

The Commonwealth of Massachusetts

PRESENTED BY:

Chynah Tyler

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 eliminating racial and ethnic health disparities in the Commonwealth.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Chynah Tyler	7th Suffolk
Bud L. Williams	11th Hampden
Christine P. Barber	34th Middlesex
Daniel Cahill	10th Essex
Gerard J. Cassidy	9th Plymouth
Sonia Chang-Diaz	Second Suffolk
Nick Collins	First Suffolk
Daniel R. Cullinane	12th Suffolk
Marjorie C. Decker	25th Middlesex
Sal N. DiDomenico	Middlesex and Suffolk
Michelle M. DuBois	10th Plymouth
Carolyn C. Dykema	8th Middlesex
James B. Eldridge	Middlesex and Worcester
Nika C. Elugardo	15th Suffolk
Carlos Gonzalez	10th Hampden
Jonathan Hecht	29th Middlesex
Russell E. Holmes	6th Suffolk
Kay Khan	11th Middlesex

Denise Provost	27th Middlesex
Rebecca L. Rausch	Norfolk, Bristol and Middlesex
Jon Santiago	9th Suffolk
Bruce E. Tarr	First Essex and Middlesex
José F. Tosado	9th Hampden

By Ms. Tyler of Boston, a petition (accompanied by bill, House, No. 1198) of Chynah Tyler and others for legislation to eliminate racial and ethnic health disparities. Health Care Financing.

The Commonwealth of Massachusetts

In the One Hundred and Ninety-First General Court (2019-2020)

An Act eliminating racial and ethnic health disparities in the Commonwealth.

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. The second paragraph of section 16 of chapter 6A of the General Laws, is
2	hereby amended by striking out, in lines 38 and 39, as appearing in the 2014 Official Edition, the
3	words "and, (7) the health facilities appeals board" and inserting in place thereof the following
4	words:- (7) the health facilities appeals board; and (8) the office of health equity.
5	SECTION 2. Section 16O of said chapter 6A, as so appearing, is hereby amended by
6	inserting after the word, "recommendations" in line 3 and 4, the following words:- to the director
7	of the office of health equity.
8	SECTION 3. Said section 16O of said chapter 6A, as so appearing, is hereby further
9	amended by inserting after the words "ex officio", in line 27, the following words:-; the director
10	of the office of health equity, or the director's designee;
11	SECTION 4. Said chapter 6A is hereby further amended by inserting after section 16Y
12	the following section:-

Section 16Z. (a) As used in this section the following words shall, unless the context
clearly requires otherwise, have the following meanings:-

15 "Disparities", differences in the incidence, prevalence, mortality and burden of diseases
16 and other adverse health conditions that exist among specific racial and ethnic groups.

17 "Office", the office of health equity.

(b) There shall be an office of health equity within the executive office of health and
human services. The office shall be under the supervision and control of a director who shall be
appointed by and report to the secretary of health and human services. The health disparities
council, established in section 16O, shall serve as an advisory board to the office.

(c) The office shall coordinate all activities of the commonwealth to eliminate racial and
 ethnic health and health care disparities. The office shall set goals for the reduction of disparities
 and prepare an annual plan for the commonwealth to eliminate disparities.

25 (d) The office shall collaborate with other state agencies of the commonwealth on 26 disparities reduction initiatives to address the social factors that influence health inequality. The 27 state agencies shall include, but shall not be limited to, the executive office of health and human 28 services, the executive office of housing and economic development, the executive office of 29 public safety and security, the executive office of energy and environmental affairs, the 30 Massachusetts Department of Transportation, the executive office of labor and workforce 31 development and the executive office of education. The office shall facilitate communication and 32 partnership between these agencies to develop greater understanding of the intersections between 33 agency activities and health outcomes. The office shall facilitate development of interagency 34 initiatives to address the social and economic determinants of health disparity issues including,

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but not limited to, healthcare access and quality; housing availability and quality; transportation
availability, location and cost; community policing and safe spaces; air, water, land usage and
quality; employment and workforce development; and education access and quality.

(e) The office shall evaluate the effectiveness of programs and interventions to eliminate
health disparities, identifying best practices and model programs for the state.

40 (f) The office shall prepare an annual health disparities report. The report shall evaluate 41 the progress of the commonwealth toward eliminating racial and ethnic health disparities, using, 42 where possible, quantifiable measures and comparative benchmarks and, where possible, shall 43 detail such progress on a regional basis. The office shall hold public hearings in several regions 44 of the commonwealth to gather public information on the topics of the report. The report shall be 45 filed with the governor and the clerks of the house of representatives and senate and the members 46 of the health disparities council, established under section 16O, and the health policy 47 commission before July 1 2020 and before July 1 of each subsequent year thereafter. The report 48 shall be posted on the official website of the commonwealth.

SECTION 5. Section 5 of chapter 6D, as appearing in the 2014 Official Edition, is hereby amended by adding the following sentence:- The commission shall establish goals that are intended to reduce health care disparities in racial, ethnic and disabled communities and in doing so shall seek to incorporate the recommendations of the health disparities council and the office of health equity.

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