

AN ACT

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

To establish a Maternal Mental Health Task Force to study maternal mental health needs in the District, and to require the task force to submit a report to the Mayor and the Council setting forth its findings and recommendations; and to amend the Confirmation Act of 1978 to require Council approval of mayoral nominees to the Maternal Mental Health Task Force.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Maternal Mental Health Task Force Establishment Act of 2018”.

TITLE I. MATERNAL MENTAL HEALTH TASK FORCE

Sec. 101. Definitions.

For the purposes of this act, the term:

(1) “Health care provider” shall have the same meaning as provided in section 2(1B) of the District of Columbia Public Emergency Act of 1980, effective March 5, 1981 (D.C. Law 3-149; D.C. Official Code § 7-2301(1B)).

(2) “Home visiting program” means an entity that:

(A) Supports expectant parents, and parents or legal guardians with infants, toddlers, and children between 3 and 5 years of age; and

(B) Provides access to health, social, and educational services through weekly or monthly home visits to promote positive child health and development outcomes, including healthy home environments, healthy birth outcomes, and a reduction in adverse childhood experiences.

(3) “Postpartum recovery” shall have the same meaning as provided in section 151(5) of the Department of Youth Rehabilitation Services Establishment Act of 2004, effective July 25, 2015 (D.C. Law 20-280; D.C. Official Code § 2-1515.51(5)).

(4) “Task Force” means the Maternal Mental Health Task Force established by section 102.

Sec. 102. Maternal Mental Health Task Force.

(a) There is established a Maternal Mental Health Task Force to provide comprehensive

policy recommendations for the improvement of maternal mental health in the District. The Task Force shall study:

- (1) Vulnerable populations and risk factors for maternal mental health disorders that may occur during pregnancy and postpartum recovery;
 - (2) Barriers to screening and identifying maternal mental health disorders;
 - (3) Evidence-based and emerging treatment options for individuals suffering from maternal mental health disorders;
 - (4) Health care provider and patient needs to improve diagnosis and treatment of maternal mental health disorders;
 - (5) Effective, culturally competent, and accessible screening, identification, and treatment strategies for maternal mental health disorders, including public education efforts, health care provider education and training, and the provision of social support services;
 - (6) Successful postpartum recovery mental-health initiatives throughout the United States;
 - (7) Evidence-based practices for health care providers and public-health systems;
- and
- (8) Models for private and public funding of maternal mental health initiatives.

(b) By December 31, 2018, the Task Force shall submit to the Mayor and the Council a comprehensive report setting forth its findings and providing recommendations regarding legislation, policy initiatives, and the funding requirements of initiatives to address maternal mental health needs in the District.

(c) The Task Force shall consist of 19 members as follows:

- (1) The Deputy Mayor of the Office of the Deputy Mayor for Health and Human Services or his or her designee;
- (2) The Director of the Department of Behavioral Health or his or her designee;
- (3) The Director of the Department of Health or his or her designee;
- (4) The Director of the Department of Health Care Finance or his or her designee;
- (5) The Chairperson of the Council's Committee on Health or his or her designee;
- (6) The Chairperson of the Council's Committee on Human Services or his or her designee; and

(7) The following members appointed by the Mayor in accordance with section 2(f) of the Confirmation Act of 1978, effective March 3, 1979 (D.C. Law 2-142; D.C. Official Code § 1-523.01(f)):

- (A) A representative from the health insurance industry;
- (B) A representative from La Clinica del Pueblo, a nonprofit health center;
- (C) A nurse psychotherapist experienced in providing perinatal mental health services in the District;
- (D) A registered nurse experienced in providing perinatal mental health services in the District;

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(E) A licensed clinical social worker experienced in providing perinatal mental health services in the District;

(F) A licensed pediatrician experienced in providing perinatal mental health services in the District;

(G) An obstetrician experienced in providing perinatal mental health services in the District;

(H) A reproductive psychiatrist practicing in the District;

(I) A reproductive therapist practicing in the District;

(J) A perinatal mood and anxiety disorders survivor;

(K) A pediatric primary care provider located in the District;

(L) An individual with experience in working with homeless families in the District; and

(M) A representative of a home visiting program operating in the District.

(d) The Mayor shall designate 2 co-chairs of the Task Force, one each from the government and non-government sectors.

(e) Vacancies shall be filled in the same manner as the original appointment to the position that became vacant.

(f) The Department of Behavioral Health shall provide the Task Force with an operating budget, which shall include funds to maintain a website where the Task Force shall provide a public listing of members, meeting notices, and meeting minutes.

(g) The Task Force shall dissolve after submitting the report required pursuant to subsection (b) of this section.

TITLE II. CONFORMING AMENDMENT

Sec. 201. Section 2(f) of the Confirmation Act of 1978, effective March 3, 1979 (D.C. Law 2-142; D.C. Official Code § 1-523.01(f)), is amended as follows:

(a) Paragraph (56) is amended by striking the phrase “; and” and inserting a semicolon in its place.

(b) Paragraph (57) is amended by striking the period and inserting the phrase “; and” in its place.

(c) A new paragraph (58) is added to read as follows:

“(58) The Maternal Mental Health Task Force, established by the Maternal Mental Health Task Force Establishment Act of 2018, passed on 2nd reading on May 1, 2018 (Enrolled version of Bill 22-172).”.

TITLE III. APPLICABILITY; FISCAL IMPACT; EFFECTIVE DATE

Sec. 301. Applicability.

(a) This act shall apply upon the date of inclusion of its fiscal effect in an approved budget and financial plan.

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(b) The Chief Financial Officer shall certify the date of the inclusion of the fiscal effect in an approved budget and financial plan, and provide notice to the Budget Director of the Council of the certification.

(c)(1) The Budget Director shall cause the notice of the certification to be published in the District of Columbia Register.

(2) The date of publication of the notice of the certification shall not affect the applicability of this act.

Sec. 302. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 4a of the General Legislative Procedures Act of 1975, approved October 16, 2006 (120 Stat. 2038; D.C. Official Code § 1-301.47a).

Sec. 303. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.

Chairman
Council of the District of Columbia

Mayor
District of Columbia