

NO SECTION 4.

SECTION 5. The second paragraph of section 172C of chapter 6 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking clause (4) and inserting in place thereof the following two clauses:-

- (4) any agency or organization that employs or refers personal care attendants; or
- (5) any other entity receiving federal, state or local funds.

SECTION 6. Section 9 of chapter 15A, as appearing in the 2000 Official Edition, is hereby amended in line 63 by inserting after the word "five" the following sentence:- The council shall neither establish nor approve any tuition reduction applicable to state colleges, community colleges, or the university.

SECTION 7. (A) Section 16 of chapter 6A of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by inserting after the words "board," in line 3, the following words:- ; the Betsy Lehman center for patient safety and medical error reduction.

(B) Said chapter 6A is hereby amended by inserting after section 16D the following section:-

Section 16E. (a) There shall be established within the executive office of health and human services, but not subject to the control of said executive office, the Betsy Lehman center for patient safety and medical error reduction, hereinafter called the center. The purpose of the center shall be to serve as a clearinghouse for the development, evaluation and dissemination, including, but not limited to, the sponsorship of training and education programs, of best practices for patient safety and medical error reduction. The center shall: (a) coordinate the efforts of state agencies engaged in the regulation, contracting or delivery of health care and those individuals or institutions licensed by the commonwealth to provide health care to meet their responsibilities for patient safety and medical error reduction; (b) assist all such entities to work as part of a total system of patient safety; and (c) develop appropriate mechanisms for consumers to be included in a statewide program for improving patient safety. The center shall coordinate state participation in any appropriate state or federal reports or data collection efforts relative to patient safety and medical error reduction. The center shall analyze available data, research and reports for information that would improve education and training programs that promote patient safety.

(b) For the purposes of this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

"Adverse event", injury to a patient resulting from a medical intervention and not to the underlying condition of the patient.

"Board", the patient safety and medical errors reduction board.

"Center", the Betsy Lehman center for patient safety and medical error reduction.

"Incident", an incident which, if left undetected or uncorrected, might have resulted in an adverse event.

"Medical error", the failure of medical management of a planned action to be completed as intended or the use of a wrong plan to achieve an outcome.

"Patient safety", freedom from accidental injury.

(c) Within the center, there shall be established a patient safety and medical errors reduction board. The board shall consist of the secretary of health and human services, the director of consumer affairs and business regulations and the attorney general. The board shall appoint, in consultation with the advisory committee, the director of the center by a unanimous vote and the director shall, under the general supervision of the board, have general oversight of the operation of the center. The director may appoint or retain and remove such expert, clerical or other assistants as the work of the center may require. The coalition for the prevention of medical errors shall serve as the advisory committee to the board. The advisory committee shall, at the request of the director, provide such advice and counsel as it deems appropriate including, but not limited to, serving as a resource for studies and projects undertaken or sponsored by the center. The advisory committee may also review and comment on regulations and standards proposed or promulgated by the center, but such review and comment shall be advisory in nature and shall not be considered binding on the center.

(d) The center shall develop and administer a patient safety and medical error reduction education and research program to assist health care professionals, health care facilities and agencies and the general public regarding issues related to the causes and consequences of medical error and practices and procedures to promote the highest standard for patient safety in the commonwealth. The center shall report to the governor and the general court relative to the feasibility of developing standards for patient safety and medical error reduction programs for any state department, agency, commission or board to reduce medical errors, and the statutory responsibilities of the commonwealth, for the protection of patients and consumers of health care together with recommendations to improve coordination and effectiveness of the programs and activities. Such report shall be filed not later than December 31, 2003.

(e) The center shall (1) identify and disseminate information about evidence-based best practices to reduce medical errors and enhance patient safety; (2) develop a process for determining which evidence-based best practices should be considered for adoption; (3) serve as a central clearinghouse for the collection and analysis of existing information on the causes of medical errors and strategies for prevention; and (4) increase awareness of error prevention strategies through public and professional education. The information collected by the center or reported to the center shall not be a public record as defined in section 7 of chapter 4, shall be confidential and shall not be subject to subpoena or discovery or introduced into evidence in any judicial or administrative proceeding, except as otherwise specifically provided by law.

(f) The center shall report annually to the general court regarding the progress made in improving patient safety and medical error reduction. The center shall seek federal and foundation support to supplement state resources to carry out the center's patient safety and medical error reduction goals.

SECTION 8. Chapter 10 of the General Laws is hereby amended by inserting after section 35U the following section:

Section 35V. (a) There shall be established upon the books of the commonwealth a separate fund to be known as the Division of Professional Licensure Trust Fund, to be expended, without prior appropriation, by the division of professional licensure. The fund shall consist of 50 per cent of the fee revenue collected in accordance with subsection (b) by the various boards serving within the division under section 9 of chapter 13 and the division. The fees shall be in addition to any existing fees collected for obtaining and renewing a license, certificate, registration, permit or authority as determined by the secretary of administration and finance under section 3B of chapter 7. The director of the division shall make necessary expenditures from this account for the shared administrative costs of the operations and programs of the division. The director shall further direct that funds from the account shall be expended to provide services in an amount reasonably related to the cost of each board or unit's administrative and regulatory mandates with consideration to revenue generated from each board or unit. The division may incur expenses, and the comptroller may certify for payment, amounts in anticipation of expected receipts; but no expenditure shall be made from the fund which shall cause the fund to be in deficit at the close of each fiscal year. All moneys deposited in the trust fund that are unexpended at the end of the fiscal year and that total not more than 20 per cent of the division's expenditures for the previous fiscal year shall not revert to the General Fund. The director shall report annually on March 1 to the house and senate committees on ways and means: (i) the revenue credited to the trust fund; (ii) the amount of trust fund expenditures that are attributable to the shared administrative costs of the division, and an explanation of why such administrative costs are necessary; (iii) an itemized list of the amount of trust funds expended by board or unit; and (iii) an analysis of the services provided based on trust fund expenditures by board or unit, including the manner in which the trust fund expenditures assist the division in meeting its regulatory mandates.

(b) Notwithstanding any general or special law to the contrary, the secretary of administration and finance, as directed by the majority vote of each board within the division of professional licensure or the division following a public hearing, shall increase fees for obtaining and renewing a license, certificate, registration, permit or authority issued by the board or division by an amount not to exceed 50 per cent, rounded to the nearest dollar, of the fees in effect as of July 1, 1996 to be expended by the director of registration pursuant subsection (a). Any board of registration established subsequent to July 1, 1996 may vote to increase fees based on the amount of the fee at the time of their original promulgation by the secretary of administration and finance. The secretary shall promulgate regulations to effect the change in fees not later than 45 days following the majority vote of each board or the division.

SECTION 9. Chapter 17 of the General Laws is hereby amended by adding the following section:-

Section 17. There shall be an advisory council on quality of care in nursing homes to consist of the commissioner of public health, the commissioner of medical assistance, the secretary of elder affairs, the director of the Commonwealth Corporation and 11 persons to be appointed by the governor, 2 of whom shall be representatives of the nursing home industry, 2 of whom shall be direct care workers who are certified as nurse's aides, 1 of whom shall be a registered nurse, 1 of whom shall be a licensed

practical nurse, 1 of whom shall be a member of a consumer advocacy organization, 1 of whom shall be a nursing home ombudsman, 1 of whom shall be an expert in labor recruitment and issues relative to the health care workforce, 1 of whom shall be a representative of a labor organization representing nursing home direct care workers recommended by the president of the Massachusetts AFL-CIO and 1 of whom shall be a family member of a nursing home resident.

The duties of the advisory council shall consist of the following:

(a) to propose regulations to the department of public health establishing appropriate staffing levels for long-term care facilities to ensure quality of care for residents. In developing such regulations, the council shall consider the staffing ratios recommended by the National Citizens' Coalition for Nursing Home Reform and staffing levels established in other states;

(b) to evaluate, annually, the required minimum staffing levels for nursing and ancillary nursing personnel set forth in department of public health's long-term care facility regulations and to make recommendations to ensure adequate staffing;

(c) to submit a report, annually, to the governor and file a copy of the report with the state secretary, the clerks of the senate and house of representatives reflecting any legislative, budgetary and policy recommendations necessary to support and improve quality of care in nursing homes; and

(d) to study the status of the healthcare workforce in the commonwealth and develop legislative, budgetary and policy recommendations on labor recruitment and retention, including workforce development, compensation and benefits for staff of long term-care facilities. In developing such recommendations, the council shall consult with individuals and organizations with expertise in the area of labor recruitment and workforce issues.

Members of the council shall choose the chairperson of the council. The council shall meet at least 4 times each year and shall convene special meetings at the call of the chairperson, a majority of the members of the council or the commissioner of public health. Members of the council shall be appointed for terms of 2 years and no member shall be appointed to serve more than 2 consecutive terms. Upon the expiration of the term of an appointed member, a successor shall be appointed in like manner for a term of 2 years. Members of the council shall serve without compensation but shall be reimbursed, subject to appropriation, for expenses actually and necessarily incurred in the discharge of their duties.

SECTION 10. The seventh paragraph of section 5G of chapter 18 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by adding the following sentence:- No third party shall require written authorization from the claimant before honoring the commonwealth's rights under this section.

SECTION 11. Chapter 19A of the General Laws, as inserted by Section 46 of chapter 159 of the acts of 2000, is hereby amended by striking sections 39 and 40 and inserting in place thereof the following sections:-

Section 39.

(a) For the purposes of this section and section 40, the following words shall, unless the context clearly requires otherwise, have the following meanings:-

“Department,” the department of elder affairs.

“Eligible person,” a resident of the commonwealth who:

- (1) is 65 years of age or older; or
- (2) has a gross annual household income less than or equal to 188 per cent of the federal poverty level, does not work more than 40 hours per month and meets: (i) the disability requirements of the CommonHealth program, so-called, under clause (h) of subsection (2) of section 9A of chapter 118E, notwithstanding the income eligibility requirements under said clause (h); or (ii) the disability requirements of the CommonHealth program, so-called, under section 16 of said chapter 118E, notwithstanding the income eligibility requirements under said clause (h); or (iii) the disability requirements of the CommonHealth program, so-called, under section 16A of said chapter 118E; or
- (3) was enrolled in the Pharmacy Program, so-called, or the Pharmacy Program Plus, so-called, as of March 31, 2001; and
- (4) is not eligible for pharmacy benefits or coverage under said chapter 118E other than under said clause (h) of said subsection (2) of said section 9A, said section 16, or said section 16A of said chapter 118E.

“Enrollee,” an eligible person who has applied and enrolled in the program established by this section.

“Enrollment,” the process during which the program accepts and receives applications for the purpose of review, determination of eligibility and approval of applicants for entry into the program.

“Mail service program,” a program to dispense prescription drugs by postal delivery service designated and administered by the department, and any entity with which it contracts, upon an enrollee's submission of a prescription and the applicable co-payment.

“Maintenance drug,” a prescription drug prescribed to an individual for a chronic condition, the use of which is medically necessary for a consecutive period of 90 days or longer.

“Open Enrollment,” a period of time as determined by the secretary during which the program accepts enrollment forms from eligible applicants age 66 or over who did not enroll during the period in which they were initially eligible.

“Out-of-Pocket Expenditures,” the total amount paid by an enrollee to satisfy the applicable annual deductible and co-payments, not including monthly premiums.

“Pharmacy benefit manager,” an entity under contract with the department, whether organized on a for-profit or a not-for-profit basis, contracted to manage the program established by this section.

“Program,” the subsidized catastrophic prescription drug insurance program.

“Review commission,” the prescription drug review commission.

“Secretary,” the secretary of the department of elder affairs.

(b) The department shall administer a subsidized catastrophic prescription drug insurance program designed to provide eligible persons with prescription drug coverage. Said program shall be the payer of last resort for the provision of such outpatient prescription drug coverage. The program shall be actuarially sound. Enrollment in the program shall be voluntary and shall be funded each fiscal year, subject to appropriation, from the Tobacco Settlement Fund established by section 2XX of chapter 29.

(c) The secretary shall enter into a competitively procured contract with one or more entities including, but not limited to, a pharmacy benefit manager, to administer benefits under the program. The secretary shall take all necessary steps to ensure that the program is structured in a way that maximizes savings, efficiencies, affordability, benefits and coverage. The procurement shall explicitly be made a part of, or said contract shall be performed in conjunction with, the aggregate purchasing program established by section 271 of chapter 127 of the acts of 1999, or any successor statute. The department shall contract with entities to perform marketing, enrollment, billing, claims processing, claims management or any other function it deems necessary.

