not be counted against any daily visitation limit set by the hospital. The Department of Health and Social Services would be responsible for overseeing the implementation, operation, and enforcement of this act. Hospitals could be subject to fines for violating the terms of this act, providing the violations continue after the hospitals have been informed of the need to take corrective action. This section does not create a civil cause of action against a hospital or physician. This measure would become effective 180 days after its enactment. **HA 1**, which provides that a hospital could not prohibit in-person visitation by a doula providing doula services with a pregnant or postpartum person, was **Placed with the Bill**.
Status: Substituted in House

[HS 1 for HB 242](#) (Dukes)

Introduced: 6/30/2023

An Act to amend Title 16 of the Delaware Code relating to **Hospital Visitation Policy**. This legislation is an attempt to strike a balance between the need to protect hospital staff, hospital patients, and the public from harm during a State of Emergency, pandemic, or infectious disease outbreak with the expectation that patients should be able to receive support from their family and spiritual counselors during a time of personal crisis. This act shall be known as "The No Patient Left Alone Act." Specifically, it migrates decision-making authority on visitation policies from elected and unelected state officials to the medical personnel operating Delaware's hospitals – the trained professionals best positioned to make these difficult decisions during an especially challenging time. While it is the intention of this act to facilitate limited in-person patient visitation, it gives hospitals and designated medical professionals' broad authority and discretion to safeguard the welfare of all involved parties. Hospitals would be able to: restrict the number of visitors patients could receive daily; require visitors to undergo and pass a specified health screening; and use personal protective equipment while visiting. Hospitals would be able to specify the required personal protective equipment, making it available for visitors to purchase on-site, subject to availability. Entry could be denied to visitors that failed their health screenings; were found to have a communicable disease; were found to have been exposed to a communicable disease; or failed to sign a statement indicating that they understood the visitation policy, and held the hospital and its staff harmless for all assumed risk directly associated with the primary cause of the State of Emergency, pandemic, or infectious disease outbreak. Attending physicians and other medical professionals designated in the bill would retain the authority to deny in-person visitation if they deemed their patients would be at risk for contracting an infectious disease or if they believed visitation posed a serious community health risk. Such determinations would be valid for up to seven days and subject to renewal. Hospitals could deny visitation if a state agency regulation, federal order, federal law, or federal regulation required it. If a prospective hospital visitor were denied in-person visitation with patients, the hospital would be required, to its best efforts, to develop alternate visitation protocols that would allow visitation to the greatest extent safely possible. This could include, but not be limited to,

streaming audio and video. Hospitals could not prohibit in-person visitation by a religious counselor to a seriously ill or dying patient, providing that the counselor complied with all visitation mandates established pursuant to this act. A visit by a religious counselor would not be counted against any daily visitation limit set by the hospital. The Department of Health and Social Services would be responsible for overseeing the implementation, operation, and enforcement of this act. Hospitals could be subject to fines for violating the terms of this act, providing the violations continue after the hospitals have been informed of the need to take corrective action. This measure would become effective 180 days after its enactment. This substitute bill differs from the bill it replaces in the following ways: • It eliminates the liability provisions previously contained on lines 56 through 62, and line 103, replacing it with a new liability section - 1014A (c)(3)(E) - that is more refined and requires a signed acknowledgment by the visitor of the risk they are assuming. This acknowledgement does not allow the hospital or personnel to be held harmless for intentional misconduct or gross negligence. • It adds the terms “advanced practice clinician, or chief medical officer” to the sections previously on lines 63 through 67 dealing with the healthcare professionals authorized to restrict visitation for justifiable medical or public health reasons. • Adds the term “state agency regulation” to the section previously on lines 48 through 50 that specify the reasons a hospital may be compelled to deny visitation. • Rewrites the section previously on lines 41 through 47 to improve the clarity of the list of conditions under which a hospital can deny entry to, or remove a visitor from, the hospital's premises. • Corrects language previously on lines 39 through 40 to reflect an earlier change to the bill that deals with the requirement for visitors to wear personal protective equipment, as stipulated by the hospital, when visiting a hospital patient. • Adds a new section - 1014A (i) - stipulating that other than the potential restrictions stipulated in Subsection (c) and Subsection (e) a hospital may not prohibit in-person visitation by a doula providing doula services as defined in § 6536A of Title 11 with a pregnant or postpartum person.

Status: Assigned to Health & Social Services Committee in Senate

[HB 243 with HA 1](#) (Minor-Brown) Introduced: 6/21/2023

An Act to amend Titles 16, 24 and 29 of the Delaware Code relating to the **Department of Health & Social Services**. This Act expands the qualifications for the Director of the Division of Public Health to include non-physician professionals. It also allows for the Director to appoint a physician or advanced practice registered nurse in certain instances where that level of medical expertise is required to fulfill duties assigned to the Director. **HA 1** provides that the Act will sunset 5 years from its enactment.

Status: Signed into Law 7/17/2023

[HB 248](#) (Johnson) Introduced: 6/23/2023

An Act to amend Title 7 of the Delaware Code relating to **Pre-Permit Community Outreach in Underserved Communities**. This Act establishes a pre-permit community outreach process for any qualified project, as defined in DNREC Regulations, that wishes to apply for a permit within 3 months, in an underserved community. Underserved community is defined in (5) specified demographic areas as well as any community so identified in a mapping tool on DNREC's website. It is anticipated that DNREC will have an environmental justice area viewer, or similar tool, as a link on its website. Under this Act the applicant must (1) identify a facility community liaison; (2) must schedule a community meeting in or within 3 miles of the boundaries of the underserved community; (3) must provide a written overview of information to be provided in the

permit application, the operation the applicant seeks to have permitted, including any renewal, new or change to any amounts or contents of emissions, and the community liaison's contact information to all residences within the underserved community, (4) must publish the community meeting notice on-line and in at least 1 newspaper and, if available, 1 in the predominate non-English language if the underserved community is identified as limited English proficiency, at least 30 days prior to the scheduled community meeting. The community meeting must allow for interaction and questions and answers. The community meeting must be recorded or transcribed and made publicly available. Any written materials and oral and visual presentations must be accurate, free of technical language, and comprehensible to readers at a sixth-grade level. The applicant must also provide an Underserved Community Outreach Report to DNREC as part of the permit application and review process by DNREC. The Report must include: (1) The community demographics that qualify it as an underserved community;(2) Community liaison's contact information; (3) Benefits of the qualified project to the community;(4) Proposed activities and their impact on air, water, soil, and health;(5)That releases of emissions over permit levels will be reported in accord with DNREC regulations; (6) Description of operations conditions or control measures that serve to reduce or mitigate pollution associated with the permit application; (7) Compliance history of facility over last 5 years and verification that any fines, penalties and remedial obligations have been fulfilled; and (8) all applicable state and federal permits held by the facility. All material provided by mail or at the community meeting and all notices must also be provided to DNREC. If the Secretary of DNREC determines any false information was provided by the applicant, it will be considered a falsification of the permit application. All cost incurred in complying with these new pre-permit community outreach requirements are to be paid by the applicant. This Act will be effective within 30 days of publication of notice by the Register of Regulations that DNREC has advised it that it has promulgated regulations to administer this Act.

Status: Substituted in House

[HS 1 for HB 248](#) (Johnson)

Introduced: 6/6/2024

An Act to amend Title 7 of the Delaware Code relating to **Pre-Permit Community Outreach in Underserved Communities**. This House Substitute bill clarifies it is only for new or substantially modified permits and specifies it is only for the following permits: (1) Clean Air permit; (2) Coastal Zone Act permit; (3) Solid waste permit; (4) National Pollutant Discharge Elimination System permit and (5) Hazardous waste permit. As in the original bill the applicant is still required to go through a community outreach process for any qualified project, defined as a project within an underserved community or within 3 miles of an underserved community that meets the definition of a "qualified project" under DNREC's Regulations. Underserved community is defined as (1) A specified geographic area where the percentage at poverty level is greater than twice the State Average Median Household Income as determined by the most recent United States Census or (2) Any specified community in the most current community mapping tool on the Department's website. It is anticipated that DNREC will have an environmental justice area viewer, or similar tool, as a link on its website. However, under this House Substitute bill the applicant must submit, with their permit application, a Community Outreach Plan. At a minimum the Community Outreach Plan must: (1) identify a facility community liaison; (2) schedule a community meeting in or within 3 miles of the boundaries of the underserved community; (3) provide a written overview of information to be provided in the permit application; (4) publish the community meeting notice on-line and in at least 1 newspaper

and, if available, 1 in the predominate non-English language if the underserved community is identified as limited English proficiency, at least 30 days prior to the scheduled community meeting. The community meeting must allow for interaction and questions and answers. The community meeting must be recorded or transcribed and made publicly available. Any written materials and oral and visual presentations must be accurate, free of technical language, and written in plain English consistent with federal guidelines. The applicant must also provide an Underserved Community Outreach Report to DNREC as part of the permit application and review process by DNREC. The Report must include: (1) The community demographics that qualify it as an underserved community; (2) Community liaison's contact information; (3) Benefits of the qualified project to the community; (4) Proposed activities and their impact on air, water, soil, and health; (5) That releases of emissions over permit levels will be reported in accord with DNREC regulations; (6) Description of operations conditions or control measures that serve to reduce or mitigate pollution associated with the permit application; (7) Compliance history of facility over last 5 years and verification that any fines, penalties and remedial obligations have been fulfilled; and (8) all applicable state and federal permits held by the facility. All material provided by mail or at the community meeting and all notices must also be provided to DNREC. Trade secrets, as defined in Title 6 of the Delaware Code, do not have to be disclosed in any community outreach materials or presentations. Under this House Substitute Bill DNREC must approve, reject, or require modifications to the Community Outreach Plan within 30 days of its submittal. If the proposed Community Outreach Plan complies with the requirements of this Act it must be approved by DNREC subject to any agreed modifications. Once approved by DNREC the applicant must complete the Community Outreach Plan within 3 months. If the Secretary of DNREC determines any false information was provided by the applicant, it will be considered a falsification of the permit application. All cost incurred in complying with these new pre-permit community outreach requirements are to be paid by the applicant. Under this House Substitute bill an applicant's permit shall not be considered complete until a DNREC approved Community Outreach Plan is completed. This House Substitute bill not only requires the Department to promulgate regulations, within 6 months of enactment, but it adds they must be created in collaboration with a Stakeholder Committee made up of appointees of the Governor, the Secretary of the Department, the Chair of the House Natural Resources and Energy Committee and the Chair of the Senate Environment, Energy, and Transportation Committee. This Act will be effective within 30 days of publication of notice by the Register of Regulations that DNREC has advised it that it has promulgated regulations to administer this Act. **HA 1**, which does the following: (1) replaces Clean Air Act permit with Air Quality permit; (2) eliminates a page limit for the summary in the Community Outreach Plan; (3) requires the applicant to post answers to questions at the community meeting on its website; (4) requires the Underserved Community Outreach Report to also advise of any impact the project will have on subaqueous land; (5) requires both the Community Outreach Plan to be implemented and the Underserved Community Outreach Report to be completed before the applicant's permit application shall be considered complete; (6) replaces Environmental Justice Ombudsman with Environmental Justice Coordinator; (7) Increases the time for the Department to promulgate regulations from 6 months to 12 months and (8) sunsets the Stakeholder Committee once the final regulations are published by the Department, was placed with the Bill. *Status: Out of Committee in House*

An act to amend Title 7 of the Delaware Code relating to the **Department of Natural Resources & Environment Control**. This Act updates certain statutory fees in Title 7 and establishes or updates certain permit and licensing fees. This Act also replaces and supersedes 1991 Del Laws. Ch. 86 (H.B. 360), An Act to Amend Titles 7 and 23 of the Delaware Code Relating to Permit Fees and Other Assessments Charged by the Department of Natural Resources and Environmental Control and to Authorize and Approve Various Permit Fees and Assessments. *Status: Introduced and Assigned to Natural Resources & Energy Committee in House*

[HB 253](#) (Williams)

Introduced: 6/30/2023

An act to amend Titles 16, 18, 29 & 31 of the Delaware Code relating to **Mammograms**. This Act requires health insurance companies, including State employee/retiree health plans and Medicaid, to cover annual mammograms for the purpose of early detection for a woman 40 years of age or older, with or without referral from the woman's health care provider. It also prohibits mammography facilities from requiring that women, 40 years of age or older, provide the facility with the name of a healthcare provider in order to receive an annual screening mammogram.

Status: Substituted in House

[HS 1 for HB 253 with HA 1](#) (Williams)

Introduced: 12/14/2023

An act to amend Titles 16, 18, 29 & 31 of the Delaware Code relating to **Mammograms**. This Act is a substitute for House Bill 253. Like HB 253, it requires health insurance companies, including State employee/retiree health plans and Medicaid, to cover annual mammograms for the purpose of early detection for a woman 40 years of age or older, with or without referral from the woman's health care provider. It also prohibits mammography facilities from requiring that women, 40 years of age or older, provide the facility with the name of a healthcare provider in order to receive an annual screening mammogram. This substitute differs from HB 253 by updating Title 18, Section 3552 of the Delaware for consistency with the rest of the bill.

Specifically, it requires insurance carriers to provide coverage for annual mammograms for cancer screening beginning at age 40 rather than age 50 and prohibits carriers from requiring a referral for these annual mammograms. **HA 1** deletes a provision from HS 1 for HB 253 that prohibits any mammogram facility from refusing to provide a mammogram for self-referred patients. This amendment instead requires that facilities either provide a mammogram for self-referred patients or refer such patients to a hospital or outpatient facility with the resources to not only provide a mammogram, but also assist the patient with understanding the results and arranging appropriate follow-up care. This amendment makes no changes to the requirements for insurance companies to provide coverage for self-referred mammograms.

Status: Signed into Law 10/9/2024

[HB 257](#) (Griffith)

Introduced: 7/7/2023

An act to amend Title 18 of the Delaware Code relating to **Easing Access to Enrollment in Health Insurance Programs**. This Act directs the Insurance Commissioner, in collaboration with the Department of Labor, Department of Health and Social Services, and Department of Finance to develop the Delaware Easy Enrollment Health Insurance Program. Under this program, individuals filing state tax forms or unemployment compensation applications will be able to check off on the form whether they have health insurance and whether they would like assistance in determining their eligibility (or their dependents) for any of the following: Medicaid, Delaware Healthy Children Program, or affordability assistance in an Affordable Care

Act Exchange plan. The goal of the program is to maximize enrollment of eligible individuals in health care programs to improve access and reduce insurance costs for all residents of Delaware. *Status: Introduced and Assigned to Economic Development/Banking/Insurance & Commerce Committee in House*

[HB 268](#) (Longhurst)

Introduced: 1/4/2024

An act to amend Title 31 of the Delaware Code relating to **Annual Behavioral Health Well Checks**. House Bill No. 303, with House Amendment No. 2, from the 151st General Assembly created an annual behavioral health well check and required carriers to provide coverage for this service. In order to ensure providers of behavioral health well checks are fairly compensated, HB 303 required carriers to reimburse through common procedural technology (CPT) codes at the same billing rate. The cited CPT codes (99381-99387, 99391-99397) are used for services akin to a typical annual well visit for a new or established patient. Billing for the annual behavioral health well check under these CPT codes may impact the accuracy of state claims data from the Division of Medicaid and Medical Assistance (DMMA) to the Centers for Medicare and Medicaid Services. This Act amends Title 31 of the Delaware Code to **allow DMMA to develop and implement new billing codes for a behavioral health well check**. These developed codes must be comparable to the rates under the cited CPT codes.

Status: Signed into Law 10/23/2024

[HB 272](#) (Hilovsky)

Introduced: 1/4/2024

An act to amend Title 6 of the Delaware Code relating to **Veterans' Benefits and Trade Practices**. This act **prohibits persons from receiving compensation for advising or assisting with veterans' benefits earned by serving our nation in the military**. This bill would not prohibit persons or business entities from receiving compensation for advice to Veterans that is unrelated to veteran claims or services available to veterans from the V.A. or its accredited agencies. Investment, insurance, banking, and other advice or services not provided by the V.A. or its accredited agencies may be obtained by veterans and fees charged for such services.

