# **SENATE . . . . . . . . . . . . . . . . No. 1307**

### The Commonwealth of Massachusetts

PRESENTED BY:

Susan L. Moran

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 establishing a task force for person centered mental health care.

#### PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Susan L. Moran	Plymouth and Barnstable	
Steven G. Xiarhos	5th Barnstable	3/8/2021
Michael O. Moore	Second Worcester	3/9/2021

## **SENATE . . . . . . . . . . . . . . . . No. 1307**

By Ms. Moran, a petition (accompanied by bill, Senate, No. 1307) of Susan L. Moran, Steven G. Xiarhos and Michael O. Moore for legislation to establish a task force for person centered mental health care. Mental Health, Substance Use and Recovery.

### The Commonwealth of Alassachusetts

In the One Hundred and Ninety-Second General Court (2021-2022)

An Act establishing a task force for person centered mental health care.

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

Chapter 6A of the General Laws is hereby amended by adding the following section:-

Section 16CC. (a) There shall be a standing interagency mental health task force located within, but not subject to the control of, the executive office of health and human services. The member agencies shall include the department of mental health; the department of public health; department of developmental services; division of insurance; office of medicaid; department of housing and community development; mental health advocates who are not under contract with any of the member agencies; members from provider agencies who offer services to adults with mental illness; members from acute care hospitals; members from provider agencies who provide care coordination services; individuals with direct experience navigating the mental health system in the Commonwealth. The task force shall have representation from members living in diverse regions in the Commonwealth.

(b) The task force shall identify: barriers to accessing continuous mental health care from birth to adulthood; methods to improve continuity of care across age groups; methods to improve continuity of care for individuals with dual diagnosis; methods to improve continuity of care for individuals receiving or attempting to receive services from multiple departments; methods to streamline eligibility for overlapping service areas; methods to streamline funding streams; methods to improve funding streams to meet clinical needs; methods to improve care coordination; strategies to reduce administrative burdens for individuals attempting to access or accessing mental health services; processes for health information exchange and data sharing; processes for ongoing communication between agencies to provide a full array of services to individuals accessing services; processes for ongoing communication between agencies to ensure continued improvement in mental health services and accessibility of those services.

(c) The task force shall submit a report annually by July 1 to the governor and the clerks of the senate and house, the senate and house committees on ways and means, the joint committee on children, families, and persons with disabilities, the joint committee on health care financing and the joint committee on public health. The report shall include: (i) interagency goals; (ii) periodic benchmarks for, and strategies to achieve, any stated goals; (iii) proposals for statutory and regulatory changes to reduce barriers to mental health care or improve interagency cooperation; (iv) cost estimates of any recommendations; (v) any additional recommendations or findings as related to subsection (b).