

SENATE No. 547

The Commonwealth of Massachusetts

PRESENTED BY:

Michael O. Moore

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 equitable provider reimbursement.

PETITION OF:

NAME:

Michael O. Moore

DISTRICT/ADDRESS:

Second Worcester

SENATE No. 547

By Mr. Michael O. Moore, a petition (accompanied by bill, Senate, No. 547) of Michael O. Moore for legislation relative to equitable reimbursement rates for health care. Health Care Financing.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 526 OF 2011-2012.]

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act relative to equitable provider reimbursement.

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 12 of chapter 118E of the General Laws, as appearing in the 2010 Official
2 Edition, is hereby amended by inserting at the beginning of the section the following new
3 definitions:

4 “Managed Care Organization”, any entity with which the Commonwealth contracts to
5 provide managed care services to eligible MassHealth enrollees on a capitated basis.

6 "Network", a grouping of health care providers who contract with a managed care
7 organization to provide services to MassHealth enrollees covered by the managed care
8 organization’s plans, policies, contracts or other arrangements.

9 “Non-network provider”, a health care provider who has not entered into a contract with
10 a managed care organization to provide services to MassHealth enrollees.

11 Section 12 of chapter 118E of the General Laws, as so appearing, is further amended by
12 inserting at the end of the section the following new language:

13 For emergency, post-stabilization, and certain other services that have received a prior
14 approval by a managed care organization contracting with the Commonwealth to provide
15 managed care services to MassHealth enrollees, health care providers not included in a managed

16 care organization's network, must accept a rate equal to the rate paid by Medicaid for the same
17 or similar services. Nothing in this section shall prohibit a managed care organization from
18 denying payment for unapproved services conducted by a non-network provider.