Status: Substituted in House

[HS 1 for HB 272 with HA 1, HA 3](#) (Hilovsky)

Introduced: 3/7/2024

An act to amend Title 6 of the Delaware Code relating to **Veterans' Benefits and Trade Practices**. This act regulates persons who receive compensation for advising or assisting with veterans' benefits earned by serving our nation in the military. This bill would not prohibit persons or business entities from receiving compensation for advice to Veterans that is unrelated to veteran claims or services available to veterans from the V.A. or its accredited agencies. Investment, insurance, banking, and other advice or services not provided by the V.A., or its accredited agencies may be obtained by veterans and fees charged for such services. **HA 1** clarifies that a violation of this subchapter is an unlawful practice under this title and a violation of Subchapter II of Chapter 25 of this title. This amendment was requested by the Department of Justice. **HA 3** clarifies that the requirements of the Act apply to persons who are not accredited by the United States Department of Veterans Affairs. This amendment also changes the effective date to 18 months following enactment to allow time for nonaccredited persons who are currently providing veterans' services to seek and obtain accreditation from the United States Department of Veterans Affairs. This amendment makes clear that while this Act does not authorize individuals to engage in any practice in violation of federal law, non-accredited

persons who advise or assist veterans in their claims are subject to civil penalties and other remedies in this State if they engage in the trade practices prohibited under this Act.

Status: Assigned to Banking, Business, Insurance & Technology Committee in Senate

[HB 273](#) (Dorsey Walker)

Introduced: 1/4/2024

An Act to amend Title 18 of the Delaware Code relating to **Health Coverage for Speech Therapy**. Parents are paying out of pocket for their children’s speech therapy for diagnosed phonological disorder and receptive language disorder since these 2 diagnoses are not covered under individual and group health plans. **This Act would require [coverage for] speech therapy** for these 2 developmentally delayed speech diagnoses for a child from age 1 until the earlier of age 6 or when the child is enrolled in first grade. **HA 1**, which, adds expressive language disorder and mixed receptive-expressive language disorder to the 2 speech diagnoses in the original Act which individual and group health plans will be required to cover, was Placed with the Bill.

Status: Substituted in House

[HS 1 for HB 273](#) (Dorsey Walker)

Introduced: 3/5/2024

An Act to amend Title 18 of the Delaware Code relating to **Health Coverage for Speech Therapy**. This Substitute bill adds 5 additional speech-language diagnosis to the 2 diagnoses listed in H.B. 273 and references that all 7 speech-language diagnoses are classified in the International Classification of Diseases (“ICD-10”) for billing purposes. This Substitute bill also broadens the definition of “child” from 1 year to first grade to include all children from birth to age 18.

Status: Substituted in House

[HS 2 for HB 273 with SA 1](#) (Dorsey Walker)

Introduced: 3/13/2024

An Act to amend Title 18 of the Delaware Code relating to **Health Coverage for Speech Therapy**. This Substitute bill adds 5 additional speech-language diagnosis to the 2 diagnoses listed in H.B. 273 and references that all 7 speech-language diagnoses are classified in the International Classification of Diseases (ICD-10) for billing purposes. This Substitute bill broadens the definition of “child” from 1 year to first grade to include all children from birth to age 18. This Substitute bill deletes the definition of carrier since the term is not referred to in these new sections and clarifies that Section 2 refers to group and blanket health insurance policies not individual health policies. This Substitute bill also clarifies that the Act applies to all health insurance contracts delivered, issued for delivery, or renewed after December 31, 2024. **SA 1** clarifies that the coverages mandated by this bill may be subject to standard policy provisions such as deductibles, coinsurance, allowable charge limitations, coordination of benefits, or provisions restricting coverage to services by a licensed, certified, or carrier-approved provider or facility.

Status: Signed into Law 11/1/2024

[HB 274](#) (Williams)

Introduced: 1/4/2024

An act to amend Titles 18, 29, & 31 of the Delaware Code relating to **insurance coverage of allergen introduction dietary supplements for infants**. Early, sustained exposure to peanut and egg proteins in the infant diet significantly reduces the risk that an infant will develop a peanut or egg allergy, saving lives and future health care costs. Following multiple clinical

studies, the current guidance of the American Academy of Allergy, Asthma, and Immunology and the American College of Allergy, Asthma, and Immunology, which is followed by pediatricians, recommends that by age 6 months, all infants should be introduced to both peanut and egg protein and that unless contraindicated, all infants should regularly consume peanut and well-cooked egg protein until they reach the age of 1 year, to reduce the risk of developing peanut or egg allergies. **This Act requires that all health insurance plans subject to requirements under Delaware law, including Medicaid, provide coverage, at no cost when prescribed to infants, of at least 1 early peanut allergen introduction dietary supplement and at least 1 early egg allergen introduction dietary supplement.** This Act applies to all policies, contracts, or certificates issued, renewed, modified, altered, amended, or reissued after December 31, 2025.

Status: Signed into Law 8/29/2024

[HB 281 with HA 3, SA 1](#) (Baumbach) Introduced: 1/4/2024

An act to amend Title 29 of the Delaware Code relating to **State Health Care Insurance**. **This Act repeals the option of providing health care insurance to state pensioners under Medicare part C, known as a Medicare Advantage Plan.** This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Act is known as "The Delaware Medicare Supplement Selection Act". **HA 3** allows a plan under Medicare part C, a Medicare Advantage Plan, as an option for eligible pensioners who are first hired on or after January 1, 2025, if the plan is initially selected and adopted by the State Employee Benefits Committee (SEBC) as a regulation under the Administrative Procedures Act. In addition, Sections 4 and 5 of this Amendment add, by reference, the procedural requirements added to § 9602(d) of Title 29 if House Bill No. 282 (152nd) is enacted. **SA 1** shifts the transparency and procedural protections that are in House Amendment No. 3 to this Act to those under House Bill No. 282 (152nd), which in tandem with Senate Amendment No. 1 to HB 282, ensure public comment is held before, not after, a vote by the State Employee Benefits Committee relating to the selection of a Medicare Advantage plan (plan), if offered to eligible pensioners who were first employed on or after January 1, 2025, rather than requiring that the plan be selected and adopted as a regulation under the Administrative Procedures Act. This Amendment also changes the term "hired" to "employed" to correspond with other sections in Chapter 52 of Title 29.

Status: Enact without signature 6/26/2024

[HB 282 with HA 1, HA 2, SA 1](#) (Baumbach) Introduced: 1/4/2024

An act to amend Title 29 of the Delaware Code relating to the **State Employee Benefits Committee**.

This Act adds procedural requirements to meetings of the State Employee Benefits Committee (SEBC), revises the membership of the SEBC, and requires that the Secretary of the Department of Human Resources inform State employees and retired State employees (eligible pensioners) about changes in benefits coverages affecting eligible pensioners who are receiving or eligible to receive retirement benefits under the state employees' pension plan, including proposed changes. This Act adds the following requirements to SEBC meetings: 1. If the SEBC or a subcommittee is holding a virtual meeting, the chair or vice-chair must attend at the anchor location. 2. The chair of a subcommittee must be a voting member of the SEBC. 3. The SEBC must approve a request for proposals to select a carrier or third-party administrator for the health

care insurance plan for State employees or eligible pensioners during an open meeting and that the draft request for proposals must be included with the meeting notice and agenda. 4. Adds standard language for the SEBC regarding the conduct of open meetings by public bodies, including requirements for quorum and when a member designates another individual to attend a meeting. This Act revises the membership of the SEBC by doing all of the following: 1. Removes the Delaware retiree appointed by the Governor and adds 2 members who are Delaware residents eligible to receive health care insurance under Chapter 52 of Title 29 under a pension or retirement plan. The President Pro Tem of the Senate and the Speaker of the House of Representatives each appoint 1 of these members. 2. Makes the Secretary of the Department of Human Resources a non-voting member of the Committee. 3. Changes the leadership of the SEBC so that only the Director of the Office of Management and Budget serves as chair and the vice-chair is elected annually by the members of the Committee. The vice-chair must be a voting member of the Committee and may not be a cabinet secretary or hold a position of equivalent rank in the executive branch. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Act is known as the “Delaware State Employee Benefits Committee (SEBC) Transparency and Accountability Act”. **HA 1** restores the Secretary of the Department of Human Resources as a member of the State Employee Benefits Committee (Committee); Makes the Controller General a non-voting member of the Committee and allows the Controller General to designate the Deputy Controller General to attend meetings of the Committee or a subcommittee; Makes a technical correction to existing law to provide explicit authority for Committee members serving by virtue of position to select a designee. **HA 2** makes this Act effective on January 1, 2025. **SA 1** requires that the State Employee Benefits Committee must provide the meaningful opportunity for public comment required under § 10004(a)(2) of this title before voting on whether to approve a request for proposals to select a carrier or third-party administrator for the health care insurance plan for State employees or eligible pensioners.

Status: Veto Overridden
Enacted into Law

[HB 285](#) (Osienski)

Introduced: 12/14/2023

An act to amend Title 16 of the Delaware Code relating to **Medical Marijuana**. This Act amends the Delaware Medical Marijuana Act by removing the requirement that a patient have a debilitating medical condition to qualify for a registry identification card, instead allowing health-care providers to make the determination of whether a patient has a diagnosed medical condition for which the patient would receive therapeutic or palliative benefit from the use of medical marijuana. As a result, this Act removes the CBD-rich and compassionate use programs, which previously allowed for the use of marijuana for the treatment of conditions that otherwise did not qualify a patient for a registry identification card. This Act allows patients aged 65 and older to self-certify their qualification for a registry identification card without a written certification from a health-care provider. This Act authorizes the Department to issue registry identification cards with 1-, 2-, or 3-year expiration dates. It also requires the issuance of a registry identification card with an indefinite expiration date where the qualifying patient has a terminal illness. This Act allows individuals with out-of-state registry identification cards or equivalent certifications who would qualify for a registry identification card in this State to use those cards or certifications for any purpose for which the person would be authorized to use a registry identification card issued under this chapter.

Status: Signed into Law 5/28/2024

[HB 294](#) (Hilovsky)

Introduced: 1/24/2024

An act to amend Title 16 of the Delaware Code relating to the **Delaware Health Care Commission Health Care Provider Loan Repayment Program**. This bill adds optometrists to those health care providers eligible for the Health Care Provider Loan Repayment Program.

Status: Introduced and Assigned to Health & Human Development Committee in House

[HB 298 with HA 1](#) (Dorsey Walker)

Introduced: 2/29/2024

An act to amend Title 16 of the Delaware Code relating to the **Vulnerable Adult Populations Commission**. This Act is a result of the Joint Legislative Oversight and Sunset Committee's ("JLOSC") review of Adult Protective Services. This Act creates the Vulnerable Adult Populations Commission ("Commission"), whose purpose is to improve the response to and reduce the incidents of vulnerable adult abuse, neglect, or exploitation in this State. The Commission will be comprised of several members from key state agencies, legislators, and the private sector. The Commission's duties include: (1) Studying Delaware court services and procedures, law enforcement procedures and protocols, and criminal justice data collection and analysis, as they relate to vulnerable adult abuse, neglect, or exploitation. (2) Effectuate coordination among Delaware agencies, departments, and courts to benefit victims of vulnerable adult abuse, neglect, or exploitation. (3) Promote effective prevention, intervention, and service provision based on research and data. (4) Recommend standards to state agencies and departments regarding programs and services that serve perpetrators or victims of vulnerable adult abuse, neglect, or exploitation. (5) Review and provide feedback on legislation relating to vulnerable adult abuse, neglect, or exploitation. (6) Submit an annual, written report to the Governor, General Assembly, Delaware Supreme Court, and the Director and Librarian of the Division of Research. **HA 1** removes language that limits the immunity against civil liability afforded to members of the Vulnerable Adult Populations Commission and any person who provides information, data, testimony, a report, or a record to the Commission.

Status: Signed into Law 9/19/2024

[HB 300](#) (Kendra Johnson)

Introduced: 2/26/2024

An act to amend Title 16 of the Delaware Code relating to **Long Term Care Facilities**. This Act requires that all assisted living facilities that are not subject to CMS regulations maintain accreditation from an independent accrediting organization approved by the Department of Health and Social Services, that assisted living facilities that provide dementia care services maintain a certification for the provision of dementia care services from an approved independent accrediting organization, and that all assisted living facilities must submit proof of accreditation and, if applicable, certification to the Department. This Act also authorizes DHSS to promulgate rules and regulations to carry out these provisions, and it defines dementia care services and secured dementia care unit. Violations of this Act are subject to enforcement actions under Chapter 11 of Title 16 and are a basis for the nonrenewal of a facility's license. This bill also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Substituted in House

[HS 1 for HB 300](#) (Johnson)

Introduced: 4/23/2024

An act to amend Title 16 of the Delaware Code relating to **Long Term Care Facilities**. This Act requires that all assisted living facilities that are not subject to CMS regulations maintain accreditation from an independent accrediting organization approved by the Department of Health and Social Services, that assisted living facilities that provide memory care services maintain a certification for the provision of memory care services from an approved independent accrediting organization, and that all assisted living facilities must submit proof of accreditation and, if applicable, certification to the Department. This Act also authorizes DHSS to promulgate rules and regulations to carry out these provisions, and it defines memory care services and secured memory care unit. Violations of this Act are subject to enforcement actions under Chapter 11 of Title 16 and are a basis for the nonrenewal of a facility's license. This bill also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. This Substitute differs from the original HB300 in that the term "memory care" is used in place of "dementia care."

Status: Substituted in House

[HS 2 for HB 300](#) (Johnson)

Introduced: 5/23/2024

An act to amend Title 16 of the Delaware Code relating to **Long Term Care Facilities**. This Substitute Bill requires the Department of Health and Social Services to maintain a public registry of assisted living facilities that are accredited and/or certified to provide memory care services by an approved independent accrediting organization. This Act also authorizes DHSS to promulgate rules and regulations to carry out these provisions, and it defines memory care services and secured memory care unit. Violations of this Act are subject to enforcement actions under Chapter 11 of Title 16 and are a basis for the nonrenewal of a facility's license. This bill also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 8/1/2024

[HB 302](#) (Bolden)

Introduced: 2/29/2024

An act to amend Title 18 of the Delaware Code relating to **Prostate Cancer Screening**. This Act requires all group, blanket, and individual health insurance policies to cover prostate screening for men at high risk for prostate cancer who are over the age of 40. Men at high risk for prostate cancer means African American men or those with a family history of prostate cancer.

Status: Substituted in House

[HS 1 for HB 302](#) (Bolden)

Introduced: 4/11/2024

An act to amend Title 18 of the Delaware Code relating to **Prostate Cancer Screening**. According to the American Cancer Society, prostate cancer is the second-leading cause of death from cancer in men. It is estimated that about 1 in 41 men will die of prostate cancer. According to ZERO Prostate Cancer, Black men face serious health care disparities regarding prostate cancer. 1 in 6 Black men will develop prostate cancer in their lifetime compared to 1 in 8 men overall. Black men are also 1.7 times more likely to be diagnosed with, and 2.1 times more likely to die from, prostate cancer than white men. HB 302 requires all group, blanket, and individual health insurance policies to cover prostate screening for men at risk of prostate cancer. This Substitute bill broadens the definition of "prostate screening" to include any medically necessary and clinically appropriate method for the detection and diagnosis of prostate cancer, including a

digital rectal exam and prostate specific antigen test, and associated laboratory work. This Substitute bill also clarifies the ages at which prostate screenings must be covered, consistent with the American Cancer Society guidelines, as follows: (1) Age 50 for men at average risk of developing prostate cancer; (2) Age 45 for men at high risk of developing prostate cancer, including African American men and men who have a first degree relative diagnosed with prostate cancer; and (3) Age 40 for men at even higher risk for prostate cancer, including men who have more than one first degree relative diagnosed with prostate cancer. This Substitute bill also extends the effective date to health insurance policies modified after December 31, 2025, and makes technical corrections.

Status: Signed into Law 10/28/2024

[HB 313](#) (Neal)

Introduced: 2/29/2024

An act to amend Title 11 of the Delaware Code relating to **Mammograms**. This Act ensures that all female inmates in DDOC custody, at level IV or V, receive annual or biennial screening mammograms as recommended by the United States Preventive Services Task Force.

Status: Signed into Law 8/2/2024

[HB 314](#) (Matthews)

Introduced: 2/29/2024

An act to amend Titles 21 & 24 of the Delaware Code relating to **Driver's Licenses**. This Act does all of the following: (1) Allows for all licensed practitioners that are treating a driver for a medical condition to report findings which allows for Nurse Practitioner, Physician Assistant, or Physician to sign Division paperwork and mirrors verbiage found in Title 24; (2) Updates the name of Medical Council to Board of Medical Licensure and Discipline which ensures compliance with code in handling of individual cases; and (3) Changes the Secretary of Health and Social Services to Secretary of Transportation for determining the status of driver's license for individuals with a potential medical condition which allows for quicker response and ensures the confidentiality of a driver. Lastly it removes a section from the Medical Licensure Act consistent with the other provisions of the bill.

