SENATE DOCKET, NO. 696 FILED ON: 1/20/2011

SENATE . . . . . No. 1087

The Commonwealth of Massachusetts

PRESENTED BY:

Sal N. DiDomenico

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying:

An Act to improve health care access.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Sal N. DiDomenico	*Middlesex, Suffolk, and Essex*
Michael F. Rush	*Suffolk and Norfolk*
Cory Atkins	*14th Middlesex*
Gloria L. Fox	*7th Suffolk*
James B. Eldridge	☐ *[District]* ☐
Mark C. Montigny	☐ *[District]* ☐

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By Mr. DiDomenico, a petition (accompanied by bill, Senate, No. 1087) of Sal N. DiDomenico, Michael F. Rush, Cory Atkins, Gloria L. Fox and other members of the General Court for legislation to improve health care access. Public Health.

The Commonwealth of Massachusetts

An Act to improve health care access.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

SECTION 1. The second paragraph of section 16 of chapter 6A of the General Laws is hereby amended by striking out the words "and (7) the health facilities appeal board" and inserting in place thereof the following words:– (7) the health facilities appeal board; and (8) the health care outreach and education unit.

SECTION 2. Chapter 6A of the General Laws is hereby amended by inserting after section 16S the following section:–

Section 16T. (a) There shall be a health care outreach and education unit within the executive office of health and human services. The unit shall coordinate statewide activities in marketing, outreach, enrollment, coverage retention, and the dissemination of educational materials related to publicly administered or publicly subsidized health care coverage for residents of the Commonwealth. The unit shall collaborate with appropriate agencies, including, but not limited to, the office of medicaid, the department of public health, the division of health care finance and policy, the executive office of labor and workforce development, the commonwealth health insurance connector authority, the executive office of administration and finance, the department of revenue, the division of insurance, the office for refugees and immigrants, the executive office of elder affairs, and the recipients of enrollment and outreach grants pursuant to this section to develop common strategies, best practices, and guidelines for providing informational support and assistance to consumers, non-profit assistance organizations, employers, and businesses.

(b) The secretary shall form an advisory committee made up of a broad cross-section of representatives of non-governmental groups concerned with community outreach, community health education and public health programs. The committee shall consist of appointees from organizations representing varied constituencies including, but not limited to, community health

24 workers, health care consumers, low-income populations, racial and ethnic minority groups, and
25 immigrant groups. The committee shall have representation from all regions of the
26 Commonwealth. The unit shall consult with the advisory committee regarding the grant design
27 and scope, including the application process and minimum grant amounts; best practices; data
28 and reporting requirements; and other issues. The unit shall provide the advisory committee with
29 information on activities submitted by grant recipients. The unit shall work in consultation with
30 the advisory committee to establish and implement an evaluation process to assess the work of
31 the unit and of the grantees. The advisory committee shall meet at least four times a year. All
32 meetings shall be open to the public.

33 (c) Subject to appropriation, the unit shall distribute grants to community and consumer-
34 focused public and private nonprofit groups for outreach, enrollment assistance and retention of
35 coverage assistance for publicly sponsored and publicly subsidized health coverage or safety net
36 programs. The grants shall be awarded to groups statewide, with emphasis in areas and
37 populations in which the division of health care finance and policy has determined a high
38 percentage of uninsured and enrolled individuals and areas in which there are limited health care
39 providers. The grants shall support efforts by the grantees to provide outreach, enrollment and re-
40 enrollment assistance, education on effective and appropriate use of health care coverage, and
41 coverage retention activities directly to consumers who may be eligible for programs including,
42 but not limited to, MassHealth, the Commonwealth Care Health Insurance Program, the
43 Commonwealth Choice program, Prescription Advantage, the Medical Security Plan, the
44 Children's Medical Security Plan, Healthy Start, and the Health Safety Net and who may require
45 individualized support due to geography, ethnicity, race, culture, linguistic capacity, age,
46 economic status, immigration status, or disease status. In awarding the grants, the unit shall
47 provide written guidance to selected grantees with specific strategies of how to expend funds in
48 the most efficient manner to target populations and avoid duplication of activities, including
49 examples of best practices among prior year outreach grant recipients.

50 (d) The unit shall distribute grants to non-profit, community and consumer-focused
51 groups that are able to provide technical assistance for grantees identified in subsection (c). The
52 grants shall support technical assistance that includes informational updates, trainings, and the
53 sharing of best practices for grantee organizations conducting outreach, enrollment assistance,
54 education and coverage retention activities for programs including, but not limited to,
55 MassHealth, the Commonwealth Care Health Insurance Program, the Commonwealth Choice
56 program, Prescription Advantage, the Medical Security Plan, the Children's Medical Security
57 Plan, Healthy Start, and the Health Safety Net.