(d) No outpatient prescription drug shall be excluded from any formulary established for the program unless another outpatient prescription drug is available on said formulary that is therapeutically equivalent to the excluded outpatient prescription drug; but the secretary may establish a formulary that excludes certain outpatient prescription drugs or classes of outpatient prescription drugs upon said secretary’s written determination, pursuant to subsection (r), that the exclusion is necessary to maintain the fiscal viability of the program. The review commission shall review and comment on the formulary and any changes thereto.

(e) Notwithstanding any general or special law to the contrary, the department shall, subject to appropriation, engage in outreach marketing efforts to maximize enrollment in the program for the purpose of spreading the risk, so-called, of the program established herein.

(f) Not later than thirty days prior to enrolling eligible persons in said program, and annually thereafter, the department shall establish a schedule of monthly premiums and annual deductibles based on a sliding income scale payable by enrollees whose gross annual household income is greater than 188 per cent of the federal poverty level. The department shall establish a separate schedule of monthly premiums and deductibles

based on a sliding income scale payable by married applicants whose gross annual household income is greater than 188 per cent of the federal poverty level. The commonwealth shall be liable for the cost of the monthly premium and annual deductible established by the schedules for any and all enrollees whose gross annual household income is less than or equal to 188 per cent of the federal poverty level, unless the secretary determines in writing, pursuant to subsection (r), that requiring such enrollees to pay premiums or deductibles is necessary to maintain the fiscal viability of the program. Each enrollee shall separately pay the applicable monthly premium and annual deductible according to the applicable monthly premium and deductible schedule established by the secretary.

(g) The determination of eligibility for the program shall be based on an enrollee's gross annual household income. The department or its designee shall verify income for the program based on the submission of the most recently required federal income tax return for the household or, if an applicant is not required to file a return, the submission of copies of 1099 forms or other easily obtainable means of income verification. Residency shall be verified by the submission of such documentation as the department deems reasonable.

(h) After an enrollee satisfies his or her applicable out-of-pocket annual deductible amount, the program shall pay the costs of any outpatient prescription drug in excess of an enrollee's applicable co-payment amount. Subject to this section, the program shall pay the costs of all outpatient prescription drugs after an enrollee's out-of-pocket expenditures for outpatient prescription drugs exceed the lesser of (a) 10 per cent of such enrollee's gross annual household income; or (b) \$2,000 in out-of-pocket expenditures made by an enrollee for co-payments and deductibles in a fiscal year. The plan shall pay the cost of all outpatient prescription drugs for married enrollee's who are both enrolled and residing in the same household after such enrollee's combined out-of-pocket expenditures for outpatient prescription drugs exceed the lesser of (a) 10 per cent of such married enrollee's combined gross annual household income; or (b) \$3,000 in combined out-of-pocket expenditures made by such married enrollee's for co-payments and deductibles in a fiscal year. For purposes of this paragraph, out-of-pocket expenditures shall not include any amounts paid by an enrollee as a condition to receiving outpatient prescription drugs from any other source.

(i) Program enrollees shall be responsible for retail and mail service co-payments for each outpatient prescription as established by the secretary.

(j) Subject to this section, the department shall offer a mail service program and may require the use of a mail service program for maintenance drugs.

(k) In order to maintain the fiscal viability of the program, after the first 12 months of said program, cost sharing required of enrollees whose gross household income is greater than 188% FPL in the form of co-payments, premiums and deductibles, or any combination thereof, shall be adjusted annually by the department to reflect price trends for outpatient prescription drugs, as determined by the secretary. The review commission

shall review the actuarial assumptions of such adjustments. Not later than 30 days prior to making any such adjustments, the secretary shall submit to the chairman of the senate and house committees on ways and means the reasons therefor and all actuarial assumptions and other supporting materials upon which such adjustments are based.

(l) During the initial 12-month period the program is in effect, an eligible person may enroll at any time, after which, application to the program shall be made during an open enrollment period established by the department, but a person shall be eligible to enroll in the program at any time within the year of reaching age 65. The department shall establish a surcharge for any eligible person whose gross annual household income is greater than 188 per cent of the federal poverty level and who fails to enroll within their first year of eligibility.

(m) Coverage shall be effective as of the date an application for enrollment is approved by the department. The secretary shall close enrollment or an established open enrollment period or modify premium and eligibility income levels upon a written determination by the secretary that program expenditures are projected to exceed the amount appropriated for the program or, based on not less than nine months of claims and enrollment data for the current fiscal year, expenditures in the subsequent fiscal year are clearly projected to annualize beyond the expenditures projected by the department in the subsequent fiscal year.

(n) The department, and any entity with which it contracts, shall inform enrollees in writing of the program's scope, coverage, cost sharing requirements and any limitations on access to outpatient prescription drugs. The department shall create a process that provides for a clear and timely process by which enrollees can seek review of a decision by the department or any contracted entity to deny or limit coverage or benefits under this section.

(o) The appeal process shall, at a minimum, provide enrollees with the opportunity to (1) obtain a nonpreferred drug at the co-payment level of a preferred drug, or to obtain any prescription drug excluded by the program, upon the separate written certification by the enrollee's physician, satisfactory to the department, that the nonpreferred or excluded drug is medically necessary and there is no therapeutically equivalent preferred drug available to the enrollee on the formulary established for the program, and documentation, satisfactory to the department from the enrollee exhibiting that payment for such drug would create a financial hardship to said enrollee; (2) appeal the exclusion of any prescription drug from any formulary established for said program, upon the separate written certification by the enrollee's physician, satisfactory to the department, that the nonpreferred or excluded drug is medically necessary, that there is no therapeutically equivalent preferred drug available to the enrollee on the formulary established for the program, and documentation, satisfactory to the department, from the enrollee exhibiting that payment for such drug will create a financial hardship to said enrollee. An enrollee may apply to be exempt from any mail service requirement of the program upon a separate written certification by the enrollee's physician, satisfactory to

the department, that due to a disability or other significant limiting factor, the use of such a mail service program would be medically inappropriate for the enrollee.

(p) A retail pharmacy shall not be required to dispense an outpatient prescription upon the failure of an enrollee to make the required co-payment.

(q) The Secretary shall promulgate such rules and regulations as may be necessary to implement and administer the program.

(r) In the event that the Secretary determines that the program is unsustainable and that modifications to the terms of the program are necessary to sustain the long term viability and cost effectiveness of the program, said secretary shall submit a report to the clerks of the house and senate and the prescription drug review commission certifying said determination and detailing necessary program modifications; provided, that not less than 30 days prior to implementing any such program modifications, said secretary shall issue public notification and convene a public hearing on any such findings and proposed changes. Notwithstanding this section, the secretary shall make necessary adjustments or rescind any modifications to the terms of the program, including to the program formulary or to the cost sharing required of low income enrollees, to the extent necessary to obtain federal financial participation or federal reimbursement for program expenditures.

Section 40.

(a) There shall be a prescription drug review commission, hereinafter referred to as the commission, to oversee the program established in section 39. The commission shall consist of: the speaker of the house of representatives; the president of the senate; the chairs of the house and senate ways and means committees or their designees; the co-chairs of the joint committee on health care or their designees; the secretary of elder affairs or his designee and nine members to be appointed by the governor, including two representatives of senior citizens' advocacy organizations, two representatives of disability advocacy organizations, a health care economist from a university or college within the commonwealth, two representatives from retail pharmacies, an individual who is a full-time employee of a pharmaceutical manufacturer and an individual who is a full-time employee of a biotechnology manufacturer. A representative of the contracted pharmacy benefit manager shall also participate, but shall not be a voting member of the commission.

(b) The commission shall be co-chaired by the speaker of the house of representatives and the president of the senate. The commission shall adopt such rules and establish such procedures as it deems necessary for the oversight of the program established in section 39. No action of the commission shall be considered approved unless it is endorsed by a majority vote of the commission.

(c) The commission shall meet annually and shall, not less than annually, submit written recommendations to the governor regarding changes to the administration, management, eligibility criteria, benefits, funding or any other aspect of the program.

(d) To facilitate the commission's development of the recommendations, the department, and any entity with which it contracts, shall review the operations of the program and, not less than biannually, prepare and submit the following summary information to said commission:

- (1) financial reports of said program, including actual and projected costs and revenues and an analysis of the adequacy of appropriated funding;
- (2) enrollment information, including enrollee demographics and benefit utilization data;
- (3) specific problems associated with the program and suggested strategies to resolve such problems;
- (4) a review of the pharmacy benefit manager's designated formulary for the program and any proposed changes thereto;
- (5) an analysis of current and future technological advancements that may result in cost savings or otherwise affect the program;
- (6) an analysis of the program's cost sharing requirements including, but not limited to, co-payments, premiums and deductibles, in relation to actual market trends in outpatient prescription drug costs, prescription drug inflation and any proposed changes thereto;
- (7) an analysis of the disabled enrollees' drug utilization pattern including, but not limited to, the cost associated with such utilization and the implications for expanding benefits to all disabled individuals who reside in the commonwealth; and
- (8) all other information requested by the commission.

In developing its recommendations, the commission shall consult with representatives of parties who may be affected by the commission's recommendations including, but not limited to, the drug formulary commission, as established by section 13 of chapter 17.

SECTION 12. Section 6 of chapter 25A of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by inserting after the word "contracts" in line 18, the following words: - , including contracts for the insurance of vehicles in the alternative fuel vehicle demonstration program.

SECTION 13.(A) Section 2H of chapter 29 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking out, in line 28, the figure "7.5" and inserting in place thereof the following figure: — 10.

B. Said chapter 29 is hereby further amended by inserting after section 2AAA the following 2 sections:—

Section 2BBB. There shall be set up on the books of the commonwealth a separate fund to be known as the One-Time Capital Projects Improvement Fund. All expenditures from the fund shall be subject to appropriation. There shall be credited to this fund all revenues or other financing sources directed to it in accordance with section 5C and any income derived from the investing of all amounts credited to the fund. Said fund shall at no time during the fiscal year have a negative fund balance. Said fund may be credited

with other appropriations, grants, gifts or other contributions explicitly made to said fund. Income derived from the investment of amounts credited to said fund shall remain in said fund and be subject to appropriation.

Section 2CCC. There shall be set up on the books of the commonwealth a separate fund to be known as the Open Space Acquisition Fund. There shall be credited to this fund all revenues or other financing sources directed to it in accordance with section 5C and any income derived from the investing of all amounts credited to the fund. Monies credited to the fund shall be allocated by the executive office of environmental affairs, without further appropriation, to agencies under the jurisdiction of said executive office for the acquisition of open space. Agencies in receipt of an allocation shall expend funds in accordance with existing programs and regulations governing open space.

C. Section 5C of said chapter 29, as appearing in the 2000 Official Edition, is hereby amended by striking out clauses (b) and (c) and inserting in place thereof the following⁴ clauses:—

(b) the comptroller shall transfer 5 per cent of the amount remaining of the consolidated net surplus after amounts made available in clause (a) to the One-Time Capital Projects Improvement Fund established in section 2BBB ;

(c) the comptroller shall transfer 15 per cent of the amount remaining of the consolidated net surplus after amounts made available in clause (a) to the Open Space Acquisition Fund established in section 2CCC;

(d) for any fiscal year for which the comptroller determines on or before October 31 of the succeeding fiscal year that there is a negative balance in the funds created pursuant to section 49 as reported in his annual financial report, the comptroller may transfer funds up to 20 per cent of the amount remaining of the consolidated net surplus after amounts made available in clauses (a), (b) and (c) to an account established pursuant to the comptroller's authority under sections 8 and 9 of chapter 7A for the purposes specified in said section 49; and

(e) 60 per cent of any remaining amount of such consolidated net surplus shall be transferred to the Commonwealth Stabilization Fund from the General Fund and 40 per cent of any remaining amount of such consolidated net surplus shall be transferred to the Commonwealth Stabilization Fund from the Local Aid Fund.

