

SENATE No. 817

The Commonwealth of Massachusetts

PRESENTED BY:

Bruce E. Tarr

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 to ensure protections for physicians & hospitals that contract with Medicaid managed care organizations.

PETITION OF:

NAME:

Bruce E. Tarr

DISTRICT/ADDRESS:

First Essex and Middlesex

SENATE No. 817

By Mr. Tarr, a petition (accompanied by bill, Senate, No. 817) of Bruce E. Tarr for legislation to ensure protections for physicians & hospitals that contract with Medicaid managed care organizations. Health Care Financing.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Second General Court
(2021-2022)**

An Act to ensure protections for physicians & hospitals that contract with Medicaid managed care organizations.

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. Section 12 of chapter 118E of the General Laws, as appearing in the 2018
2 Official Edition, is hereby amended by inserting after the last paragraph the following
3 paragraph:-

4 Reimbursement from managed care organizations that contract with the executive office
5 for hospital and physician services provided to beneficiaries under this chapter shall be subject to
6 negotiation between providers of medical services and managed care organizations and shall not
7 be limited or determined through contracts between the executive office and managed care
8 organizations, including accountable care organizations and dual-eligible health plans.

9 SECTION 2. Section 13E1/2 of chapter 118E of the General Laws, as so appearing, is
10 hereby amended in the last sentence of the first paragraph by inserting after the word “services”
11 the following words:-

12 provided further, that acute hospital and non-acute hospital reimbursement from managed
13 care organizations that contract with the executive office shall for health services provided to
14 beneficiaries under this chapter be subject to negotiation between those hospitals and managed
15 care organizations and shall not be limited or determined through contracts between the
16 executive office and managed care organizations, including accountable care organizations and
17 dual-eligible health plans.

18 SECTION 3. Section 13F of chapter 118E of the General Laws, as so appearing, is
19 hereby amended by inserting after subsection c the following subsection: -

20 (d) the executive office shall not, in its contracts with acute hospitals and non-acute
21 hospitals or through any other rule or regulation, require hospitals to accept fee-for-service rates
22 established by the office of Medicaid for non-emergency services provided to beneficiaries
23 enrolled in managed care organizations including for accountable care organizations and dual-
24 eligible health plans. The office may require hospitals that are not in a managed care
25 organization's provider network to accept fee-for-service rates established by the office for
26 emergency services only.