

HOUSE No. 1088

The Commonwealth of Massachusetts

In the Year Two Thousand Nine

An Act relative to providing for review of proposed changes to health care provider mandates by the Division of Health Care Finance and Policy..

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) Chapter 3 of the General Laws, as amended by section 3 of Chapter 300
2 of the Acts of 2002, is hereby amended by inserting after section 38C the following section:—

3 38D. (a) For the purposes of this section, a health care provider mandate is one that
4 mandates a new operational or fiscal reporting requirement on health care providers licensed
5 under Chapter 19, Chapter 111, Chapter 112, and Chapter 123.

6 (b) Joint Committees of the general court and the house and senate committees on ways
7 and means when reporting favorably on health care provider mandates referred to them shall
8 include a review and evaluation conducted by the division of health care finance and policy
9 pursuant to this section.

10 (c) Upon request of a joint standing committee of the general court having jurisdiction
11 or the committee on ways and means of either branch, the division of health care finance and
12 policy shall conduct a review and evaluation of the health care provider mandate proposal, in

consultation with other relevant state agencies, and shall report to the committee within 90 days of the request.

(d) All interested parties supporting or opposing the proposal may provide the division of health care finance and policy information relevant to the division's review. The division shall enter

into interagency agreements as necessary with all state agencies holding data, including cost data, relevant to the division's review under this section. The division of health care finance and policy may, after consultation with all parties that would be affected by such health care provider mandate proposal, contract with independent consultants as necessary to complete its analysis. The report shall include, at a minimum, the following:

(1) the financial impact of the health care provider mandate proposal on all parties affected by the proposal;

(2) whether any data required by the proposal is already collected by any state agency;

(3) whether there is a specific need for governmental intervention that is clearly identified and precisely defined;

(4) whether the costs of the proposal exceed the benefits that would be effected by the proposal;

(5) whether less restrictive, less intrusive and less costly alternatives are available to achieve the desired outcome of the proposal;

(6) whether a process and schedule can be established to measure the effectiveness of the proposal;

(7) whether the proposal can be time-limited and reviewed on a regular basis.

SECTION 2. of Chapter 30A of the General Laws, as so appearing, is hereby amended by inserting after the first paragraph the following paragraph:—

Prior to the adoption or amendment of any regulation as to which a public hearing is required, an agency must demonstrate, that: (a) the financial impact of all parties that will be affected is fully documented; (b) there is a specific need for governmental intervention that is clearly identified and precisely defined; (c) the costs of the proposal do not exceed the benefits that would be effected by the regulation; (d) less restrictive, less intrusive and less costly alternatives have been considered and found less desirable based on a sound evaluation of the alternatives; (e) the Agency has established a process and a schedule for measuring the effectiveness of the regulation; (f) the regulation is time-limited or provides for regular review.

SECTION 3. of Chapter 30A of the General Laws, as so appearing, is hereby amended by inserting before the first paragraph the following paragraph:—

Prior to the adoption or amendment of any regulation as to which a public hearing is not required under section 2, an agency must demonstrate, that: (a) the financial impact of all parties that will be affected is fully documented; (b) there is a specific need for governmental intervention that is clearly identified and precisely defined; (c) the costs of the proposal do not exceed the benefits that would be effected by the regulation; (d) less restrictive, less intrusive and less costly alternatives have been considered and found less desirable based on a sound evaluation of the alternatives; (e) the Agency has established a process and a schedule for measuring the effectiveness of the regulation; (f) the regulation is time-limited or provides for regular review.