

HOUSE No. 994

The Commonwealth of Massachusetts

PRESENTED BY:

Patricia A. Haddad

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 requiring increased transparency in data reporting by health care providers.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Patricia A. Haddad</i>	<i>5th Bristol</i>	<i>1/15/2015</i>

HOUSE No. 994

By Mrs. Haddad of Somerset, a petition (accompanied by bill, House, No. 994) of Patricia A. Haddad relative to requiring increased transparency in data reporting by health care providers. Health Care Financing.

The Commonwealth of Massachusetts

**In the One Hundred and Eighty-Ninth General Court
(2015-2016)**

An Act requiring increased transparency in data reporting by health care providers.

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 9 of Chapter 12C of the General Laws, as so appearing, is hereby
2 amended by striking out subsection (b) and inserting in place thereof the following paragraphs:-

3 (b)(1) The center shall promulgate regulations requiring registered provider organizations
4 to report following information annually: (1) organizational charts showing the ownership,
5 governance and operational structure of the provider organization, including any clinical
6 affiliations and community advisory boards; (2) the number of affiliated health care professional
7 full-time equivalents by license type, specialty, name and address of principal practice location
8 and whether the professional is employed by the organization; (3) the name and address of
9 licensed facilities by license number, license type and capacity in each major service category;

10 (4) a comprehensive financial statement, including information on parent entities and corporate
11 affiliates as applicable, and including details regarding annual costs, annual receipts, realized
12 capital gains and losses, accumulated surplus and accumulated reserves; (5) information on stop-

13 loss insurance and any non-fee-for-service payment arrangements; (6) information on clinical
14 quality, care coordination and patient referral practices; (7) information regarding expenditures
15 and funding sources for payroll, teaching, research, advertising, taxes or payments-in-lieu-of-
16 taxes and other non-clinical functions; (8) information regarding charitable care and community
17 benefit programs; (9) for any risk-bearing provider organization, certificate from the division of
18 insurance under chapter 176U; and (10) such other information as the center considers
19 appropriate as set forth in the center's regulations; provided, however, that the center shall
20 coordinate with the commission and the division of insurance to obtain information directly from
21 the commission and the division of insurance where available. The center may, in consultation
22 with the division of insurance and the commission, merge similar reporting requirements where
23 appropriate.

24 (b)(2) The center shall promulgate regulations requiring registered provider
25 organizations with at least five licensed clinicians to annually report the same payer data required
26 by hospitals pursuant to 114.1 C.M.R. 42 and Schedule VA of Center for Health Information
27 Analysis Form DHCFP-4031. A copy of all such provider reports shall be filed with the Joint
28 Committee on Health Care Finance. The center shall, by regulation, designate standard systems
29 for determining, reporting and auditing payer data. The center shall promulgate regulations for
30 the disclosure and release of such data.