

SENATE – No. 2048 (September)

The Commonwealth of Massachusetts

In the Year One Thousand Nine Hundred and Ninety Five

ACT ESTABLISHING THE HEALTH EDUCATION LEARNING PARTNERSHIP OF MASSACHUSETTS.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1. The General laws are hereby amended by inserting after chapter 111J the
2. following new chapter:

3.

4.

CHAPTER 111J.

5.

THE HEALTH EDUCATION LEARNING PARTNERSHIP

6.

OF MASSACHUSETTS.

7.

8. **Section 1.** The General Court finds it to be in the interest of the
9. commonwealth to promote the prevention of injury and illness
10. among its residents. Whereas there are individuals and families
11. residing in the commonwealth who lack health insurance coverage
12. for preventive health or primary care services, utilization of said
13. services has been shown to be effective in reducing the incidence
14. of preventable hospitalization and cost of health care, there are a
15. significant number of students of the health sciences and licensed
16. and certified health professionals located in the commonwealth
17. seeking opportunities to serve the public in community settings,
18. there are a number of health programs and facilities in the com-
19. monwealth that may benefit from the services of said students and
20. health professionals, and students who participate in such pro-
21. grams are likely to seek careers in community settings. the
22. General Court hereby establishes the Health Education Learning
23. Partnership of Massachusetts.

24. **Section 2.** In this chapter, unless the context otherwise indi-
25. cates, the following terms have the following meanings:

26. (a) “Advisory committee” shall mean the HELPMASS Advisory
27. Committee.

28. (b) “Chancellor” shall mean the chief executive officer of the
29. Worcester campus of the University of Massachusetts.

30. (c) “Commissioner” shall mean the commissioner of public
31. health.

32. (d) “Department” shall mean the department of public health.

33. (e) “HELPMASS” shall mean Health Education Learning
34. Partnership of Massachusetts, a health service corps program
35. designed to coordinate students and practitioners of the health sci-
36. ences with programs, services, and resources that support or pro-
37. vide primary care and health education to underserved, uninsured,
38. and underinsured populations, with emphasis on public service.

39. (f) “Primary health care” shall mean health care that is acces-
40. sible, coordinated, continuous and comprehensive, which meets a
41. majority of a patient’s personal health care needs, and that pro-
42. vides patients with information about illness, prevention, and
43. health maintenance.

44. (g) “Underserved population” shall mean a population that has
45. inadequate availability of primary care services, poor health status
46. indicators, or disproportionate numbers of uninsured or under-
47. insured individuals.

48. **Section 3.** Notwithstanding and in addition to any authority
49. granted under any other provision of the law, the commissioner and
50. the chancellor are hereby authorized and directed to establish
51. HELPMASS.

52. **Section 4.** The purpose of HELPMASS shall be to expand
53. opportunities for students of health professions, health educators,
54. public health practitioners, and active and retired licensed or certi-
55. fied health professionals to participate in public service programs
56. that enhance access to prevention services and primary care for
57. uninsured or underinsured individuals or families or is in under-
58. served geographical areas of the commonwealth. The commis-
59. sioner and the chancellor shall develop a program to expand and
60. coordinate public and private resources that promote community
61. service by linking health professionals and supervised students
62. with existing health education and primary care services.

63. **Section 5.** The commissioner and the chancellor shall appoint a
64. HELPMASS advisory committee consisting of not less than ten
65. or more than thirty members. These persons shall represent a
66. wide range of professions and institutions involved in providing
67. medical and health education and primary health care. The com-
68. missioner and chancellor or their designees shall jointly chair the
69. advisory committee.

