

HOUSE No. 5123

Sections 133, 192, 193 and 196 contained in the engrossed Bill making appropriations for the fiscal year 2023 (see House, No. 5050), which had been returned by His Excellency the Governor with recommendation of amendment (for message, see Attachment R of House, No. 5132). July 28, 2022.

The Commonwealth of Massachusetts

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

An Act authorizing the Health Insurance Connector Authority to implement a 2-year pilot program to extend eligibility for premium assistance payments or point-of-service cost-sharing subsidies for certain applicants.

Whereas, The deferred operation of this act would tend to defeat its purpose, which is to authorize the Health Insurance Connector Authority to implement a 2-year pilot program to extend eligibility for premium assistance payments or point-of-service cost-sharing subsidies for certain applicants, therefore it is hereby declared to be an emergency law, necessary for the immediate preservation of the public convenience.

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. (a) Notwithstanding clause (b) of section 3 of chapter 176Q of the General
2 Laws or any other general or special law to the contrary, the commonwealth health insurance
3 connector authority established in section 2 of said chapter 176Q shall implement a 2-year pilot
4 program to extend eligibility for premium assistance payments or point-of-service cost-sharing
5 subsidies for applicants at or below 500 per cent of the federal poverty guidelines.

6 (b) Applicants participating in the pilot program that are between 300 and 500 per cent
7 of the federal poverty guidelines shall have access to a plan that meets at least 90 per cent

8 actuarial value; provided, that the affordability standard for the pilot program shall be consistent
9 with current practices pursuant to said section 3 of said chapter 176Q.

10 (c) Notwithstanding the second paragraph of section 2000 of chapter 29 of the General
11 Laws or any other general or special law to the contrary, amounts necessary to support the 2-year
12 pilot program established in subsection (a) shall be expended from the Commonwealth Care
13 Trust Fund established in said section 2000 of said chapter 29.

14 (d) The commonwealth health insurance connector authority, in consultation with the
15 center for health information and analysis, shall evaluate the pilot program to assess the public
16 health, health equity, utilization and financial impacts on residents of reducing out-of-pocket
17 costs and premium costs. The center shall collect quantitative and qualitative data at the start of
18 the pilot program and at the end of each year of the pilot program to assess the impact on pilot
19 program participants. Data points to be collected shall include, but not be limited to: (i) rates of
20 unmet medical need due to cost; (ii) disparities in rates of unmet medical need due to cost; (iii)
21 difficulties accessing care at a doctor's office or clinic; (iv) racial and ethnic disparities in
22 difficulties accessing care at a doctor's office or clinic; (v) insurance coverage rates, including
23 rates of continuous insurance coverage; (vi) racial and ethnic disparities in insurance coverage
24 rates; (vii) visits to a doctor's office; and (viii) racial and ethnic disparities in visits to a doctor's
25 office. The connector authority shall file reports of its evaluation with the clerks of the house of
26 representatives and the senate, the house and senate committees on ways and means, the joint
27 committee on public health and the joint committee on health care financing not later than
28 December 1, 2024 and December 1, 2025.

29 SECTION 2. Section 1 shall take effect on June 1, 2023.

30 SECTION 3. Section 1 is hereby repealed.

31 SECTION 4. Section 3 shall take effect on May 31, 2025.

32 SECTION 5. This act shall take effect on July 1, 2022.