Status: Signed into Law 8/2/2024

[HB 323](#) (Vanderwende)

Introduced: 3/5/2024

An act to amend Title 11 of the Delaware Code relating to **Criminal Mischief**. This Act expands the crime of "criminal mischief" to include damaging an authorized emergency vehicle, defining them as vehicles of a fire department, fire company, police vehicles, ambulances, as well as vehicles used by a fire chief, chief engineer, or fire police officer of any duly organized fire company in performance of their duties. This Act also makes it a class E felony when the person intentionally damages an authorized emergency vehicle.

Status: Out of Committee in House

[HB 324](#) (Baumbach)

Introduced: 3/5/2024

An act to amend Titles 29 & 30 of the Delaware Code relating to the **Administrative Responsibilities of the Department of Finance**. This Act makes several changes to the Code relating to the Department of Finance. Section 1 removes a bond requirement for Division of Revenue officers, agents, or employees for faithful performance of their duties. Sections 2 and 3 enable the Department of Finance and the Division of Revenue to fully administer and enforce taxes where jurisdiction is assigned by the Delaware Code without reference to any specific

Title. This avoids the need to revise applicable provisions of Title 30 (by enumerating each applicable title) when changes to the law make the Department responsible for the administration and enforcement of tax and tax-related laws established outside of Title 30. Section 4 provides the Division of Revenue the ability to collect the lodging tax imposed under § 8112 of Title 9 on behalf of a county in the State of Delaware and enter into an agreement with a county in the State of Delaware to coordinate the collection process. Sections 5 and 6 transfer and reorganize the personal income tax aspects of the Organ and Bone Marrow Transplantation Tax Credit statute to appear within the appropriate personal income tax subchapter in Chapter 11 of Title 30. Section 7 replaces the term “trailer park” with “recreational vehicle park” to clarify license procedures. This Act makes technical changes to existing Code to conform with the Delaware Legislative Drafting Manual.

Status: Signed into Law 8/15/2024

[HB 325](#) (Longhurst)

Introduced: 1/25/2024

A BOND AND CAPITAL IMPROVEMENTS ACT OF THE STATE OF DELAWARE AND CERTAIN OF ITS AUTHORITIES FOR THE FISCAL YEAR ENDING JUNE 30, 2025; AUTHORIZING THE ISSUANCE OF GENERAL OBLIGATION BONDS OF THE STATE; APPROPRIATING FUNDS FROM THE TRANSPORTATION TRUST FUND; AUTHORIZING THE ISSUANCE OF REVENUE BONDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING SPECIAL FUNDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING GENERAL FUNDS OF THE STATE; REPROGRAMMING CERTAIN FUNDS OF THE STATE; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AND AMENDING CERTAIN STATUTORY PROVISIONS. This Bill is the Fiscal Year 2025 Bond and Capital Improvements Act.

Status: Introduced and Assigned to Capital Infrastructure Committee in House

[HB 326](#) (Baumbach)

Introduced: 3/6/2024

An act to amend Title 16 of the Delaware Code relating to the **Delaware Health Care Commission**. Non-profit hospitals are granted tax-exempt status under the premise that they serve a vital role in promoting the health and well-being of the communities they serve. Community benefit spending is a means by which hospitals fulfill this obligation. Such spending includes activities like providing uncompensated care, supporting medical research, offering health education and prevention programs, subsidizing community clinics, and addressing social determinants of health. This Act requires Delaware’s non-profit hospitals to provide the state and public with an annual report outlining their community benefits spending, bringing Delaware in line with 31 other states, including all of Delaware’s neighboring states, that require reporting. This Act defines “community benefits program,” outlines the minimum contents that must be included in a community benefits activity report, and requires that the report be made available to the public and be submitted by January 31 of each year to multiple state entities.

Status: Substituted in House

[HS 1 for HB 326](#) (Baumbach)

Introduced: 4/17/2024

An act to amend Title 16 of the Delaware Code relating to the **Delaware Health Care Commission**. This is a substitute for House Bill No. 326. Non-profit hospitals are granted tax-exempt status on the premise that they serve a vital role in promoting the health and well-being

of the communities they serve. Community benefit spending is a means by which hospitals fulfill this obligation. Such spending includes activities like providing uncompensated care, supporting medical research, offering health education and prevention programs, subsidizing community clinics, and addressing social determinants of health. Like House Bill No. 326, this substitute bill requires Delaware’s non-profit hospitals to provide the state and public with an annual report outlining their community benefits spending, bringing Delaware in line with 31 other states, including all of Delaware’s neighboring states, that require reporting. Like House Bill No. 326, this substitute bill defines “community benefits program,” outlines the minimum contents that must be included in a community benefits activity report, and requires that the report be made available to the public. This substitute contains provisions allowing the report to be submitted electronically to State officials on an annual basis. It differs from the original bill in that the deadline for submitting the report is changed from January 31 of each year to 30 days after a hospital files a federal Form 990. This substitute also contains technical changes to reference and accord with appropriate law and regulations and broadens the list of information that must be included in the community benefits report.

Status: Signed into Law 6/30/2024

[HB 327](#) (Morrison)

Introduced: 3/6/2024

An act to amend Title 10 of the Delaware Code relating to **Sexual Assault, Harassment and Discrimination**. The purpose of this Act is to protect victims of sexual assault, discrimination, or harassment from retaliatory lawsuits that arise when a victim of sexual assault discloses information regarding an act of sexual assault, discrimination, or harassment. The first part of this Act protects assault victims from defamation lawsuits by: 1. Placing a higher burden of proof on the complainant, even if the complainant is a private figure; and 2. Entitling a prevailing defendant to attorneys’ fees and costs, treble the amount of actual damages, and punitive damages. The second part of this Act prohibits any provision in a settlement agreement that prevents the disclosure of information related to a claim of sexual assault, harassment, or discrimination.

Status: Introduced and Assigned to Judiciary Committee in House

[HB 330 with HA 1](#) (Baumbach)

Introduced: 3/7/2024

An act to amend Title 29 of the Delaware Code relating to **Appropriations for Retiree Health Insurance**. This Act increases the amount of the annual appropriation to prefund future State employee retiree health insurance as recommended by the Retiree Healthcare Benefits Advisory Subcommittee of the State Employee Benefits Committee. Like other required contributions to the Other Post-Employment Benefits Fund (OPEB) Fund, this appropriation must be included in the review of and plan for proposed expenditures that the Director of the Office of Management and Budget submits to the Governor and in the Governor's Budget Appropriation Bill. This Act also revises existing law to allow the current practice of making the annual payment to the OPEB Fund of 1% of the operating budget appropriations for the prior fiscal year in a Supplementary Appropriation Bill and makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual. **HA 1** delays implementation of this Act by 1 year.

Status: Signed into Law 9/30/2024

[HB 333 with HA 1, SA 1](#) (Griffith)

Introduced: 1/18/2024

An act to amend Title 29 of the Delaware Code relating to the **Artificial Intelligence Commission**. This Act creates the Delaware Artificial Intelligence ("AI") Commission. This Commission shall be tasked with making recommendations to the General Assembly and Department of Technology and Information on AI utilization and safety within the State of Delaware. The Commission shall additionally conduct an inventory of all Generative AI usage within Delaware's executive, legislative, and judicial agencies and identify high risk areas for the implementation of Generative AI. The Commission will terminate 10 years from enactment unless extended by the General Assembly. **HA 1** adds 4 additional members to the Delaware AI Commission: (1) The Secretary of the Department of Health and Social Services; (2) The Secretary of the Department of Safety and Homeland Security; (3) The State Election Commissioner; and (4) The Executive Director of GEAR. It also clarifies that members appointed to the commission from the private sector may be individuals that represent private sector entities with experience in developing or implementing AI. Finally, this Amendment makes technical, non-substantive changes to conform existing law to the standards of the Delaware Legislative Drafting Manual. **SA 1** adds two additional legislative representatives to the Commission.

Status: Signed into Law 7/17/2024

[HB 334 with HA 1](#) (Osienki)

Introduced: 3/7/2024

An act to amend Titles 4 and 30 of the Delaware Code relating to **Marijuana**. This Act makes several technical and logistical corrections to the Delaware Marijuana Control Act. Section 1 of this Act authorizes the Division of Alcohol and Tobacco Enforcement to conduct administrative inspections of premises licensed under Title 4 for the purpose of ensuring compliance with the provisions of Title 4, the rules and regulations of the Alcohol Beverage Control Commissioner, or the rules and regulations of the Marijuana Commissioner. Section 2 of this Act creates definitions for the terms "conditional license" and "flowering plants." Section 3 of this Act changes the permissible hours of operation of a marijuana facility from 9 a.m. through 1 a.m. to 9 a.m. through 10 p.m. on Mondays through Saturdays. Section 4 of this Act gives enforcement powers to the Division of Alcohol and Tobacco Enforcement and permits administrative inspections of premises licensed under Chapter 13 of Title 4. Section 5 of this Act removes the power of the Commissioner to create rules and regulations to gather consumer data to track compliance with possession limits. Section 6 of this Act makes the following changes to the application selection process: (1) it removes the requirement that the process be varied to account for geographic distribution or population density; (2) it removes a requirement for an applicant to provide information as to the suitability of the proposed location for the facilities; (3) it removes the requirement for an attestation signed by a bona fide labor organization that the applicant has entered a labor peace agreement with the organization (this requirement is instead moved to the criteria for conditional licensure in Section 13 of this Act); (4) it moves the requirement for the creation of identification badges from marijuana establishments to the Commissioner and permits the Commissioner to require a fee for each badge; (5) requires that employees complete training approved by the Commissioner in recognizing valid identification cards; and (6) specifies that agents of a marijuana establishment are subject to all standards and requirements of regulations adopted by the Commissioner. Section 7 of this Act removes a provision for retail store licenses that specifies that a properly registered compassion center that is issued a retail marijuana store license is considered a business registration separate and distinct from the compassion center registration. It also removes the ability for a licensee or employee of a retail

marijuana store to detain and question an individual that the employee believes is under 21 years old and is believed to be exhibiting fraudulent identification to attempt to obtain retail marijuana or a retail marijuana product. Section 8 of this Act corrects a typographical error and clarifies the definition of a cannabis plant grow canopy area. Section 9 of this Act changes the criteria for social equity applicants to remove a Delaware residency requirement and add that a marijuana-related conviction or adjudication of delinquency must have been under the laws of Delaware. Section 10 adds a source of funding that the Commissioner is to investigate that may support social equity applicants. Section 11 of this Act removes a prohibition on microbusiness applicants from possessing more than 1,000 marijuana plants each month and a Delaware residency requirement. Section 12 of this Act repeals a provision allowing for the grant of a conditional license to microbusiness applicants, as in Section 13 of this Act, a new section 1345 of Title 4 authorizes the grant of conditional licenses to applicants who meet specified criteria for licensure. Section 13 of this Act makes technical corrections to conform to the standards of the Delaware Legislative Drafting Manual, prohibits the grant of multiple licenses of any type where the grant would result in the applicant or other person with a financial interest in the application owning more than one business entity of the license type, authorizes the Commissioner to grant a conditional license to any applicant, specifies criteria that must be met for the Commissioner to grant an active license, details requirements for background checks, and makes information received by the Commissioner during the application or background check process confidential and exempt from the Delaware Freedom of Information Act. Section 14 of this Act limits the prohibition on the transfer of social equity licenses to people who would not meet the criteria for the issuance of a social equity license so that licensees may transfer such licenses after three years. Section 15 of this Act adds support for social equity applicants with select business-related expenses to the list of areas for which funding from the Justice Reinvestment Fund is to be appropriated to administer grants, contracts, services, or initiatives. Section 16 of this Act makes changes to Title 30 relating to taxes on retail marijuana establishments. This Act also makes technical corrections to conform to the standards of the Delaware Legislative Drafting Manual. This Act requires passage by a 3/5 majority because it authorizes the Commissioner to charge a fee for identification badges. **HA 1** changes the qualifying residency requirement for a social equity applicant from an individual who has resided for at least 5 of the preceding 10 years in a disproportionately impacted area to one who has so resided for 5 of the preceding 15 years.
Status: Signed into Law 7/17/2024

[HB 340](#) (Griffith)

Introduced: 3/14/2024

An act to amend Title 11 of the Delaware Code relating to **Family Justice Centers**. This Act authorizes the creation of Family Justice Centers within Delaware to provide victims of crime with a single source to obtain resources and support services.

Status: Signed into Law 10/25/2024

[HB 345](#) (Minor-Brown)

Introduced: 3/12/2024

An act to amend Title 31 of the Delaware Code relating to **Coverage for Doula Services**. This Act requires Medicaid coverage for additional postpartum visits with a doula upon recommendation of a licensed practitioner or clinician.

Status: Signed into Law 6/30/2024

[HB 346](#) (Neal)

Introduced: 3/13/2024

An act to amend Titles 10 & 24 of the Delaware Code relating to **Gender-Affirming Health Care**. This Act updates House Bill 455 from the 151st General Assembly by providing the same legal protections afforded providers of contraceptive and abortion services to providers of gender-affirming health care. In summary, this Act does the following: (1) Clarifies that medical professionals who provide gender-affirming health care cannot be disciplined for such services even if such services are illegal or considered to be unprofessional conduct or the unauthorized practice of medicine in another state, so long as such services are lawful in this State; (2) Prohibits health care providers from disclosing communications and records concerning gender-affirming health care without the patient's authorization in any civil action or proceeding, with some exceptions; (3) Protects health care providers from out-of-state civil actions relating to gender-affirming health care treatment that is legal in Delaware, including the issuance of a summons or the enforcement of subpoenas relating to such cases; (4) Creates a cause of action for recoupation of out-of-state judgments relating to gender-affirming services that are lawful in Delaware; and (5) Prohibits insurance companies from taking any adverse action against health care professionals who provide gender-affirming health care services.

Status: Out of Committee in House

[HB 350](#) (Longhurst)

Introduced: 3/12/2024

An act to amend Title 16 of the Delaware Code relating to **Hospital Costs**. This Act creates the Diamond State Hospital Cost Review Board, which will be responsible for review and approval of annual hospital budgets beginning with budgets for calendar year 2026. Hospital budgets established under this process are required to adhere as closely to the spending benchmark as is reasonable given the hospital's financial position and associated economic factors, promote efficient and economic operations of the hospital, and maintain the hospital's ability to meet its financial obligations. As a temporary measure until the Board begins operations, hospitals are required to charge no more than 250% of Medicare costs to any payer for hospital services in calendar year 2025.

Status: Substituted in House

[HS 1 for HB 350](#) (Longhurst)

Introduced: 3/21/2024

An act to amend Title 16 of the Delaware Code relating to **Hospital Costs**. This Act creates the Diamond State Hospital Cost Review Board, which will be responsible for review and approval of annual hospital budgets beginning with budgets for calendar year 2026. Hospital budgets established under this process are required to adhere as closely to the spending benchmark as is reasonable given the hospital's financial position and associated economic factors, promote efficient and economic operations of the hospital, and maintain the hospital's ability to meet its financial obligations. As a temporary measure until the Board begins operations, hospitals are required to charge no more than 250% of Medicare costs to any payer for hospital services in calendar year 2025. This Substitute Bill differs from the original House Bill No. 350 as follows: It provides additional detail regarding the operation of the Board, budget modifications, and provides an appeal right to the Superior Court. It changes the application of the definition of hospital to exclude psychiatric facilities. Because hospitals may have different fiscal years, the deadline for the Board to issue a final decision on a budget is changed to 90 days before the start of a hospital's fiscal year rather than a fixed date. The confidentiality provisions for hospital records have been updated. Technical corrections have been made.

