

SENATE No. 985

The Commonwealth of Massachusetts

PRESENTED BY:

Michael J. Barrett

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 eliminate racial and ethnic health disparities in the Commonwealth.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Michael J. Barrett</i>	<i>Third Middlesex</i>
<i>Carlos Henriquez</i>	<i>5th Suffolk</i>
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>
<i>Kenneth I. Gordon</i>	<i>21st Middlesex</i>
<i>Martha M. Walz</i>	<i>8th Suffolk</i>
<i>Sonia Chang-Diaz</i>	<i>Second Suffolk</i>
<i>Sal N. DiDomenico</i>	<i>Middlesex and Suffolk</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>
<i>Denise Andrews</i>	<i>2nd Franklin</i>
<i>Denise Provost</i>	<i>27th Middlesex</i>
<i>Byron Rushing</i>	<i>9th Suffolk</i>

SENATE No. 985

By Mr. Barrett, a petition (accompanied by bill, Senate, No. 985) of Michael Barrett, Carlos Henriquez, Jason M. Lewis, Kenneth I. Gordon and other members of the General Court for legislation to eliminate racial and ethnic health disparities in the Commonwealth. Public Health.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 1091 OF 2011-2012.]

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act to eliminate racial and ethnic health disparities in the Commonwealth.

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. The second paragraph of section 16 of chapter 6A of the General Laws, as
2 appearing in the 2010 Official Edition, is hereby amended by striking out the words “and, (7) the
3 health facilities appeals board ” and inserting after in place thereof the following words :-

4 (7) the health facilities appeal board; and (8) the office of health equity.

5 SECTION 2. Section 16O of said chapter 6A, as so appearing, is hereby amended by
6 inserting after the word, “recommendations,” in line 3, the following words :- to the director of
7 the office of health equity.

8 SECTION 3. Said section 16O of said chapter 6A, as so appearing, is hereby further
9 amended by striking out, in line 15, the figure “37” and inserting in place thereof the following
10 figure :- 38.

11 SECTION 4. Said section 16O of said chapter 6A, as so appearing, is hereby further
12 amended by inserting after the word “ officio ”, in line 19, the following words :- ; the director of
13 the office of health equity, or the director’s designee.

14 SECTION 5. Said chapter 6A is hereby amended by inserting after section 16S the
15 following section: –

16 Section 16T. There shall be an office of health equity within the executive office of
17 health and human services. The office shall be in the charge of a director, who shall report
18 directly to the secretary of health and human services. The health disparities council, described in
19 section 16O, shall serve as an advisory board to the office of health equity.

20 SECTION 6. The General Laws are hereby amended by inserting after chapter 111N the
21 following chapter:—

22 CHAPTER 111O . OFFICE OF HEALTH EQUITY.

23 Section 1. As used in this chapter the following words shall, unless the context clearly
24 requires otherwise, have the following meanings: —

25 “Disparities” or “Racial and ethnic health and health care disparities”, differences in the
26 incidence, prevalence, mortality and burden of diseases and other adverse health conditions that
27 exist among specific racial and ethnic groups.

28 “Office”, the office of health equity, as established by section 16T of chapter 6A.

29 Section 2. The office, subject to appropriation, shall coordinate all activities of the
30 commonwealth to eliminate racial and ethnic health and health care disparities. The office shall
31 set goals for the reduction of disparities and prepare an annual plan for the commonwealth to
32 eliminate disparities.

33 Section 3. The office, subject to appropriation, shall collaborate with other state agencies
34 of the commonwealth on disparities reduction initiatives to address the social factors that
35 influence health inequality. These state agencies shall include, but shall not be limited to, the
36 executive office of health and human services, the executive office of housing and economic
37 development, the executive office of public safety and security, the executive office of energy
38 and environmental affairs, the Massachusetts Department of Transportation, the executive office
39 of labor and workforce development and the executive office of education.

40 The office shall facilitate communication and partnership between these agencies to
41 develop greater understanding of the intersections between agency activities and health
42 outcomes. The office shall facilitate development of interagency initiatives to address the social
43 and economic determinants of health and key health disparities issues including, but not limited
44 to, healthcare access and quality; housing availability and quality; transportation availability,
45 location and cost; community policing and safe spaces; air, water, land usage and quality;
46 employment and workforce development; and education access and quality.

47 Section 4. The office, subject to appropriation, shall evaluate the effectiveness of
48 programs and interventions to eliminate health disparities, identifying best practices and model
49 programs for the state.

50 Section 5. The secretary of health and human services shall annually, on the day assigned
51 for submission of the budget to the general court under section 7H of chapter 29, designate major
52 initiatives of the commonwealth affecting the health and health care of residents of the
53 commonwealth. These initiatives may include any activity of the commonwealth including, but
54 not limited to, activities of the executive office of health and human services, the executive
55 office of housing and economic development, the executive office of public safety and security,
56 the executive office of energy and environmental affairs, the Massachusetts Department of
57 Transportation, the executive office of labor and workforce development and the executive office
58 of education.

59 For each major initiative, the office shall prepare a disparities impact statement
60 evaluating the likely positive or negative impact of each initiative on eliminating or reducing
61 racial and ethnic health disparities. The statements shall, to the extent possible, include
62 quantifiable impacts and evaluation benchmarks. The statements shall be posted on the official
63 internet site of the executive office of health and human services and submitted to the clerks of
64 the house of representatives and senate, members of the health disparities council, appropriate
65 legislative committees and the house and senate committees on ways and means.

66 Section 6. The office, subject to appropriation, shall prepare an annual health disparities
67 report card. The report card shall evaluate the progress of the commonwealth toward eliminating
68 racial and ethnic health disparities, using, where possible, quantifiable measures and comparative
69 benchmarks. The report card shall report on progress on a regional basis, based on regions
70 designated by the office. The office shall hold public hearings in several regions of the state to
71 get public information on the topics of the report card. The report card shall be delivered to the
72 governor, speaker of the house of representatives and president of the senate and the members of
73 the health disparities council, established under section 16O of chapter 6A, before July 1 of each
74 year and shall be posted on the official internet site of the office or executive office of health and
75 human services.

76 SECTION 7. Section 5 of Chapter 6D of chapter 224 of the acts of 2012, is hereby
77 amended by adding the following sentence:- The council shall also establish goals that are
78 intended to reduce health care disparities in racial, ethnic and disabled communities and in doing
79 so shall seek to incorporate the recommendations of the health disparities council and the office
80 of health equity.