

# SENATE . . . . . No. 2865

Senate, July 11, 2024 -- Text of amendment (34) (offered by Senator Comerford) to the Ways and Means amendment (Senate, No. 2856) to the Senate Bill relative to economic development

## The Commonwealth of Massachusetts

In the One Hundred and Ninety-Third General Court  
(2023-2024)

1 by adding the following section:-

2 “SECTION 134A. Chapter 111 of the General Laws is hereby amended by striking out  
3 section 27D, as appearing in the 2022 Official Edition, and inserting in place thereof the  
4 following section:-

5 Section 27D. (a) As used in this section, the following words shall have the following  
6 meanings unless the context clearly requires otherwise:-

7 “Board of health”, any body politic or political subdivision of the commonwealth that  
8 acts as a board of health, public health commission or a health department for a municipality,  
9 region or district, including, but not limited to, municipal boards of health, regional health  
10 districts established pursuant to section 27B and boards of health that share services pursuant to  
11 section 4A of chapter 40.

12 “Foundational capabilities”, cross-cutting skills and capacities needed to support basic  
13 public health programs and other protections and activities including, but not limited to: (i)  
14 assessment and surveillance; (ii) emergency preparedness and response; (iii) policy development;  
15 (iv) communications; (v) community partnership development; (vi) organizational administrative

16 competences; (vii) data-driven interventions; or (viii) accountability and performance  
17 management.

18 “Foundational public health services”, a nationally recognized framework for a minimum  
19 set of public health services, including, but not limited to, public health programs and  
20 foundational capabilities.

21 “Public health programs”, programs that include, but are not limited to: (i) communicable  
22 disease control; (ii) public health nursing services; (iii) epidemiology; (iv) food and water  
23 protection; (v) chronic disease and injury prevention; (vi) environmental public health; (vii)  
24 maternal, child and family health; or (viii) access to and linkage with clinical care, where  
25 applicable.

26 (b) The department, in consultation with municipalities and other stakeholders, shall  
27 establish a state action for public health excellence program to: (i) provide uniform access for  
28 every resident of the commonwealth to foundational public health services; provided, however,  
29 that foundational public health services shall further equity, including for historically  
30 underrepresented communities; (ii) assist boards of health to adopt practices to improve the  
31 efficiency and effectiveness of the delivery of foundational public health services; (iii) develop a  
32 set of standards for foundational public health services across the commonwealth; and (iv)  
33 promote and provide adequate resources for boards of health that shall include, but shall not be  
34 limited to:

35 (A) supporting boards of health to meet the standards established pursuant to clause (iii)  
36 and subsection (c) to improve municipal and regional health systems; (B) increasing cross-  
37 jurisdictional sharing of public health programs to strengthen the service delivery capabilities of

38 municipal and regional public health systems; (C) improving planning and system accountability  
39 of municipal and regional public health systems, including, but not limited to, statewide data  
40 collection and reporting systems; (D) establishing workforce credentialing standards, including,  
41 but not limited to, education and training standards for municipal and regional public health  
42 officials and staff; and (E) expanding access to professional development, training and technical  
43 assistance for municipal and regional public health officials and staff.

44 (c) The standards for local foundational public health services developed pursuant to  
45 clause (iii) of subsection (b) shall include, but not be limited to, : (i) standards for inspections,  
46 epidemiology and communicable disease investigation and reporting, permitting and other local  
47 public health responsibilities as required by law or under regulations of the department or the  
48 department of environmental protection; (ii) workforce education, training and credentialing  
49 standards; and (iii) standards for contributing required data. The standards shall consider  
50 applicable national standards and shall be developed in consultation with local boards of health,  
51 public health organizations, academic experts in the field of public health and members of the  
52 special commission on local and regional public health established in chapter 3 of the resolves of  
53 2016.

54 (d) (i) Subject to appropriation, boards of health shall implement and comply with the  
55 standards developed pursuant to subsections (b) and (c), individually or through cross-  
56 jurisdictional sharing of public health programs in the form of comprehensive public health  
57 districts, formal shared services or other arrangements for sharing public health programs.

58 (ii) Annually, not later than August 31, boards of health shall submit a report to the  
59 department including information demonstrating compliance with the standards pursuant to  
60 subsections (b) and (c) during the preceding fiscal year.

