

**HOUSE . . . . . No. 2127**

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Jon Santiago and David M. Rogers*

*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 commission to study the availability of a continuum of care for persons with substance use disorder.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Jon Santiago</i>	<i>9th Suffolk</i>	<i>2/11/2021</i>
<i>David M. Rogers</i>	<i>24th Middlesex</i>	<i>2/25/2021</i>
<i>Michael J. Barrett</i>	<i>Third Middlesex</i>	<i>2/25/2021</i>
<i>Christopher Hendricks</i>	<i>11th Bristol</i>	<i>2/26/2021</i>
<i>Tami L. Gouveia</i>	<i>14th Middlesex</i>	<i>2/26/2021</i>
<i>Diana DiZoglio</i>	<i>First Essex</i>	<i>2/26/2021</i>
<i>Steven G. Xiarhos</i>	<i>5th Barnstable</i>	<i>2/26/2021</i>
<i>Paul McMurtry</i>	<i>11th Norfolk</i>	<i>2/26/2021</i>
<i>Tram T. Nguyen</i>	<i>18th Essex</i>	<i>2/26/2021</i>
<i>Jeffrey N. Roy</i>	<i>10th Norfolk</i>	<i>2/26/2021</i>
<i>Daniel R. Carey</i>	<i>2nd Hampshire</i>	<i>2/26/2021</i>
<i>James J. O'Day</i>	<i>14th Worcester</i>	<i>2/26/2021</i>
<i>John Barrett, III</i>	<i>1st Berkshire</i>	<i>2/26/2021</i>
<i>Brian W. Murray</i>	<i>10th Worcester</i>	<i>2/26/2021</i>
<i>Lindsay N. Sabadosa</i>	<i>1st Hampshire</i>	<i>2/26/2021</i>
<i>Bradley H. Jones, Jr.</i>	<i>20th Middlesex</i>	<i>3/9/2021</i>
<i>Hannah Kane</i>	<i>11th Worcester</i>	<i>3/15/2021</i>



**HOUSE . . . . . No. 2127**

By Messrs. Santiago of Boston and Rogers of Cambridge, a petition (accompanied by bill, House, No. 2127) of Jon Santiago, David M. Rogers and others for legislation to establish a special commission (including members of the General Court) to study the availability of continuum of care for persons with substance use disorder. Mental Health, Substance Use and Recovery.

**The Commonwealth of Massachusetts**

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

An Act establishing a commission to study the availability of a continuum of care for persons with substance use disorder.

*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. Notwithstanding any general or special law to the contrary, there shall be a  
2 commission established pursuant to section 2A of chapter 4 of the General Laws to study the  
3 availability of a continuum of care for persons with substance use disorder. The commission  
4 shall review: (i) the availability of detoxification services, clinical stabilization services,  
5 transitional support services, residential recovery home services and outpatient treatment  
6 including medication assisted treatment and (ii) make an assessment of what the appropriate  
7 capacity should be for each level of care to allow individuals to efficiently access each level of  
8 care as clinically necessary.

9 The commission shall consist of: the house and senate chairs of the committee on  
10 mental health, substance use and recovery, who shall serve as co-chairs; a member appointed by  
11 the speaker of the house of representatives; a member appointed by the senate president; the

12 minority leader of the house, or a designee; the minority leader of the senate, or a designee; the  
13 secretary of the office of health and human services, or a designee; the assistant secretary for  
14 masshealth; the commissioner of the department of public health, or a designee; the  
15 commissioner of the department of mental health, or a designee; the commissioner of the  
16 division of insurance, or a designee; and one from each of the following: Association for  
17 Behavioral Healthcare, Inc.; Massachusetts Organization for Addiction Recovery; the  
18 Massachusetts Health & Hospital Association; the Massachusetts Medical Society; Recovery  
19 Homes Collaborative; Learn to Cope; the Grayken Center; the Massachusetts Association of  
20 Health Plans; and Blue Cross and Blue Shield of Massachusetts.

21           Annually, not later than March 1, the commission shall file a report with the house  
22 and senate clerks on its activities and any recommendations. The commission shall monitor the  
23 implementation of its recommendations.

