

SENATE No. 1450

The Commonwealth of Massachusetts

PRESENTED BY:

Jacob R. Oliveira

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

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

An Act assessing healthcare access.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Jacob R. Oliveira</i>	<i>Hampden, Hampshire and Worcester</i>	
<i>Lindsay N. Sadosa</i>	<i>1st Hampshire</i>	<i>1/25/2023</i>
<i>Paul R. Feeney</i>	<i>Bristol and Norfolk</i>	<i>1/27/2023</i>
<i>Marc R. Pacheco</i>	<i>Third Bristol and Plymouth</i>	<i>1/27/2023</i>
<i>Carlos González</i>	<i>10th Hampden</i>	<i>2/2/2023</i>
<i>Patrick M. O'Connor</i>	<i>First Plymouth and Norfolk</i>	<i>2/13/2023</i>

SENATE No. 1450

By Mr. Oliveira, a petition (accompanied by bill, Senate, No. 1450) of Jacob R. Oliveira, Lindsay N. Sabadosa, Paul R. Feeney, Marc R. Pacheco and other members of the General Court for legislation to assess healthcare access. Public Health.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Third General Court
(2023-2024)**

An Act assessing healthcare access.

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 111 of the General Laws, as appearing in the 2020 Official Edition,
2 is hereby amended by adding at the end the following section:

3 The Department, in consultation with the Health Policy Commission and the Center for
4 Health Information Analysis, shall commission a study. The study shall examine current access
5 to essential health services, as defined by the department of public health under section 51G of
6 chapter 111, provided by the Commonwealth’s acute care hospitals including community
7 hospitals, in-patient psychiatric hospitals, the effect of the discontinuation of essential health
8 services on that access, the projected need for those services in all regions of the Commonwealth
9 over the next decade and provide recommendations as to how to ensure access to those essential
10 health services. This study shall include, but not be limited to (i) the current number of beds and
11 services provided by each hospital in each region, including the most recent year’s admission
12 and discharge data for each service by hospital; (ii) review discontinuations of essential health

13 services by hospitals since 1992 and their effect on access to these essential health services; (ii)
14 review hospital closures since 1992 and their effect on access to these essential health services;
15 (iii) review plans provided to the department of public health following the discontinuation of
16 essential services for compliance and identify where essential health services were provided
17 following the discontinuation; (iv) calculate projected need for essential health services in each
18 region; (v) calculate projected need, if any, for providers of essential health services to meet
19 regional needs over the next decade; (vi) examine financial conditions that might lead to the
20 discontinuation of essential health services, including but not limited to private and public
21 reimbursement rates; (vii) identify essential health services by region that might be vulnerable to
22 discontinuation over the next three years; (viii) examine the need for additional post in-patient
23 discharge services (viii) identify steps to protect essential health services provided by financially
24 vulnerable acute care and inpatient psychiatric hospitals; (ix) review methods implemented in
25 other states to discourage and manage the discontinuation of essential health services by acute
26 care hospitals and in-patient psychiatric hospitals closures; and (x) recommend any policy
27 changes to assure access to essential health services in all regions of the Commonwealth.