61 (e) Subject to appropriation, the department and the department of environmental  
62 protection shall, according to each agency's jurisdiction and authority, provide comprehensive  
63 core public health educational and training opportunities and technical assistance to municipal  
64 and regional public health officials and staff to support such officials in obtaining credentials and  
65 foundational capabilities required by the standards developed pursuant to subsections (b) and (c);  
66 provided, that said educational and training opportunities and technical assistance shall be  
67 offered in diverse geographic locations throughout the commonwealth or online. The department  
68 and the department of environmental protection may contract with other state agencies or  
69 external entities to provide said educational and training opportunities and technical assistance  
70 and shall provide such training opportunities and technical assistance free of charge.

71 (f) (1) Subject to appropriation, the department shall provide funds to boards of health to  
72 implement and comply with the standards developed pursuant to subsections (b) and (c),  
73 including through cross-jurisdictional sharing of public health programs in the form of  
74 comprehensive public health districts, formal shared services and other arrangements for sharing  
75 public health programs.

76 (2) The funds under this subsection may be used to provide:

77 (i) grants and technical assistance to municipalities that demonstrate limited operational  
78 capacity to meet local public health responsibilities as required by law or regulations;

79 (ii) competitive grants to increase the efficiency and effectiveness of the delivery of  
80 public health programs across not less than 2 municipalities through:

81 (A) expanding shared services arrangements to include more municipalities;

82 (B) expanding shared services arrangements to provide a more comprehensive and  
83 equitable set of public health programs or sustainable business model; or

84 (C) supporting new cross-jurisdictional sharing arrangements; provided, however, that  
85 grants provided pursuant to this clause shall supplement and shall not replace existing state,  
86 local, private or federal funding to boards of health and regional health districts; provided  
87 further, that boards of health shall apply for funds pursuant to this clause in a manner determined  
88 by the department; provided further, that the application shall include, but not be limited to: (1) a  
89 description of how the applicant will increase the efficiency and effectiveness in the delivery of  
90 public health programs; (2) certification by the applicant that, at the time of the application, the  
91 applicant meets or will use funding to meet workforce standards as determined by the  
92 department; (3) certification that the applicant shall submit written documentation on the  
93 implementation of systems to increase efficiency in providing local public health programs,  
94 including data, to the department in a manner to be prescribed by the department; and (4) the  
95 applicant's plan for the long-term sustainability of strengthening local public health programs;  
96 provided further, that the department shall adopt rules, regulations or guidelines for the  
97 administration and enforcement of this clause, including, but not limited to, establishing  
98 applicant selection criteria, funding priorities, application forms and procedures, grant  
99 distribution and other requirements; and provided further, that not less than 33 per cent of the

100 grants awarded shall be distributed to municipalities with a median household income below the  
101 median income of the commonwealth; and

102 (iii) annual non-competitive funding to ensure that all residents of the commonwealth are  
103 provided with foundational public health services that meet or exceed the standards set pursuant  
104 to this section; provided, however, that funds provided pursuant to this clause shall be distributed  
105 based on the level of implementation of the standards established in this section and using a  
106 formula based on population, level of cross-jurisdictional sharing and sociodemographic data;  
107 provided further, that to receive funding pursuant to this clause, a board of health shall submit an  
108 annual report to the department of public health and department of environmental protection that:  
109 (A) demonstrates progress or implementation of the standards; and (B) confirms that funding  
110 provided pursuant to this clause shall supplement and shall not replace existing state, local,  
111 private or federal funding to boards of health and regional health districts; provided further, that  
112 the report shall not require data that is otherwise reported to the department under subsection (d);  
113 provided further, local governments shall be granted relief from the department for good cause,  
114 including, but not limited to economic or fiscal hardship; and provided further, that data  
115 demonstrating implementation and compliance with the standards shall be submitted in a form  
116 prescribed by the department.

117 (g) Subject to appropriation, the department shall develop a system to provide for  
118 increased standardization, integration and unification of public health reporting and systems for  
119 the measuring of standard responsibilities of boards of health, including, but not limited to,  
120 inspections, code enforcement, communicable disease management and local regulations. The  
121 system shall be developed in coordination with the department of environmental protection.  
122 Where feasible and in compliance with state and federal privacy requirements, the data and an

123 analysis of the data shall be available on the department's website in a form that allows the  
124 public to conduct further analysis; provided, however, that any such published data shall exclude  
125 personal identifying information.