SECTION 14. Chapter 29 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking out section 2Z, as appearing, and inserting in place thereof the following section:-

Section 2Z. There shall be established and set up on the books of the commonwealth a separate fund to be known as the Commonwealth Sewer Rate Relief Fund. The fund shall consist of all amounts credited to the fund and any income derived from the investment of amounts credited to the fund. All amounts credited to the fund shall be held in trust and used solely for the purposes of this section. Amounts credited to the fund shall be available to mitigate sewer rate increases due to debt service obligations created by issuing eligible indebtedness. For the purposes of this section, eligible indebtedness shall mean debt issued on or after January 1, 1990, which has a final date of maturity more than 5 years after the date of issuance and which is incurred, wholly or in

substantial part, to finance or refinance the cost of planning, design or construction of a water pollution abatement project, or part thereof, required to be constructed to meet the provisions of the Federal Water Pollution Control Act, 33 U.S.C. sections 1251 et seq., and sections 26 to 53, inclusive, of chapter 21, or any wastewater collection or transportation project related thereto. Eligible indebtedness shall not include any indebtedness for which the issuer has received assistance provided from state grants. Notwithstanding this section, eligible indebtedness shall include indebtedness incurred to finance the Metrowest Water Supply Tunnel. Eligible indebtedness shall include indebtedness incurred pursuant to loan agreements under the provisions of chapter 275 of the acts of 1989 which exceeded \$50,000,000 by June 30, 1995, and the debt service attributable thereto for any year, for purposes of this section, shall be the net obligation borne by the issuer after application of any credits, subsidies or assistance, however characterized, provided under the provisions of the aforementioned laws. No city, town, district, commission, agency, authority, board or other instrumentality of the commonwealth or any of its political subdivisions which is responsible for the ownership or operation of wastewater treatment projects and is authorized to finance all or any part of the cost thereof through the issuance of eligible indebtedness, in this section called an issuer, shall receive relief authorized by this section in excess of 20 per cent of its annual debt service obligations due to eligible indebtedness. The division of local services of the department of revenue, in consultation with the department of environmental protection, shall develop guidelines to certify an issuer's eligible indebtedness and shall create a process to distribute funds equitably to eligible issuers, in order to mitigate extraordinary increases in sewer costs. Funds disbursed in any fiscal year shall be disbursed on or before March 31 of the fiscal year. The board, office or commission responsible for setting sewer charges in each city, town, district or commission that either receives aid itself or is a member of a regional entity that receives aid pursuant to this section shall certify to the division of local services that it has reduced sewer charges to reflect its share of any such aid. No expenditure shall cause the fund to be in deficit at the end of the fiscal year.

SECTION 15. (A) Subsection (a) of section 2XX of chapter 29 of the 2000 official edition is hereby amended by striking said subsection (a) and inserting in place thereof the following section:—

(a) There shall be established and set up on the books of the commonwealth a separate fund to be known as the Tobacco Settlement Fund. There shall be credited to said fund: (1) for fiscal years 2000 to 2001, inclusive, all amounts designated in the schedule of payments contained in paragraph (c) of section 3 of chapter 29D of the General Laws; (2) for fiscal years 2002, 2003 and 2004, 50 percent of all payments received by the commonwealth each year pursuant to the master settlement agreement the action known as Commonwealth of Massachusetts v. Phillip Morris, Inc. et. Al., Middlesex Superior Court, No. 95-7378, 50 percent of the earnings generated each year from the Health Care Security Trust as certified by the comptroller pursuant to paragraph (f) of section 3 of said chapter 29D of the General Laws, and 50 percent of any monies generated by any other claim or action undertaken by the attorney general against a manufacturer of cigarettes to recover the amount of medical assistance provided pursuant to chapter 118E or any other claim or action taken by the attorney general against a manufacturer of

cigarettes; (3) for fiscal years 2005 and thereafter 30 percent of all payments received by the commonwealth each year pursuant to the master settlement agreement the action known as Commonwealth of Massachusetts v. Phillip Morris, Inc. et. Al., Middlesex Superior Court, No. 95-7378, 30 percent of the earnings generated each year from the Health Care Security Trust as certified by the comptroller pursuant to paragraph (f) of section 3 of said chapter 29D of the General Laws, and 30 percent of any monies generated by any other claim or action undertaken by the attorney general against a manufacturer of cigarettes to recover the amount of medical assistance provided pursuant to chapter 118E or any other claim or action taken by the attorney general against a manufacturer of cigarettes; (4) any federal reimbursement received pursuant to Title XIX and Title XXI of the Social Security Act, or a successor statute, as a result of the operation of programs funded by the expenditures from said fund; (5) any fees, premiums, co-payments, assessments or other revenues collected as a result of the operation of programs funded by expenditures from said fund; (6) any appropriation, grant, gift, or other contribution explicitly made to said fund; and (7) any income derived from the investment of amounts credited to said fund.

(B) Subsection (a) of section 3 of chapter 29D as appearing in the 2000 official edition is hereby amended by striking said subparagraph (ii) and inserting in place thereof the following:—

(ii) for fiscal years 2002, 2003 and 2004, 50 percent of any monies generated by any other claim or action undertaken by the attorney general against a manufacturer of cigarettes to recover the amount of medical assistance provided pursuant to chapter 118E or any other claim or action undertaken by the attorney general against a manufacturer of cigarettes for fiscal years 2005 and thereafter, 70 percent of any monies generated by any other claim or action undertaken by the attorney general against a manufacturer of cigarettes to recover the amount of medical assistance provided pursuant to chapter 118E or any other claim or action undertaken by the attorney general against a manufacturer of cigarettes;

(C) Subsection (c) of section 3 of chapter 29D, as appearing in the 2000 official edition, is hereby amended by striking said subsection (c) and inserting in place thereof the following:—

(c) The comptroller shall promptly certify to the fiscal affairs division, the house and senate committees on ways and means, the joint committee on health care and the advisory committee on health care and tobacco control established pursuant to section 5, the amount and date when any payments are made pursuant to the master settlement agreement in the tobacco action and any other payments are made or credited to said fund.

In fiscal years 2000 and 2001, inclusive, the comptroller shall transfer sums from the Health Care Security Trust Fund to the Tobacco Settlement Fund in accordance with the following schedule: in fiscal year 2000, the sum of \$91.2 million, in fiscal year 2001, the sum of \$94 million.

In fiscal years 2002, 2003 and 2004, the comptroller shall transfer 50 percent of the total of all annual payments made pursuant to the master settlement agreement in the tobacco action and received in that fiscal year to the Health Care Security Trust Fund to the

Tobacco Settlement Fund; provided that amounts received in any fiscal year as strategic contribution fund payments, pursuant to the master settlement agreement, shall not be transferred to the Tobacco Settlement Fund. The comptroller shall adjust the amounts of all such transfers made pursuant to the forgoing and applicable to all payments made thereafter by applying to such payments the adjustment factors established in the master settlement agreement in the tobacco action, as verified by and in consultation with the attorney general.

In fiscal years 2005 and thereafter, the comptroller shall transfer 30 percent of the total of all annual payments made pursuant to the master settlement agreement in the tobacco action and received in that fiscal year to the Health Care Security Trust Fund to the Tobacco Settlement Fund; provided that amounts received in any fiscal year as strategic contribution fund payments, pursuant to the master settlement agreement, shall not be transferred to the Tobacco Settlement Fund. The comptroller shall adjust the amounts of all such transfers made pursuant to the foregoing schedule and applicable to all payments made thereafter by applying to such payments the adjustment factors established in the master settlement agreement in the tobacco action, as verified by and in consultation with the attorney general.

(D) Subsection (f) of section 3 of chapter 29D as appearing in the 2000 official edition is hereby amended by striking said subsection (f) and inserting in place thereof the following:—

(f) Not later than October 31 of each year, the comptroller shall certify to the trustees, the fiscal affairs division, the house and senate committees on ways and means, the joint committee on health care and the advisory committee on health care and tobacco control the balance in the Tobacco Settlement Fund, the balance in the Health Care Security Trust Fund and the amount of earnings generated by the principal of said trust fund during the prior 12 month period ending on September 30. On or before July 1 of each year, for fiscal years 2002, 2003 and 2004, the comptroller shall transfer 50 percent of said earnings, as so certified by the comptroller in the previous October, from the Health Care Security Trust to the Tobacco Settlement Fund, which shall be available for expenditure. For fiscal years 2005 and thereafter, the comptroller shall transfer 30 percent of said earnings, as so certified by the comptroller in the previous October, from the Health Care Security Trust to the Tobacco Settlement Fund, which shall be available for expenditure.

SECTION 16. Said chapter 29 of the General Laws, as so appearing, is hereby further amended by inserting after section 2AAA, inserted by section 3 of chapter 7 of the acts of 2001, the following section:-

Section 2BBB. Notwithstanding any general or special law to the contrary, the division of medical assistance and the department of public health shall deposit all monies collected as civil monetary penalties from nursing homes participating in the Medicaid program authorized by Title XIX of the Social Security Act into a separate expendable trust fund which shall be designated and known as the Commonwealth of Massachusetts Civil Monetary Penalties Fund. Monies collected as civil monetary penalties from nursing homes shall include both monies collected from Medicaid-only facilities, known as nursing facilities, and the commonwealth portion of funds collected

from dually participating facilities, known as skilled nursing facilities or nursing facilities, for noncompliance with sections 1919(b), 1919(c) and 1919(d) of the Social Security Act and monies collected from individuals pursuant to sections 1919(b)(3)(B)(ii)(I), 1919(b)(3)(B)(ii)(II) and 1919(g)(2)(A)(i) of the Social Security Act. The department may expend monies from this fund without further appropriation in accordance with the provisions of this section. The department shall administer the fund in accordance with law including, without limitation, section 1919(h)(2)(A)(ii) of the Social Security Act. The department shall expend monies in the fund for measures to protect the health and property of nursing home residents in nursing home facilities found by the department or the secretary of health and human services to be deficient including, without limitation, the following: (i) nursing facility staff training and education; (ii) technical assistance for troubled facilities; (iii) dissemination of best practice models for quality of care issues, such as malnutrition and dehydration; (iv) state operation of facilities pending correction of deficiencies or closure; (v) reimbursement of facility residents for lost personal funds or property; and (vi) costs of relocating residents from one facility to another. No expenditure shall cause the fund to be in deficit at the end of the fiscal year.

SECTION 17. Subsection (1) of section 22C of said chapter 32 of the General Laws of the 2000 edition, as so appearing, is hereby further amended by adding the following paragraph:- Notwithstanding any general or special law to the contrary, appropriations made to the commonwealth's pension liability fund in fiscal year 2002 to 2004, inclusive, shall be made in accordance with the following funding schedule: \$912,373,000 in fiscal year 2002, \$926,087,000 in fiscal year 2003 and \$940,486,000 in fiscal year 2004.

SECTION 18. Section 18C of chapter 58 of the General Laws, as appearing in section 106 of chapter 450 of the acts of the acts of 1996, is hereby amended by adding the following subsection:-

(4) Notwithstanding clause Forty-first of section 7 of chapter 4 or any other general or special law to the contrary, the commissioner of revenue or any official responsible for a local reimbursement or assistance program reported by said commissioner pursuant to section 25A of chapter 58 shall use, as appropriate, the most recent city and town population estimates of the United States Bureau of the Census in calculating distributions or assessments under local reimbursement or assistance programs. Such distribution programs shall include, but not be limited to, the chapter 70 school aid program, and aid to regional public libraries. Such assessments shall include, but not be limited to, air pollution control districts, the metropolitan area planning council, the old colony planning council, the Massachusetts Bay Transportation Authority and any other entity for which said commissioner is required to give notice pursuant to said section 25A.

SECTION 19. (A)Section 6 of chapter 64H of the general Laws, as appearing in the 2000 official Edition, is hereby amended by adding the following 2 paragraphs:-

(uu) Sales of repair or replacement parts exclusively for use in aircraft or in the significant overhauling or rebuilding of aircraft or aircraft parts or components on a factory basis.

(vv) Sales of aircraft.

(B) Section 7 of chapter 64I of the general Laws, as appearing in the 2000 Official Edition, is hereby amended by adding the following 2 paragraphs:-

(d) Storage, use or other consumption of repair or replacement parts exclusively for use in aircraft or in significant overhauling or rebuilding of aircraft or aircraft parts or components on a factory basis.

(e) Storage, use or other consumption of aircraft.

(C) The department of revenue and the Massachusetts Aeronautic Commission shall review and analyze all statistical data available for the purpose of determining the economic and revenue impact of the sales and use tax exemptions provided in this section. Such report shall include, but not be limited to, an analysis of any increases to the commonwealth in airplane maintenance and aviation related employment, any increase in hangaring and any increases in revenues associated with any increases in economic activity resulting from section 18A. The department of revenue and the Massachusetts Aeronautics Commission shall report their findings to the joint committee on taxation on or before January 1, 2006.

