

HOUSE No. 1293

The Commonwealth of Massachusetts

PRESENTED BY:

Elizabeth A. Malia

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 relative to accountable care organizations.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Elizabeth A. Malia</i>	<i>11th Suffolk</i>	<i>2/16/2021</i>

HOUSE No. 1293

By Ms. Malia of Boston, a petition (accompanied by bill, House, No. 1293) of Elizabeth A. Malia for legislation to require annual reports by certain accountable care organizations. Health Care Financing.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. 1175 OF 2019-2020.]

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Second General Court
(2021-2022)**

An Act relative to accountable care organizations.

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. Chapter 118E of the General Laws, as appearing in the 2018 Official
2 Edition, is hereby amended by inserting after section 78 the following new sections: -

3 Section 79.

4 (A) For purposes of this section, the following words shall have the following
5 meanings:

6 “Managed care entities”, all contracted health insurers, health plans, health maintenance
7 organizations, behavioral health management firms and third-party administrators under contract
8 to a Medicaid managed care organization or primary care clinician plan, and accountable care
9 organizations.

10 “Community Partners”, care management entities under contract with the Division to
11 deliver complex care management services to enrollees with complex behavioral health or long-
12 term services and supports needs.

13 (B) The Division shall require all managed care entities to report annually in a public
14 document the following information:

15 a. Each managed care entities’ spending, in total and as a percentage of total
16 expenditure, on MassHealth members for behavioral health services, primary care, acute care
17 costs, emergency services, pharmacy, and other specialties that MassHealth deems appropriate.
18 The data shall be broken down by levels of care: inpatient, diversionary and outpatient. Managed
19 care entities shall report categorized services in a standardized manner established by the
20 division and the division shall provide data to establish a pre-ACO participation baseline.

21 b. The percentage of members eligible for enhanced care coordination and the
22 percentage of coordination services provided by the managed care entities or by Community
23 Partners.

24 c. The behavioral health Community Partners with which the managed care entity is
25 partnering and the enrollment in each Community Partner.

26 d. For each managed care entity, the total cost of care for the enrolled population;
27 the total cost of care for the enrolled population that is enrolled in a plan-based care management
28 program; the total cost of care for the enrolled in a Behavioral Health Community Partner; the
29 total cost of care for the enrolled population is enrolled in a Long-Term Services Community
30 Partner; and

31 e. Any additional data that MassHealth deem appropriate.

32 (C) The Division, in consultation with the Department of Mental Health, shall also
33 report annually in a public document the total cost of care for all members in the Fee for Service
34 Program. The analysis shall differentiate those who receive Community Partner coordination
35 services due to their enrollment in the Department of Mental Health Adult Community Clinical
36 Services and those who do not.