Status: Substituted in House

[HS 2 for HB 350 with HA 1, SA 1](#) (Longhurst) Introduced: 4/23/2024

An act to amend Title 16 of the Delaware Code relating to **Hospital Costs**. This Act creates the Diamond State Hospital Cost Review Board, which will be responsible for an annual review of hospital budgets and related financial information. The Board will have 7 members: 6 appointed by the Governor and confirmed by the Senate, and the Executive Director of the Delaware Healthcare Association. This Act creates a requirement that hospitals submit yearly budgets, audited financial statements, and related financial information to the Board for review. Where a hospital fails to meet the state's budget benchmark for increases in hospital costs it is required to engage with the Board on a performance improvement plan. If the Board and the hospital cannot agree on an improvement plan or where the hospital fails to successfully implement a performance plan, the Board may require the hospital to have its future budget approved by the Board. The submission of hospital budget and financial information will begin in 2025 for calendar year 2026. In reviewing performance improvement plans or proposed budgets, the Board will consider adherence as closely to the spending benchmark as is reasonable given the hospital's financial position and associated economic factors, the promotion of efficient and economic operations of the hospital, and maintenance of the hospital's ability to meet its financial obligations and provide quality health care. As a temporary measure until the Board begins operations, hospitals are required to charge no more than 250% of Medicare costs to any payer for hospital services in calendar year 2025. This Substitute Bill incorporates all of the following changes which were incorporated into House Substitute No. 1 for House Bill No. 350: It provides additional detail regarding the operation of the Board, budget modifications, and provides an appeal right to the Superior Court. It changes the application of the definition of hospital to exclude psychiatric facilities. Because hospitals may have different fiscal years, the deadline for the Board to issue a final decision on a budget is changed to 90 days before the start of a hospital's fiscal year rather than a fixed date. The confidentiality provisions for hospital records have been updated. Technical corrections have been made. In addition, House Substitute No. 2 contains the following changes: It adds a performance improvement plan process as an interim step prior to requiring a hospital to submit a proposed budget for approval or modification by the Board. With this change, the Board will only accept and review budget information in its first year of operation in 2025. In 2026, it may direct hospitals to submit a performance improvement plan. It exempts hospitals that are exclusively rehabilitative hospitals. It changes the composition of the Board as set forth above. It exempts hospitals who derive 45% or more of their revenue or whose patient population has 5% or less Medicare patients from the 2025 reference pricing provision. It extends the interim reference pricing period to include 2026 and prohibits balance billing in reference pricing period. **HA 1** changes the Delaware Healthcare Association member to a non-voting member of the Board and adds 1 additional member appointed by the Governor. It also makes some technical clarifications to the budget submission and review process. **SA 1** amends House Substitute No. 2 for House Bill No. 350, as amended by House Amendment No. 1, as follows: • Replaces the temporary reference pricing provision with a cost growth containment measure already in use for some health care services. • Specifies that there must be at least 1 member of the Board from each county. • Provides clarification regarding submissions of hospital financial information. • Requires the Board to promulgate regulations clarifying the process and factors to be considered for performance improvement

plans. • Adds clarifying provisions regarding the manner and timing of public hearings for each hospital to present its budget, and performance improvement plan where applicable. • Removes the penalty provision for hospitals who fail to adhere to a budget that was approved or modified by the Board. • Requires that the Delaware Economic and Financial Advisory Council (DEFAC) Health Care Spending Benchmark Subcommittee, which sets the spending benchmark, consider revisions to its methodology and make a report recommending any changes to DEFAC by December 31, 2024.

Status: Signed into Law 6/13/2024

[HB 355](#) (Osienski)

Introduced: 3/21/2024

An act to amend Title 16 of the Delaware Code relating to **Marijuana**. This Act provides legal protections for financial institutions and other entities that provide financial or accounting services to cannabis-related businesses that are licensed or registered under Delaware law. Specifically, it clarifies that banks, credit unions, armored car services, and providers of accounting services are not subject to prosecution under Delaware law merely by providing lawful services to licensed businesses engaged in the production, distribution and sale of cannabis in Delaware. This Act aims to facilitate the operation of cannabis-related businesses by helping to ensure that such businesses have access to necessary financial and accounting services.

Status: Signed into Law 10/9/2024

[HB 361](#) (Shupe)

Introduced: 3/28/2024

An Act to amend Title 14 of the Delaware Code relating to **School Meal Programs**. This Act requires a public school to provide a breakfast meal and a lunch meal free of charge to a student who is eligible for a reduced-price meal. This Act requires the Department of Education to reimburse public schools for the free meals required by this Act by paying the difference between the cost of the free meal provided to a student and the reduced-price meal.

Status: Introduced and Assigned to Education Committee in House

[HB 362](#) (Minor-Brown)

Introduced: 4/11/2024

An Act to amend Title 18 of the Delaware Code relating to Coverage for **Doula Services**. In 2023, the General Assembly passed House Bill 80, which required the coverage of doula services under the State's Medicaid plan beginning in 2024. This Act would require similar coverage under private health insurance plans.

Status: Signed into Law 9/24/2024

[HB 364](#) (Romer)

Introduced: 4/11/2024

An Act to amend Title 18 of the Delaware Code relating to **Cancer Coverage**. This Act requires that individual, blanket, and group health insurance carriers cover drug treatment for the associated conditions of metastatic cancer in the same way treatment for metastatic cancer is covered. Specifically, it requires insurance companies to cover any FDA approved drug prescribed to treat the side effects of metastatic cancer treatment and prohibits insurance companies from mandating that patients first fail to respond to a different drug or prove a history of failure of such drug. Technical changes are also made to comply with the Delaware Legislative Drafting Manual.

Status: Signed into Law 8/2/2024

[HB 374](#) (K. Johnson)

Introduced: 4/17/2024

An Act to amend Titles 10 & 24 of the Delaware Code relating to **Fertility Treatment**. This Act updates House Bill 455 from the 151st General Assembly by providing the same legal protections afforded providers of contraceptive and abortion services to providers of fertility treatment. In summary, this Act does the following: (1) Clarifies that medical professionals who provide fertility treatment care cannot be disciplined for such services even if such services are illegal or considered to be unprofessional conduct or the unauthorized practice of medicine in another state, so long as such services are lawful in this State; (2) Prohibits health care providers from disclosing communications and records concerning fertility treatment without the patient's authorization in any civil action or proceeding, with some exceptions; (3) Protects health care providers from out-of-state civil actions relating to fertility treatment that is legal in Delaware, including the issuance of a summons or the enforcement of subpoenas relating to such cases; (4) Creates a cause of action for recouperation of out-of-state judgments relating to fertility treatment that is lawful in Delaware; and (5) Prohibits insurance companies from taking any adverse action against health care professionals who provide fertility treatment and services.

Status: Signed into Law 9/24/2024

[HB 376](#) (Baumbach)

Introduced: 5/16/2024

An Act to amend Title 29 of the Delaware Code relating to **State Healthcare Insurance**. This Act implements a recommendation from the December 31, 2023, Report of the Retiree Healthcare Benefits Advisory Subcommittee. Under this Act, the state group health insurance program must include a pensioner coordination of benefits policy for eligible pensioners who were first employed by the State on or after January 1, 2015, and are eligible for health care coverage through their employer that is not through a plan under Chapter 52 of Title 29. The new pensioner coordination of benefits policy begins July 1, 2027, and must be comparable to the existing coordination of benefits policy for the spouse of a state group health insurance program participant who is eligible for health care coverage through the spouse's own employer. This Act also codifies the existing spousal coordination of benefits policies for the state group health insurance program. The existing spousal coordination of benefits policies and the pensioner coordination of benefits policy created under this Act apply to all participants in the state group health insurance program, which includes regular officers or employees, eligible pensioners, and individuals eligible under § 5208 and § 5209 of Title 29. In addition, this Act makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/30/2024

[HB 377](#) (Baumbach)

Introduced: 4/18/2024

An Act to amend Title 29 of the Delaware Code relating to **State Healthcare Insurance**. This Act implements a recommendation from the December 31, 2023, Report of the Retiree Healthcare Benefits Advisory Subcommittee (RHBAS). Under this Act, the State must continue to offer eligible pensioners first employed by the State as a regular officer or employee (first employed) before January 1, 2025, a plan that is comparable to the current Special Medicfill Medicare Supplement plan. However, for eligible pensioners first employed on or after January

1, 2025, the State may offer different Medicare supplement plans that are not high deductible plans. This Act differs from the RHBAS recommendation because it does not limit the plan for eligible pensioners first employed on or after January 1, 2025, to plans that are comparable to the current Medicare supplement Plan G and Plan L. This difference is because under this Act, the State will not be able to offer a different Medicare supplement plan to any eligible pensioners until January 1, 2040, and details about the Medicare supplement plans that will be available at that time is unknown. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual and to align with related legislation.

Status: Enact w/o Sign 10/1/24

[HB 379](#) (Bush)

Introduced: 4/18/2024

An Act to amend Title 18 of the Delaware Code relating to **Insurance Payments**. This Bill would reinstate language formerly in the Delaware Code which would permit insurance agents to issue checks to policyholders in time sensitive situations without having to qualify as claims adjusters. This practice would be subject to regulation by the Department of Insurance.

Status: Signed into Law 6/30/2024

[HB 382](#) (Heffernan)

Introduced: 4/23/2024

An Act to amend Title 14 of the Delaware Code relating to **Vision Screening**. This Act requires that public school students receive a vision screening, including a test for color blindness, in kindergarten. Students must also receive vision screenings at appropriate intervals in grades 1 through 12, to be determined by the DOE.

Status: Signed into Law 9/19/2024

[HB 383](#) (Harris)

Introduced: 5/2/2024

An Act to amend Titles 18 & 24 of the Delaware Code relating to **Prohibiting Discrimination Against 340B Drugs and Covered Entities by Manufacturers and Pharmacy Benefits Managers**. Section 1 of this Act prohibits discrimination against 340B drug distribution by manufacturers, re-packagers, third-party logistics providers, and wholesalers. Violations are deemed an unlawful practice enforceable by the Consumer Protection Unit of the Department of Justice. The Department of Justice has authority to promulgate regulations under this section. The Board of Pharmacy may take disciplinary action against licensees based on the outcome of investigations or proceedings brought by the Department of Justice. Section 2 of this Act prohibits discrimination by pharmacy benefits managers against 340B covered entities. Violations are deemed unfair practices in the insurance business. Contracts purporting to include provisions in violation of this Act are deemed void and unenforceable. Section 3 of this Act contains severability language, in the event that any provision or the application of the Act to a person or circumstance is deemed to be invalid. Section 4 of this Act contains non-preemption language to ensure that the Act can be read and interpreted to not conflict with other State or federal law.

Status: Substituted in House

[HS 1 for HB 383 with HA 1, HA 2, SA 1](#) (Harris) Introduced: 6/6/2024

An Act to amend Titles 18 & 24 of the Delaware Code relating to **Prohibiting Discrimination Against 340B Drugs and Covered Entities by Manufacturers and Pharmacy Benefits Managers**. This substitute for House Bill 383 does the following: Like House Bill 383, Section

1 of this Act prohibits discrimination against 340B drug distribution by manufacturers, third-party logistics providers, and wholesale distributors. Violations are deemed an unlawful practice enforceable by the Consumer Protection Unit of the Department of Justice. The Department of Justice has authority to promulgate regulations to implement the provisions of this Act. This Section differs from House Bill 383 by removing re-packagers from the list of entities prohibited from engaging in 340B drug discrimination, authorizing the Board of Pharmacy to promulgate regulations and take disciplinary action against both licensees and holders of permits issued by the Board, and requiring covered entities, manufacturers, third-party-logistics providers, and wholesale distributors to publish annual reports on their websites and provide copies of the reports to the Board of Pharmacy, Speaker of the House, Senate President Pro Tempore, Office of the Governor, and members of the House and Senate Health Committees and Joint Finance Committee. Section 2 of this Act prohibits discrimination by pharmacy benefits managers against 340B covered entities. Violations are deemed unfair practices in the insurance business. Contracts purporting to include provisions in violation of this Act are deemed void and unenforceable. This Section differs from House Bill 383 by making technical changes to correct internal references and changing references to “health carriers” to reference “purchasers” instead. Section 3 of this Act contains severability language, in the event that any provision or the application of the Act to a person or circumstance is deemed to be invalid. Section 4 of this Act contains non-preemption language to ensure that the Act can be read and interpreted to not conflict with other State or federal law. **HA 1** clarifies an exemption to the definition of “covered entity” and changes the deadline for covered entities to provide an annual report. **HA 2** removes wholesale distributors from the requirements and prohibitions against 340B drug discrimination. The Board of Pharmacy may still conduct investigations of a wholesale distributor that may possess evidence concerning a complaint filed with the Board concerning a violation of this Act. **SA 1** removes Section 1 of this Act, which would prohibit discrimination against 340B drug distribution by manufacturers, third-party logistics providers, and wholesale distributors. This Amendment also does all the following: 1. Clarifies that an entity's contracted pharmacy is included in the protections under § 3374A of Title 18. 2. Makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/19/2024

[HB 388](#) (Minor-Brown)

Introduced: 5/9/2024

An Act to amend Title 16 of the Delaware Code relating to the **Clean Indoor Air Act**. This Act updates the Clean Indoor Air Act to include the burning of marijuana or the use of marijuana in an electronic smoking device as a prohibited activity in all the same locations where smoking a tobacco product or using an electronic smoking device is prohibited. Further, the Act updates and clarifies some of the definitions used in this chapter. Several of the defined terms are no longer used in the substantive portions of the chapter because they pertained to exceptions to the Clean Indoor Air Act that were legislatively removed. This bill also makes technical changes to conform to the requirements of the Delaware Legislative Drafting Manual. Finally, the exception on smoking prohibitions for vapor establishments is repealed. The exception for tobacco businesses was removed from the Clean Indoor Air Act in 2002, and this repeal will treat the businesses more alike. In addition, the definition of vapor establishment had proved difficult for agencies to understand and implement properly. This Act is effective January 1, 2025.

Status: Introduced and Assigned to Health & Human Development Committee in House

[HB 393](#) (Dorsey Walker)

Introduced: 5/14/2024

An Act to amend Title 31 of the Delaware Code relating to **Adult Protective Services**. This Act is a result of the Joint Legislative Oversight and Sunset Committee's ("JLOSC") review of Adult Protective Services ("APS"). JLOSC approved recommendations to modify several areas of the APS statute, Chapter 39 of Title 31. Based on the recommendations, this Act does all of the following: - Establishes timelines for when the Department of Health and Social Services ("Department") must begin an investigation after receiving a report concerning an allegation of abuse, neglect, or exploitation of an adult who is impaired or incapacitated. - Establishes the Department's responsibility to conduct ongoing training programs for relevant staff. - Removes the Adult Protective Services Advisory Council from section 3903, Title 31. This council is absorbed into the existing Council on Services for Aging and Adults with Physical Disabilities, through separate legislation. - Modifies the reporting requirement of § 3910(a), Title 31, to specifically establish that health-care professionals have a duty to file a report with the Department when the professional has reasonable cause to believe that an adult who is impaired or incapacitated is in need of protective services; clarifies that privilege does not relieve an individual from the duty to report. - Removes language in § 3904(d)(1) regarding a fee schedule and income criteria process that the Department has not used and does not plan to institute. - Makes many technical changes to modernize and conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 11/1/2024

[HB 394](#) (Dorsey Walker)

Introduced: 5/14/2024

An Act to amend Title 16 of the Delaware Code relating to **Health Planning and Resources Management**. This Act is a result of the Joint Legislative Oversight and Sunset Committee's ("JLOSC") review of the Delaware Health Resources Board, which this Act renames the Delaware Health Resources Advisory Board ("Advisory Board"). Based on the research, review, and discussion of both the JLOSC and a task force created to assist the JLOSC's research, JLOSC approved recommendations to change the Advisory Board into an advisory council and move the Advisory Board's decision-making authority to the Delaware Health Care Commission's executive director. In addition to those approved recommendations, this Act also implements JLOSC's approval to amend the Advisory Board's statute in the following ways: - Renames the certificate of public review process to the nationally recognized name of "certificate of need." - Clarifies procedures and review considerations, including removing the Health Resources Management Plan ("Plan") and codifying relevant sections of the Plan. The Plan will be replaced by a statewide health-care facility utilization study, be conducted on a biennial basis, and include utilization information to process certificate of review applications. - Adjusting for inflation, updates the monetary threshold that triggers the requirement for a certificate of need application. The monetary threshold has not been updated since 2007. - Removes references to the Bureau of Health Planning and Resources Management, because staff support was transferred in 2012 to the Delaware Health Care Commission and DHSS, Office of the Secretary. This Act takes effect 6 months after the date of enactment. This Act does not apply to applications that are submitted before the enactment date of this Act.

Status: Assigned to Appropriations Committee in House

[HB 395](#) (Harris)

Introduced: 5/7/2024

An Act to amend Title 16 of the Delaware Code relating to **Hospital Costs**. This Act replaces a temporary hospital cost containment provision from the implementing legislation for the Diamond State Hospital Cost Review Board that was based on Medicare reference pricing with a provision that limits growth based on a formula already in use for some health care services.

Status: Stricken in House

[HB 401](#) (Lambert)

Introduced: 5/16/2024

An Act to amend Title 16 of the Delaware Code relating to **Lead Screening or Test Results**. This Act amends Section 2603 of Title 16 to require the Division of Public Health to provide the results of lead screenings or tests to school nurses and require contracts or computer upgrades to include lead results.

