HOUSE No. 737

The Commonwealth of Massachusetts

PRESENTED BY:

Carmine Lawrence Gentile

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 clarifying rate setting processes for home health and home care services.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Carmine Lawrence Gentile	13th Middlesex	2/12/2021
Jacob R. Oliveira	7th Hampden	2/22/2021
Jack Patrick Lewis	7th Middlesex	2/23/2021
Adam J. Scanlon	14th Bristol	2/23/2021
Lindsay N. Sabadosa	1st Hampshire	2/24/2021
Paul F. Tucker	7th Essex	2/24/2021
James J. O'Day	14th Worcester	2/25/2021
David Henry Argosky LeBoeuf	17th Worcester	2/26/2021
Maria Duaime Robinson	6th Middlesex	2/26/2021
Vanna Howard	17th Middlesex	2/26/2021
Patricia D. Jehlen	Second Middlesex	3/1/2021
Steven Ultrino	33rd Middlesex	3/8/2021
Erika Uyterhoeven	27th Middlesex	3/13/2021
Tram T. Nguyen	18th Essex	3/15/2021
Walter F. Timilty	Norfolk, Bristol and Plymouth	3/17/2021
Christine P. Barber	34th Middlesex	3/19/2021
Mike Connolly	26th Middlesex	3/19/2021
Carol A. Doherty	3rd Bristol	3/29/2021

Mary S. Keefe	15th Worcester	4/1/2021
Rebecca L. Rausch	Norfolk, Bristol and Middlesex	4/21/2021
Kenneth I. Gordon	21st Middlesex	4/23/2021
Tami L. Gouveia	14th Middlesex	7/1/2021
Jason M. Lewis	Fifth Middlesex	7/2/2021
Marcos A. Devers	16th Essex	7/30/2021
Natalie M. Higgins	4th Worcester	9/3/2021
Natalie M. Blais	1st Franklin	12/10/2021
Susannah M. Whipps	2nd Franklin	12/10/2021

HOUSE No. 737

By Mr. Gentile of Sudbury, a petition (accompanied by bill, House, No. 737) of Carmine Lawrence Gentile and others relative to the rate setting processes for home health and home care services. Elder Affairs.

The Commonwealth of Alassachusetts

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

An Act clarifying rate setting processes for home health and home care services.

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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 13D of Chapter 118E of the general laws is amended after the second paragraph by inserting the following new paragraph:

Such rates for home health agencies, as defined under section 51K of chapter 111, shall be established at least biennially. In setting such rates, the executive office shall use as base year costs for rate determination purposes the reported costs of the calendar year not more than 4 years prior to the current rate year, adjusted for reasonableness and to incorporate any new regulatory costs imposed since said base year costs. In establishing rates of payment to home health agencies, the executive office shall consider all costs which must be incurred by efficiently and economically operated providers. The rates shall also include an allowance for reasonable administrative expenses and a reasonable profit factor, as determined by the executive office. Such cost analysis shall include, but not be limited to, the following: costs of similar services provided in other care settings; use of national or regional indices to measure increases

or decreases in reasonable costs incurred since the base year costs; the revision of existing historical cost bases, where applicable, to reflect changing norms or models of efficient service delivery; and other means to encourage the cost-efficient delivery of services. The Secretary shall, concurrent with the completion of setting such rates, provide a report to the house and senate committees on ways and means detailing how the rates issued under this paragraph were analyzed and revised; provided further, that the report shall compare the inflationary considerations made in the adopted rate with the most recent "Home Health Agency Market Basket" index posted by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services; provided further, that if the adopted rate does not rely on the "Home Health Agency Market Basket" index for the purpose of determining inflationary adjustments, then the report will simulate what the rate would have been if such index was a factor in rate development.

SECTION 2: Section 4 of Chapter 19A is hereby amended by adding after Section 4D the following new section:

SECTION 4E: In establishing rates of payment pursuant to the second paragraph of section 13C of chapter 118E of the M.G.L., the executive office shall consider changes to the state minimum wage or changes to employer payroll tax obligations as governmental mandates that affect the costs of providing homemaker and personal care homemaker services to elderly clients under this section.

The executive office shall also consider and analyze rates of payment and wages associated with providing similar services in both the public and private settings. In calculating operating costs, the executive office shall consider costs of; health insurance, employee benefits

and training, payroll taxes, technology costs, administrative allocation and staff salaries using the latest available national or regional indices and benchmarked to the latest available Bureau of Labor Statistics median wage data. Nothing in this section shall be construed as limiting consideration of other governmental mandates or operating costs that affect the cost of providing services pursuant to section 4 of chapter 19A of the General Laws.

The Secretary of Elder Affairs shall, concurrent with the promulgation of the final rates of payment for services under section 4 of chapter 19A, issue a report to the House and Senate committees on ways and means detailing how the rates promulgated were analyzed and determined in compliance with the provisions set forth in the second paragraph of section 13C of chapter 118E of the General Laws. The report shall detail the department's analysis of changes in the costs of providing homemaker and personal care homemaker services since the immediately preceding rate determination; provided further, that the report shall compare the inflationary considerations made in the adopted rate with the most recent "Home Health Agency Market Basket" index posted by the United States Department of Health and Human Services, Centers for Medicare and Medicaid Services; provided further, that if the adopted rate does not rely on the "Home Health Agency Market Basket" index for the purpose of determining inflationary adjustments, then the report will simulate what the rate would have been if such index was a factor in rate development.