

**SENATE . . . . . No. 537**

---

The Commonwealth of Massachusetts

\_\_\_\_\_  
**In the Year Two Thousand Nine**  
\_\_\_\_\_

An Act To Assure Equitable Heath Coverage For All Children..

*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 10F of chapter 118E of the General Laws is hereby amended by  
2 striking out subsection (a) and inserting in place thereof the following subsection:-

3 (a) There is hereby established a program of managed care to provide primary and  
4 preventive health care services for uninsured dependent and adopted youths from birth through  
5 age eighteen; provided, however, that only said youths who are ineligible for medical benefits  
6 pursuant to this chapter shall be eligible for the services defined in this section. Services  
7 available from the program shall include but are not limited to the following:-

8 (1) preventive pediatric care in a participating doctor's office, community health center,  
9 health maintenance organization or school-based clinic, including well-child visits,  
10 immunizations, tuberculin testing, hematocrit, hemoglobin and other appropriate blood testing,  
11 urinalysis, and routine tests to screen for lead poisoning, and such services as are periodically  
12 recommended by the American Academy of Pediatrics; provided that services provided by a  
13 participating independent laboratory for diagnostic laboratory tests shall be reimbursed by said  
14 program;

15 (2) unlimited sick visits in a participating doctor's office, community health center,  
16 health maintenance organization, school-based clinic or a patient's home;

17 (3) first-aid treatment and follow up care, including the changing or removal of casts,  
18 burn dressings or structures, in a participating doctor's office, community health center, health  
19 maintenance organization or school-based clinic;

20 (4) the provision of smoking cessation and prevention educational information and  
21 materials to the parent, guardian or person with whom an enrollee resides.

22 (5) medically necessary prescription drugs; provided, however, that enrollees shall be  
23 responsible for a copayment of \$3 for each interchangeable drug prescription and \$4 for each  
24 brand name drug prescription.

25 (6) urgent care visits in the outpatient department of a participating hospital when an  
26 enrollee's primary care practitioner is not available to provide such services, and emergency care  
27 in the outpatient department or emergency department of a participating hospital, including  
28 related laboratory and diagnostic radiology services for said urgent and emergency care,  
29 provided that rates of reimbursement for such urgent care and emergency services are negotiated  
30 by participating hospitals with the department or its designated vendor;

31 (7) outpatient surgery and anesthesia which is medically necessary; provided that rates  
32 of reimbursement for such urgent care and emergency services are negotiated by participating  
33 hospitals with the division or its designated vendor;

34 (8) medically necessary eye examinations and eye glasses;

35 (9) medically necessary outpatient and inpatient mental health services; provided  
36 further, that no such mental health services shall be provided by the division that would  
37 substitute for mental health services required pursuant to chapter 71B;

38 (10) dental health services, including preventive dental and restorative care; provided,  
39 however, that no funds shall be expended for cosmetic dentistry;

40 (11) durable medical equipment; and

41 (12) auditory screening and hearing aids.

42 SECTION 2. Section 10F of chapter 118E of the General Laws is hereby amended by  
43 striking out subsection (b).