Status: Signed into Law 7/17/2024

[HB 404 with HA 1](#) (Carson)

Introduced: 5/16/2024

An Act to amend Title 3 of the Delaware Code relating to **Lyme Disease**. To address the significant spread and impact of Lyme Disease in Delaware, this bill creates a Lyme Disease intervention fund. The fund shall be overseen by the Department of Agriculture and shall have the goal of reducing the prevalence of Lyme disease and potential for contracting Lyme disease on State owned lands. The Department shall investigate the best ways to do that, focusing on ones that are the most effective, environmentally sensitive, and innovative. The Department of Agriculture will coordinate its efforts in the administration of the fund with the Division of Public Health and the Department of Natural Resources. The Joint Finance Committee shall determine the yearly amount of the fund. **HA 1** expands the goals of the Lyme disease intervention fund established in House Bill No. 404 to include reducing the prevalence of other tick-borne illnesses and the animals known to carry other tick-borne illnesses.

Status: Signed into Law 10/23/2024

[HB 408 with HA 1, HA 2](#) (Osienski)

Introduced: 5/16/2024

An Act to amend Title 4 of the Delaware Code relating to **Marijuana Conversion Licenses**. This Act creates a temporary conversion license for existing medical marijuana compassion centers to operate for recreational marijuana purposes and sets forth requirements to obtain a conversion license and to operate under such a license. This Act also specifies that conversion licenses may not be issued after November 1, 2024 and expire after 48 months, at which time the license may be renewed as an open license. **HA 1** makes the following changes to the provisions contained in House Bill No. 408: (1) It increases the fee for cultivation conversion licenses from \$100,000 to \$200,000. (2) It removes a 5% discount for up-front payment of the conversion license fee. (3) It changes the conversion license expiration period from 48 months to 24 months. (4) It requires applicants seeking a conversion license to operate a retail facility to provide an attestation that they will serve medical cardholders in accordance with the Medical Marijuana Act. (5) It provides additional criteria that conversion licensees must meet to operate a retail facility, which include continuing to operate the facility as a medical dispensing location, prioritizing the distribution of marijuana products to qualifying patients, maintaining or

increasing the diversity of medical marijuana products available, providing product and pricing information to the Commissioner within 7 days of increasing the maximum price for any marijuana or marijuana product or a new product is being offered, and abide by an agreement to continue medical marijuana operations and to maintain an adequate and diverse supply as well as justifiable pricing with respect to medical marijuana and medical marijuana products. (6) It requires conversion licensees with cultivation or manufacturing conversion licenses to provide monthly wholesale pricing information to the Commissioner. **HA 2** makes clear that all funds derived from the issuance of conversion licenses must solely be used as a source of financial assistance to social equity applicants.

Status: Signed into Law 7/17/2024

[HB 415](#) (Phillips)

Introduced: 5/21/2024

An Act to amend Titles 6 and 31 of the Delaware Code relating to **Individuals who are Experiencing Homelessness**. This Act ensures that all individuals, regardless of housing status, have equal opportunity to live in decent, safe, sanitary, and healthful accommodations and enjoy equality of opportunities. To that end, this Act sets forth the rights of individuals experiencing homelessness, many of which are existing constitutional rights, and creates a process by which the State Human and Civil Rights Commission and the Division of Human and Civil Rights may accept and investigate complaints of discriminatory treatment, attempt conciliation, and refer enforcement actions to law enforcement Internal Affairs if necessary. These entities already exist and administer Delaware's Fair Housing and Equal Accommodations laws. This act is intended to prohibit discrimination on the sole basis that one is experiencing homelessness. It does not give preferential treatment to those experiencing homelessness, but merely prohibits discriminatory treatment. The complaint process requires that conciliation is attempted before a public hearing is held, as set forth in lines 151-160 and 167-169. This Act is a successor to House Bill No. 55 and differs from that bill in the following ways: 1) The new Chapter it creates is entitled "Anti-Discrimination Provisions for Individuals Experiencing Homelessness" instead of "Bill of Rights for Individuals Experiencing Homelessness." 2) Defines the term reasonable search. 3) Expands the definition of "individuals experiencing homelessness" to include those who may be staying with different friends or family without a permanent home. 4) Eliminates a reference to voting rights, since such rights are addressed elsewhere in the Code. 5) Clarifies that the right to seek or maintain housing does not preclude or limit a municipality's enforcement of its housing, building, and sanitation laws. 6) Changes the right to occupy a motor vehicle or recreational vehicle, provided that the vehicle is legally parked "on public property" to "in a public parking lot." 7) Confirms that the right to be free from discrimination by landlords on the basis of experiencing homelessness does not preclude a landlord's consideration of any other factor that is permissible under State or federal law. 8) Removes the provision that the Commission and the Division may consult with state, county, and municipal officials, and other interested parties, to learn the extent, if any, to which discriminatory acts exist in the State, county, or municipality, and whether and how state, county, or municipal enforcement programs might be utilized to combat the discrimination. 9) Mandates reporting on the Division's educational activities. 10) Provides that upon preliminary confirmation that the party alleged to have engaged in a discriminatory act is a law enforcement officer or law enforcement agency, the Division shall refer the matter to the applicable Internal Affairs department (instead of the Department of Justice) for further appropriate investigation and resolution. 11) Provides that the Commission shall issue an annual report identifying organizations who has committed three or

more substantiated violations of § 4504A of this title in a 12 month period. 12) Clarifies that judicial review is done in accordance with the Administrative Procedures Act. 13) Provides respondents with a cause of action for damages, including attorneys' fees, costs, and punitive damages, against a complainant who abuses the process set forth in the act.

Status: Introduced and Assigned to Judiciary Committee in House

[HB 417](#) (Dukes)

Introduced: 5/22/2024

An Act to amend Title 10 of the Delaware Code relating to the **Statute of Limitations for Civil Claims Based on Sexual Abuse of a Minor**. Survivors of child sexual abuse that occurred in this State who have been barred from filing suit against their abusers by virtue of the expiration of the former civil statute of limitations, shall be permitted to file those claims in the Superior Court of this State at any time. This is intended to apply retroactively.

Status: Laid on the Table in Senate

[HB 422](#) (Johnson)

Introduced: 5/16/2024

An Act to amend Title 7 of the Delaware Code relating to **Environmental Permits in Overburdened Communities**. This Act defines certain facilities which will require an applicant seeking a permit for a new facility, or expansion of an existing facility, or renewal of an existing permit, located in an overburdened community, as defined in the Act, to provide an environmental justice impact report. Facility includes the following commercial, municipal, or industrial businesses located in, or within, a ½ mile radius of an overburdened community: (1) manufacturers of animal food, meat, seafood, tobacco, manufactured homes, chemicals, cement, asphalt, ready-mix concrete, primary metal, nonmetallic mineral products, ammunition or transport equipment; (2) manufacturers of fossil or bio-based fuels, distillates, chemicals and pharmaceuticals; or industrial scale storage of such materials; (3) pulp, paper, paperboard and sawmills; (4) commercial rail, port or water freight docks; (5) landfills, transfer stations, resource recovery, scrap metal or recycle centers or compost operators; (6) warehouses, and distribution, trucking and logistic centers larger than 75,000 square feet; (7) industrial or municipal sewage treatment centers, animal waste management or processing operations and sludge processors; (8) large, concentrated animal feeding operations, as defined by the size threshold in the federal Clean Water Act, regardless of their discharge status; (9) energy generators, as defined in §1001 of Title 26; (10) medical waste incinerators (with the exception of those attendant to a hospital or university intended to process self-generated medical waste); and (11) commercial, municipal, or industrial projects or installations that are not listed in (1) through (10) that are similar in scale, and that currently contribute or upon permit approval would contribute to the cumulative pollution in an overburdened community, which are identified by the Department in conjunction with the Environmental Justice Board. For all permit applications, the environmental justice impact report would be required at least 60 days before a required community information session and public hearing. Under the Act an "overburdened community" is defined as any geographic locations that potentially experience harms and risks a determined by the Environmental Justice Board or any census tract, as delineated in the most recent U.S. Census, in which one or more of the following is greater than .75 standard percentage of the State average for any of the following: (1) 35% of the residents are below 185% of federal poverty level. (2) At least 25% or more identify as minority or member of a state or federally recognized tribal community or immigrant. (3) 25% or more have limited English proficiency as defined by U.S. Census Bureau. The Department would be required to create and post on its website a list of

“overburdened communities” and update the list every 2 years. The Act establishes the Environmental Justice Board to review and make recommendations on the environmental justice impact reports, conduct community information sessions and public hearings, and other measures to help the Department fulfill the purpose of this chapter. The community information session and public hearing on the permit would be required to provide an opportunity for meaningful public participation by the overburdened community. Following the public hearing the Secretary would be required to consider the recommendation of the Environmental Justice Board and the testimony presented at the public hearing and an analysis of the environmental justice impact report. The Secretary could impose conditions to the permit that may be necessary to reduce the adverse impact to the public health or to the environment in the overburdened community. The Secretary would have the authority to deny a permit application in an overburdened community upon a finding that the cumulative impact imposed by the new or expanded facility would constitute an unreasonable risk to the health of the residents of the overburdened community or to the environment in that community. The Act requires the Department to establish rules and regulations to implement the Act, in consultation with the Environmental Justice Board, within 6 months after its enactment.

Status: Introduced and Assigned to Natural Resources & Energy Committee in House

[HB 425](#) (Osienki)

Introduced: 5/23/2024

An Act to amend Titles 4 & 16 of the Delaware Code relating to **Medical Marijuana**. This Act moves the Office of Medical Marijuana, which is currently under the Department of Health and Social Services to the Office of the Marijuana Commissioner within the Department of Safety and Homeland Security. Under this Act, the Marijuana Commissioner, rather than DHSS, will be responsible for administering the Delaware Medical Marijuana Act, which includes the following tasks: (1) Registration and certification of safety compliance facilities and compassion centers; (2) Issuance of registry identification cards; (3) Registration of qualifying patients and designated caregivers; and (4) Updating rules and regulations under the Delaware Medical Marijuana Act.

Status: Signed into Law 7/17/2024

[HB 426](#) (Neal)

Introduced: 6/6/2024

An Act to amend Title 11 of the Delaware Code relating to **Medical Services**. This Act ensures that pregnant women in DOC custody, at Level IV or V, are able to meet with a doula or midwife to create a birth plan surrounding the birth of their child. Among other things, the birth plan must include a statement identifying a preferred childcare provider and whether the new mother wishes to express breast milk for the child. This Act further requires that the DOC publish an annual report regarding the use of doula and midwifery services within the DOC. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Signed into Law 9/24/2024

[HB 429](#) (Short)

Introduced: 6/6/2024

An Act proposing an amendment to Article VIII, # 6 of the Delaware Constitution relating to **Limiting the Annual Growth of Expenditures in the State Operating Budget**. This legislation, the State Spending Accountability Amendment, is the first leg of a constitutional amendment that would reform the state budgeting process. This amendment would continue the

Budget Stabilization Fund, established in 2018 under Executive Order 21, issued by Governor John Carney. It also seeks to continue the state Benchmark Index and state Benchmark Appropriation, established by the same executive order, which will expire at the end of the Carney administration in January 2025. This amendment would further hold the General Assembly accountable for responsibly managing state spending growth by instituting new protocols. It would create the 8-member Budget Accountability Review Commission (BARC) and establish a set of procedures to ensure the state operating budget complied with the state Benchmark Index and state Benchmark Appropriation. These benchmarks could be exceeded when extraordinary circumstances presented themselves.

Status: *Introduced and Assigned to Administration Committee in House*

[HB 432 with HA 1](#) (Minor-Brown) Introduced: 6/6/2024

An Act to amend Title 16 of the Delaware Code relating to the **Delaware Institute of Medical Education and Research**. This Act updates provisions of the code covering the Delaware Institute of Medical Education Research (DIMER), which creates partnerships with out-of-state medical schools as an alternative to creating a state sponsored medical school. Specifically, this Act does the following: (1) Updates the name of the Jefferson Medical College of Thomas Jefferson University to “Sidney Kimmel Medical College of Thomas Jefferson University”; (2) Adds the Philadelphia College of Osteopathic Medicine as a DIMER medical school; (3) Alters and updates the composition of the DIMER Board and provides that all members will be appointed by the Governor; (4) Clarifies that a vacant Board position is not counted for quorum purposes; (5) Requires the Board Chair to be elected from the members of the Board, rather than appointed by the Chair of the Delaware Health Care Commission; (6) Requires the Board to select candidates for the Chair and Vice Chair from a nominating committee determined by the Board; and (7) Provides that the Board Chair and Vice Chair shall serve no more than 3 consecutive terms. **HA 1** adds a representative of Federally Qualified Health Centers, who is a resident of Sussex County, as a board member of DIMER.

Status: *Signed into Law 9/19/2024*

[HB 433](#) (Osienski) Introduced: 6/6/2024

An Act to amend Title 19 of the Delaware Code relating to **Unemployment Compensation**. This Act revises the experience rating methodology for assigning unemployment assessment rates to employers under the Unemployment Insurance Code in Delaware, replacing the current benefit wage ratio methodology with the benefit ratio methodology used by 19 other states. The new methodology is meant to be more responsive to changes in the economy over time, to better sustain the solvency of the Unemployment Trust Fund, and to be easier to administer. The unemployment assessment rate for an employer under this new methodology would be calculated by combining a benefit ratio assessment, an employer size add-on, and an employer industry add-on. The supplemental tax for operations and technology costs that is already included in the Unemployment Code would continue to be added to each employer's overall assessment rate. This bill also reduces new employer unemployment assessment rates and phases in a permanent taxable wage base over three years- \$12,500 for calendar year 2025, \$14,500 for calendar year 2026, and \$16,500 for calendar year 2027 and thereafter. The new methodology would be in effect beginning calendar year 2027. Until the effective date of that new tax rate structure, this Act would also provide temporary relief to employers who pay unemployment tax assessments in calendar year 2025 and 2026 by reducing new employer tax rates, simplifying tax rate

schedules, reducing or holding constant overall employer tax rates, and reducing the maximum earned rate. This Act also makes technical corrections to existing Code to conform to the Legislative Drafting Manual and reinserts a historical provision that applied only to 2023.

Status: Signed into Law 8/15/2024

[HB 435](#) (Griffith)

Introduced: 6/6/2024

An Act to amend Title 30 of the Delaware Code relating to **Income Taxes**. This bill creates a new chapter in Title 30 and establishes the STEM Talent Advancement and Retention Program (“STAR Program”) and the STEM Talent Advancement and Retention Fund (“STAR Fund”). The purpose of this STAR Program is to incentivize and attract individuals graduating with an associate, bachelor’s, graduate, or post-graduate degree in STEM to stay and work in Delaware. An applicant must be employed with a Delaware-based employer defined as (1) having its principal place of business in Delaware; or (2) at least 51% of its employees working at a Delaware based location; or (3) registered to conduct business in Delaware and reported Delaware tax liability in the previous year. Successful applicants will receive tax credits for education loan expenses up to a maximum of \$1,000 for an associate degree, \$4,000 for a bachelor's degree, and \$6,000 for a graduate or post-graduate degree for up to 4 consecutive years. The award may not exceed the education loan expense incurred by the applicant. The Department of Finance shall administer the program in conjunction with the Delaware Center for Life Science Education and Training ("Center"). The Department will form a Fund Committee of 5-8 individuals that must include the Executive Director of the Center, or their designee, and individuals with knowledge and expertise in STEM employment in Delaware. The fund shall be funded on an annual basis by the General Assembly in a minimum amount of \$100,000. The Department may also seek federal funds, grants, or private contributions to fund the STAR Fund. The Department may not commit to awards that exceed the amount contained in the Fund. This Act is effective 10 days following the date of publication in the Register of Regulations that funds have been appropriated to implement the provisions of this Act and Notice by the Controller General is published with the Register of Regulations. This Act is to be implemented the earlier of the following: (1) 6 months after the Act’s effective date; or (2) Notice by the Secretary of Education in the Register of Regulations that final regulations have been promulgated. This Act expires 5 years after its effective date unless otherwise provided by a subsequent Act of the General Assembly.

