

**SENATE . . . . . No. 66**

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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 improving the children's medical security program and simplifying the administration process.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Sal N. DiDomenico</i>	<i>Middlesex and Suffolk</i>
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>
<i>Paul R. Heroux</i>	<i>2nd Bristol</i>
<i>Barbara A. L'Italien</i>	<i>Second Essex and Middlesex</i>
<i>Michael O. Moore</i>	<i>Second Worcester</i>
<i>Marjorie C. Decker</i>	<i>25th Middlesex</i>
<i>Joseph W. McGonagle, Jr.</i>	<i>28th Middlesex</i>
<i>Daniel J. Ryan</i>	<i>2nd Suffolk</i>
<i>Michael J. Barrett</i>	<i>Third Middlesex</i>
<i>Timothy J. Toomey, Jr.</i>	<i>26th Middlesex</i>
<i>Denise Provost</i>	<i>27th Middlesex</i>
<i>Benjamin Swan</i>	<i>11th Hampden</i>
<i>Joan B. Lovely</i>	<i>Second Essex</i>

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By Mr. DiDomenico, a petition (accompanied by bill, Senate, No. 66) of Sal N. DiDomenico, Jason M. Lewis, Paul R. Heroux, Barbara L'Italien and other members of the General Court for legislation to improve the children's medical security program and simplifying the administration process. Children, Families and Persons with Disabilities.

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The Commonwealth of Massachusetts

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In the One Hundred and Eighty-Ninth General Court  
(2015-2016)  
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An Act improving the children's medical security program and simplifying the administration process.

*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, as appearing in the 2012  
2 Official Edition, is hereby amended by striking out subsections (a) and (b) and inserting in place  
3 thereof the following 2 subsections:-

4 (a) There shall be a program to provide primary and preventive health care services for  
5 uninsured dependent and adopted youths from birth through age 18, in this section called the  
6 program; but only those youths who are ineligible for medical benefits pursuant to this chapter  
7 shall be eligible for the services defined in this section. The secretary of health and human  
8 services shall administer the program, subject to appropriation. The covered services available  
9 from the program shall be set forth in the regulations of the executive office of health and human  
10 services as the secretary of health and human services determines is appropriate, but at a  
11 minimum shall include the following:

12 (1) preventive pediatric health care visits and well-child visits, including immunizations  
13 and screening tests;

14 (2) primary care health care services customarily furnished by or through a general  
15 practitioner, family physician, internal medicine physician, obstetrician, gynecologist,  
16 pediatrician, independent nurse practitioner or physician assistant to the extent the furnishing of  
17 those services is legally authorized in the commonwealth; provided, that primary care shall not  
18 include emergency or post-stabilization services provided in a hospital or other setting; and

19 (3) unlimited sick visits provided by a primary care provider.

20 (b) Additional services under the program shall include the following, but coverage for  
21 specific services within each category and the benefit limitations shall be at the secretary of  
22 health and human service's discretion:

23 (1) dental health care, including preventive dental care; provided, however, that no funds  
24 shall be expended for cosmetic or surgical dentistry;

25 (2) durable medical equipment;

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

32 (4) annual and medically necessary eye examinations;

33 (5) auditory screenings;

34 (6) outpatient surgery and anesthesia for tympanostomy tube placement and inguinal  
35 hernias;

36 (7) prescription drugs; and

37 (8) behavioral health.

38 SECTION 2. Subsection (g) of said section 10F of said chapter 118E, as so appearing, is  
39 hereby amended by striking out the second sentence and inserting in place thereof the following  
40 2 sentences:- At least 30 days prior to modifying any program benefits or eligibility standards  
41 that are intended to ensure that program costs are limited to the funds appropriated therefore, the  
42 division shall provide the aforementioned committees and the secretary of administration and  
43 finance with notice of the modification and, for any program benefit modifications, a description  
44 of the cost per covered program member in the fiscal year preceding implementation of the  
45 modification, as well as the anticipated cost per covered program member in the fiscal year  
46 following implementation of the modification. The description shall clearly indicate any changes  
47 in anticipated costs resulting from changes in covered program services.

48 SECTION 3. The division of medical assistance may promulgate regulations to  
49 implement section 1 pursuant to subsection (f) of section 10F of chapter 118E of the General  
50 Laws.

51 SECTION 4. Section 1 shall take effect on July 1, 2015.