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15 A BILL

18 _____
19 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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24 To establish a Maternal Mental Health Task Force to study maternal mental healthcare, make
25 recommendations regarding specified matters pertaining to maternal mental healthcare,
26 and report its findings and recommendations to the Mayor and the Council.

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28 BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this
29 act may be cited as the “Maternal Mental Health Task Force Act of 2017”.

30 Sec. 2. Maternal Mental Health Task Force.

31 (a) There is established a Maternal Mental Health Task Force (“Task Force”) to provide a
32 set of comprehensive policy recommendations on how the District can improve maternal mental
33 healthcare.

34 (b) The Task Force shall be funded by the District of Columbia Department of Behavior
35 Health;

36 (c) The Task Force shall:

37 (1) Meet at least 8 times per year;

- 1 (2) Identify vulnerable populations and risk factors for maternal mental health
2 disorders that may occur during pregnancy and through the first postpartum year;
- 3 (3) Study, review, and identify current barriers to screening and diagnosis;
- 4 (4) Study, review, and identify current treatment options for both those who are
5 privately insured and those who receive care through the public-health system;
- 6 (5) Study, review, and identify evidence-based and emerging treatment options
7 that are scalable to public- and private-healthcare settings;
- 8 (6) Identify provider population needs and patient needs in order to improve
9 diagnosis and treatment;
- 10 (7) Identify and recommend effective, culturally competent, and accessible
11 prevention screening and identification and treatment strategies, including public education and
12 awareness, provider education and training, and social support services;
- 13 (8) Identify successful postpartum mental-health initiatives throughout the United
14 States and recommend programs, tools, strategies, and funding sources needed to implement
15 similar initiatives in the District;
- 16 (9) Identify and recommend evidence-based practices for healthcare providers and
17 public-health systems;
- 18 (10) Identify and recommend models for private and public funding; and
- 19 (11) Make comprehensive recommendations on legislation, policy initiatives,
20 funding requirements, and budgetary priorities to address maternal mental-health needs in a
21 white paper to be published no later than December 31, 2017; and
- 22 (12) Present its recommendations to the Mayor and the Council within 30 days
23 after publishing its white paper.

1 (d) This act shall sunset concurrently with the Task Force presenting its recommendations
2 to the Mayor and Council.

3 **Sec. 3. Maternal Mental Health Task Force composition.**

4 (a) The Mayor shall appoint the members of the Task Force with the advice and consent
5 of the Council. Within 60 days of the effective date of this act, the Mayor shall transmit proposed
6 resolutions to approve the appointment of each member of the Task Force for a 45-day period of
7 review, excluding days of Council recess. If the Council does not approve or disapprove a
8 resolution within the 45-day period of review, the resolution shall be deemed approved.

9 (b) The Task Force shall be comprised:

10 (1) One representative from the Office of the Deputy Mayor for Health and Human
11 Services;

12 (2) One representative from the Committee on Health and Human Services;

13 (3) One representative from the Department of Behavioral Health;

14 (4) One representative from the Department of Health;

15 (5) One representative from the Department of Health Care Finance;

16 (6) One representative from the health insurance industry;

17 (7) One representative from La Clínica del Pueblo, a nonprofit health center;

18 (8) One nurse psychotherapist experienced in providing perinatal mental health
19 services;

20 (9) One licensed clinical social worker experienced in providing perinatal mental
21 health services;

22 (10) One perinatal registered nurse experienced in providing perinatal mental health
23 services;

- 1 (11) One obstetrician experienced in providing perinatal mental health services;
2 (12) One reproductive psychiatrist;
3 (13) One reproductive therapist;
4 (14) One Perinatal Mood and Anxiety Disorders survivor; and
5 (15) Other stakeholders the Mayor considers crucial to the composition of the Task
6 Force.

7 (b) The Mayor shall designate two co-chairs of the Task Force, one each from the
8 government and non-government sectors.

9 (c) Members of the Task Force shall:

- 10 (1) Serve without compensation;
11 (2) Be residents of the District of Columbia; and
12 (3) Be reimbursed for travel expenses to the extent available.

13 Sec. 4. Fiscal impact statement.

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

17 Sec. 5. Effective date.

18 This act shall take effect after approval by the Mayor (or in the event of a veto by the
19 Mayor, override of the veto by the Council, a 30-day period of Congressional review as provided
20 in section 602(c)(1) of the District of Columbia Home Rule Act, approved December 24, 1973
21 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia
22 Register.