SENATE No. 32

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:	
Sal N. DiDomenico	Middlesex and Suffolk	
Denise Provost	27th Middlesex	1/24/2017
Diana DiZoglio	14th Essex	1/24/2017
Jason M. Lewis	Fifth Middlesex	1/25/2017
Jack Lewis	7th Middlesex	1/25/2017
Steven Ultrino	33rd Middlesex	1/26/2017
Patricia D. Jehlen	Second Middlesex	1/27/2017
Michael D. Brady	Second Plymouth and Bristol	1/27/2017
Barbara A. L'Italien	Second Essex and Middlesex	1/27/2017
Joseph W. McGonagle, Jr.	28th Middlesex	1/30/2017
James B. Eldridge	Middlesex and Worcester	1/31/2017
Marjorie C. Decker	25th Middlesex	1/31/2017
Danielle W. Gregoire	4th Middlesex	1/31/2017
Paul R. Heroux	2nd Bristol	2/1/2017
Daniel J. Ryan	2nd Suffolk	2/3/2017
Carmine L. Gentile	13th Middlesex	2/3/2017
Mike Connolly	26th Middlesex	2/17/2017

SENATE No. 32

By Mr. DiDomenico, a petition (accompanied by bill, Senate, No. 32) of Sal N. DiDomenico, Denise Provost, Diana DiZoglio, Jason M. Lewis 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.

[SIMILAR MATTER FILED IN PREVIOUS SESSION SEE SENATE, NO. 66 OF 2015-2016.]

The Commonwealth of Massachusetts

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

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:

- SECTION 1. Section 10F of chapter 118E of the General Laws, as appearing in the 2014
- 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

- services as the secretary of health and human services determines is appropriate, but at a minimum shall include the following:
- (1) preventive pediatric health care visits and well-child visits, including immunizations and screening tests;
 - (2) primary care health care services customarily furnished by or through a general practitioner, family physician, internal medicine physician, obstetrician, gynecologist, pediatrician, independent nurse practitioner or physician assistant to the extent the furnishing of those services is legally authorized in the commonwealth; provided, that primary care shall not include emergency or post-stabilization services provided in a hospital or other setting; and
 - (3) unlimited sick visits provided by a primary care provider.
- (b) Additional services under the program shall include the following, but coverage for specific services within each category and the benefit limitations shall be at the secretary of health and human service's discretion:
- (1) dental health care, including preventive dental care; provided, however, that no funds shall be expended for cosmetic or surgical dentistry;
- (2) durable medical equipment;

(3) urgent care visits in the outpatient department of a participating hospital when an enrollee's primary care practitioner is not available to provide such services and emergency care in the outpatient department or emergency department of a participating hospital, including related laboratory and diagnostic radiology services for urgent or emergency care; provided, that

- 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;
- (6) outpatient surgery and anesthesia for tympanostomy tube placement and inguinal
 hernias;
- 36 (7) prescription drugs; and
- 37 (8) behavioral health.

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

SECTION 4. Section 1 shall take effect on July 1, 2017

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