24           COVID-19, including through federal agencies, state and local government entities,  
25 financial institutions and other private businesses, grants, loans, investments or other means; (iii)  
26 investigate the preparedness for and response to COVID-19, including the planning for and  
27 implementation of testing, containment, mitigation, contact tracing activities, and the acquisition  
28 and distribution of protective equipment and medical supplies; (iv) investigate the economic and  
29 social impact of COVID-19 on individuals, communities, small businesses, health care  
30 providers, the state, and local government entities; (v) investigate any disparate impacts of  
31 COVID-19 on different communities and populations, including racial and ethnic minorities,  
32 senior citizens, and other vulnerable or historically disadvantaged populations; (vi) investigate  
33 the use and public health impact, effectiveness, and social and economic cost of social distancing  
34 practices, stay-at-home directives, school and business closures, disruptions to childcare, and

35 other measures adopted to contain the virus; (vii) review the efficacy of public outreach to  
36 inform and protect Massachusetts residents; (viii) investigate any disparate impacts in nursing  
37 homes and long-term care facilities in the state; and (ix) identify lessons learned from the  
38 outbreak and from the response by the state, including the coordination, management, policies,  
39 procedures, public outreach, and actions of federal, state and local governments and non-  
40 governmental entities in preparing for, detecting, preventing, and responding to COVID-19. The  
41 commission shall make publicly available a report containing its findings, conclusions, and  
42 recommendations.

43 (d) The commission shall consist of 7 members: 1 person who shall be appointed by the  
44 governor; 1 person who shall be appointed by the Massachusetts attorney general; 1 person who  
45 shall be appointed by the state treasurer; 1 person who shall be appointed by the secretary of the  
46 commonwealth; 1 person who shall be appointed by the state auditor; 1 person who shall be  
47 appointed by the senate president; and 1 person who shall be appointed by the speaker of the  
48 house. The chair of the commission shall be appointed by a majority vote of the members.  
49 Individuals appointed to the commission shall be Massachusetts residents with extensive  
50 experience and significant expertise in professions such as: economics; labor and workforce  
51 development; business and finance; public health; medicine, including epidemiology; healthcare;  
52 civil rights; law and governmental service; and emergency preparedness, response, and  
53 management. The composition of the committee shall, to the fullest extent possible, consist of a  
54 mixture of experts from all the professions listed above.

55 The nonpartisan commission shall be comprised of individuals who can look at the  
56 totality of the state's response impartially, without fear or favor, regardless of party or interests  
57 involved. An individual appointed to the commission may not be a current elected official, an

58 employee of state or local government, a registered lobbyist, or an employee of a trade  
59 association or special interest group whose purpose is to lobby at the state level or otherwise  
60 influence governmental policymaking. Appointments to the commission shall be made not later  
61 than 30 days after the effective date of this act.

62 (e) The commission shall furnish reasonable staff and other support for the work of the  
63 commission. Members shall not receive compensation for their service but may receive  
64 reimbursement for reasonable expenses incurred in carrying out their responsibilities as members  
65 of the commission.

66 (f) The commission may meet as appropriate, but not less than 4 times in different  
67 geographic regions of the commonwealth and shall accept input from the public via not less than  
68 two public hearings, as well as solicit expert testimony from individuals identified by the  
69 commission. The public hearings shall be conducted in person unless such in-person meetings  
70 would pose a health risk or significant practical challenges.

71 (g) The commission shall have the power to issue subpoenas to compel the attendance of  
72 witnesses and the production of documents, papers, books, records and other evidence relating to  
73 any matter under investigation. The commission shall have the power to administer oaths and  
74 affirmations to persons whose testimony is required. The commission may select and contract  
75 with independent consultants to assist with leading and managing public hearings, collecting and  
76 analyzing data and information, completing a final report and any other activity to achieve the  
77 goals of the commission.

78 (h) The commission shall, following the completion of the required meetings and  
79 hearings, file a report of its findings, analysis, and recommendations to the clerks of the house of

80 representatives and senate. The commission shall convene its first meeting not later than 45 days  
81 following the effective date of this act. The commission shall submit its final report and its  
82 recommendations not later than six months following the effective date of this act. The final  
83 report must be made publicly available in both electronic and paper format.