SECTION 20. Chapter 90 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by inserting, after section 19J, the following section:-

Section 19K. For the purposes of this section only, the term "hitching mechanism" shall be defined as the lift cylinder and the lift arm. Nothing in this section shall apply to state, county, or municipally owned or operated vehicles. Between May 15 and October 15 of each year, a motor vehicle with a gross weight of less than 26,000 pounds which is equipped with a plow shall be required to have removed the plow and hitching mechanism used with the plow. Vehicles equipped with an apparatus that allows the hitching mechanism to be folded flat leaving no protruding surfaces shall only be required to have the plow itself removed, provided that the hitching mechanism is in the folded flat position while the vehicle is in operation. If snowfall occurs prior to October 25 or after May 15, vehicles subject to this section may be re-equipped with the plow and apparatus necessary for clearing snow. Such vehicles shall comply with this section within 72 hours of the conclusion of the snowfall. An individual found operating a motor vehicle in violation of this section shall be issued a warning for the first offense, shall be fined \$250 for the second offense and \$500 and revocation of the vehicle's registration for the third offense. The revocation of a vehicle's registration due to a third offense shall remain in effect until such time as the vehicle is in compliance with this section. This section shall not apply to hitching mechanisms which are permanently affixed through welding or other means, prior to the effective date of this section. It shall be a violation of this section and punishable by the same fines and revocations for a person to permanently affix through welding or other means a hitching mechanism governed under this section after the effective date of this section.

SECTION 21. Section 1 of chapter 111K of the General Laws, as appearing in the 2000 official Edition, is hereby amended by inserting after the word “medical”, in line 5, the following words:- and related.

SECTION 22. Said chapter 111K is hereby further amended by striking out section 5, as so appearing, and inserting in place thereof the following section:

Section 5. The commission shall have the following powers and duties:-

(a) to establish a program to administer the fund and authorize the payment or medical reimbursement of the medical and related expenses of children with catastrophic illnesses;

(b) to establish procedures for applying to the fund, determining the eligibility for the payment or reimbursement of medical expenses for each child and processing claim disputes;

(c) to establish procedures for reimbursement of the fund where a family, after receiving assistance from the fund, recovers the costs for a child’s medical expenses from a catastrophic illness pursuant to a settlement or judgment in a legal action;

(d) to establish the amount of reimbursement for the medical expenses of each child using a sliding fee scale based on a family’s ability to pay for medical expenses, which takes into account family size, family income and assets and family medical expenses;

(e) to adjust the financial eligibility criteria established pursuant to section 1 based upon the monies available in the fund;

(f) to disseminate information on the fund and the program to the public;

(g) to maintain confidential records on each child who applies for assistance under the fund; and

(h) to authorize and make payment of all administrative costs, not to exceed 3 per cent of the monies transferred into the fund in a given fiscal year, related to the management of the program, including but not limited to, costs for staff to manage the program and coordinate the work assigned by the commission and materials development, printing, postage and telephone expenses.

SECTION 23. Chapter 118E of the General Laws is hereby amended by inserting after section 10C the following new section:-

Section 10D. The division shall, within the limits of the funds appropriated for such purpose, provide coverage to eligible women who require medical treatment for either breast or cervical cancer in accordance with 1902(a)(10)(A)(ii)(XVIII) of the breast and cervical cancer prevention and treatment act of 2000 (PL 106-354). Said coverage shall be provided to women who meet the requirements of said federal act and any cost sharing prerequisites that said division may impose. Said division shall collaborate with the department of public health in order to incrementally implement said program, efficiently administer such benefits, and verify recipient eligibility and income information. Said program shall take effect upon written certification by the division to the secretary of administration and finance and the house and senate committees on ways and means that the federal Health Care Financing Administration has granted said division the approval to implement and administer such program.

SECTION 24. Section 17 of said chapter 118E, as so appearing, is hereby amended by striking out, in line 9, the word “or” and inserting in place thereof the following word:- and.

SECTION 25. Subsection O of Section 18 of Chapter 118G of the General Laws as appearing in the 2000 Official Edition is hereby amended by striking out the second sentence and inserting in its place thereof following: -

All amounts credited to this account shall be held in trust and shall be available for expenditure by the commissioner of the division of medical assistance to be used for medical assistance payments to entities designated and authorized by the general court, or which have contractually agreed to make intergovernmental transfers to said account; provided that any amount in excess of such medical assistance payments may be credited to the general fund; provided further, however, that the amount of all such expenditures shall be subject to annual approval by the general court.

SECTION 26. The seventh paragraph of section 22 of said chapter 118E, as so appearing, is hereby amended by adding the following sentence:- No third party shall require written authorization from the claimant before honoring the commonwealth’s rights under this section.

SECTION 27. Said chapter 118E, as so appearing, is hereby further amended by striking out section 23, as amended by section 129 of chapter 127 of the acts of 1999, and inserting in place thereof the following section:—

Section 23. Notwithstanding any other provision of general or special law, rule or regulation, the division shall be subrogated to the right of any recipient of medical assistance under this chapter to proceed against any health care insurer that is or may be liable to pay for covered services obtained by a recipient of medical assistance to the extent of any medical benefits provided by the division on behalf of the recipient or his or her dependents. No health care insurer shall require written authorization from the recipient before honoring the division's rights under this section. A health care insurer shall reimburse the division for any medical benefits provided by the division on behalf of a recipient of medical assistance, and shall not reduce the amount of the total reimbursement by any division payment, provided that any part of the total that is a reimbursement for a division payment shall not exceed the amount actually paid by the division.

A recipient of medical assistance or any person legally obligated to support and have actual or legal custody of a recipient of medical assistance shall inform the division of any health insurance available to such recipient upon initial application and redetermination for eligibility for assistance and shall make known the nature and extent of any health insurance coverage to any person or institution that provides medical benefits to the recipient or his or her dependent.

No policy for health insurance for health care delivery administered, issued or renewed in the commonwealth shall contain any provision denying or reducing benefits to a person who is eligible for or who is receiving medical assistance under this chapter.

A provider of medical assistance under this chapter shall determine whether any recipient for whom it provides medical care or services that are or may be eligible for reimbursement pursuant to this chapter is a subscriber or beneficiary of a health insurance plan. The division is the payor of last resort, and accordingly a provider shall request payment for medical care or services it provides from a health insurer which is or may be liable for the medical care or services so provided, before payment is requested from the division.

Payment by the division under the medical assistance programs established by this chapter shall constitute payment in full; subsequent to any such payment a provider may not recover from any health insurer an amount greater than the amount so paid by the division for any service for which the division is to be the payor of last resort.

Notwithstanding the provisions of any general or special law or rule or regulation to the contrary, all holders of health insurance information, including, but not limited to, health insurers doing business in the commonwealth, all private and public entities who employ individuals in the commonwealth, and all agencies of the commonwealth, shall provide sufficient information to the division, or in the case of said agencies, shall make other arrangements mutually satisfactory to both agencies, to enable the division: (a) to identify whether any of the following persons are or could be beneficiaries under any policy of insurance in the commonwealth: (1) persons applying for or receiving medical assistance or benefits under this chapter or health services through an agency under the executive office of health and human services, (2) persons for whom hospitals and community health centers claim payments from the uncompensated care pool under chapter 118G; and (b) to determine the cost, scope, and terms of said policy of insurance.

The division may, after notice and opportunity for hearing, garnish the wages, salary, or other employment income of, and shall, with the assistance of the department of revenue pursuant to section 3 of chapter 62D, withhold amounts from state tax refunds to, any person who: (a) is required by court or administrative order to provide coverage of the costs of health services to a child who is eligible for medical assistance under this chapter; (b) has received payment from a third party for the costs of such services to such child; but, (c) has not used such payments to reimburse either the other parent or guardian of such child or the provider of such services, to the extent necessary to reimburse the division for expenditures for such costs.

SECTION 28. Section 41A of chapter 118E of the General Laws, as inserted by section 225 of chapter 159 of the acts of 2000, is hereby repealed.

SECTION 29. Chapter 118G of the General Laws is hereby amended by inserting after section 6 the following section:-

Section 6A. (a) In fulfillment of its duties pursuant to clause (a) of the second paragraph of section 2, the division shall collect and analyze such data as it deems necessary in order to better protect the public's interest in monitoring the financial conditions of acute hospitals. Such information shall be analyzed on an industry-wide and hospital-specific basis and shall include, but not be limited to: (1) gross and net patient service revenues; (2) sources of hospital revenue, including revenue excluded from consideration in the establishment of hospital rates and charges pursuant to section 12; (3) private sector charges; (4) trends in inpatient and outpatient case mix, payor mix,

hospital volume and length of stay; and (5) other relevant measures of financial health or distress.

(b) The division shall publish annual reports and establish a continuing program of investigation and study of financial trends in the acute hospital industry, including an analysis of systemic instabilities or inefficiencies that contribute to financial distress in the acute hospital industry. Such reports shall include an identification and examination of hospitals that the division considers to be in financial distress, including any hospitals at risk of closing or discontinuing essential health services, as defined by the department of public health pursuant to section 51G of chapter 111, as a result of financial distress.

(c) The division may modify uniform reporting requirements established pursuant to section 6 and may require hospitals to report required information quarterly to effectuate the purposes of this section.

SECTION 30. The third paragraph of section 57 of chapter 121B of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking out clause (d) and inserting in place thereof the following clause:-

(d) The total amount of urban revitalization and development grants to be paid under this section shall not exceed \$4,400,000 in any one fiscal year or a total of \$60,000,000 in the aggregate, including amounts authorized by the department to be advanced for the estimated expenses as provided in the first paragraph.

SECTION 31. Section 51 of chapter 132 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking out the first paragraph and inserting in place thereof the following paragraph:—

Mount Wachusett Community College may establish a Forest and Wood Products Institute and establish experimental sites for the purpose of achieving its mission. The institute shall be established for the purposes of (1) promoting the effective management of private and public forests and assisting private enterprise in the creation, maintenance, expansion and marketing of forest-related and wood-related products; (2) promoting the development and increased use and affordability of biomass and related renewable energy resources demonstrating the role of biomass as a sustainable, renewable energy source addressing the current concerns of air quality, green house emissions, and forest management practices, establishing applied research and development activities that examine and promote best available control technology serving as a depository of information regarding biomass and related renewable energy resources, providing consulting and “technology transfer” assistance to the public sector in an effort to help public institutions replicate best available practices in incorporating renewable energy strategies into existing and future construction and providing a forum for public education and training regarding renewable energy and related application; and (3) promoting education in the skills, technologies and sciences relevant to the creation maintenance and improvement of both commercial wood products and a healthy and sustainable forest resource, in consultation and conjunction with the state extension service, the department of forest and wildlife management at the university of Massachusetts, the department of environmental management, the metropolitan district commission, the Forest Service of the United States Department of Agriculture, school systems within the north central Massachusetts region, students in secondary, post-

secondary and graduate levels, timber harvesters, foresters, wood product industry owners, managers and employees, forest land owners, and municipal officials.

SECTION 32. (A) Subsection (i) of section 14G of chapter 151A of the General Laws as so appearing is hereby amended by adding the following sentence:- Said division shall use a simple application form for this program. The application form and a basic description of the program shall be available in English, Spanish, Chinese, Haitian-Creole, Italian, Portuguese, Vietnamese, Laotian, Khmer, Russian, and any other language that is a primary language of at least 10,000 or 0.5 per cent of all residents of the commonwealth.

(B) The third paragraph of subsection (j) of said section 14G of said chapter 151A, as so appearing, is hereby amended by adding the following sentence:- The division shall establish a schedule of benefits for the direct coverage plan that is comparable to the benefit schedule of the CommonHealth program, established by clause (g) of subsection (2) of section 9A and section 16C of chapter 118E of the General Laws.

(C) The seventh paragraph of said subsection (j) of said section 14G of said chapter 151A, as so appearing, is hereby further amended by striking out the third sentence and inserting in place thereof the following 5 sentences:-Such reports shall also include the number of enrollees who applied for the program, the number of enrollees who were denied benefits in the program, the reasons for denial and the number of individuals who were denied due to the failure to complete the application form. The deputy director of employment and training may delegate, by means of an interagency service agreement, to another state agency the authority to manage and administer the health insurance program established by this subsection and shall, whether or not such delegation has occurred, enter into an interagency service agreement with the division of medical assistance. Such agreement shall require that the division of employment and training provide not less than 20 per cent of the administrative costs deducted by the division of employment and training as a result of this section to the division of medical assistance for the provision of multilingual information about the program to health care providers, community-based organizations, unions and worker centers and that this information shall be distributed in print and public service announcements and other methods which serve to increase participation in the program. Such agreement shall also require that the division of employment and training screen each applicant for other sources of coverage and for potential eligibility for government programs and to document the results of such screening. If the division determines that an applicant is potentially eligible for Medicaid or another government program, the division shall assist the applicant in applying for benefits under such program.