Status: Assigned to Appropriations Committee in House

[HB 438 with HA 1](#) (Heffernan)

Introduced: 6/6/2024

An Act to amend Titles 13 and 19 of the Delaware Code relating to the **Family and Medical Leave Insurance Program**. This Act makes changes to the Paid Family and Medical Leave Program. It removes the employer as the party responsible for making eligibility determinations and claims decisions and instead reallocates this responsibility to the Department of Labor and gives the Department authority to enter into contracts with other entities to review and adjudicate claims for benefits. This Act makes other changes throughout Chapter 37 of Title 19 concerning eligibility criteria and requirements for the Paid Family and Medical Leave Program. It clarifies that schools are not exempt from being considered employers; clarifies that family leave benefits are not payable for time taken after the death of an individual for whom an employee is on approved family leave; removes the ability of employers with fewer than 25 employees to elect to provide reduced parental leave; removes a provision that results in the aggregation and

potential capping of benefits for employees who work multiple jobs with the potential for employees to pay more in contributions and receive less in benefits than they would otherwise be due; requires the Department to set contribution rates, statewide average weekly wages, and maximum benefits; removes a provision authorizing employers to require that payment be made concurrently or otherwise coordinated with payment made or leave allowed under the terms of disability or family care leave under a collective bargaining agreement or employer policy; removes a provision allowing employers to require employees to use accrued paid time off before accessing family and medical leave benefits and count that accrued paid time off toward the total length of leave allowed under Chapter 37 of Title 19; authorizes an employee an option to use a private review process of a private plan's denial of benefits prior to appealing to the Department; clarifies that denials of claims are subject to the appeal provisions of the Administrative Procedures Act; and clarifies that employers who violate the requirements of Chapter 37 of Title 19 are subject to a penalty only where the violation is due to willful misconduct or gross negligence. This Act makes changes to ensure that child support obligations are fulfilled and benefit checks account appropriately for child support deductions and to allow the Department to make garnishments to enforce judgments obtained under this chapter. This Act also updates relevant sections of Title 13 to allow for child support deductions of PFMLA benefits as appropriate. This Act also makes technical corrections to conform to the standards of the Delaware Legislative Drafting Manual. **HA 1** removes language contained in House Bill 438 stating that schools are not exempt from being considered employers for purposes of the Family and Medical Leave Insurance Program.

Status: Assigned to Appropriations Committee in House

[HB 440](#) (Phillips)

Introduced: 6/6/2024

An Act to amend the Delaware Code Relating to **Housing Status Discrimination in Employment & Professional Activities**. Delaware law prohibits discrimination on the basis of protected characteristics in employment and professional activities. This Act would add "housing status" as a protected characteristic.

Status: Signed into Law 9/26/2024

[HB 441](#) (Lambert)

Introduced: 6/6/2024

An Act to amend Titles 18, 24, 29 and 31 of the Delaware Code relating to **Insurance Coverage for Physical Therapy, Occupational Therapy and Neuromuscular Massage Therapy**. This Act encourages patients to choose physical therapy, occupational therapy, and neuromuscular massage therapy as a safe alternative to opioid use for managing acute and chronic pain by doing the following: 1. Eliminating cost-sharing for physical therapy, occupational therapy, and neuromuscular massage therapy services. 2. Expanding the prohibition on annual or lifetime numerical limits on physical therapy, occupational therapy, and neuromuscular massage therapy services to the treatment of any chronic or acute musculoskeletal pain or post-surgical therapy. This Act applies to individual health insurance policies under Chapter 33 of Title 18, group and blanket health insurance policies under Chapter 35 of Title 18, the State employee health plan under Chapter 52 of Title 29, and Medicaid under Chapter 5 of Title 31. This Act applies to all policies, contracts, or certificates issued, renewed, modified, altered, amended, or reissued after December 31, 2025. This Act expires December 31, 2030. This Act also makes technical corrections to conform existing law to the standards of the Delaware Legislative Drafting Manual.

Status: Introduced and Assigned to Economic Development/Banking/Insurance & Commerce Committee in House

[HB 442](#) (Johnson)

Introduced: 6/6/2024

An Act creating an **Affordable Housing Production Task Force**. This Act creates the Affordable Housing Production Task Force (“Task Force”). The purpose and mission of the Task Force is to investigate and make findings and recommendations to the Governor and the General Assembly on how the State and local governments can increase the production of affordable rental units and homes in Delaware. The Task Force shall consist of 20 members some appointed by the Governor, some appointed by the President Pro Tempore of the Senate, some appointed by the Speaker of the House of Representatives, and some will serve as a member by virtue of their official position. The Co-Chairs of the Task Force will be (1) the member of the Delaware Senate appointed by the President Pro Tempore of the Senate, (2) the member of the Delaware House of Representatives appointed by the Speaker of the House of Representatives, and (3) the Director of the Delaware State Housing Authority. The Task Force must create, at a minimum, the following Sub-Committees: (1) Regulating and Permitting, (2) Finance and Development, (3) Construction, (4) Manufactured Housing, (5) Community Focus Groups. The Chairs of the Sub-Committees must be members of the Task Force but the members of the Sub-Committees do not have to be on the Task Force. A Sub-Committee may have a maximum of 9 members. This Act establishes the duties and responsibilities of the Co-Chairs of the Task Force and the requirements that will govern the administration of the Task Force. The first meeting of the Task Force must be held no later than 60 days after enactment of this Act. The Task Force must provide its Final Report by March 1, 2025. This Task Force will expire on the date it submits its Final Report unless its existence is continued by a subsequent act of the General Assembly.

Status: Signed into Law 7/17/2024

[HB 447](#) (Minor-Brown)

Introduced: 6/13/2024

An Act to amend Title 24 of the Delaware Code relating to **Healthcare Professional Title Transparency and Advertisement**. This Act creates Chapter 62 of Title 24 to regulate health-care advertisements, defined as any communication or statement that is directly controlled or administered by a health-care professional or a health-care professional’s office personnel. It requires the following 1) Doctorally prepared health-care practitioners using the designation "Doctor" or "Dr." in connection with that person's name or calls themselves "Doctor" must specify the educational degree and type of license or other permissible title authorized by that person's professional practice act or regulation. 2) Any health-care practitioner licensed under the professional boards defined in this chapter must wear an identification name tag during all patient encounters which must include the practitioner's name and the type of license or other permissible title authorized by that person's professional practice act or regulation. There are certain exceptions to this requirement: (1) The health-care practitioner is working in a nonpatient care setting and does not have any direct patient care interaction. (2) The wearing of identification would jeopardize the health-care practitioner's safety. (3) The health-care practitioner is in a setting in which the license type and names of all health-care practitioners working in that setting are displayed. (4) The office is an office of a solo health-care practitioner, or of a single type of health-care practitioner. The Boards defined in this chapter are the following: Board of Mental Health and Chemical Dependency Professionals Board of Podiatry Board of Chiropractic Board of Medical Licensure and Discipline Board of Dentistry and Dental

Hygiene Board of Nursing Board of Occupational Therapy Board of Optometry Board of Pharmacy Board of Mental Health and Chemical Dependency Professionals Board of Examiners of Psychologists Board of Dietetics/Nutritionists Board of Social Work Examiners Examining Board of Physical Therapists and Athletic Trainers 3) An advertisement for health-care services which names any health-care practitioner must identify the type of license held pursuant to the requirements of this statute or other permissible title. Further, the advertisement may not contain deceptive or misleading information. 4) Provides that a health-care practitioner who violates this chapter is deemed to have engaged in unprofessional conduct, which may be grounds for disciplinary action under the licensure provisions governing the respective health-care practitioner; however, The Division of Professional Regulation will only accept or assign a complaint number or investigate a complaint filed by a patient or agent of the patient as designated in a power of attorney or advance health-care directive.

Status: Introduced and Assigned to Sunset Committee (Policy Analysis & Government Accountability) Committee in House

[HB 452](#) (Harris)

Introduced: 6/20/2024

An Act to amend Titles 16 & 25 of the Delaware Code relating to **Lead-Based Paint**. This Act requires that all rental units constructed before January 1, 1978, are certified as lead free or lead safe by a specific deadline. Lead inspectors must be approved by the State to conduct inspections and if necessary, lead abatement and remediation. A certificate exemption may be issued for no more than 6 months. If the rental unit is uninhabitable, the landlord must provide alternative housing while the unit undergoes lead abatement or remediation. Recertification for lead safe units must occur prior to commencement of any rental agreement more than 4 years after the date the unit was last certified. Units must be recertified as lead free or lead safe if a lead-based paint hazard is discovered in the rental unit or if individuals residing in the unit develop elevated lead blood levels. Beginning July 1, 2026, every rental unit constructed prior to January 1, 1978, shall include a disclosure as to whether the rental unit has been certified as lead safe or lead free. To help eligible landlords obtain lead certification or remediate their units, this Act creates a Lead-based Paint Hazard Control Grant and Loan Program. Preference for grants shall be given to families with young children, pregnant individuals, or tenants regularly visited by children under 6 years old. This Act also establishes a Lead-Based Paint Remediation Certification Committee to study the available workforce and available public funding to support the inspection and remediation efforts required by this Act along with the feasibility of meeting deadlines established under this Act. This Act also does the following: (1) Prohibits landlords from discriminating against individuals because they make a complaint or assist in an investigation or proceeding relating to a lead-based paint hazard in a rental unit or premises. (2) Prohibits landlords from discriminating against individuals residing in a unit who have elevated blood lead levels or children or pregnant individuals who may be affected by lead-based paint hazards. (3) Requires landlords to show proof that their unit is certified as lead free or lead safe in accordance with this Act prior to filing a complaint for possession with JP Court. (4) Requires that contractors performing lead-based paint abatement or remediation under the Delaware State Lead-Based Paint Program provide for the safety of workers performing lead-based paint remediation work, including free blood testing for workers at least every 3 months.

Status: Introduced and Assigned to Health & Human Development Committee in House

[HB 475](#) Heffernan)

Introduced: 6/24/2024

A BOND AND CAPITAL IMPROVEMENTS ACT OF THE STATE OF DELAWARE AND CERTAIN OF ITS AUTHORITIES FOR THE FISCAL YEAR ENDING JUNE 30, 2025; AUTHORIZING THE ISSUANCE OF GENERAL OBLIGATION BONDS OF THE STATE; APPROPRIATING FUNDS FROM THE TRANSPORTATION TRUST FUND; AUTHORIZING THE ISSUANCE OF REVENUE BONDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING SPECIAL FUNDS OF THE DELAWARE TRANSPORTATION AUTHORITY; APPROPRIATING GENERAL FUNDS OF THE STATE; REPROGRAMMING CERTAIN FUNDS OF THE STATE; SPECIFYING CERTAIN PROCEDURES, CONDITIONS AND LIMITATIONS FOR THE EXPENDITURE OF SUCH FUNDS; AND AMENDING CERTAIN STATUTORY PROVISIONS.

Status: Signed into Law 6/30/2024

Senate Resolutions:

[SCR 3](#) (Hansen)

Introduced: 1/13/2023

This Senate Concurrent Resolution requests that **the Division of Substance Abuse and Mental Health assess the feasibility** of replacing the Delaware Psychiatric Center's ("DPC") facilities, including gathering input regarding DPC's current and future needs, and provide a report detailing the findings of this work by December 31, 2023.

Status: Passed in Senate & House

[SCR 6](#) (Poore)

Introduced: 1/25/2023

This Senate Concurrent Resolution designates the week of February 27 to March 5, 2023, as "**Eating Disorders Awareness and Prevention Week**" in Delaware and encourages the Department of Health and Social Services to research methods to raise awareness of, prevent, and treat eating disorders.

Status: Passed in Senate & House

[SCR 7](#) (Townsend)

Introduced: 1/24/2023

This Senate Concurrent Resolution recognizes February 28, 2023, as "**Rare Disease Day**" in Delaware.

Status: Passed in Senate & House

[SCR 12](#) (Pinkney)

Introduced: 3/14/2-23

This Senate Concurrent Resolution declares that **gun violence is a public health crisis**, that ending the gun violence devastating Delaware is a policy priority and supporting policy and legislative solutions that will make schools safe, confront armed hate and extremism, prevent suicide, and center and support survivors of gun violence.

Status: Passed in Senate & House

[SCR 16](#) (Poore) Introduced: 3/29/2023
This Concurrent Resolution recognizes March 2023 as "**Kidney Month**" in Delaware.
Status: Passed in Senate & House

[SCR 17](#) (Poore) Introduced: 3/29/2023
This Senate Concurrent Resolution recognizes March 2023 as "**Colorectal Cancer Awareness Month**" in the State of Delaware.
Status: Passed in Senate & House

[SCR 22](#) (Hoffner) Introduced: 3/28/2023
This resolution designates March 26, 2023, as "**Epilepsy Awareness Day**" in Delaware and calls upon State agencies and the people of Delaware to undertake suitable efforts to increase epilepsy awareness.
Status: Passed in Senate & House

[SCR 25](#) (Richardson) Introduced 4/4/2023
This Resolution recognizes April 2023 as "**Child Abuse Prevention Month**" in the State of Delaware.
Status: Passed in Senate & House

[SCR 26](#) (Buckson) Introduced 4/4/2023
This Resolution recognizes April 2023 as "**Parkinson's Disease Awareness Month**" in the State of Delaware.
Status: Passed in Senate & House

[SCR 30](#) (Pinkney) Introduced 4/6/2023
This Resolution recognizes April 11-17, 2023 as "**Black Maternal Health Awareness Week**" in Delaware.
Status: Passed in Senate & House

[SCR 33](#) (Poore) Introduced 5/4/2023
This resolution designates the week of May 1-7, 2023, as "**Tardive Dyskinesia Awareness Week**" in Delaware.
Status: Passed in Senate & House

[SCR 44](#) (Gay) Introduced 5/4/2023
This Resolution recognizes May 5, 2023, as **Maternal Mental Health Awareness Day** in Delaware.
Status: Passed in Senate & House

[SCR 45](#) (Lawson) Introduced: 5/11/2023
This Senate Concurrent Resolution recognizes the month of May 2023 as "**Healthy Vision Month**" in the State of Delaware.
Status: Passed in Senate & House

[SCR 47](#) (Hocker) Introduced 5/9/2023
This Senate Concurrent Resolution proclaims May 2023 "**Cystic Fibrosis Awareness Month**" in the State of Delaware.
Status: Passed by Senate & House

[SCR 48](#) (Mantzavinos) Introduced 5/9/2023
RECOGNIZING MAY 2023 AS "**OLDER AMERICANS MONTH**" IN THE STATE OF DELAWARE.
Status: Passed by Senate & House

[SCR 49](#) (Hansen) Introduced 5/9/2023
RECOGNIZING MAY 7-13, 2023, AS "**YOUTH HEALTH AWARENESS AND PREVENTION WEEK**" IN THE STATE OF DELAWARE.
Status: Passed by Senate & House

[SCR 50](#) (Walsh) Introduced 5/9/2023
ACKNOWLEDGING THE IMPORTANCE OF **MOBILE INTEGRATED HEALTH AND COMMUNITY PARAMEDICINE SERVICES** IN THE STATE OF DELAWARE.
Status: Passed by Senate & House

[SCR 52](#) (Hoffner) Introduced 5/10/2023
DESIGNATING THE MONTH OF MAY 2023 AS "**LUPUS AWARENESS MONTH**" IN THE STATE OF DELAWARE.
Status: Passed by Senate & House

[SCR 53](#) (Wilson) Introduced 5/11/2023
COMMENDING THE **FOOD BANK OF DELAWARE** FOR ITS CONTRIBUTION TO THE STATE OF DELAWARE
Status: Passed in Senate & House

[SCR 54](#) (Hoffner) Introduced 5/11/2023
PROCLAIMING MAY 11, 2023, AS "**HOME CARE ADVOCACY DAY**" IN THE STATE OF DELAWARE.
Status: Passed in Senate & House

[SCR 56](#) (Buckson) Introduced 5/11/2023
RECOGNIZING THE ADVOCACY EFFORTS OF THE **YOUTH-LED KICK BUTTS GENERATION ORGANIZATION**.
Status: Passed by Senate & House

[SCR 58](#) (Pettyjohn) Introduced: 5/18/2023
This Senate Concurrent Resolution designates the month of May 2023 as "**Lyme Disease Awareness Month**" in the State of Delaware.
Status: Passed in Senate & House

[SCR 62](#) (Poore)

Introduced: 5/18/2023

This Resolution recognizes the contributions of the **AmeriHealth Caritas mobile unit** to the communities it serves.

Status: Passed in Senate & House

[SCR 64](#) (Poore)

Introduced: 6/15/2023

This concurrent resolution establishes the **Non-Acute Long-Stay Patient Task Force** to study and make findings and recommendations regarding the needs and options of non-acute Long-Stay hospital patients in need of transition to a more appropriate care setting. Long-Stay is defined as patients that have been in the hospital for 15 days or more and no longer have an acute medical need warranting hospitalization. These individuals are awaiting transition because access to a more appropriate care setting is unavailable. This means there are individuals in acute medical hospital beds that no longer need to be, but various barriers such as lack of insurance coverage, delayed authorization or guardianship, barriers to admission into behavioral health facilities or long-term care, and more, are preventing them from acute medical hospital discharge. This unnecessarily increases health care costs and can have a negative impact on the patients who are missing out on getting the specialized care they need at a more appropriate care facility. This also means longer wait times for other patients in hospital emergency rooms as there is less bed availability. This concurrent resolution establishes a task force to study and make recommendations on these issues.

