

**SENATE . . . . . No. 610**

**The Commonwealth of Massachusetts**

PRESENTED BY:

*Julian Cyr*

*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 ensure effective health care cost control.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Julian Cyr</i>	<i>Cape and Islands</i>	
<i>Carmine L. Gentile</i>	<i>13th Middlesex</i>	<i>1/24/2017</i>
<i>Sarah K. Peake</i>	<i>4th Barnstable</i>	<i>1/31/2017</i>
<i>Thomas M. McGee</i>	<i>Third Essex</i>	<i>1/31/2017</i>
<i>Barbara A. L'Italien</i>	<i>Second Essex and Middlesex</i>	<i>1/31/2017</i>
<i>Jack Lewis</i>	<i>7th Middlesex</i>	<i>1/31/2017</i>
<i>Denise Provost</i>	<i>27th Middlesex</i>	<i>1/31/2017</i>
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>	<i>1/31/2017</i>
<i>Mike Connolly</i>	<i>26th Middlesex</i>	<i>2/1/2017</i>
<i>Sean Garballey</i>	<i>23rd Middlesex</i>	<i>2/1/2017</i>
<i>Paul R. Heroux</i>	<i>2nd Bristol</i>	<i>2/2/2017</i>
<i>Anne M. Gobi</i>	<i>Worcester, Hampden, Hampshire and Middlesex</i>	<i>2/2/2017</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>2/2/2017</i>
<i>Sonia Chang-Diaz</i>	<i>Second Suffolk</i>	<i>2/2/2017</i>
<i>Juana B. Matias</i>	<i>16th Essex</i>	<i>2/3/2017</i>
<i>Michael S. Day</i>	<i>31st Middlesex</i>	<i>2/3/2017</i>
<i>Marjorie C. Decker</i>	<i>25th Middlesex</i>	<i>2/3/2017</i>

<i>Eric P. Lesser</i>	<i>First Hampden and Hampshire</i>	<i>2/3/2017</i>
<i>James M. Cantwell</i>	<i>4th Plymouth</i>	<i>7/6/2017</i>
<i>James Arciero</i>	<i>2nd Middlesex</i>	<i>11/30/2017</i>

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By Mr. Cyr, a petition (accompanied by bill, Senate, No. 610) of Julian Cyr, Carmine L. Gentile, Sarah K. Peake, Thomas M. McGee and other members of the General Court for legislation to ensure effective health care cost control. Health Care Financing.

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[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 647 OF 2015-2016.]

**The Commonwealth of Massachusetts**

\_\_\_\_\_  
**In the One Hundred and Ninetieth General Court  
(2017-2018)**  
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An Act to ensure effective health care cost control.

*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 1 of chapter 12C of the General Laws is hereby amended by  
2 inserting after the definition of “Self-insured group” the following definitions:-

3 “Single payer benchmark”, the estimated total costs of providing health care to all  
4 residents of Massachusetts under a single payer health care system in the previous year, as  
5 established in section 23.

6 “Single payer health care”, a system providing publicly financed, universal access to  
7 health care for the population through a unified public health care plan, simplifying  
8 administration and allowing the budgeting of health care spending.

9           SECTION 2. Chapter 12C of the General Laws is hereby amended by inserting after  
10 section 22 the following:-

11           Section 23. (a) The center shall monitor, review, and evaluate reports related to single  
12 payer health care; provided, however, that the center shall also monitor the performance of single  
13 payer health care systems in other states and countries. (b) The center shall establish a single  
14 payer benchmark that shall be an estimate of the total cost of providing health care to all  
15 residents of Massachusetts under a single payer health care system during the previous year,  
16 provided that the single payer health care system offers continuous, comprehensive, affordable  
17 coverage for all Massachusetts residents regardless of income, assets, health status, or  
18 availability of other health coverage. (c) The center, in conjunction with the Health Policy  
19 Commission, shall include in its annual report, as mandated by section 16 (a), a comparison of  
20 the single payer benchmark with the actual health care spending in the state for the previous  
21 year, indicating whether the state would have saved money while expanding access to care under  
22 a single payer health care system.

23           SECTION 3. Chapter 6D of the General Laws is hereby amended by inserting after  
24 section 18 the following:-

25           Section 19. If at the outset of fiscal year 2018 the board determines that the single payer  
26 benchmark, as calculated by the Center for Health Information and Analysis under section 23 of  
27 chapter 12C, has outperformed the actual total health care spending and spending growth in the  
28 state, the Health Policy commission shall, no later than June 30, 2019, submit a “Single Payer  
29 Health Care Implementation Plan” to the legislature for consideration. The Implementation Plan  
30 will be developed after holding public hearings and meetings across the state, and will consist of

31 legislation to implement a single payer health care system for Massachusetts, as defined in  
32 section 1 of chapter 12C, and that offers continuous, comprehensive, affordable coverage for all  
33 Massachusetts residents regardless of income, assets, health status, or availability of other health  
34 coverage.