SECTION 33. Section 2 of chapter 185 of the General Laws, as appearing in the 1998 Official Edition, is hereby amended by striking the first sentence and inserting in place thereof the following sentence: - The land court department shall consist of six associate justices appointed to the land court department.

SECTION 34. Section 8 of chapter 185C of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking out the third sentence and inserting in place thereof the following sentence:-

Said first justice shall be the administrative head of that particular court and shall have the power, authority and responsibility of a first justice as set forth in section 10 A of chapter 211B; provided, however, that clerks shall have responsibility for the internal administration of his office, including the selection, appointment, and management of personnel, staff services and record keeping.

SECTION 35. Section 9 of said chapter 185C, as appearing in the 2000 Official Edition, is hereby amended by striking out the fourth sentence and inserting in place thereof the following sentence:-

Said clerks shall have responsibility for the internal administration of their respective offices, including the selection, appointment, and management of personnel, staff services and record keeping.

SECTION 36. Section 11 of said chapter 185C, as appearing in the 2000 Official Edition, is hereby amended by striking out the first sentence and inserting in place thereof the following sentence:-

The clerk of a division of the housing court department may appoint one or more assistant clerks, who shall be removable at his pleasure.

SECTION 37. Section 1 of chapter 211B of the General Laws, as amended by section 253 of chapter 159 of the acts of 2000, is hereby amended by striking out the second sentence and inserting in place thereof the following sentence:- The trial court, as an administrative unit, shall consist of no more than 378 justices and special justices.

SECTION 38. Section 2 of said chapter 211B, as amended by section 254 of chapter 159 of the acts of 2000, is hereby amended by striking out the first sentence and inserting in place thereof the following sentence:- There shall be 82 justices appointed to the superior court department, 10 justices appointed to the housing court department, 6 justices appointed to the land court department, 51 justices appointed to the probate and family court department, 11 justices appointed to the Boston municipal court department, 41 justices appointed to the juvenile court department and 177 justices and special justices appointed to the district court department.

SECTION 39. The third paragraph of section 9 of said chapter 211B, as appearing in the 2000 Official Edition, is hereby amended by striking out clause (xxxv).

SECTION 40. Section 10A of said chapter 211B, as appearing in the 2000 Official Edition, is hereby amended by striking out the first sentence and inserting in place thereof the following sentence:-

A first justice, in addition to his judicial powers and duties as a justice of the trial court and in addition to his general powers of superintendence as first justice of a particular court within the trial court, shall, subject to the superintendence authority of the supreme judicial court as provided in section three of chapter two hundred and eleven and the administrative authority of the chief justice of the first justice's department of the trial court, be the administrative head of his court; provided, however, that clerks, recorders

and registers shall have responsibility for the internal administration of their respective offices, including the selection, appointment, and management of personnel, staff services and record keeping.

SECTION 41. Said chapter 211B is hereby further amended by inserting after section 10A the following two sections:-

Section 10B. (a) The exclusive authority to select and appoint assistant clerks in the district court, juvenile court, housing court and Boston municipal court shall be vested in the clerks of said courts and such authority shall not be subject to the review or approval of any other person, except as provided in this section.

(b) Upon the appointment of an assistant clerk, the clerk shall forward notice of said appointment to the chief justice for administration and management, together with (i) a certification of compliance with the personnel standards promulgated pursuant to section 8 and in effect as of July 1, 1998, with respect to job posting, newspaper advertising, review of applications, interviewing applicants, reference checks, verification of eligibility to work in the United States, and criminal record checks and (ii) a certification that sufficient funding is available in the current fiscal year budget to support the position as of the effective date of the appointment. No such appointment may be made in violation of the nepotism provisions of chapter 268A.

(c) The chief justice for administration and management shall, within 21 days, review such appointments of assistant clerks solely for compliance with the specific personnel standards promulgated pursuant to section 8 and in effect as of July 1, 1998, that deal expressly with job posting, newspaper advertising, review of applications, interviewing applicants, reference checks, verification of eligibility to work in the United States, and criminal record checks. Any such appointment not disapproved by the chief justice for administration and management within 21 days of receipt of the appointing authority's notice of appointment and accompanying certifications shall be deemed to be approved.

(d) Except for matters of compliance with the provisions of subsection (b), any dispute arising between a chief justice of a department or a first justice of a division, and a clerk of court, concerning the selection or appointment of personnel in the office of the clerk shall be submitted directly to the chief justice for administration and management in accordance with paragraph (xxx) of section 9, provided that the chief justice for administration and management shall not refer such dispute to any other person, but shall conduct a hearing and determine such dispute within 30 days of receipt of the written notification of such dispute or within such other reasonable time as the chief justice for administration and management shall set with the agreement of the parties to the dispute. The decision of the chief justice for administration and management shall be made in accordance with the applicable provisions of law and shall be binding on the parties.

(e) Any appointing authority aggrieved by a final determination of the chief justice for administration and management under subsection (c) or (d) or by the failure of the chief justice for administration and management to hear and determine a dispute within the time prescribed by subsection (d) may petition for appeal in the supreme judicial court sitting in Suffolk county by filing a copy thereof with the clerk of said court. Such petition for appeal shall be filed within 20 days after the date of receipt of such determination. Each claim of appeal shall set forth separately and particularly each

error of law asserted to have been made by the chief justice for administration and management. Upon the entry of the appeal it shall be heard and determined by the court, which shall have jurisdiction to affirm, modify or set aside such determination in whole or in part, or remand the proceeding to the chief justice for administration and management with instructions.

(f) The provisions of this section shall operate notwithstanding any other provision of law and shall not be construed to limit the appointment power conferred by law to any appointing authority within the trial court with respect to the appointment of personnel not specifically governed by this section.

Section 10C. The general superintendence and administrative authority of the chief justice for administration and management, the chief justices of the respective departments of the trial court and the first justices of particular courts shall not include the authority or power to exercise, supersede, limit, prevent the exercise of or otherwise affect any of the powers, duties and responsibilities of the clerks or registers of probate in any general or special law, including laws authorizing or governing the selection and appointment of personnel, except where expressly authorized.

SECTION 42. Section 1 of chapter 212 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking the first sentence and inserting in place thereof the following sentence: - The superior court department of the trial court of the commonwealth, established pursuant to section one of chapter two hundred and eleven B, shall consist of 82 justices appointed to the department.

SECTION 43. (A) Chapter 217 of the General Laws is hereby amended by striking out section 28, as so appearing, and inserting in place thereof the following section:-

Section 28. The first justice of the Suffolk county court may, subject to the approval of the chief justice, appoint a clerk and may, with the approval of the chief justice, remove him. The register of probate may designate 5 employees as deputy assistant registers with the same powers as assistant registers and may revoke any such designation at will. A deputy assistant register shall receive as additional compensation, subject to appropriation, an amount equal to 15 per cent of the annual salary of the Suffolk county register of probate. The register may also, from time to time, designate 5 employees as associate deputy registers who shall have the powers of assistant registers and receive as additional compensation, subject to appropriation, an amount equal to 7.5 per cent of the salary paid to the register. The register may revoke any such designation at will.

(B) The first paragraph of section 35B of said chapter 217, as so appearing in the 2000 Official Edition, is hereby amended by striking out the first sentence and inserting in place thereof the following sentence:- The salaries of first assistant registers and administrative deputy assistants of the probate and family court department shall be not more than 83.5 per cent of the salary of the registers pursuant to section 35A and shall be paid, subject to appropriation, by the commonwealth.

(C) Section 35C of said chapter 217, as so appearing, is hereby repealed.

SECTION 44. Section 6 of chapter 218 of the General Laws, as amended by section 267 of chapter 159 of the acts of 2000, is hereby amended by striking out, in line 26, the figure "175" and inserting in place thereof the following figure:- 177.

SECTION 45. The fifth paragraph of section 6 of chapter 218 of the General Laws, as appearing in the 2000 Official Edition, is hereby amended by striking out the second sentence and inserting in place thereof the following sentence:-

As administrative head of his court, said first justice shall be responsible for the management of the courthouse and shall have control over all personnel employed therein; provided, however, that the clerk shall have responsibility for the internal administration of his office, including the selection, appointment, and management of personnel, staff services and record keeping; and provided, further, that the commissioner of probation shall have the authority to appoint, dismiss, assign and discipline probation officers and associate probation officers within the several sessions of the trial court.

SECTION 46. Section 51A of said chapter 218, as appearing in the 2000 Official Edition, is hereby amended by inserting after the word "two hundred and eleven B", in line 9, the words:- ; provided, however, that the clerk shall have responsibility for the internal administration of his office, including the selection, appointment, and management of personnel, staff services and record keeping.

SECTION 47. The second paragraph of section 58 of said chapter 218, as so appearing, is hereby amended by striking out the second sentence and inserting in place thereof the following sentence:-

The first justice shall be the administrative head of his division; provided, however, that the clerks shall have responsibility for the internal administration of his office, including the selection, appointment, and management of personnel, staff services and record keeping.

SECTION 48. Section 58 of said chapter 218, is hereby amended by striking out the fourth paragraph, as amended by section 275 of chapter 159 of the acts of 2000, and inserting in place thereof the following paragraph:-

Each division shall have a clerk, who shall be appointed by the governor, with the advice and consent of the council and who shall hold office during good behavior, subject, however, to retirement under the provisions of any applicable general or special law relative to retirement systems. The Suffolk county division held at Boston shall have a first assistant clerk and said division shall have eleven assistant clerks; the Barnstable county division held at Plymouth shall have a first assistant clerk and said division shall have two assistant clerks; the Bristol county division shall have a first assistant clerk and five assistant clerks; the Franklin and Hampshire counties division shall have an assistant clerk; the Essex county division shall have an assistant clerk; the Berkshire and Hampden counties division held at North Adams shall have an assistant clerk; the Hampden division held at Springfield shall have an assistant clerk; the Middlesex county division shall have a first assistant clerk and five assistant clerks; the Norfolk county division held at Quincy shall have four assistant clerks; the Plymouth county division shall have a first assistant clerk and two assistant clerks; and the Worcester county division shall have a first assistant

clerk and two assistant clerks. Said first assistant clerks and assistant clerks shall be appointed by the clerks of said courts, with all such appointments subject to approval by the chief justice for administration and management solely with respect to the specific personnel standards promulgated under section 8 of chapter 211B.

SECTION 49. Section 5 of chapter 221 of the General Laws, as amended by section 276 of chapter 159 of the acts of 2000, is hereby amended by striking out said section 5 and inserting in place thereof the following section:-

Section 5. In addition to the assistant clerks provided for in section four, the clerks of the courts for the following counties may, subject to the approval of the chief justice for administration and management as to compliance with personnel standards promulgated pursuant to section 8 of chapter 211B, appoint assistant clerks with the same powers and duties. Said appointments shall be as follows:

Barnstable, 2 assistant clerks
Bristol, 9 assistant clerks
Essex, 11 assistant clerks
Hampden, 10 assistant clerks
Nantucket, 1 assistant clerk
Norfolk, 11 assistant clerks
Middlesex, 26 assistant clerks
Plymouth, 6 assistant clerks
Worcester, 11 assistant clerks

Suffolk, (a) superior court department, by the clerk of the superior court department for criminal business, 22 assistants; (b) superior court department, by the clerk of the superior court department for civil business, 26 assistants; (c) supreme judicial court, by the clerk of the supreme judicial court for said county, a second assistant clerk, designated from his office force and a third assistant clerk, designated from his office force.

SECTION 50. Section 5A of chapter 252 of the General Laws, as appearing in the 1998 Official Edition, is hereby amended by striking out, in line 19, the word "appropriated" and inserting in place thereof the following words:— determined by the board to be necessary.

