

HOUSE No. 01240

The Commonwealth of Massachusetts

PRESENTED BY:

Harriett L. Stanley

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the passage of the accompanying bill:

An Act relative to sustainable health care cost containment.

PETITION OF:

NAME:

Harriett L. Stanley

DISTRICT/ADDRESS:

2nd Essex

HOUSE No. 01240

By Ms. Harriett L. Stanley of West Newbury, petition (accompanied by bill, House, No. 01240) of Harriett L. Stanley relative to sustainable health care cost containment. Joint Committee on Health Care Financing.

The Commonwealth of Massachusetts

In the Year Two Thousand Eleven

An Act relative to sustainable health care cost containment.

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

1 SECTION 1. Chapter 118E of the General Laws, as appearing in the 2008 Official Edition, is
2 hereby amended by adding the following new section:

3 Section 62. – The Executive Office of Health and Human Services shall discontinue membership
4 in the MassHealth fee-for-service program and primary care clinician plan, and for plan years
5 beginning on or after January 1, 2011, shall begin to enroll all members meeting eligibility
6 requirements, as established pursuant to applicable federal and state law and regulation, into a
7 Medicaid managed care organization that has contracted with the commonwealth to deliver such
8 managed care services, in accordance with the enrollment and assignment process for other
9 eligible categories and at the appropriate levels of premium.

10 SECTION 2. Notwithstanding any general or special law to the contrary, the Executive Office
11 of Health and Human Services shall move away from fee for service payment to all providers of

12 medical care or services for which medical assistance and medical benefits are available under
13 Chapter 118E. In accordance with the recommendations of the Special Commission on Payment
14 Reform created pursuant to Section 44 of Chapter 305 of the Acts of 2008 and any subsequent
15 commission on payment reform, any medical assistance provided under Chapter 118E shall be
16 reimbursed by a global capitation payment or other payment that demonstrates lower payments
17 for more coordinated and efficient care. The Secretary shall provide an annual report to the house
18 and senate committee on ways and means and the joint committee on health care financing on or
19 before December 31st outlining in detail the changes that have been made to date and the savings
20 that have resulted.