

**HOUSE . . . . . No. 3241**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

*Kate Hogan*

*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 improve access to family physicians.**

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Kate Hogan</i>	<i>3rd Middlesex</i>	<i>1/20/2017</i>
<i>Chris Walsh</i>	<i>6th Middlesex</i>	<i>1/20/2017</i>
<i>Steven Ultrino</i>	<i>33rd Middlesex</i>	<i>2/2/2017</i>
<i>Thomas M. Stanley</i>	<i>9th Middlesex</i>	<i>2/3/2017</i>
<i>Jennifer E. Benson</i>	<i>37th Middlesex</i>	
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>	
<i>Patrick M. O'Connor</i>	<i>Plymouth and Norfolk</i>	
<i>Colleen M. Garry</i>	<i>36th Middlesex</i>	
<i>Diana DiZoglio</i>	<i>14th Essex</i>	
<i>Edward F. Coppinger</i>	<i>10th Suffolk</i>	
<i>Kimberly N. Ferguson</i>	<i>1st Worcester</i>	
<i>José F. Tosado</i>	<i>9th Hampden</i>	
<i>Paul R. Heroux</i>	<i>2nd Bristol</i>	
<i>Frank I. Smizik</i>	<i>15th Norfolk</i>	
<i>Christine P. Barber</i>	<i>34th Middlesex</i>	
<i>David K. Muradian, Jr.</i>	<i>9th Worcester</i>	
<i>Anne M. Gobi</i>	<i>Worcester, Hampden, Hampshire and Middlesex</i>	

<i>John J. Mahoney</i>	<i>13th Worcester</i>	
<i>Marjorie C. Decker</i>	<i>25th Middlesex</i>	
<i>James J. O'Day</i>	<i>14th Worcester</i>	
<i>Mary S. Keefe</i>	<i>15th Worcester</i>	
<i>David M. Rogers</i>	<i>24th Middlesex</i>	
<i>John H. Rogers</i>	<i>12th Norfolk</i>	
<i>Steven S. Howitt</i>	<i>4th Bristol</i>	
<i>Sean Garballey</i>	<i>23rd Middlesex</i>	
<i>James Arciero</i>	<i>2nd Middlesex</i>	

**HOUSE . . . . . No. 3241**

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By Ms. Hogan of Stow, a petition (accompanied by bill, House, No. 3241) of Kate Hogan and others relative to requirements of certain health care applicants and trainees. Public Health.

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**The Commonwealth of Massachusetts**

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**In the One Hundred and Ninetieth General Court  
(2017-2018)**  
\_\_\_\_\_

An Act to improve access to family physicians.

*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 25N ½ of chapter 111 of the General Laws, as appearing in the  
2   2014 Official Edition, is hereby amended in subsection (b) by inserting after the words “primary  
3   care” in line 8 the words “and family medicine”.

4           SECTION 2. Said subsection (b) of section 25N ½, as so appearing, is hereby further  
5   amended by adding the phrase “and family physicians” after “primary care providers” at the end  
6   of the first sentence of the first paragraph.

7           SECTION 3. Said subsection (b) of section 25N ½, as so appearing, is hereby further  
8   amended by striking out in line 23 the number “50” and inserting in place thereof “95”.

9           SECTION 4. Said subsection (b) of section 25N ½, as so appearing, is hereby further  
10   amended by inserting after the second paragraph the following new paragraph:—

11           The health care workforce center shall require applicants to include the following  
12   information and give preference to those applicants whom meet at least one of the following

13 criteria: (1) Have a proven record of placing graduates in areas of unmet need; (2) Have a record  
14 or written plan of attracting and admitting underrepresented minorities and/or economically  
15 disadvantaged groups; or (3) host their programs and/or clinical training sites in areas of unmet  
16 need.

17 SECTION 5. Said subsection (b) of section 25N ½, as so appearing, is hereby further  
18 amended by striking out the phrase “9 to 12 month” in line 30 and inserting in place thereof “3  
19 to 4 year”.

20 SECTION 6. Said subsection (b) of section 25N ½, as so appearing, is hereby further  
21 amended by adding at the end of the third paragraph:—

22 All resident trainees shall be assigned as the primary care provider for a continuity panel  
23 of patients and see those patients in that location no less than 40 weeks per academic year for  
24 each year of the residency.

25 SECTION 7. Said subsection (b) of section 25N ½, as so appearing, is hereby further  
26 amended by striking out the first sentence and inserting in place thereof:—

27 The health care workforce center shall determine through regulation grant amounts per  
28 full-time resident, provided that grant amounts per resident are no less than 85% of the average  
29 CMS annual reimbursement rate per year and funding is provided for all of the 3 or 4 year  
30 residency.