SECTION 51. Said section 5A of said chapter 252 is hereby further amended by adding the following paragraph:—

Notwithstanding the provisions of any general or special law to the contrary, expenditures and other financial uses charged to said fund shall not be subject to appropriation, and shall include salaries and other costs of state employees, operational expenses, acquisition of capital equipment and property, and other expenses deemed necessary to the state reclamation board's successful operation as determined by the director of said board. Revenue and other financial sources credited to said fund shall include funds made available pursuant to this chapter, and interest income from investments made by the treasurer on behalf of the fund. For the purpose of accommodating timing discrepancies between the receipt of revenues and related expenditures, notwithstanding the provisions of any general or special law to the

contrary, the board may incur expenses and the comptroller may certify for payment amounts in anticipation of receipts. The board shall annually certify to the comptroller that expenditures for the fiscal year do not exceed related assessments.

Notwithstanding the provisions of subsection (f) of section 6B of chapter 29 of the General Laws, the Mosquito and Greenhead Fly Fund, and any expenditure accounts associated with the fund, shall not be subject to indirect cost assessments by the comptroller.

SECTION 52. Chapter 276 of the General Laws is hereby amended by striking out section 83, as appearing in the 2000 Official Edition, and inserting in place thereof the following section:-

Section 83. Subject to appropriation, the commissioner of probation may appoint, dismiss and assign such probation officers to the several sessions of the trial court as he deems necessary. In any court having two or more probation officers, said commissioner may designate one probation officer to serve as chief probation officer and may designate other probation officers to serve as assistant chief probation officers, as he deems necessary for the effective administration of justice; provided, however, that said commissioner may suspend or discipline any such probation officer. The compensation of probation officers in the trial court shall be paid by the commonwealth according to schedules established in section 99B or in a provision of an applicable collective bargaining agreement.

SECTION 53. Section 85A of said chapter 276, as appearing in the 2000 Official Edition, is hereby amended by striking out, in lines 1 and 2, the words "imposed upon him by the justices of the probate court".

SECTION 54. Section 86 of said chapter 276, as so appearing, is hereby amended by inserting after the word "court", in line 1, the following:- subject to the approval of the commissioner of probation.

SECTION 55. (A) Section 32 of chapter 637 of the acts of 1983 is hereby amended by striking out clauses (d) and (e) of the fourth paragraph and inserting in place thereof the following three clauses: - "(d) the financial ability of the town to fund the project from its own sources; (e) the ability of the town to enter the capital markets to obtain borrowed funds for the project; and (f) the amount of state and federal highway funds expended or to be expended in the town."

(B) Said section 32 of said chapter 637 is hereby further amended by striking out the last paragraph, as most recently amended by section 2 of chapter 195 of the acts of 1998, and inserting in place thereof the following paragraph: -

"Upon the approval of such application, the commissioner shall notify the town as to the total amount of state aid for such project and the provisions for repayment. No grant shall be approved after June 30, 2003. An application received by the commissioner prior to June 30, 1997 shall be deemed eligible for consideration and shall not require resubmission by the town. The commissioner shall report annually to the house and senate committees on ways and means the status of all small town road assistance applicants by June 30, 2002."

SECTION 56. The last paragraph of section 308 of chapter 38 of the acts of 1995 is hereby amended by striking out, in line 3, the words “June thirtieth, two thousand and one” and inserting in place thereof the following :- June 30, 2002.

SECTION 57. Section 22 of Chapter 47 of the acts of 1997 is hereby amended by striking out, in line 2, the words “1998 to 2002” and inserting in place thereof the following: - 1998 to 2004.

SECTION 58. Section 341 of chapter 38 the acts of 1995 is hereby amended by striking out the last sentence, as most recently amended by section 310 of chapter 159 of the acts of 2000, and inserting in place thereof the following sentence:—Said commission shall report its recommendations to the clerks of the house of representatives and the senate on or before June 30, 2002.

SECTION 59. Section 267 of chapter 127 of the acts of 1999 is hereby repealed.

SECTION 60. Chapter 159 of the acts of 2000 is hereby amended by striking out section 357 and inserting in place thereof the following section:—

Section 357. There shall be established on the books of the commonwealth a separate fund to be known as the Capital Needs Investment Trust Fund, in this section called the fund. There shall be credited to the fund in fiscal year 2001, 2002, 2003, 2004 and 2005 \$45,000,000 for each such fiscal year received by the commonwealth from the income tax imposed by chapter 62 of the General Laws. The state treasurer shall hold amounts in the fund as trustee for the purposes set forth in this section and shall disburse in each of fiscal years 2002, 2003, 2004 and 2005, the following amounts without further appropriation:

(a) two semiannual payments of \$10,000,000 each to the Affordable Housing Trust Fund, established by chapter 121D of the General Laws, to be made at the beginning and middle of each fiscal year;

(b) \$11,000,000 upon the request from time to time of the department of education, for statewide systems and competitive grants for districts that innovate or adopt the best scalable practices for using technology to increase student achievement on curriculum aligned with the Massachusetts standards. Of those amounts, over the 5-year period of the fund, the department shall expend: (1) not more than \$10,700,000 for the development of the virtual education space, an online set of tools and implementation strategies individualized for each educator, student and parent to support them on increasing student achievement on the Massachusetts Comprehensive Assessment System; (2) not more than \$4,000,000 for the completion of all objectives of the department’s information management system, with a final report and demonstration made to the general court not later than January 31, 2001; (3) not more than \$5,000,000 for programs that train students as technology leaders such as Youth Tech Entrepreneurs;

(4) not less than \$35,000,000 for competitive matching grants to districts that have updated approval by the department for local technology plans that meet department standards by 2003 in areas of student to computer ratio, classroom access to the internet, availability of user support, administrative systems and out of school access, and which demonstrate clear capabilities to innovate or adopt best scalable practices that increase student achievement on curriculum aligned with Massachusetts standards; (5) not less than \$300,000 in each of fiscal years 2002, 2003, 2004 and 2005 for a program promoting the beneficial effect of music for young people aged 8 to 18, inclusive, including a program of multidiscipline curricula in the public schools and for an internet domain site providing an array of information and resources on music education for children, parents and teachers; and (6) not less than \$500,000 on an annual basis to be granted directly to Jobs for Youth-Boston, Inc., for the purpose of providing to public schools and community agencies of the commonwealth a comprehensive program to improve and enhance student performance on the Massachusetts Comprehensive Assessment System examination through instructional computer software; and

(c) \$5,000,000 upon the request from time to time of the commissioner of capital asset management and maintenance, to repair, rehabilitate, reuse, demolish or redevelop former residential facilities operated by any of the departments of mental health, mental retardation and public health, according to a written annual plan which the commissioner shall file not later than September 15 with the house and senate committees on ways and means.

(d) \$9,000,000 upon the request from time to time of the commissioner of capital asset management and maintenance, for scheduled and deferred maintenance and repairs to capital assets owned by the commonwealth. The commissioner shall submit a plan detailing the cost and nature of such maintenance and repair projects, including how projects funded under this paragraph alleviate or otherwise affect the costs and schedules of maintenance and repairs otherwise funded or required to be funded by bonded indebtedness, to the secretary of administration and finance, the state budget director and the house and senate committees on ways and means not later than September 1, 2000. The commissioner shall file quarterly reports with the secretary, budget director and committees on the progress of all funded projects.

The fund established pursuant to this section shall expire on June 30, 2005, at which time the fund shall be repealed and any unexpended balance and interest earnings shall be transferred to the Affordable Housing Trust Fund, established pursuant to chapter 121D of the General Laws, the department of education and the commissioner of capital asset management and maintenance, for the purposes of and in proportion to the allocations stated in subsections (a) to (c), inclusive. The provisions of subsections (a) to (c), inclusive, shall expire on June 30, 2006.

SECTION 61. (a) Upon the request of the board of selectmen in a town, the city council in a plan E city or the mayor in any other city, the department of revenue may recalculate the minimum required local contribution, as defined in section 2 of chapter 70 of the General Laws, in the fiscal year ending June 30, 2002. Based on the criteria specified in this section, the department shall recalculate the minimum required local

contribution for a municipality's local and regional schools and shall certify the amounts calculated to the department of education.

(b) A city or town that used qualifying revenue amounts in a fiscal year which shall not be available for use in the next fiscal year, or that shall be required to use revenues for extraordinary nonschool-related expenses for which it did not have to use revenues in the preceding fiscal year, or that has an excessive certified municipal revenue growth factor which is also greater than or equal to one and one-half times the state average municipal revenue growth factor, may appeal to the department of revenue not later than January 2, 2002 for an adjustment of its minimum required local contribution and net school spending.

(c) If a claim is determined to be valid, the department of revenue may reduce proportionately the minimum required local contribution amount based on the amount of shortfall in revenue or based on the amount of increase in extraordinary expenditures in the current fiscal year, but no adjustment to the minimum required local contribution on account of an extraordinary expense raised in the budget of the fiscal year ending on June 30, 2002, shall affect the calculation of the minimum required local contribution in subsequent fiscal years. Qualifying revenue amounts shall include, but not be limited to, extraordinary amounts of free cash, overlay surplus and other available funds.

(d) If, upon submission of adequate documentation, the department of revenue determines that the municipality's claim regarding an excessive municipal revenue growth factor is valid, the department shall recalculate the municipal revenue growth factor and the department of education shall use the revised growth factor to calculate preliminary local contribution, minimum required local contribution and any other factor that directly or indirectly uses the municipal revenue growth factor. Any relief granted as a result of an excessive municipal revenue growth factor shall be a permanent reduction in minimum required local contribution.

(e) Upon the request of the board of selectmen in a town, the city council in a plan E city, or the mayor in any other city, in a majority of the member municipalities, a regional school district which used qualifying revenue amounts in a fiscal year that shall not be available for use in the next fiscal year shall appeal to the department of revenue not later than January 2, 2002 for an adjustment to its net school spending requirement. If the claim is determined to be valid, the department of revenue shall reduce the net school spending requirement based on the amount of the shortfall in revenue and reduce the minimum required local contribution of member municipalities accordingly. Qualifying revenue amounts shall include, but not be limited to, extraordinary amounts of excess and deficiency, surplus and uncommitted reserves.

(f) A regional school district which received regional school incentive aid in fiscal year 1995 shall, upon the request of the board of selectmen in a town, the city council in a Plan E city, or the mayor in any other city, in a majority of the member municipalities, appeal to the department of education for an adjustment in the minimum required local contribution of its member municipalities. The department of education may reduce the increased assessment of the member municipalities as a result of the reorganization of the regional school district by using a portion of the regional incentive aid to reduce the prior year local contribution.

(g) If the regional school budget has already been adopted by two-thirds of the member municipalities, then upon a majority vote of the member municipalities, the

regional school committee shall adjust the assessments of the member municipalities in accordance with the reduction in minimum required local contributions approved by the department of revenue or the department of education in accordance with the provisions of this section.

(h) Notwithstanding the provisions of clause (14) of section 3 of chapter 214 of the General Laws or any other general or special law to the contrary, the amounts so determined shall be deemed to be the minimum required local contribution described in chapter 70 of the General Laws. The house and senate committees on ways and means and the joint committee on education, arts and humanities shall be notified by the department of revenue and the department of education of the amount of any reduction in the minimum required local contribution amount.

(i) If a city or town has an approved budget that exceeds the recalculated minimum required local contribution and net school spending amounts for its local school system or its recalculated minimum required local contribution to its regional school districts as provided by this section, the local appropriating authority shall determine the extent to which the community shall avail itself of any relief authorized under this section.

(j) The amount of financial assistance due from the commonwealth in fiscal year 2002 under said chapter 70 of the General Laws or any other provision of law shall not be changed on account of any redetermination of the required minimum local contribution under this section.

(k) The department of revenue and the department of education shall issue guidelines for their respective duties under this section.

SECTION 62. (a) The secretary of the executive office of elder affairs, the commissioner of the group insurance commission and the commissioners of the departments of public health, mental health and mental retardation shall form, a prescription drug procurement unit, which shall develop a program of aggregate purchase of prescription drugs or a program to negotiate discounts with pharmaceutical companies on behalf of the unit and its member agencies based upon the consolidated populations of said unit and its member agencies. Such program shall include a competitive procurement process and contract negotiation for pharmacy benefit management services. No contract currently in existence with any agency or program shall be terminated before its expiration date unless, in the opinion of the agency and a majority of the member agencies, it has been favorably renegotiated as part of the unit contract. The unit shall consult with the office of pharmacy services and the division of medical assistance, to the extent allowed by federal law, in negotiating discounts pursuant to this section, and the division of medical assistance may join the unit contract to the extent allowed by federal law.

