

**SENATE . . . . . No. 608**

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Jason M. Lewis*

*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>Jason M. Lewis</i>	<i>Fifth Middlesex</i>
<i>Benjamin Swan</i>	<i>11th Hampden</i>
<i>Linda Dorcena Forry</i>	<i>First Suffolk</i>
<i>Sal N. DiDomenico</i>	<i>Middlesex and Suffolk</i>
<i>Tricia Farley-Bouvier</i>	<i>3rd Berkshire</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>
<i>Sonia Chang-Diaz</i>	<i>Second Suffolk</i>
<i>Byron Rushing</i>	<i>9th Suffolk</i>
<i>Barbara A. L'Italien</i>	<i>Second Essex and Middlesex</i>
<i>James J. O'Day</i>	<i>14th Worcester</i>
<i>Evandro C. Carvalho</i>	<i>5th Suffolk</i>
<i>Jeffrey Sánchez</i>	<i>15th Suffolk</i>
<i>Mark C. Montigny</i>	<i>Second Bristol and Plymouth</i>

**SENATE . . . . . No. 608**

---

By Mr. Lewis, a petition (accompanied by bill, Senate, No. 608) of Jason M. Lewis, Benjamin Swan, Linda Dorcena Forry, Sal N. DiDomenico and other members of the General Court for legislation to eliminate racial and ethnic health disparities in the Commonwealth. Health Care Financing.

---

**The Commonwealth of Massachusetts**

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

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 2014 Official Edition, is hereby amended by striking out the words “and, (7) the  
3 health facilities appeals board ” and inserting 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 13, 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 16V, as  
15 inserted by section 17 of chapter 38 of the acts of 2014, the following section: –

16 Section 16W. (a) As used in this section the following words shall, unless the context  
17 clearly requires otherwise, have the following meanings: –

18 “Disparities”, differences in the incidence, prevalence, mortality and burden of diseases  
19 and other adverse health conditions that exist among specific racial and ethnic groups.

20 “Office”, the office of health equity.

21 (b) There shall be an office of health equity within the executive office of health and  
22 human services. The office shall be in the charge of a director, who shall report directly to the  
23 secretary of health and human services. The health disparities council, established in section  
24 16O, shall serve as an advisory board to the office of health equity.

25 (c) The office, subject to appropriation, shall coordinate all activities of the  
26 commonwealth to eliminate racial and ethnic health and health care disparities. The office shall  
27 set goals for the reduction of disparities and prepare an annual plan for the commonwealth to  
28 eliminate disparities.

29 (d) The office, subject to appropriation, shall collaborate with other state agencies of the  
30 commonwealth on disparities reduction initiatives to address the social factors that influence  
31 health inequality. The state agencies shall include, but shall not be limited to, the executive office

32 of health and human services, the executive office of housing and economic development, the  
33 executive office of public safety and security, the executive office of energy and environmental  
34 affairs, the Massachusetts Department of Transportation, the executive office of labor and  
35 workforce development and the executive office of education. The office shall facilitate  
36 communication and partnership between these agencies to develop greater understanding of the  
37 intersections between agency activities and health outcomes. The office shall facilitate  
38 development of interagency initiatives to address the social and economic determinants of health  
39 and key health disparities issues including, but not limited to, healthcare access and quality;  
40 housing availability and quality; transportation availability, location and cost; community  
41 policing and safe spaces; air, water, land usage and quality; employment and workforce  
42 development; and education access and quality.

43 (e) The office, subject to appropriation, shall evaluate the effectiveness of programs and  
44 interventions to eliminate health disparities, identifying best practices and model programs for  
45 the state.

46 (f) The secretary of health and human services shall annually, on the day assigned for  
47 submission of the budget by the governor to the general court pursuant to section 7H of chapter  
48 29, designate major initiatives of the commonwealth affecting the health and health care of  
49 residents of the commonwealth. The initiatives may include any activity of the commonwealth  
50 including, but not limited to, activities of the executive office of health and human services, the  
51 executive office of housing and economic development, the executive office of public safety and  
52 security, the executive office of energy and environmental affairs, the Massachusetts Department  
53 of Transportation, the executive office of labor and workforce development and the executive  
54 office of education.

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

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

72 SECTION 6. Section 5 of chapter 6D, as appearing in the 2014 Official Edition, is hereby  
73 amended by adding the following sentence:- The council shall establish goals that are intended to  
74 reduce health care disparities in racial, ethnic and disabled communities and in doing so shall  
75 seek to incorporate the recommendations of the health disparities council and the office of health  
76 equity.