Status: Passed in Senate & House

[SCR 65](#) (Pinkney)

Introduced: 6/27/2023

This resolution recognizes July 27, 2023, as "**Black Women's Equal Pay Day**" in the State of Delaware and encourages all Delawareans to join in recognizing the contributions Black women have made in every aspect of life, and the sacrifices they have made to champion equality.

Status: Passed in Senate & House

[SCR 67](#) (Hocker)

Introduced: 6/7/2023

This Senate Concurrent Resolution recognizes November 2023 as "**Autoimmune Disease Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 68](#) (Sturgeon)

Introduced: 6/6/2023

This resolution proclaims the first full week of June as the "**Delaware Gun Violence Prevention Week**" in the State of Delaware, in which we remember and honor all survivors of gun violence and ask that all Delawareans consider ways that we as a community can reduce gun violence - including storing all firearms securely.

Status: Passed in Senate & House

[SCR 69](#) (Pinkney)

Introduced: 6/6/2023

This resolution recognizes May 25, 2023, as "**Stop the Bleed Day**" in Delaware.

Status: Passed in Senate & House

[SCR 70](#) (Poore)

Introduced: 6/15/2023

This Resolution designates July 26, 2023, as "**Americans with Disabilities Act Day**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 71](#) (Wilson)

Introduced: 6/8/2023

This Senate Concurrent Resolution recognizes September 2023 as "**Prostate Cancer Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 73](#) (Pinkney)

Introduced: 6/13/2023

This Senate Concurrent Resolution recognizes the importance of community health workers and June 12 – 18 2023, as "**Community Health Improvement Week**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 75](#) (Hocker)

Introduced: 6/15/2023

This Senate Concurrent Resolution proclaims Saturday, October 28, 2023, as "**National First Responders Day**" in the State of Delaware.

Status: Passed in Senate

[SCR 78](#) (Poore)

Introduced: 6/15/2023

This concurrent resolution establishes the **Enhancing Lifelong Community Supports for the Aging, Individuals with Disabilities, and Their Family Caregivers Task Force**.

Status: Passed in Senate & House

[SCR 79](#) (Walsh)

Introduced: 6/15/2023

This Concurrent Resolution recognizes the month of **June 2023 as Myasthenia Gravis Awareness Month** in the State of Delaware.

Status: Passed in Senate & House

[SCR 80](#) (Mantzavinos)

Introduced: 6/15/2023

This Concurrent Resolution recognizes June 15, 2023, as "**Delaware Elder Abuse Awareness Day**" and encourages all of Delaware's citizens to learn about how to protect and nurture our elderly citizens.

Status: Passed in Senate & House

[SCR 81](#) (Lockman)

Introduced: 6/27/2023

This resolution recognizes August 26, 2023, as "**Women's Equality Day**" in Delaware.

Status: Passed in Senate & House

[SCR 83](#) (Huxtable)

Introduced: 6/20/2023

This resolution recognizes August 17, 2023, as "**National Nonprofit Day**" in Delaware.

Status: Passed in Senate & House

[SCR 87](#) (Hocker)

Introduced: 6/22/2023

This Senate Concurrent Resolution proclaims the month of October 2023 as “**Depression Awareness Month**” in the State of Delaware.

Status: Passed in Senate & House

[SCR 94](#) (Mantzavinos)

Introduced: 6/22/2023

This resolution recognizes June 2023 as **Alzheimer's and Brain Awareness Month** and urges all Delawareans to wear purple to help spread awareness of Alzheimer's and all other dementia.

Status: Passed in Senate & House

[SCR 95](#) (McBride)

Introduced: 6/27/2023

This resolution designates the month of June 2023 as “**Cytomegalovirus Awareness Month**” in the State of Delaware and recommends providing those in close contact with infants and children education and informational resources on preventative measures that can be taken to protect infants and children from the virus.

Status: Passed in Senate & House

[SCR 109](#) (Hoffner)

Introduced: 1/25/2024

This concurrent resolution designates February 2024 as “**Turner Syndrome Awareness Month**” in the State of Delaware.

Status: Passed in Senate & House

[SCR 114](#) (Poore)

Introduced: 1/25/2024

Extending the deadline of the enhancing lifelong Community Supports for the aging, individuals with disabilities, and their family caregivers task force. This concurrent resolution extends the deadline for the task force to compile and submit a report from March 2, 2024, to May 31, 2024.

Status: Passed in Senate & House

[SCR 116](#) (Townsend)

Introduced: 1/24/2024

This Senate Concurrent Resolution recognizes February 29, 2024, as “**Rare Disease Day**” in Delaware.

Status: Passed in Senate & House

[SCR 121](#) (Poore)

Introduced: 6/11/2024

This Senate Concurrent Resolution designates the month of June 2024, as “**Eating Disorders Awareness and Prevention Month**” in Delaware and encourages the Department of Health and Social Services to research methods to raise awareness of, prevent, and treat eating disorders.

Status: Passed in Senate & House

[SCR 125](#) (Poore)

Introduced: 3/26/2024

This Senate Concurrent Resolution recognizes March 2024, as “**Kidney Month**” in Delaware.

Status: Passed in Senate & House

[SCR 129](#) (Hoffner)

Introduced: 3/26/2024

This Concurrent Resolution designates March 26, 2024, as "**Epilepsy Awareness Day**" in Delaware and calls upon State agencies and the people of Delaware to undertake suitable efforts to increase epilepsy awareness.

Status: Passed in Senate & House

[SCR 133](#) (Poore)

Introduced: 3/26/2024

This Senate Concurrent Resolution recognizes March 2024 as "**Colorectal Cancer Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 135](#) (Hocker)

Introduced: 3/26/2024

This Senate Concurrent Resolution proclaims Monday, October 28, 2024, as "**National First Responders Day**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 136](#) (Buckson)

Introduced: 3/27/2024

This Resolution recognizes April 2024 as "**Parkinson's Disease Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 144](#) (Richardson)

Introduced: 4/16/2024

This Senate Concurrent Resolution recognizes April 2024 as "**Child Abuse Prevention Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 147](#) (Pettyjohn)

Introduced: 4/24/2024

This Senate Concurrent Resolution recognizes April 2024 as "**Limb Loss and Limb Difference Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 148](#) (Gay)

Introduced: 4/25/2024

This Resolution recognizes May 1, 2024, as "**Maternal Mental Health Awareness Day**" in Delaware.

Status: Passed in Senate & House

[SCR 152](#) (Lawson)

Introduced: 5/7/2024

This Senate Concurrent Resolution recognizes the month of May 2024 as "**Healthy Vision Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 156](#) (Hoffner)

Introduced: 5/16/2024

This resolution requests the Division of Medicaid and **Medical Assistance to study and issue a report assessing the home care industry in Delaware**. The DMMA is requested to use specified home care codes for their report and conduct various analyses. The DMMA is requested to make their report available for the public.

Status: Passed in Senate & House

[SCR 157](#) (Poore)

Introduced: 5/9/2024

This resolution designates May 5-11, 2024, as “**Tardive Dyskinesia Awareness Week**” and encourages anyone experiencing uncontrollable, abnormal, and repetitive movements to consult their healthcare provider regarding their symptoms.

Status: Passed in Senate & House

[SCR 158](#) (Hoffner)

Introduced: 5/16/2024

This Concurrent Resolution proclaims May 16, 2024, as "**Home Care Advocacy Day**" in Delaware to recognize the dedication and hard work of caregivers, to emphasize the critical importance of access to quality home care services for Delaware’s aging residents to live independently and age with dignity, and to advocate for policies and resources that support the delivery of high-quality, person-centered care in the home setting.

Status: Passed in Senate & House

[SCR 159](#) (Hocker)

Introduced: 5/14/2024

This Senate Concurrent Resolution proclaims the month of May 2024 "**Cystic Fibrosis Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 160](#) (Pettyjohn)

Introduced: 5/23/2024

This Senate Concurrent Resolution designates the month of May 2024 as "**Lyme Disease Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 163](#) (Hoffner)

Introduced: 5/23/2024

This Concurrent Resolution designates May 27, 2024, as “**Brain Cancer Awareness Day**” in the State of Delaware. “Brain Cancer Awareness Day” brings attention to the experiences of individuals affected by brain cancer and empowers them to share their stories, which helps overcome stigmas, corrects misconceptions, fosters a supportive community for patients and their families, and helps patients and caregivers to navigate their journey with greater knowledge and support by sharing resources, support networks, and information about available services. “Brain Cancer Awareness Day” is critical to educating the public about brain cancer and to supporting research funding for effective brain cancer treatments including targeted therapies, immunotherapies, and ultimately a cure.

Status: Passed in Senate & House

[SCR 172](#) (Pinkney)

Introduced: 5/23/2024

This resolution recognizes May 23, 2024, as “**Stop the Bleed Day**” in Delaware.

Status: Passed in Senate & House

[SCR 181](#) (Mantzavinos)

Introduced: 6/13/2024

This resolution recognizes June 15, 2024, as "**Elder Abuse Awareness Day**" in Delaware.

Status: Passed in Senate & House

[SCR 182](#) (Buckson)

Introduced: 6/12/2024

This Senate Concurrent Resolution designates the week of June 10-16, 2024, as "**National Men's Health Week**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 183](#) (Wilson)

Introduced: 6/13/2024

This Senate Concurrent Resolution recognizes September 2024 as "**Prostate Cancer Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 186](#) (Pinkney)

Introduced: 6/13/2024

This Senate Concurrent Resolution recognizes the importance of community health workers as well as "**Community Health Improvement Week**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 187](#) (Poore)

Introduced: 6/18/2024

This resolution raises awareness of **Cerebral Palsy** and highlights the need for a statewide cerebral palsy registry in the State of Delaware.

Status: Passed in Senate & House

[SCR 189](#) (Buckson)

Introduced: 6/18/2024

This Senate Concurrent Resolution designates the month of July 2024 as "**American Pride Month**" in the State of Delaware.

Status: Passed in Senate

[SCR 190](#) (Hocker)

Introduced: 6/18/2024

This Senate Concurrent Resolution recognizes November 2024 as "**Autoimmune Disease Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 195](#) (Hocker)

Introduced: 6/25/2024

This Senate Concurrent Resolution proclaims the month of October 2024 as "**Depression Awareness Month**" in the State of Delaware.

Status: Passed in Senate & House

[SCR 197](#) (Walsh)

Introduced: 6/20/2024

This Concurrent Resolution recognizes the month of June 2024 as **Myasthenia Gravis Awareness Month** in the State of Delaware.

Status: Passed in Senate & House

[SCR 198](#) (Mantzavinos)

Introduced: 6/25/2024

This resolution recognizes June 2024, as **Alzheimer's and Brain Awareness Month** and urges all Delawareans to wear purple to help spread awareness of Alzheimer's and all other dementias.

Status: Passed in Senate & House

[SCR 199](#) (McBride)

Introduced: 6/25/2024

This resolution designates October 9-16, 2024, as “**Dyspraxia Awareness Week**” in the State of Delaware, affirming the importance of widespread awareness and support for individuals with dyspraxia, and encouraging expanded efforts to foster a culture of inclusivity and understanding in Delaware.

Status: Passed in Senate & House

[SCR 200](#) (Richardson)

Introduced: 6/25/2024

Requesting a Report from the Delaware Department of Education to follow up on the recommendations contained in the 154-page **Delaware Drug Prevention Curriculum Task Force Report**. Because of the serious consequences of the drug overdose epidemic, this Senate Concurrent Resolution respectfully requests a report from the Delaware Department of Education to follow up on the recommendations contained in the 154-page Delaware Drug Prevention Curriculum Task Force Report.

Status: Passed in Senate & House

[SCR 204](#) (Poore)

Introduced: 6/25/2024

This Resolution designates July 26, 2024, as “**Americans with Disabilities Act Day**” in the State of Delaware.

Status: Passed in Senate & House

[SCR 205](#) (Mantzavinos)

Introduced: 6/26/2024

This Senate Concurrent Resolution directs the Delaware Division of Public Health to develop and release a strategic plan to implement a public health outreach campaign to assess trends, possible messaging, cost of messaging and delivery to communities of need, service needs, resources, and strategies to educate healthcare providers on **Alzheimer's Disease and related dementias**. In crafting the strategic plan, the Division of Public Health is directed to collaborate with various stakeholders, and the plan must include a strategy for identifying and pursuing federal funding opportunities. Finally, the Division of Public Health is directed to submit the strategic plan to the Governor, all members of the General Assembly, the Controller General, and the Director of the Office of Management and Budget no later than November 1, 2024.

Status: Passed in Senate & House

[SCR 206](#) (Richardson)

Introduced: 6/30/2024

This Senate Concurrent Resolution establishes the **Delaware Restoring the Family Unit Task Force**.

Status: Defeated in Senate

[SJR 2](#) (Hansen)

Introduced: 6/1/2023

This resolution designates August 31, 2023, as "**International Overdose Awareness Day**" in the State of Delaware, affirms the importance of overdose awareness, and encourages expanded efforts to keep Delaware residents properly informed of the grief that comes from losing a loved one to overdose.

Status: Signed into Law 8/3/2023

[SJR 8](#) (Hansen)

Introduced: 6/7/2024

This Joint Resolution designates August 31, 2024, as "**International Overdose Awareness Day**" in the State of Delaware and requires that in observance, the State flag be flown at half-staff at State facilities. By recognizing International Overdose Awareness Day, this Joint Resolution affirms the importance of overdose awareness, remembers those who have died from overdose, and acknowledges the grief suffered from losing a loved one to overdose.

Status: Signed into Law 8/29/2024

[SR 11](#) (Buckson)

Introduced: 3/9/2023

This Senate Resolution urges our federal delegation to **support legislation to deschedule marijuana.**

Status: Passed in Senate

[SR 16](#) (Gay)

Introduced: 6/30/2023

This resolution directs the Department of Health and Social Services to prepare reports on the **Purchase of Care Program** and directs the Department of Education to prepare reports on childcare capacity.

Status: Passed in Senate

[SR 18](#) (Hoffner)

Introduced: 3/7/2024

This resolution expresses support for the designation of March 2024 as "**National Multiple Myeloma Awareness Month.**"

Status: Passed in Senate

[SR 23](#) (Hoffner)

Introduced: 6/27/2024

This Resolution designates September 22-29, 2024, as "**Frontotemporal Degeneration Awareness Week**" in the State of Delaware.

Status: Passed in Senate

[SR 24](#) (Poore)

Introduced: 6/30/2024

This resolution recognizes the State's role in assisting the general public in accessing the right level of medical care efficiently and effectively and, specifically, the growing role of urgent care centers in alleviating the burden on the overall healthcare system. The resolution directs the Delaware Department of Health to perform a comprehensive landscape analysis of urgent care centers and submit recommendations on how best to educate the public on choosing the appropriate healthcare setting and the consideration of the development of an Advanced Urgent Care model. This report is due to the General Assembly by January 1, 2025.

Status: Passed in Senate

[SR 25](#) (Gay)

Introduced: 6/30/2024

This Resolution directs the Department of Health and Social Services to prepare reports on the **Purchase of Care Program** and directs the Department of Education to prepare reports on the childcare capacity.

Status: Passed in Senate

House Resolutions:

[HCR 1](#) (Williams)

Introduced: 1/12/2023

This Concurrent Resolution recognizes January 2023 as **Human Trafficking Awareness Month** in Delaware

Status: Passed in House & Senate

[HCR 2](#) (Minor-Brown)

Introduced: 1/18/2023

This Concurrent Resolution commemorates January 22nd, 2023 as the **50th Anniversary of the United States Supreme Court ruling in Roe v. Wade.**

Status: Passed in House & Senate

[HCR 3](#) (Minor-Brown)

Introduced: 1/18/2023

This House Concurrent Resolution designates January 23, 2023, as "**Maternal Health Awareness Day**" in the State of Delaware.

Status: Passed in House & Senate

[HCR 4](#) (Williams)

Introduced: 1/25/2023

Cholangiocarcinoma, also known as bile duct cancer, is a cancer that occurs in the bile ducts in or outside the liver. This Resolution recognizes February 12, 2023 as "**World Cholangiocarcinoma Day**" in Delaware.

Status: Passed in House & Senate

[HCR 5](#) (Minor-Brown)

Introduced: 1/25/2023

This concurrent resolution designates January 22-28, 2023 as **Certified Registered Nurse Anesthetists' (CRNA) Week** in the State of Delaware.

