

**HOUSE . . . . . No. 68**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

***Ruth B. Balsler***

*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 relative to protecting access to disability services.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Ruth B. Balsler</i>	<i>12th Middlesex</i>
<i>Paul R. Heroux</i>	<i>2nd Bristol</i>
<i>Barbara A. L'Italien</i>	<i>Second Essex and Middlesex</i>
<i>Kay Khan</i>	<i>11th Middlesex</i>

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By Ms. Balsler of Newton, a petition (accompanied by bill, House, No. 8) of Ruth B. Balsler and others relative to protecting access to disability services for certain adults enrolled in the integrated care organization pilot program. Children, Families and Persons with Disabilities.

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[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE HOUSE, NO. 70 OF 2013-2014.]

**The Commonwealth of Massachusetts**

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**In the One Hundred and Eighty-Ninth General Court  
(2015-2016)**  
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An Act relative to protecting access to disability services.

*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 2012 Official  
2 Edition, is hereby amended by adding after Section 9F(c) the following new sections-:

3           (d) The division shall ensure that enrollment in the program is voluntary. No  
4 disincentives for selecting a fee-for-service delivery system shall be included as part of any  
5 agreement or waiver regarding the program. The division shall ensure that all enrollees in an ICO  
6 have the right to disenroll from the program in any month upon submitting a notice of  
7 disenrollment to the division or contracted entity. Disenrollment notices received by the division  
8 or contracted entity by the twentieth day of the month shall be effective the first day of the  
9 following month.

10 (e) The benefits provided to persons considered eligible to enroll in the ICO shall  
11 include those services covered by Medicare Part A and Part B; the amount, duration and scope of  
12 Medicaid-covered services shall be at a minimum no more restrictive than the scope of services  
13 provided under MassHealth standard coverage, and shall include services covered under the  
14 home and community-based services waiver program; and services necessary for the treatment of  
15 mental health or substance abuse.

16 (e)(1) During the first 3 years of the demonstration project, an ICO shall conform to the  
17 minimum medical loss ratio as established by the division for its category. At the end of each  
18 fiscal year, the ICO shall provide to the division an audited statement of its medical loss ratio for  
19 the past year. Two years after the implementation of the ICO dual eligible pilot program, the  
20 division shall have 6 months to review the data and audited statements and shall have an  
21 additional 6 months to implement revised loss ratios. Beginning the fourth year of the  
22 demonstration project and upon renewal of the contract with the division, an ICO shall conform  
23 to the revised minimum medical loss ratio as established by the division for its category. During  
24 any subsequent year of the program and upon renewal of the contract with the division, if an  
25 ICO's audited medical loss ratio is below the minimum as determined by the division for its  
26 category, the ICO shall provide additional benefits or services to its enrollees in the following  
27 contract year in an amount for its category, and shall submit a plan to the division detailing how  
28 such benefits or services shall be provided to its plan enrollees.

29 (2) Not later than the end of the first year of operation as an ICO, the division shall  
30 require that all ICOs, with whom the division contracts to deliver such services, establish ICO  
31 consumer advisory councils. Such councils shall monitor and make recommendations for the

32 ICOs services delivered under this program and shall be represented by members of its enrolled  
33 population, or family members or unpaid caregivers of its enrolled population.

34 (3) The division shall educate consumers and their families as to their enrollment  
35 choices under MassHealth options and other available alternatives under Medicare and Medicaid.  
36 Neither ICOs nor the division shall offer gifts, payments or other inducements to enroll dually  
37 eligible individuals in an ICO.

38 (4) The division shall deliver to all prospective enrollees ICO educational materials that  
39 shall include, but not be limited to: a definition of an ICO and how it functions; enrollment  
40 eligibility standards; the location of ICOs; a complete list of their participating providers; the  
41 range of available services; consumer rights under Medicare and Medicaid; an assistance  
42 worksheet for determining health care options under MassHealth , Medicare and Medicaid; and  
43 quality of care measurements reported to the division.

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45 (f) The division shall develop and issue a document for consumers to be known as the  
46 ""ICO report card" containing information and data providing a basis upon which ICOs may be  
47 evaluated and compared by consumers. The document shall be made available to residents of the  
48 commonwealth, upon request. In preparing that report card, the division shall, to the extent  
49 possible, use information already reported by the ICO. The division shall consult with the  
50 department of public health and the division of insurance in determining the content and format  
51 of the report card, and shall make the report card available on the internet web site established by  
52 the division. The division shall issue its proposed methodology for the preparation of the ICO

53 report card. The division shall issue the initial report card 1 year from the announcement of the  
54 methodology and annually thereafter.

55 (g) The division shall measure a ICO's performance using a variety of objective quality  
56 assurance measures, including, but not limited to, ongoing provider education, consumer  
57 satisfaction surveys, outcome measures and practice guidelines.

58 (h) The division shall ensure that enrollees have a choice of at least 2 integrated care  
59 organizations within their geographic area, where available.

60 (i) An ICO shall meet all privacy standards set by the regulations established by the  
61 federal Department of Health and Human Services under the Healthcare Insurance Portability  
62 and Accountability Act of 1996.

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64 (j) The commissioner, in consultation with the secretary of the executive office of health  
65 and human services, shall semi-annually submit to the house and senate committees on ways and  
66 means a report detailing the name and number of entities participating as integrated care  
67 organizations and expenditure data, including, but not limited to, an analysis of the program's  
68 aggregate budget neutrality. Furthermore, the division shall collect detailed information on the  
69 functioning of the ICO demonstration project, including: enrollment and disenrollment rates,  
70 including detailed reasons for enrolling and disenrolling; the number of ICO enrollees in  
71 community settings and other settings; and other information to assist the special commission in  
72 completing various studies.

73 (k)ICO's shall, at a minimum, pay health care providers and social service programs rates  
74 established pursuant to section 13C of chapter 118E.