70. **Section 6.** The advisory committee shall assist the commis-
71. sioner and the chancellor or their designees in the development
72. and implementation of studies and pilot projects designed to coor-
73. dinate and utilize existing public and private resources to provide
74. improved access to primary care and preventive health services for
75. underserved, underinsured, and uninsured populations. Said
76. studies and pilot projections shall examine ways to encourage schools
77. and other educational programs that prepare public health and
78. health professionals to incorporate public service requirements in

79. the curriculum and promote incentives for participation. Under
80. supervision from appropriate licensed or certified personnel, and
81. in cooperation with appropriate educational authorities, students
82. should be enlisted to participate in pilot projects. To the extent
83. possible, opportunities for participation in pilot projects should be
84. expanded for students enrolled in secondary and post-secondary
85. schools and educational programs and current and retired licensed
86. health care providers.

87. **Section 7.** The commissioner and the chancellor shall have the
88. responsibility and authority to:

89. (a) Conduct studies and pilot projects as described in sec-
90. tion six;

91. (b) Apply to private sources and the federal government for
92. grants to implement pilot studies and projects; deposit funds
93. received from those sources in a separate account in the depart-
94. ment or the University; and expend said funds for the purposes set
95. forth in this chapter;

96. (c) Enter into agreement with each other and other entities as
97. allowed by law for the purpose of this chapter;

98. (d) Study the feasibility of utilizing the services of retired
99. health care providers and other licensed and certified health care
100. practitioners including a study addressing methods of liability
101. coverage for retired licensed health care providers;

102. (e) Study the feasibility of establishing a not-for-profit corpo-
103. ration authorized by statute to operate HELPMASS;

104. (f) Deliver reports of the program to the governor and officials
105. of the senate and the house of representatives as appropriate;

106. (g) Recommend legislation to implement statewide HELP-
107. MASS programs designed to achieve the comprehensive and coor-
108. dinated delivery of primary and preventive health care services to
109. underserved, underinsured, and uninsured populations; and

110. (h) Appoint a program director to implement and administer
111. the studies and pilot projects initiated by this chapter.

ACTS AND RESOLVES OF 1996

Chap. 202

SECTION 1. Section 25B of chapter 111 of the General Laws, as appearing in the 1994 Official Edition, is hereby amended by striking out, in lines 35 and 36, the words “a religious group relying solely on spiritual means through prayer and healing” and inserting in place thereof the following words – and for persons who rely exclusively upon treatment by spiritual means through prayer for healing, in accordance with the creed or tenets of a church or religious denomination.

SECTION 2. Section 70E of said chapter 111, as so appearing, is hereby amended by striking out, in lines 180 and 181, the words “or listed and certified by The First Church of Christ, Scientist, in Boston” and inserting in place thereof the following words:- by and for persons who rely exclusively upon treatment by spiritual means through prayer for healing, in accordance with the creed or tenets of a church or religious denomination.

SECTION 3. Section 72Y of said chapter 111, as so appearing, is hereby amended by striking out, in lines 17 and 18, the words “a religious group relying solely on spiritual means through prayer and healing” and inserting in place thereof the following words:- and for persons relying solely upon treatment by spiritual means through prayer for healing, in accordance with the creed or tenets of a church or religious denomination.

SECTION 4. Section 73A of said chapter 111, as so appearing, is hereby amended by striking out, in lines 3 and 4, the following words “, or listed and certified by The First Church of Christ, Scientist, in Boston, Massachusetts,” and inserting in place thereof the following words:- by and for persons who rely exclusively upon treatment by spiritual means through prayer for healing, in accordance with the creed or tenets of a church or religious denomination.

SECTION 5. Section 108 of chapter 112 of the General Laws, as so appearing, is hereby amended by striking out, in lines 13 to 17, inclusive, the words “certified by a recognized church or religious denomination which teaches reliance on spiritual means alone for healing as having been approved to administer institutions certified by such church or denomination for the care and treatment of the sick in accordance with its teachings” and inserting in place thereof the following words:- employed by an institution operated by and for persons who rely exclusively upon treatment by spiritual means through prayer for healing, in accordance with the creed or tenets of a church or religious denomination.

Approved July 29, 1996.

