

HOUSE No. 3929

The Commonwealth of Massachusetts

In the Year Two Thousand Twelve

An Act relative to creating a community based flexible supports Oversight Commission.

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

1 SECTION 1. There shall be a special commission on community based flexible supports
2 administered by the department of mental health. The commission shall conduct an investigation
3 and study of all matters that relate to community based flexible supports, hereinafter referred to
4 in this act as CBFS, including, but not limited to, behavioral health, detoxification, homeless
5 mentally ill, hospital discharge, community tenure, provider contracts, and all other matters
6 related to the program. The commission shall conduct its investigation and study of the program
7 in consultation with a diverse group of stakeholders, including consumers, family members of
8 program clients, advocates, providers, other state agencies, mental health professionals and their
9 professional organizations, legislators, organized labor representatives and members of racial,
10 cultural and linguistic minority groups.

11 SECTION 2. The department shall provide the commission with information and data
12 relative to CBFS. The commission may make recommendations relative to achievement of
13 outcomes measures used in the program including:

14 (a) Percentage change of clients who move to a less restrictive living arrangement;

15 (b) Percentage change of clients who achieve their individualized discharge criteria
16 and are discharged from CBFS in accordance with their discharge plan;

17 (c) Change in the amount of third party revenues collected including without
18 limitation food stamps, fuel assistance and community-based nursing services;

19 (d) Change in community tenure including without limitation reductions in
20 psychiatric hospitalizations, number of hospital days, and amount of time incarcerated.

21 (e) Percentage change of clients who are non-smokers;

22 (f) Percentage change of clients who participate in wellness and fitness activities;

23 (g) Percentage change of clients who are employed;

24 (h) Change in participation in self help groups for addictions; and

25 (i) Percentage change of clients who report satisfaction with their level of
26 participation in their treatment planning.

27 SECTION 3. In addition to investigation and study of the matters set forth in section 2,
28 the commission may make recommendations relative to other measures relevant to evaluating the
29 program including the following:

30 (a) The number of clients demonstrating improvement in each of the areas set forth in
31 section 2 and any other data relative to achievement of outcome measures described in said
32 section;

33 (b) System-wide data on client suicides or attempts and other serious incidents
34 involving clients of the program.

35 (c) Information concerning investigation and resolution of complaints;

36 (d) Provider employee data including training, employee turnover, duration of
37 employee vacancies and worker injuries.

38 (e) Caseload measures, paper work requirements, number of face to face contacts
39 between providers and clients, amount of Medicaid billings and other third party revenues at
40 providers and agencies under the program; and

41 (f) A description of the services provided by all providers and agencies under the
42 program.

43 SECTION 4. The commission shall consist of 18 members: the commissioner of mental
44 health, who shall serve as the chairperson; the house and senate chairs of the joint committee on
45 mental health and substance abuse; 1 member designated by service employees international
46 union local 509; 1 member designated by the association for behavioral healthcare; 13 members
47 appointed by the Governor, 3 of whom shall be individuals who are receiving or have received
48 mental health services under the program, provided that at least 1 of them shall be from
49 MPOWER; 3 of whom shall be family members of individuals who are receiving or have
50 received mental health services under the program, provided that at least one of them shall be
51 from the Massachusetts chapter of the national alliance on mental illness; 3 of whom shall be
52 employees of providers under the program, provided that there shall be 1 representative each
53 from each the private organized labor, private unorganized labor, and public sectors; 1 of whom
54 shall be an advocate from the disability law center specific to providers and services under the
55 program; and 3 of whom shall be individuals with expertise in mental health issues and policy.

56 SECTION 5. The report shall be completed by January 1, 2013 and filed with the clerks
57 of the house of representative and senate, the chairs of the joint committee on mental health and
58 substance and the chairs of the joint committee on health care financing.

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60 SECTION 6. No information provided to or reports issued by the commission under this
61 act shall in any way identify any client of the program.