Status: Passed in House & Senate

[HCR 11](#) (Chuckwoucha)

Introduced: 3/9/2023

This Resolution recognizes the pertinent work of social workers throughout Delaware and the entire country, encourages the creation and expansion of Social Work programs, and recognizes March 2023 as **Social Work Month in the State of Delaware.**

Status: Passed in House & Senate

[HCR 13 w/ SA 1](#) (Neal)

Introduced: 3/8/2023

This Concurrent Resolution recognizes the month of **March 2023 as "National Developmental Disability Month" in Delaware.** SA 1 corrects the number of individuals in Delaware living with developmental disabilities and clarifies the impairments associated with developmental disabilities. This Amendment also corrects a typographical error.

Status: Passed in House

[HCR 15](#) (Bolden)

Introduced: 3/14/2023

This House Concurrent Resolution designates March 14, 2023 as "**Equal Pay Day**" in the State of Delaware.

Status: Passed in House & Senate

[HCR 17](#) (Griffith)

Introduced 3/16/2023

This House Concurrent Resolution designates the 21st day of the Month of March, 2023 as "**Rock Your Socks for World Down Syndrome Day**" and celebrates the beauty and contributions that people with Down Syndrome make in Delaware.

Status: Passed in House & Senate

[HCR 21](#) (Griffith)

Introduced 3/28/2023

This concurrent resolution designates March 24, 2023 as **Women and Girls in STEM Day** in the State of Delaware.

Status: Passed in House & Senate

[HCR 31](#) (Neal)

Introduced 3/30/2023

This concurrent resolution commemorates March 31st as **International Transgender Day of Visibility**.

Status: Passed in House & Senate

[HCR 34](#) (Williams)

Introduced 4/4/2023

This House Concurrent Resolution recognizes April 2023 as "**Autism Acceptance and Inclusion Month**" and Autism Delaware's 25 years of service to the people of Delaware.

Status: Passed in House & Senate

[HCR 37](#) (Schwartzkopf)

Introduced 4/27/2023

This Resolution recognizes the month of April 2023 as "**National Donate Life Month**" in Delaware.

Status: Passed in House & Senate

[HCR 42](#) (Longhurst)

Introduced 5/3/2023

This Concurrent Resolution recognizes the month of May 2023 as **Mental Health Awareness Month**.

Status: Passed in House & Senate

[HCR 46](#) (Minor-Brown)

Introduced 5/10/2023

This resolution designates the month of May as "**National Nurses Month**" in Delaware.

Status: Passed in House & Senate

[HCR 55](#) (K. Johnson)

Introduced: 6/7/2023

Directing the Department of Health & Social Services to Issue a **Report Analyzing Long-Term Care**. This Resolution requires the Department of Health and Social Services to submit a report no later than April 1, 2024 detailing recommendations for the revision of the Delaware Code and the Delaware Administrative Code related to long-term care. The report is also required to outline an implementation plan for a person-centered acuity model of long-term care staffing.

Status: Passed in House & Senate

[HCR 56](#) (Morrison)

Introduced: 6/6/2023

This Concurrent Resolution acknowledges **June 2023 as LGBTQ+ Pride Month** in the State of Delaware.

Status: Passed in House & Senate

[HCR 58](#) (Longhurst)

Introduced: 6/13/2023

This Concurrent Resolution commends the **2023 Delaware Behavioral Health Professional of the Year, Dana Carey**, and all of the District/Charter Network Behavioral Health Professionals of the Year.

Status: Passed in House & Senate

[HCR 64](#) (Wilson-Anton)

Introduced: 6/20/2023

This concurrent resolution recognizes June 25, 2023 as **World Vitiligo Day** in Delaware.

Status: Passed in House & Senate

[HCR 69](#) (K. Johnson)

Introduced: 6/27/2023

This resolution requests the **Delaware Department of Health and Social Services submit a report** detailing the findings of the request for information on conducting a statewide needs assessment.

Status: Passed in House & Senate

[HCR 70](#) (Briggs King)

Introduced: 6/27/2023

This Resolution recognizes June 2023 as “**Post-Traumatic Stress Injury Month**” and June 27, 2023, as “Post-Traumatic Stress Injury Day”, and encourages State agencies to continue their work educating victims of assault or abuse, combat, serious accidents, and natural disasters about the causes, symptoms, and treatment of PTSD.

Status: Passed in House & Senate

[HCR 71](#) (Johnson)

Introduced: 6/27/2023

This resolution recognizes November 2023 as **Gluten-Free Diet Awareness Month** in Delaware.

Status: Passed in House & Senate

[HCR 73](#) (Osienski)

Introduced: 6/27/2023

This resolution recognizes the week of June 25th-July 1st, 2023 as "**Deafblind Awareness Week**."

Status: Passed in House & Senate

[HCR 74](#) (Williams)

Introduced: 6/27/2023

This concurrent resolution designates October of each year as “**Dyslexia Awareness Month**” in Delaware. According to the United States National Institute of Health, dyslexia is a learning disability that can hinder a person’s ability to read, write, spell, and sometimes speak. Dyslexia is the most common learning disability in children and persists throughout life with 10 percent of the population or one out of every 10 people in the United States suffering from dyslexia. Children with dyslexia who are identified as dyslexic and provided with effective reading

instruction in kindergarten and first grade, will have significantly fewer problems learning to read at grade level than children who are not identified as dyslexic or provided help until third grade or after. Proper diagnosis, early and appropriate treatment, and support from family, teachers, and friends will greatly increase a child’s academic success and self-esteem; however it is never too late for adults with dyslexia to learn to read, and process and express information more efficiently. October is National Dyslexia Awareness Month, reminding students and their parents that living with dyslexia can be tackled with early intervention. Each year during the month of October, conferences are held around the United States to promote awareness, research, and early identification of dyslexia.

Status: Passed in House & Senate

[HCR 79](#) (Minor-Brown)

Introduced: 1/23/24

This concurrent resolution hereby designates January 23, 2024 as ‘**Maternal Health Awareness Day**’ in the State of Delaware.

Status: Passed in House & Senate

[HCR 82](#) (Minor-Brown)

Introduced: 1/24/2024

This concurrent resolution designates January 21-27, 2024 as **Certified Registered Nurse Anesthetists' (CRNA) Week** in the State of Delaware.

Status: Passed in House & Senate

[HCR 90](#) (Bolden)

Introduced: 3/12/2024

This House Concurrent Resolution designates March 12, 2024 as "**Equal Pay Day**" in the State of Delaware.

Status: Passed in House & Senate

[HCR 93](#) (Morrison)

Introduced: 3/27/2024

This Concurrent Resolution designates March 27, 2024 as **Medical Misdiagnosis Day** in Delaware.

Status: Passed in House & Senate

[HCR 95](#) (Neal)

Introduced: 3/20/2024

This House Concurrent Resolution recognizes the month of March 2024 as “**Multiple Sclerosis Month**” in the State of Delaware.

Status: Passed in House & Senate

[HCR 96](#) (Griffith)

Introduced: 3/21/2024

This House Concurrent Resolution designates the 21st day of the Month of March 2024 as “**Rock Your Socks for World Down Syndrome Day**” and celebrates the beauty and contributions that people with Down syndrome make in Delaware.

Status: Passed in House & Senate

[HCR 102](#) (Williams)

Introduced: 3/27/2024

This House Concurrent Resolution recognizes April 2024 as “**Autism Acceptance and Inclusion Month**” and Autism Delaware's years of service to the people of Delaware.

Status: Passed in House & Senate

[HCR 107](#) (Minor-Brown) Introduced: 4/16/2024
This Resolution recognizes April 11 - 17, 2024, as "**Black Maternal Health Awareness Week**" in Delaware.
Status: Passed in House & Senate

[HCR 111](#) (Romer) Introduced: 4/17/2024
This Resolution recognizes April 2024 as "**Sexual Assault Awareness and Prevention Month**" in the State of Delaware and encourages all Delawareans to learn about and raise awareness of sexual violence.
Status: Passed in House & Senate

[HCR 112](#) (Ramone) Introduced: 4/17/2024
This resolution calls on the General Assembly to encourage the Delaware medical community to educate the citizens of Delaware about the **Forced Organ Harvesting** that occurs in China, in the event they decide to travel to China for an expedited transplant. This resolution also calls on the United States Government to pass laws and regulations prohibiting American medical and pharmaceutical companies from collaborating with Chinese groups that are found to have involvement with forced organ harvesting, as well as banning entry into the United States individuals who have participated in the forced organ harvesting, and allowing prosecution of those persons involved.
Status: Introduced and Assigned to Administration Committee in House

[HCR 113](#) (Heffernan) Introduced: 4/24/2024
This concurrent resolution designates April 22nd, 2024 as "**Earth Day**" in the State of Delaware.
Status: Passed in House & Senate

[HCR 114](#) (Schwartzkopf) Introduced: 4/24/2024
This Resolution recognizes the month of April 2024 as "**National Donate Life Month**" in Delaware.
Status: Passed in House & Senate

[HCR 119](#) (Minor-Brown) Introduced: 4/25/2024
This Concurrent Resolution promotes minority **health awareness and supporting the goals and ideals of National Minority Health Month** in April 2024, which include bringing attention to the health disparities faced by minority populations in the State of Delaware.
Status: Passed in House & Senate

[HCR 122](#) (Heffernan) Introduced: 5/8/2024
This concurrent resolution calls for **parents, childcare centers and preschools to take precautions when allowing kids to play with water bead toys** in light of the significant health concerns they present for Delaware children.
Status: Passed in House & Senate

[HCR 124](#) (Minor-Brown) Introduced: 5/7/2024
This resolution designates May 6-12 as "**National Nurses Week**" in Delaware.

Status: Passed in House & Senate

[HCR 126](#) (Longhurst)

Introduced: 5/15/2024

This Concurrent Resolution recognizes the month of May 2024 as **Mental Health Awareness Month**.

Status: Passed in House & Senate

[HCR 129](#) (Johnson)

Introduced: 5/21/2024

This resolution recognizes the importance and expertise of Direct Support Professionals to the State of Delaware on the occasion of May 21st as “**Direct Support Professional**” **Advocacy Day**, co-sponsored by the Ability Network of Delaware A Team Delaware.

Status: Passed in House & Senate

[HCR 133](#) (Jones Giltner)

Introduced: 5/15/2024

This resolution designates May 12-18 as “**National Skilled Nursing Care Week**” in Delaware.

Status: Passed in House & Senate

[HCR 134](#) (Griffith)

Introduced: 5/16/2024

This House Concurrent Resolution designates May as **National Critical Care Awareness and Recognition Month** in the state of Delaware.

Status: Passed in House & Senate

[HCR 138](#) (Parker Selby)

Introduced: 5/23/2024

This House Concurrent Resolution recognizes the month of May as **Stroke Awareness Month** in the State of Delaware.

Status: Passed in House & Senate

[HCR 140](#) (Longhurst)

Introduced: 5/22/2024

This concurrent resolution recognizes and commends **speech-language pathologists and audiologists** throughout this State for their work with citizens of this State to lead independent, productive, and fulfilling lives.

Status: Passed in House & Senate

[HCR 145](#) (Longhurst)

Introduced: 6/11/2024

This Concurrent Resolution commends the 2024 **Delaware Behavioral Health Professional of the Year**, Shannon Gronau, and all of the District/Charter Network Behavioral Health Professionals of the Year.

Status: Passed in House & Senate

[HCR 148](#) (Heffernan)

Introduced: 6/18/2024

Requesting Medical Professionals to Provide Parents and Caregivers Resources on Infant and Child CPR and Basic First Aid Training. This Concurrent Resolution requests that medical professionals who engage in the provision of prenatal or postnatal care, delivery, or

infant care services to provide parents and caregivers resources on infant and child CPR and basic first aid training.

Status: Passed in House & Senate

[HCR 153](#) (Heffernan)

Introduced: 6/20/2024

This House Concurrent Resolution directs the Department of Education and the Department of Health and Social Services to jointly produce a report outlining the **creation of a student injury monitoring system**. The system is intended to facilitate the sharing of injury information from medical professionals to school nurses, counselors, athletic trainers, and any other necessary medical professionals working in schools, focusing on injuries that require surgery, pain management, physical therapy, and concussions, while ensuring compliance with health information privacy laws. The report is to be submitted by August 31, 2025.

Status: Passed in House & Senate

[HCR 154](#) (K. Johnson)

Introduced: 6/25/2024

This House Concurrent Resolution recognizes September 2024 as **Sickle Cell Disease Awareness Month** in the State of Delaware.

Status: Passed in House & Senate

[HCR 155](#) (Morrison)

Introduced: 6/18/2024

This concurrent resolution recognizes the month of **June 2024 as Pride Month** in the state of Delaware.

Status: Passed in House & Senate

[HCR 157](#) (Minor-Brown)

Introduced: 6/26/2024

Urging Delaware's Higher Education Institutions to **Provide Midwifery Education Programs**. This concurrent resolution urges all higher education institutions in the State of Delaware having nursing programs to pursue and establish ACME-accredited pathways for becoming Certified Nurse-Midwives and Certified Midwives.

Status: Passed in House & Senate

[HCR 158](#) (Williams)

Introduced: 6/25/2024

This concurrent resolution designates October of each year as "**Dyslexia Awareness Month**" in Delaware. According to the United States National Institute of Health, dyslexia is a learning disability that can hinder a person's ability to read, write, spell, and sometimes speak. Dyslexia is the most common learning disability in children and persists throughout life with 10 percent of the population or one out of every 10 people in the United States suffering from dyslexia. Children with dyslexia who are identified as dyslexic and provided with effective reading instruction in kindergarten and first grade, will have significantly fewer problems learning to read at grade level than children who are not identified as dyslexic or provided help until third grade or after. Proper diagnosis, early and appropriate treatment, and support from family, teachers, and friends will greatly increase a child's academic success and self-esteem; however, it is never too late for adults with dyslexia to learn to read, and process and express information more efficiently. October is National Dyslexia Awareness Month, reminding students and their parents that living with dyslexia can be tackled with early intervention. Each year during the

month of October, conferences are held around the United States to promote awareness, research, and early identification of dyslexia.

Status: Passed in House & Senate

[HCR 160](#) (Minor-Brown)

Introduced: 6/26/2024

Urging the **Establishment of a Medical School** in the State of Delaware. This House Concurrent Resolution urges the establishment of a medical school in the State of Delaware; calls for the formation of a formal Steering Group to guide the planning and implementation of a medical school; encourages the pursuit of partnerships with established medical schools and other medical education programs; and commits to supporting efforts to secure necessary funding needed to establish a medical school.

Passed in House & Senate

[HCR 161](#) (Kendra Johnson)

Introduced: 6/26/2024

This resolution recognizes November 2024 as **Gluten-Free Diet Awareness Month** in Delaware.

Passed in House & Senate

[HCR 162](#) (K. Johnson)

Introduced: 6/26/2024

This House Concurrent Resolution recognizes the second week of October 2024 as **Obesity Care Week** in the State of Delaware.

Passed in House & Senate

[HCR 164](#) (Jones Giltner)

Introduced: 6/27/2024

This Resolution recognizes June 2024 as “**Post-Traumatic Stress Injury Month**” and June 27, 2024, as “Post-Traumatic Stress Injury Day”, and encourages citizens of the state to continue their work educating victims of assault or abuse, combat, serious accidents, and natural disasters about the causes, symptoms, and treatment of PTSD.

Passed in House & Senate

[HJR 2](#) (Carson)

Introduced: 6/21/2023

This Resolution provides the official revenue, refund, and unencumbered **funds estimates for Fiscal Year 2023**.

Status: Signed into Law 6/30/2023

[HJR 3](#) (Carson)

Introduced: 6/21/2023

This Resolution provides the official revenue, refund, and unencumbered funds estimates for Fiscal Year 2024.

Status: Signed into Law 6/30/2023

[HR 13](#) (Longhurst)

Introduced: 5/18/2023

This House Resolution recognizes and **commends speech-language pathologists and audiologists** throughout this State for their work with citizens of this State to lead independent, productive, and fulfilling lives.

Status: Passed in House

[HR 19](#) (Romer)

Introduced: 6/29/2023

This resolution recognizes the month of October 2023 as **Breast Cancer Awareness Month**.

Status: Passed in House

[HR 21](#) (Longhurst)

Introduced: 6/29/2023

This resolution recognizes the month of September 2023 as **Alopecia Awareness Month**.

Status: Passed in House

[HR 32](#) (Hilovsky)

Introduced: 6/27/2024

This resolution urges the Department of Human Resources / Division of Statewide Benefits and Insurance Coverage, to collaborate with a health system partner to work with a technology partner to deliver focused and targeted care protocols to a measurable cohort of the State Employee Group Health Insurance Plan to proactively address the growing problem Diabetes and metabolic syndrome present, thereby improving health and decreasing expenses for the enrollees of the Plan.

Status: Passed in House