(b) If a majority of the members of the procurement unit are unable to agree on a program, pursuant to this section, the unit shall file, by May 31, 2002, a report with the house and senate committees on ways and means and the joint committee on health care on the reasons therefor and shall include in such report any recommendations to improve or clarify the development of a program, including any legislative recommendations necessary to ensure successful establishment of such program.

(c) For the purposes of paragraph (c) of section 39 of chapter 19A of the General Laws, this section shall be considered a successor statute to section 271 of chapter 127 of the acts of 1999 section, but this sentence shall not be construed to have the effect of repealing said section 271.

SECTION 63. Notwithstanding any law or regulation to the contrary, within 6 months after the passage of this act, the division of capital asset management shall complete an energy audit and inventory for the purpose of determining the most recent 3-year average of energy consumption by all state facilities. The audit shall calculate a baseline of kilowatt hours or Btu equivalents consumed by all state agencies. The audit shall be broken down by facility and by responsible agencies for the purposes of energy use reduction planning for those agencies. The audit shall be referred to herein as the "2001 state energy audit." The division shall be responsible for completing an energy audit and inventory on an annual basis and shall post results on a web site, in coordination with the division of energy resources. The division shall evaluate the potential for increasing the energy efficiency of each building owned by a state agency or leased by such agency for at least a 10 year period, and shall submit those assessments both to the division of energy resources and to agencies, departments and divisions that have an energy efficiency planning interest in that facility.

SECTION 64. Notwithstanding any general or special law to the contrary, the funds appropriated in item 6001-9957 of section 2D of chapter 235 of the acts of 2000 for the Westfield Intermodal Transportation Facility in the city of Westfield shall not be considered as the state match to any federal funds obtained pursuant to the Transportation Equity Act for the 21st Century or any prior or subsequent federal act.

SECTION 65. Notwithstanding any general or special law to the contrary, the department of public health and the executive office of elder affairs shall establish a task force to establish new training requirements for certified nurses' aides, home health aides and home care workers. The task force shall: (a) review and recommend revisions to current training requirements for direct care workers; (b) consider a common curriculum for direct care workers; (c) develop skills standards for direct care work; (d) ensure portability across long-term care settings; (e) target the content and methods to the needs of direct care workers; (f) develop model orientation programs to support the transition from training to work; (g) recognize career advancement curricula; and (h) integrate English as a second language and adult basic education into the curriculum for those who need it. The task force shall consult with and draw upon results of the Commonwealth Corporation extended care career ladders initiative. Task force members shall include direct care provider organizations, consumer representatives, labor representatives, a representative of the Commonwealth Corporation, a representative of the community colleges, selected by the community college presidents, individuals with expertise in paraprofessional training, adult basic education and English as a second language training. The task force shall report in writing its recommendations to revise current training requirements to the joint committees on health care, and human services and

elderly affairs and the house and senate committees on ways and means not later than December 31, 2002.

SECTION 66. The division of medical assistance shall seek a senior assistance program waiver from the United States Department of Health and Human Services pursuant to section 1115(a) of the Social Security Act. The senior assistance program shall provide for the payment of prescription drug benefits by the division, and, if in the opinion of the division the inclusion increases the likelihood of approval of the waiver, may include payment for acute inpatient and outpatient services, transportation, mental health and substance abuse services, or ancillary services, for persons eligible for the subsidized catastrophic prescription drug insurance established pursuant to section 39 of chapter 19A of the General Laws whose financial eligibility does not exceed 188 per cent of the federal poverty level. Enrollees in said senior assistance program shall be deemed financially unable to pay for hospital services for purposes of the definition of free care in section 1 of chapter 118G, and such status shall be noted on any enrollment card or notification materials provided to the enrollees. Prior to the implementation of said senior assistance program, the division shall report to the house and senate committees on ways and means on the cost-effectiveness of said program waiver, including a determination as to whether the costs of including such additional services in said program would exceed the amount generated in federal reimbursements through said senior assistance program waiver.

SECTION 67. The Massachusetts Bay Transportation Authority shall promulgate guidelines for eligible communities to pursue reimbursement under the last paragraph of section 9 of chapter 161A of the General Laws. The guidelines shall define the kinds of services eligible for reimbursement, what documentation is required for reimbursement, which office within the Massachusetts Bay Transportation Authority shall coordinate the program, and the timeline for submission of documentation in each fiscal year. The Authority shall develop and distribute a general application for services that local communities may use to qualify individuals for paratransit services. The guidelines and application shall be completed no later than March 31, 2002.

SECTION 68. The registry of motor vehicles shall, within 180 calendar days after the effective date of this act, develop a list of makes and models of hitching mechanisms that fold flat leaving no protruding surfaces. The registry of motor vehicles shall promulgate and implement regulations governing a system of verification whereby said registry shall ensure a motor vehicle's compliance with this act following a third offense.

SECTION 69. Notwithstanding any general or special law to the contrary, the division of medical assistance may expend an amount not to exceed \$18,000,000 from the medical assistance intergovernmental transfer account within the Uncompensated Care Trust Fund for the intergovernmental funds transfer component of Title XIX payments to certain publicly owned or operated providers. Such payments shall be established in accordance with Title XIX of the federal Social Security Act or any

successor federal statute, any regulations promulgated thereunder, the Medicaid state plan, and the terms and conditions of agreements reached with the division for such payments. No funds shall be expended unless a public entity is legally obligated to make an intergovernmental funds transfer in an amount specified in an agreement with such entity which amount shall not be less than 50 per cent of the amount of such Title XIX payments. Revenues generated pursuant to the provisions of this section shall be credited to the medical assistance intergovernmental transfer account and administered in accordance with the provisions of G.L.c.118G, section 18(o).

SECTION 70. Funds appropriated for item 0331-3100 of Section 2 of this act shall be expended in a manner such that one additional assistant clerk magistrate for the civil division and one additional assistant clerk magistrate for the criminal division shall be appointed and funded from said item in fiscal year 2002.

SECTION 71. Notwithstanding the provisions of paragraph (a) of subsection (xxiii) of section 9 of Chapter 211B of the General Laws, the chief justice for administration and management may, from the effective date of this act through April 30, 2002, transfer funds from any item of appropriation of any trial court department to any other item of appropriation within the trial court department; provided that said transfers shall be made in accordance with schedules submitted to the house and senate committees on ways and means. No such transfer shall occur until 10 days after the revised funding schedules have been submitted in written form to the house and senate committees on ways and means.

SECTION 72. Notwithstanding any general or special law to the contrary, not later than 10 days after the effective date of this act, the comptroller shall transfer any remaining balance from the Tax Reduction Fund to the General Fund.

Notwithstanding any general or special law to the contrary, not later than 10 days after the effective date of this act, the comptroller shall transfer \$422,000,000 from the Transitional Escrow Fund to the General Fund. Any remaining balance in the Transitional Escrow Fund shall be transferred to the Commonwealth Stabilization Fund.

In accordance with section 2H of chapter 29 of the General Laws, the comptroller shall transfer an amount not to exceed \$350,000,000 from the Commonwealth Stabilization Fund to the General Fund.

SECTION 73. The division of medical assistance shall contract with an independent consultant, appointed by the secretary of administration and finance and the chairs of the joint committee on health care, not later than September 1, 2001, to conduct a study of the methodology utilized in determining the Medicaid reimbursement rates and how the methodology impacts the Medicaid reimbursement rates paid to freestanding pediatric specialty hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02 in the commonwealth. The study shall include the following:

- (1) a review of the Medicaid reimbursement rates paid to freestanding pediatric specialty hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02 from fiscal years 1992 to 2001, inclusive;
 - (2) a comparison of Medicaid rates paid to freestanding pediatric specialty hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02 in relation to Medicaid rates paid to acute care hospitals licensed by the department of public health incurred providing care for Medicaid patients;
 - (3) an evaluation of the Medicaid reimbursement rate methodology and a review of factors impacting the adequacy of rates, including, but not limited to, Medicaid payment and cost ratios, Medicaid volume, level of acuity, age of patients, occupancy rate, and how such factors affect freestanding pediatric specialty hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02, and how such factors affect acute care hospitals and non-acute hospitals licensed by the department of public health;
 - (4) a review of the type and nature of services provided to Medicaid beneficiaries at freestanding pediatric specialty hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02, the availability of such services at other facilities providing pediatric care, patient origin at freestanding pediatric hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02 compared to other pediatric providers, and an evaluation of the role of freestanding pediatric hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02 in the health safety net;
 - (5) a review and analysis of Medicaid reimbursement rate methodologies utilized by other state Medicaid programs who contract with pediatric specialty hospitals comparable in size and mission to those defined in 114.1 CMR 36.02 as compared to the Medicaid reimbursement rate methodologies utilized by the commonwealth's Medicaid program which contracts with freestanding pediatric specialty hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02 in the commonwealth, including a comparison of Medicaid net revenues to Medicaid net expenses, with and without disproportionate share payments and expenses;
 - (6) a review or establishment of recommended policy reforms or funding enhancements that would eliminate discrepancy, if any, between the reimbursement rates paid to freestanding pediatric specialty hospitals with not less than 250 licensed beds and acute pediatric specialty units as defined in 114.1 CMR 36.02 in relation to Medicaid rates paid to acute care hospitals and non-acute hospitals licensed by the department of public health; and
 - (7) an estimate of the aggregate costs of any recommended policy reforms or funding enhancements to eliminate discrepancy, if any.
- (b) The independent consultant shall not have a financial interest in the hospitals under review, and shall consult with the division of medical assistance, the division of health care finance and policy, various health care providers, advocacy organizations and

other interested parties in conducting the study. The independent consultant shall file the initial findings of the study, which shall include an estimate of the aggregate cost of any recommended funding enhancements or policy reforms with the secretary of administration and finance, the clerks of the house of representatives and the senate, and the house and senate committees on ways and means on or before June 30, 2002.

SECTION 74. There shall be a special commission for the purpose of devising a fair and equitable allocation of the burden of uncompensated care and free care among affected participants in the health care delivery system, so that no single participant or group of participants bears a disproportionate burden for the cost of providing such care. The commission shall consist of 9 voting members as follows: 1 member of the house of representatives, 1 member of the senate, the secretary of administration and finance and 6 persons to be appointed by the governor, 1 of whom shall be a representative of the Massachusetts Hospital Association, 1 representative of Blue Cross and Blue Shield of Massachusetts, 1 of whom shall be a representative of the Massachusetts Association of Health Maintenance Organizations, 1 of whom shall be a representative of Associated Industries of Massachusetts, 1 of whom shall be a representative of the Massachusetts League of Community Health Centers, and 1 of whom shall be a representative of Health Care for All. The commission shall also consist of 4 nonvoting members to be appointed by the governor, 1 of whom shall be a representative of the Massachusetts Nurses Association, 1 of whom shall be a representative of Children's Hospital, 1 of whom shall be a representative of the Massachusetts Business Roundtable, and 1 of whom shall be a representative of the Massachusetts Taxpayers Foundation. The commission shall be jointly chaired by the members from the senate and house of representatives and the secretary of administration and finance and shall adopt such rules and establish such procedures as it considers necessary for the conduct of its business. No action of the commission shall be considered official unless approved by a majority of the voting members of the commission. The commission shall have the following duties and responsibilities: (a) to develop a suitable plan to establish a fair and equitable assessment to pay for the uncompensated care and equitable distribution of any such assessment, including maximizing the amount of federal financial participation to which the commonwealth may be entitled; (b) to develop a plan that includes incentives for the utilization of insurance programs, including programs operated by the division of medical assistance, wherever possible, such as payment methodologies that are not more favorable than those used by such insurance programs, as well as recommendations for more efficient and effective administration of the uncompensated care pool; and (c) to prepare any legislation necessary to effectuate the recommendations of the commission. In pursuing its responsibilities and duties, the commission shall consult with parties affected by the commission's study, and shall, prior to voting on any final recommendations, consult with the parties affected by the recommendations, including, but not limited to, the executive office of health and human services, the division of health care finance and policy, the division of insurance, the division of medical assistance, the Massachusetts Health Care Purchasers group, the small business advisory board, established pursuant to section 22 of chapter 188G of the General Laws, the Massachusetts Law Reform Institute, the Massachusetts Council of Community Hospitals, the Life Insurance Association of Massachusetts, the AFL-CIO and

organizations representing chambers of commerce. The commission shall use as the basis for the development of its plan quantifiable data as it relates to the projected impact of any assessments, provider taxes and federal financial participation; provided, however, that the data shall be included in the commission's final report. The commission shall file its final report, including any proposed legislation necessary to effectuate the recommendations of the commission, with the clerks of the senate and house of representatives, with the house and senate committees on ways and means and with the governor on or before August 31, 2002.

