HOUSE DOCKET, NO. 1198 FILED ON: 1/14/2015

HOUSE . . . . . No. 1821

The Commonwealth of Massachusetts

PRESENTED BY:

Angelo M. Scaccia

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 adoption of the accompanying bill:

An Act to provide services for medically ill and mentally ill persons.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Angelo M. Scaccia	*14th Suffolk*

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HOUSE . . . . . No. 1821

By Mr. Scaccia of Boston, a petition (accompanied by bill, House, No. 1821) of Angelo M. Scaccia for legislation to provide services for medically ill and mentally ill persons. Mental Health and Substance Abuse.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. *1816* OF 2013-2014.]

The Commonwealth of Massachusetts

In the One Hundred and Eighty-Ninth General Court
(2015-2016)

An Act to provide services for medically ill and mentally ill persons.

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

Chapter 19 of the Mass. General Laws is hereby amended by adding, after section one, the following new section: — At least the first twelve and one-half percent of any placements of persons in new department of mental health adult community residential programs receiving operating funds within a fiscal year, including but not limited to placements in existing community residential programs which are not yet operational, shall be provided in community residential programs with medical/nursing care components for persons requiring both long-term mental health services and at least intermediate nursing care services, as defined in the regulations of the department of transitional assistance, regardless of any person's need to have such services provided in an institutional setting, until such time that at least one hundred sixty such placements in community residential programs with medical/nursing care components are

11 provided and maintained, as required by the comprehensive statewide plan developed pursuant to
12 Section 79 of Chapter 169 of the Acts of 1987. In the event that twelve and one-half percent of
13 the new community residential placements funded equals an amount adequate to provide only a
14 fractional portion of, or a whole number plus a fractional portion of, the operating or capital
15 funds necessary to fund a whole number of community residential programs with
16 medical/nursing care components, the department shall provide all additional amount adequate to
17 fund the next higher whole number of community residential programs with medical/nursing
18 care components. For each department of mental health inpatient bed that is closed during a
19 fiscal year, commencing with fiscal year two thousand and sixteen, at any department of mental
20 health inpatient unit(s) composed entirely or almost entirely of clients with intermediate, skilled
21 or chronic disease hospital level nursing care needs, an amount equal to the per diem cost of
22 operating such bed multiplied by the number of days of the fiscal year during which the bed is
23 closed, shall be transferred from the department of mental health 5095-0015 account to the 5046-
24 0000 account for the purpose of funding the operation of community residential programs with
25 medical/nursing components as required under said comprehensive statewide plan, and shall be
26 annualized in subsequent fiscal years in the 5046-0000 account. The department of mental
27 health shall create a master plan to develop at least one hundred sixty community residential
28 placements with medical/ nursing care components, assuming five-year implementation, starting
29 with fiscal year 2017, and requiring the development of at least thirty-two placements per year,
30 subject to appropriation. The department of mental health shall submit the master plan to the
31 house and senate committees on ways and means on December 31, 2016 and shall submit a
32 report regarding implementation of the master plan, adjusted if necessary based on the prior or
33 current fiscal year appropriation, quarterly thereafter. Such plan shall require that programs be

34 comparable in size to other department of mental health community residential programs, and
35 geographically spread throughout the department of mental health regions in the commonwealth.
36 Such plan and quarterly reports shall designate, by department of mental health region, the types
37 of programs to be developed each year, the level of medical/nursing care to be provided on site at
38 each program, the projected starting date for each program, the number of clients in each
39 program, and the names of clients projected for placement in each program. The department
40 shall keep a separate waiting list of persons waiting for community residential placements with
41 medical/ nursing care components. Such list shall be developed by December 31, 2016, and
42 updated monthly.