

2023-2024 Legislative Endorsements

In addition to the [bills that MAMH has worked with legislators to file and is leading advocacy efforts](#) on, MAMH also endorses the following bills for the 2023-24 legislative session. These bills support four goals – *expanding access, legal reform, promoting well being, and workforce*. With a focus on prevention and ongoing concerns of parity, MAMH will work with our partners and legislators to advance each of these priorities:



Expanding Access

An Act relative to transparency of consumer health insurance rights | [H.937](#) (Rep. Balser) / [S.602](#) (Sen. Creem)

To help individuals and advocates report potential mental health parity violations, this bill requires all private insurers regulated by the Division of Insurance to include a notation on their members' enrollment cards that states that their health plan is fully insured. [Lead advocacy contacts: Health Law Advocates, Massachusetts Psychological Association]

An Act providing continuity of care for mental health treatment | [H.936](#) (Reps. Balser and Farley-Bouvier) / [S.657](#) (Sen. Keenan)

Should an individual be engaged in a course of treatment with a licensed mental health provider, this bill allows the person to continue treatment with that provider as an out-of-network option should the provider become disenrolled from the plan or if the individual's insurance carrier changes for any reason. [Lead advocacy contact: Mental Health Legal Advisors Committee (MHLAC)]

An Act requiring mental health parity for disability insurance policies | [H.940](#) (Rep. Balser) / [S.669](#) (Sen. Lovely)

This bill requires parity in disability insurance policies providing income replacement benefits, so that people with disabling behavioral health conditions are treated the same as people with disabling physical health conditions. [Lead advocacy contact: MHLAC]

An Act relative to access to care for serious mental illness | [H.984](#) (Rep. Decker) / [S.631](#) (Sen. Eldridge)

This bill prohibits private health insurance plans regulated by the MA Division of Insurance (DOI) from requiring prior authorization or step therapy for drugs prescribed to treat a severe and disabling mental health condition.

Legal Reform

An Act transferring Bridgewater State Hospital from the Department of Correction to the Department of Mental Health | [H.2985](#) (Rep. Balser) / [S.1239](#) (Sen. Creem)

This bill transfers the administration and oversight of Bridgewater State Hospital (BSH), the state psychiatric facility for people detained by the criminal legal system, from the Department of Corrections (DOC) to DMH, the state mental health authority. Every other state in the country provides secure psychiatric treatment in non-carceral settings for this population. [Lead advocacy contacts: National Alliance for Mental Illness (NAMI) Mass and MAMH]

An Act ensuring access to addiction services | [H.1966](#) (Rep. Balser) / [S.1247](#) (Sen. Friedman)

This bill requires the Executive Office of Health and Human Services (EOHHS) to maintain an adequate supply of beds for the treatment of alcohol or substance use conditions pursuant to G.L. c. 123, § 35 at Department of Public Health (DPH) or DMH-licensed or approved facilities (not at jails or prisons). If the court makes a specific finding that the only

appropriate setting for treatment is a secure facility, then an individual may be committed to a DPH or DMH-licensed or approved *secure* facility. [Lead advocacy contact: Prisoners' Legal Services (PLS)]

An Act relative to ending unnecessary hospitalizations and reducing emergency department boarding | [H.1980](#) (Rep. Decker)

This bill will reduce emergency department (ED) boarding and unnecessary involuntary hospitalization of people by requiring mental health professionals, before seeking hospitalization under G.L. c. 123, § 12(a), to pursue less restrictive alternatives and by diverting people, when appropriate, to Community Behavioral Health Centers. The bill also requires that individuals in EDs be informed of their legal rights within 12 hours of arrival, including the right to have access to a judicial hearing if they are still in the ED 48 hours after their arrival. [Lead advocacy contact: Committee for Public Counsel Services (CPCS)]

An Act relative to authorizing supported decision-making agreements for certain adults with disabilities | [H.1485](#) (Rep. Finn) / [S.109](#) (Sen. Lovely)

This bill would establish a legal framework for supported decision-making agreements, which allow people with disabilities to maintain autonomy in significant life decisions. Sixteen states have enacted similar laws and MA has successfully implemented a pilot program since 2014. Last session, this bill passed the Senate. [Lead advocacy contact: Massachusetts Advocates for Supported Decision-Making (MASDM)]

An Act related to rehabilitation, re-entry, and human rights for incarcerated people | [H.2325](#) (Rep. Fluker Oakley) / [S.1493](#) (Sen. Creem)

