

HOUSE No. 1188

The Commonwealth of Massachusetts

PRESENTED BY:

William J. Driscoll, Jr.

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 providing affordable care through out-of-pocket assistance.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>William J. Driscoll, Jr.</i>	<i>7th Norfolk</i>	<i>1/20/2023</i>
<i>Jon Santiago</i>	<i>9th Suffolk</i>	<i>2/6/2023</i>
<i>Rebecca L. Rausch</i>	<i>Norfolk, Worcester and Middlesex</i>	<i>7/12/2023</i>

HOUSE No. 1188

By Representative Driscoll of Milton, a petition (accompanied by bill, House, No. 1188) of William J. Driscoll, Jr., and Jon Santiago relative to a cost-sharing assistance program for low income health care applicants. Health Care Financing.

The Commonwealth of Massachusetts

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

An Act providing affordable care through out-of-pocket assistance.

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. (a) Notwithstanding any other general or special law to the contrary, the
2 Secretary of Health and Human Services, in consultation with the commonwealth health
3 insurance connector authority established in section 2 of chapter 176Q shall implement a cost-
4 sharing assistance program for applicants at or below 500 percent of the federal poverty
5 guidelines enrolled in employer-sponsored insurance plans.

6 (b) Applicants shall be deemed eligible for the cost-sharing assistance program
7 established under subsection (a) of section 1 if they meet the following criteria: (1) have income
8 under 500 percent of the federal poverty level; and (2) are enrolled in an employer sponsored
9 health insurance plan that meets the criteria for minimum value and affordable coverage under
10 U.S. Code section 36B(c)(2)(C).

11 (c) The cost-sharing assistance program established under subsection (a) shall provide
12 supplemental insurance coverage to eligible applicants that covers the differences in cost-

13 sharing, including co-pays, co-insurance, and deductibles, between the employer plan in which
14 the applicant is enrolled, and a plan equivalent to plans sold through the connector that are
15 eligible for premium assistance payments or cost sharing subsidies under section 3 of Chapter
16 176Q.

17 (d) The commonwealth health insurance connector authority, in consultation with the
18 center for health information and analysis, shall evaluate the cost assistance program to assess
19 the public health, health equity, utilization and financial impacts on residents of reducing out-of-
20 pocket costs. The center shall collect quantitative and qualitative data at the start of the program
21 and at the end of each year of the program to assess the impact on program participants. Data
22 points to be collected shall include, but not be limited to: (i) rates of unmet medical need due to
23 cost; (ii) disparities in rates of unmet medical need due to cost; (iii) difficulties accessing care at
24 a doctor's office or clinic; (iv) racial and ethnic disparities in difficulties accessing care at a
25 doctor's office or clinic; (vii) visits to a doctor's office; and (viii) racial and ethnic disparities in
26 visits to a doctor's office. The connector authority shall file a report of its evaluation with the
27 clerks of the house of representatives and the senate, the house and senate committees on ways
28 and means, the joint committee on public health and the joint committee on health care financing
29 not later than December 1, 2029.

30 SECTION 2. Section 1 shall take effect on Jan 1, 2026.