Chapter 203. AN ACT PROVIDING FOR IMPROVED ACCESS TO HEALTH CARE

Whereas, The deferred operation of this act would tend to defeat its purpose, which is to immediately make available health care coverage to uninsured children and adults and to provide pharmaceutical benefits to the elderly, therefore it is hereby declared to be an emergency law, necessary for the immediate preservation of the public convenience.

Be it enacted etc., as follows:

...

SECTION 23. (a) The general court finds it to be in the interest of the commonwealth to promote the prevention of injury and illness among its residents

Whereas there are individuals and families residing in the commonwealth who lack health insurance coverage for preventative health or primary care services, utilization of said services has been shown to be effective in reducing the incidences of preventable hospitalization and cost of health care, there are a significant number of students of the health sciences and licensed and certified health professionals located in the commonwealth seeking opportunities to serve the public in community settings, there are a number of health programs and facilities in the commonwealth that may benefit from the services of said students and health professionals, and students who participate in such programs are likely to seek careers in community setting, the general court hereby establishes the Health Education Learning Partnership of Massachusetts.

(b) As used in this section the following words shall, unless the context otherwise indicates, have the following meanings:

“Advisory Committee”, the HELPMASS Advisory Committee.

“Chancellor”, the chief executive officer of the Worcester campus of the University of Massachusetts.

“Commissioner”, the commissioner of public health.

“Department”, the department of public health.

“HELMASS”, Health Education Learning Partnership of Massachusetts, a health service corps program designed to coordinate students and practitioners of the health sciences with programs, services, and resources that support or provide primary care and health education to underserved, uninsured, and underinsured individuals.

“Primary health care”, health care that is accessible, coordinated, continuous, and comprehensive, which meets a majority of a patient’s personal health care needs, and that provides patients with information about illness, prevention, and health maintenance.

“Underserved population”, a population that has inadequate availability of primary care services, poor health status indicators, or disproportionate numbers of uninsured or underinsured individuals.

- (c.) The commissioner and the chancellor are hereby authorized and directed to establish HELPMASS to expand opportunities for students and health professionals and supervised students with existing health education and primary care services.
- (d.) The commissioner and the chancellor shall appoint a HELPMASS advisory committee consisting of not less than ten nor more than thirty members. These persons shall represent a wide range of professions and institutions involved in providing medical and health education and primary health care. The commissioner and chancellor or their designees shall jointly chair the advisory committee.
- (e.) The advisory committee shall assist the commissioner and the chancellor in the development and implementation of studies and pilot projects designed to coordinate and utilize existing public and private resources to provide improved access to primary care and preventative health services for underserved, underinsured and uninsured populations. Said studies and pilot projects shall examine ways to encourage schools and other educational programs that prepare public health and health professionals to incorporate public service requirements in the curriculum and promote incentives for participation. Under supervision from appropriate licensed or certified personnel, and in cooperation with appropriate educational authorities, students should be enlisted to participate in pilot projects. To the extent possible, opportunities for students enrolled in secondary and post secondary schools and educational programs and current and retired licensed health care providers.
- (f.) The commissioner and the chancellor shall have the responsibility and authority to:
 - (1) conduct studies and pilot projects as described in paragraph (c.);
 - (2) apply to private sources and the federal government for grants to implement pilot studies and projects; deposit funds received from those sources in a separate account in the department of the university; and expend said funds for the purposes set forth in this section;

- (3) enter into agreements with each other and other entities as allowed by law for the purposes of implementing this act;
- (4) study the feasibility of utilizing the services of retired health care providers and other licensed and certified health care practitioners including the study addressing methods of liability coverage for retired licensed health care providers;
- (5) study the feasibility of establishing a not-for-profit corporation authorized by statute to operate HELPMASS;
- (6) deliver reports of the progress to the governor and the general court as appropriate;
- (7) recommend legislation to implement statewide HELPMASS programs designed to achieve the comprehensive and coordinated delivery of primary and preventive health care services to underserved, underinsured and uninsured populations; and
- (8) appoint a program director to implement and administer the studies and pilot projects initiated by this chapter.