This bill establishes universal baseline conditions standards for everyone incarcerated in state prisons, county jails, and houses of correction. Conditions include meaningful out-of-cell time, expanded programming and vocational training opportunities, increased educational offerings, and improved quality of life. [Lead advocacy contact: PLS | [Fact Sheet](#)]

An Act promoting access to counsel and housing stability in Massachusetts | [H.1731](#) (Reps. Rogers and David) / [S.864](#) (Sen. DiDomenico)

Legal assistance makes a substantial difference in avoiding the deleterious effects of eviction and keeping vulnerable persons safe and stably housed. This bill would provide a right to counsel for tenants, as well as owner-occupants of 1 to 3-unit buildings. [Lead advocacy contact: Massachusetts Law Reform Institute (MLRI)]

An Act relating to public access to historical records | [H.3033](#) (Rep. Garballey) / [S.1965](#) (Sen. Barrett)

This bill supports the work of the Special Commission on the History of State Institutions by requiring that all records in the custody of the state secretary be open to public inspection and available for copying after the expiration of seventy-five years from the record's creation. [Lead advocacy contact: The Arc of Massachusetts]

Promoting Well Being

An Act establishing a child and adolescent behavioral health implementation coordinating council | [H.1979](#) (Rep. Decker)

This bill establishes a council within the [BIRCh Project's School-Based Behavioral Health Technical Assistance Center \(TA Center\)](#) to develop a three year, statewide plan for implementing a comprehensive school-based behavioral health and to provide guidance to school districts to provide equitable access to behavioral health promotion, prevention, and intervention services and supports. [Lead advocacy contact: Children's Mental Health Campaign (CMHC)]

An Act to lift kids out of deep poverty | [H.144](#) (Rep. Decker) / [S.75](#) (Sen. DiDomenico)

Deep poverty (i.e., income below half of the federal poverty level) harms kids. In Massachusetts, the maximum cash assistance grant for a family of three is only \$783/month. This bill would raise grants by 25% a year until they reach half of the federal poverty level, and then make small increases each year to keep up with inflation. [Lead advocacy contact: Lift Our Kids Coalition | [Fact Sheet](#)]

An Act to create and implement a Massachusetts Flexible Supportive Housing Subsidy Pool Program | [H.1354](#) (Rep. Meschino) / [S.855](#) (Sen. Crighton)

This bill leverages public and private funding streams to provide flexible, responsive funds for supportive housing (affordable housing with intensive, coordinated services) to people with chronic physical and behavioral health issues. Last session, this bill received favorable reports from both the Housing and Health Care Financing Committees. [Lead advocacy contact: United Way of Massachusetts Bay and Merrimack Valley, Massachusetts Housing and Shelter Alliance (MHSA), and Citizens' Housing and Planning Association (CHAPA)]

An Act increasing access to postpartum home visiting services | [H.985](#) (Reps. Decker and Tyler) / [S.672](#) (Sen. Lovely)

More than half of pregnancy-related deaths occur in the 12-month postpartum period with Black and Indigenous birthing people two to three times more likely than white individuals to die due to pregnancy-related causes. This bill makes permanent and expands statewide DPH's universal postpartum home visiting program, as well as requires both MassHealth and private insurance to cover these services. The Special Legislative Commission on Racial Inequities in Maternal Health recommended these reforms. [Lead advocacy contact: Health Care for All (HCFA)]

Workforce

An Act relative to applied behavioral health clinic rates | [H.2006](#) (Rep. O'Day) / [S.760](#) (Sen. Keenan)

Behavioral health clinics play a vital role in the behavioral health workforce pipeline as they are a primary training ground, but they do not have access to the same funding streams as teaching hospitals or community health centers. This bill increases the rate paid for all outpatient mental health services by 5% and requires MassHealth to create an additional 20% rate differential for services provided in mental health clinics. [Lead advocacy contact: Association for Behavioral Healthcare (ABH)]

An Act establishing a behavioral health workforce center of excellence | [H.1275](#) (Reps. Khan and Donaghue) / [S.829](#) (Sen. Keenan)

This bill establishes a Behavioral Health Workforce Center of Excellence at a state or community college and enumerates tasks that the center must complete to address the workforce crisis, including research, data reporting, and collaboration among state agencies, payers, providers, and higher education. [Lead advocacy contact: ABH]

An Act relative to licensure demographics | [H.2271](#) (Rep. Santiago) / [S.1473](#) (Sen. Velis)

People of color face a barrier to behavioral health care due to the lack of behavioral health clinicians of color. This bill requires DPH to collect and publish, in aggregate, the demographic data of mental health and addiction treatment practitioners seeking and obtaining MA professional licensure. [Lead advocacy contact: ABH]

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