SECTION 75. There shall be a special commission to investigate and study the calculation of the superannuation retirement allowances for members classified as Group 1 under chapter 32 of the General Laws. The investigation and study shall include, but not be limited to, an analysis of alternative calculations of said allowances, including comparison of member eligibility, vesting, portability, the contribution rate of members, other benefits, and the effects on accrued liabilities and costs attributable to such alternative calculations. The commission shall consist of 9 members as follows: the house and senate chairmen of the joint committee on public service, who shall serve as co-chairs of the commission; the house and senate chairmen of the committees on ways and means, or their designees; a representative of the Massachusetts Municipal Association; a representative of the Massachusetts Association of Contributory Retirement Systems; the chairmen of the State Teachers' Retirement Board and the State Retirement Board, or their designees; and, the chairmen of the Public Employee retirement Administration Commission, or his designee. The commission shall report to the general court the results of its study, together with its recommendations and draft legislation necessary to carry the recommendations into effect, by filing the same with the clerk of the house of representatives on or before May 31, 2002.

SECTION 76. There shall be a special commission to investigate and study services and supports for adults with autistic spectrum disorders, which shall include, but not be limited to, Asperger's syndrome, high functioning autism, and pervasive development disorder not otherwise specified and who do not therefore have a condition that meets the definition of mental retardation as defined in 1992 by the American association of mental retardation. The commission shall consist of: a member of the house of representatives, appointed by the speaker of the house of representatives and a member of the senate appointed by the president of the senate, a member of the house of representatives appointed by the minority leader of the house of representatives and a member of the senate appointed by the minority leader of the senate, a representative of the governor; the secretary of the executive office of health and human services or the secretary's designee; the commissioner of the department of mental retardation, or the commissioner's designee; the commissioner of the department of mental health, or the commissioner's designee; the commissioner of the department of education, or the commissioner's designee; 8 of whom shall be named by the Statewide Autism group; 2 of whom shall be named by the Asperger's Association of new England; and 2 of whom shall be named by the Autism Society of America, Massachusetts Chapter.

Within 180 days of the passage of this act, the commission shall report to the general court the results of the investigation and study, and its recommendations, which shall include, but not be limited to, (1) defining the population to be served, (2) identifying the types of services and supports needed, (3) identifying how such services and supports can best be delivered, and (4) identifying the cost of such services and supports, together with drafts of legislation necessary to carry such recommendations into effect.

The secretary of the executive office of health and human services shall, within available appropriations, provide staff necessary for the performance of the functions and duties of the commission.

SECTION 77. There is hereby established a commission to study and evaluate the delivery of mental health services to children within the Commonwealth to be known as The Mental Health Commission for Children. Said commission shall collect data from each of the Commonwealth's agencies responsible for the provision of mental health services to children including, but not limited to, state-contracted service providers, and may request data from private sector providers of mental health services to children including, but not limited to, insurance companies. Said commission shall produce a quarterly report to the legislature, to be made available to the public, on several measures of mental health services delivery to children, including, but not limited to, community-based, inpatient and residential care. Said report shall be filed with the clerks of the House of Representatives and Senate.

The Commission shall consist of the Secretary or a representative of the Executive Office of Health and Human Services, the Commissioner or a representative of the Department of Mental Health, the Commissioner or a representative of the Department of Mental Retardation, the Commissioner or a representative of the Division of Medical Assistance, the Commissioner or a representative of the Department of Public Health, the Commissioner or a representative of the Division of Insurance, the Commissioner or a representative of the Department of Education, the Commissioner or a representative of the Department of Social Services, and the Commissioner or a representative of the Department of Youth Services. The Commission shall also consist of the following members of the public: a representative of the Massachusetts Psychiatric Hospitals Association, a representative of the Massachusetts Hospital Association, a representative of the Mental Health and Substance Abuse Corporation of Massachusetts, and a representative of the Children's League, one Board-certified child psychiatrist, one Board-certified pediatrician, one licensed psychologist, one licensed social worker, and a representative of the Parent/Professional Advocacy League. Members of the public appointed by the commission shall serve for a term of three years. Appointments shall be made no later than one month from the effective date this act. Each member shall hold office for the term of his appointment or until his successor has been appointed and shall receive no compensation for their services.

The secretary or commissioner of each of the agencies or their designees shall participate in the commission. The psychiatrist will be appointed in consultation with the Massachusetts Psychiatric Society and the New England Council of Child Psychiatry.

The pediatrician will be appointed in consultation with the Massachusetts chapter of the American Academy of Pediatricians. The licensed psychologist will be appointed in consultation with the Massachusetts Psychological Association. The licensed social worker will be appointed in consultation with the Massachusetts chapter of the National Association of Social Workers. The Board of the Children's League will appoint its representative. The representative from the Parent/Professional Advocacy League shall be or shall have been a parent of a child with a mental or emotional impairment. Each member shall be experienced or knowledgeable relative to the provision of services for children with mental or emotional impairments. The members of the commission shall elect a chair.

Said commission shall have the following powers and duties: (1) To collect from the Executive Office of Health and Human Services the following data on the delivery of mental health services to children, which data the reporting agencies shall collect, and which data the executive office of health and human services shall compile from all reporting agencies on a quarterly basis.

(2) To collect data with respect to community-based services, including, but not limited to outpatient clinics. Said data shall include: (a) the number of those wait-listed, by month, (b) the number wait-listed by service type, and by requisite data categories (c) the mean and maximum time spent waiting for available appointments for services by service type and by requisite data categories (d) a sample of waiting times for licensed psychiatrists from the date of the request until the initial appointment and (e) the number of psychiatrists who have provided outpatient mental health services to children on Medicaid sorted by number of children per region, and by month including a comparison of said data to the number of psychiatrists who provide such services, but who do not accept children on Medicaid.

(3) To collect data with respect to inpatient services; provided, however, that said data shall include: (a) the number of those stuck, by month (b) the number stuck by requisite data categories (c) the mean and maximum length of stay of those stuck by requisite data categories (d) the number of boarders, by month (d) the number of boarders by requisite data categories (e) the mean and maximum length of stay of boarders by requisite data categories (f) readmission rates of children by requisite data categories for each type of program (g) and the licensed and operational capacity by month.

(4) To collect data with respect to residential care; provided, however, that said data shall include: (a) the number of children waiting for residential treatment per month by type of program including, but not limited to, Intensive Residential Treatment Programs, Clinically Intensive Residential Treatment Programs, Behaviorally Intensive Residential Treatment Programs, group homes funded by the Department of Mental Health, group homes funded by the Department of Social Services, programs funded by the Department of Public Health, private residential schools funded by the Department of Education or local school districts (b) for each type of program, the number of children by requisite data categories (c) for each type of program, the mean and maximum time spent waiting for service and (d) for each type of program, the licensed and operational

capacity, by month.

(5) To require the Executive Office of Health and Human Services to report all data compiled pursuant to this section to the commission no later than six weeks after the end of each quarter of the calendar year; provided, however, that the first report of data from said executive office to the commission shall be due within 6 weeks of the quarter subsequent to the quarter in which this act becomes effective.

(6) To prepare and issue a public report of its findings, on a quarterly basis, and to file a copy of such report with the Senate and House Committees on Ways and Means, the Mental Health Legislative Caucus, the Children's Legislative Caucus, the Joint Committee on Human Services and Elderly Affairs, and the Joint Committee on Health Care, no later than 6 weeks after receipt of the data. The report shall include all of the data listed above in sections.

(7) To request certain additional data from the Executive Office of Health and Human Services and other reporting agencies that is consistent with meeting the purposes of this act.

(8) To request that said executive office modify the manner and timeframe of reporting of said data to the commission.

As used in this Act, the following terms shall have the following meanings:

“Boarders” refers to children who require inpatient psychiatric hospitalization, but who stay overnight in medical facilities-emergency departments or pediatric inpatient services of general hospitals, because of the lack of availability of inpatient psychiatric beds.

“Children” refers to individuals through the age of 18.

“Case Management” refers to services designed to assure continuity of services for children and families, coordinating services for children and families, arranging for needed services, and linking various services, providers, and agencies.

“C.D.L.P.P.s” refers to “Children Detained Solely for Lack of Psychiatric Placements” in Department of Youth Services’ facilities, as well as other residential resources.

“Reporting Agency” refers to any executive branch office, department, or other division of the commonwealth that provides mental health services to children, including state contracted service providers, and including but not limited to, the Department of Mental Health, the Department of Mental Retardation, the Division of Medical Assistance, the Division of Insurance, the Department of Education, the Department of Social Services, the Department of Public Health, and the Department of Youth Services. In addition, the commission may request data from private sector providers of mental health services to children, including insurance companies.

“Requisite Data Categories” refers to insurance status, insured or uninsured, if insured, what type of insurance, diagnosis, including mental health, medical and substance abuse information, age, race, primary language, region, and department of social services custody status.

“Stuck” refers to children residing in inpatient psychiatric facilities and waiting to be discharged to a less restrictive environment because their psychiatric needs no longer

require an inpatient level of care.

“Wait-listed” refers to children who are either: (1) on waiting lists for case management services from the Department of Mental Health or the Department of Mental Retardation; (2) waiting for counseling or behavioral management services from the Department of Education or local school districts; (3) on waiting lists for Department of Social Services residential placements or on waiting lists for intensive community-based support services, such as a Family Stabilization Team, or (4) on waiting lists for residential placements funded by the Department of Education or local school districts.

SECTION 78. There is hereby established a special commission to report on alternatives to using the property tax to fund public education. Said commission shall consist of the Speaker of the House of Representatives and three additional members to be appointed by the Speaker of the House, the President of the Massachusetts Senate and three additional members to be appointed by the President of the Senate, the Chairman of the House Committee on Ways and Means or his designee, the Chairman of the Senate Committee on Ways and Means or his designee, the House and Senate Chairs of the Joint Committee on Education, Arts, and Humanities, the Secretary of Administration and Finance, and one member appointed by the following organizations: the Department of Revenue, the Suburban Coalition, the Massachusetts Taxpayer's Foundation, the Massachusetts Municipal Association, Associated Industries of Massachusetts, and the Taxpayer's Equity Alliance of Massachusetts. Said commission shall be chaired by the House and Senate Chairs of the Joint Committee on Taxation. The scope of the commission's inquiry shall include, but shall not be limited to: reviewing the current practice of using the property tax to fund education and seeking alternative sources of funding to provide a dedicated stream of revenue. The Commission shall submit its report to the House and Senate Committee on Ways and Means, the Joint Committee on Education, Arts and Humanities, and the Joint Committee on Taxation not later than December 31, 2002 along with drafts of any legislation.

SECTION 79. There shall be a special commission to consist of the following: the secretary of public safety or the secretary's designee; the commissioner of corrections or the commissioner's designee; the president of the Massachusetts Sheriff's Association and an additional designee of the Association, the senate and house chairs of the committee on public safety; the senate and house chairs of the committee on science and technology; two (2) additional members of the house, chosen by the Speaker and one (1) additional member of the senate chosen by the senate President; two (2) industry representatives who shall not be employed by the same company, one of whom will be chosen by the senate President and one of whom will be chosen by the Speaker of the House; and a consumer with knowledge in the area of expertise who shall be chosen by the governor.

The commission is hereby established for the purpose of making an investigation and study to evaluate issues specific to the use of biometric technology, specifically as biometric technology relates to public safety, law enforcement and corrections, and in particular to biometrics, the science of identifying people using human characteristics, as it relates to the identification of subjects and the application of due process, regional sharing of information by all law enforcement agencies, crowd and riot control, security and personal and financial accountability in the correctional system, cost control, access

to the essential goods and services, crowd and population control within correctional facilities, access and visitor control, surveillance and contraband control, and control of contractors, suppliers and vendors employed by or within the correctional system, as well as other issues as they relate to responsibility and accountability within the correctional system.

There shall be an honorary chairperson and vice chairperson chosen by the members of the commission.

Said commission shall report to the general court the results of its investigation and study, and its recommendations, if any, to carry such recommendation into effect by filing the same with the clerk of the house of representatives on or before May 30, 2002.

SECTION 80. Section 8 shall expire on June 30, 2003.

SECTION 81. Except as otherwise provided, the provisions of this act shall take effect on July 1, 2001.