126 (h) The department shall estimate the amount of funds necessary to meet the  
127 requirements of this section for each fiscal year. The department shall report the estimate to the  
128 secretary of administration and finance and the house and senate committees on ways and means  
129 for the upcoming fiscal year in advance of the day assigned for submission of the budget by the  
130 governor to the general court pursuant to section 7H of chapter 29 and shall publish the estimate  
131 on the department's website.

132 (i) In the event of an outbreak of a disease or health care situation important to the public  
133 health, as determined by the commissioner or the commissioner of the department of  
134 environmental protection, affecting more than 1 board of health, the department may coordinate  
135 the affected boards of health, assemble and share data on affected residents and organize the  
136 public health response within and across the affected communities.

137 (j) Biennially, not later than December 1, in every even numbered year, the department,  
138 in consultation with the department of environmental protection, shall submit a report detailing  
139 the impact of the state action for public health excellence program established under subsection  
140 (b), the status of the local public health programs and their ability to meet the requirements under  
141 this section, including, but not limited to: (i) the number of board of health and regional health  
142 district officials and staff that meet workforce standards as determined by the department; (ii) the  
143 number of board of health and regional health district officials and staff that attended educational  
144 and training opportunities; (iii) the number of boards of health and regional health districts that

145 are in compliance with data reporting requirements under this section; and (iv) the number of  
146 municipalities participating in regional public health collaborations. In preparing the report, the  
147 department shall consult with the department of environmental protection. The report shall be  
148 filed with the clerks of the house of representatives and the senate, the house and senate  
149 committees on ways and means and the joint committee on public health and be publicly posted  
150 on the websites of the department and the department of environmental protection.

151 (k) Notwithstanding any general or special law to the contrary, if the commissioner, the  
152 commissioner of the department of environmental protection or their authorized representatives,  
153 determine that failure to meet standards established under subsections (b) and (c) in a timeframe  
154 consistent with the timeframe established in subsection (d), constitutes a threat to public health,  
155 they shall, in writing, notify the appropriate board of health of such determination and request  
156 that the board of health, in writing, notify the department of actions taken to effect appropriate  
157 protection. If the commissioner is not so notified, or if after notification the commissioner  
158 determines the actions are not sufficient to protect public health, the department may restrict  
159 future funding provided under clause (iii) of subsection (f) and shall report these insufficiencies  
160 in its report issued under subsection (i).

161 (l) Nothing in this section shall limit the authority or responsibility of a board of health  
162 otherwise established pursuant to the general laws, including, but not limited to, section 127A.”;  
163 and

164 by inserting after section 170 the following 3 sections:-

165 “SECTION 170A. (a) Not more than 1 year after the effective date of this act and before  
166 the adoption of any regulation for the administration of the state action for public health



167 excellence program pursuant to section 27D of chapter 111 of the General Laws, as inserted by  
168 section 134A, the department of public health shall hold not fewer than 3 public hearings in  
169 diverse geographic locations throughout the commonwealth or online to identify ways to  
170 improve the efficiency and effectiveness of the delivery of local public health services, in  
171 alignment with the recommendations of the special commission on local and regional public  
172 health established in chapter 3 of the resolves of 2016.

173 (b) Not later than March 31, 2025, the department of public health shall submit a report to  
174 the clerks of the house of representatives and the senate, the house and senate committee on  
175 ways and means and the joint committee on public health. The report shall include an analysis of  
176 needs, opportunities, challenges, timeline and cost analysis for the implementation of section  
177 27D of said chapter 111, as inserted by section 134A.

178 SECTION 171A. The special commission on local and regional public health established  
179 in chapter 3 of the resolves of 2016 is hereby revived and continued to December 31, 2024. As  
180 soon as possible following the effective date of this act, the department shall convene the special  
181 commission at least once to review the changes made to section 27D of chapter 111 of the  
182 General Laws, as inserted by section 134A, and funding available to support and enhance the  
183 commonwealth's local and regional public health system.

184 SECTION 172A. The standards for foundational public health services developed  
185 pursuant to subsections (b) and (c) of section 27D of chapter 111 of the General Laws, as  
186 inserted by section 134A, shall be consistent with the recommendations of the report of the  
187 special commission on local and regional and public health approved in June 2019 and shall be  
188 implemented and complied with by a phased schedule adopted by the department of public

189 health. The department of public health shall publish a list of the local public health standards  
190 established pursuant to said subsections (b) and (c) of said section 27D of said chapter 111, as  
191 inserted by said section 134A, not later than 90 days after the effective date of this act.”.