# **SENATE** . . . . . . . . . . . . . . . . . . No. 569

## The Commonwealth of Massachusetts

#### PRESENTED BY:

#### Sal N. DiDomenico

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 to benefit the health safety net trust fund.

#### PETITION OF:

NAME:	DISTRICT/ADDRESS:
Sal N. DiDomenico	Middlesex and Suffolk
Barbara A. L'Italien	Second Essex and Middlesex
Michael O. Moore	Second Worcester
Joseph W. McGonagle, Jr.	28th Middlesex
James B. Eldridge	Middlesex and Worcester
Angelo J. Puppolo, Jr.	12th Hampden
Carmine L. Gentile	13th Middlesex
Sean Garballey	23rd Middlesex
Frank A. Moran	17th Essex
Josh S. Cutler	6th Plymouth
Steven Ultrino	33rd Middlesex
Chris Walsh	6th Middlesex
Thomas M. Stanley	9th Middlesex
Paul R. Heroux	2nd Bristol

# SENATE DOCKET, NO. 1177 FILED ON: 1/16/2015 SENATE No. 569

By Mr. DiDomenico, a petition (accompanied by bill, Senate, No. 569) of Sal N. DiDomenico, Barbara L'Italien, Michael O. Moore, Joseph W. McGonagle, Jr. and other members of the General Court for legislation relative to the health safety net trust fund. Health Care Financing.

### The Commonwealth of Massachusetts

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

An Act to benefit the health safety net trust fund.

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. The Center for Health Information and Analysis shall amend the Health
2	Safety Net Payments and Funding regulations (114.6 CMR 14.00) in order to increase the
3	revenue available for provider payments and to reduce the Health Safety Net fund's shortfall
4	amount. Such amendment shall:

5 a) Establish a new Large Physician Organizations Assessment that creates a \$20,000,000 6 annual liability for independent physician organizations with more than 500 physician members 7 that is not a corporate affiliate of or otherwise controlled by a licensed acute care hospital. A 8 physician organization - whether a parent physician group or a local practice group as defined by 9 the Center for Health Information and Analysis - shall be considered independent, however 10 organized, so long as such practice is owned and controlled by one or more of the practitioners 11 so associated. Such independent physician organizations shall be exempt from liability for this 12 new assessment if their percentage of gross billed charges for services reimbursed by the state

Office of Medicaid is equal to or greater than 15% of their total gross billed charges for thatfiscal year.

15	b) Ensure that such Large Physician Organizations who contribute to the Health Safety
16	Net under subsection (a) are reimbursed for uncompensated care in a manner consistent with
17	payments made to hospitals and community health centers under 114.6 CMR 14.00, the
18	Massachusetts Section 1115 Demonstration Waiver governing safety net care, or any other
19	federally required limit on payments under 42 U.S.C.1396a(a)(13) or 42 CFR 447.