

**SENATE . . . . . No. 1311**

**The Commonwealth of Massachusetts**

PRESENTED BY:

***Marc R. Pacheco***

*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 relative to creating a pilot program to transfer high acuity behavioral health and dual diagnosis patients away from overcrowded emergency departments.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Marc R. Pacheco</i>	<i>First Plymouth and Bristol</i>	
<i>Carol A. Doherty</i>	<i>3rd Bristol</i>	<i>3/9/2021</i>
<i>Patrick Joseph Kearney</i>	<i>4th Plymouth</i>	<i>3/9/2021</i>
<i>Michael D. Brady</i>	<i>Second Plymouth and Bristol</i>	<i>3/9/2021</i>
<i>Walter F. Timilty</i>	<i>Norfolk, Bristol and Plymouth</i>	<i>3/9/2021</i>
<i>John J. Cronin</i>	<i>Worcester and Middlesex</i>	<i>4/9/2021</i>
<i>Paul R. Feeney</i>	<i>Bristol and Norfolk</i>	<i>4/13/2021</i>
<i>John F. Keenan</i>	<i>Norfolk and Plymouth</i>	<i>4/20/2021</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>4/28/2021</i>
<i>Erika Uytterhoeven</i>	<i>27th Middlesex</i>	<i>4/28/2021</i>
<i>John C. Velis</i>	<i>Second Hampden and Hampshire</i>	<i>5/25/2021</i>

**SENATE . . . . . No. 1311**

By Mr. Pacheco, a petition (accompanied by bill, Senate, No. 1311) of Marc R. Pacheco, Carol A. Doherty, Patrick Joseph Kearney, Michael D. Brady and other members of the General Court for legislation relative to creating a pilot program to transfer high acuity behavioral health and dual diagnosis patients away from overcrowded emergency departments. Mental Health, Substance Use and Recovery.

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 1164 OF 2019-2020.]

**The Commonwealth of Massachusetts**

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

An Act relative to creating a pilot program to transfer high acuity behavioral health and dual diagnosis patients away from overcrowded emergency departments.

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

1 Chapter 19 of the General Laws, as appearing in the 2018 Official Edition, is hereby  
2 amended by adding the following sections at the end thereof: -

3 Section XX. For the purposes of this section, the term “dual diagnosis” shall mean a  
4 mental illness and a substance abuse problem occurring simultaneously.

5 There shall be, on the campus of Taunton State Hospital, a Behavioral Health Emergency  
6 Department Relief Pilot Program to accept medically stable, high acuity behavioral health and  
7 dual diagnosis patients from emergency departments in the Southeast region. Medically stable  
8 patients presenting in an Emergency Department with a high acuity behavioral health condition

9 or who have a dual diagnosis should be transferred to this pilot program if another appropriate  
10 setting cannot be located within four hours of admission to the emergency department. Patients  
11 admitted to the pilot program will be cared for until an appropriate placement is found that meets  
12 the patients' needs, which shall be no more than fourteen days following admission to the pilot  
13 program. The program shall be operated by the department and staffed by the department  
14 registered nurses, psychiatrists and other staff as needed to provide appropriate care, with  
15 program protocols and a staffing plan to be developed during the first six months following  
16 passage of this legislation by a committee including the department, the department of public  
17 health, the national alliance on mental illness, the Massachusetts Nurses Association and the  
18 emergency nurses association. For the purposes of this pilot program, Taunton State Hospital  
19 shall be allowed to accept patients classified under Section 12 of Chapter 123 of the General  
20 Laws. The pilot program shall operate for a period of two years, with a report to be filed by the  
21 department with the Joint Committee on Mental Health, Substance Use and Recovery during  
22 year two of the program, to evaluate the success of the program in decreasing emergency  
23 department overcrowding in the Southeast Region, and the quality of care provided in the  
24 program. The report shall be drafted by an independent entity, utilizing data from the department  
25 and the local hospitals in the Southeast Region.