

HOUSE No. 3710

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, October 24, 2013.

The committee on Health Care Financing to whom were referred the Bill relative to creating a community based flexible supports oversight commission (House, No. 1805), reports recommending that the same ought to pass with an amendment substituting therefore a bill with the same title (House, No. 3710) [Cost: Less than \$100,000].

For the committee,

STEVEN M. WALSH.

HOUSE No. 3710

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

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 relative to
12 CBFS. The commission may make recommendations relative to achievement of outcomes
13 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 and are
16 discharged from CBFS in accordance with their discharge plan;
- 17 (c) Change in the amount of third party revenues collected including without limitation food
18 stamps, fuel assistance and community-based nursing services;
- 19 (d) Change in community tenure including without limitation reductions in psychiatric
20 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;

- (h) Change in participation in self help groups for addictions; and
- (i) Percentage change of clients who report satisfaction with their level of participation in their treatment planning.

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

- (a) The number of clients demonstrating improvement in each of the areas set forth in section 2 and any other data relative to achievement of outcome measures described in said section;
- (b) System-wide data on client suicides or attempts and other serious incidents involving clients of the program.
- (c) Information concerning investigation and resolution of complaints;
- (d) Provider employee data including training, employee turnover, duration of employee vacancies and worker injuries.
- (e) Caseload measures, paper work requirements, number of face to face contacts between providers and clients, amount of Medicaid billings and other third party revenues at providers and agencies under the program; and
- (f) A description of the services provided by all providers and agencies under the program.

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

SECTION 5. The report shall be completed by January 1, 2015 and filed with the clerks of the house of representative and senate, the chairs of the joint committee on mental health and substance and the chairs of the joint committee on health care financing.

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