SENATE No. 635

The Con	ımonwealth of Massachusetts	
	PRESENTED BY: Nick Collins	
To the Honorable Senate and House of Re Court assembled:	presentatives of the Commonwealth of Massachusetts	in General
The undersigned legislators and/o	or citizens respectfully petition for the adoption of the	accompanying bill
An Act addressing duplicative ne	otifications of UR approvals (administrative s	implification).
	PETITION OF:	
Nаме:	DISTRICT/ADDRESS:	
Nick Collins	First Suffolk	

SENATE No. 635

By Mr. Collins, a petition (accompanied by bill, Senate, No. 635) of Nick Collins for legislation to address duplicative notifications of UR approvals (administrative simplification). Financial Services.

The Commonwealth of Alassachusetts

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

An Act addressing duplicative notifications of UR approvals (administrative simplification).

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 12 of Chapter 1760 of the General Laws, as appearing in the 2018

Official Edition, is hereby amended by striking out subsections (b) and (c) and inserting in place

thereof the following subsections:-

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4 (b) A carrier or utilization review organization shall make a determination regarding the

medical necessity of a proposed admission, procedure or service that requires a determination

6 within two working days of obtaining all necessary information. For purposes of this section,

"necessary information" shall include the results of any face-to-face clinical evaluation or second

opinion that may be required. In the case of a determination to approve an admission, procedure

or service, the carrier or utilization review organization shall notify the provider rendering or

requesting the service within 24 hours. In the case of an adverse determination, the carrier or

11 utilization review organization shall notify the provider rendering or requesting the service

within 24 hours, and shall provide written or electronic confirmation of the notification to the insured and the provider within one working day thereafter.

(c) A carrier or utilization review organization shall make a concurrent review determination within one working day of obtaining all necessary information. In the case of a determination to approve an extended stay or additional services, the carrier or utilization review organization shall notify the provider rendering or requesting the service within one working day. In the case of an adverse determination, the carrier or utilization review organization shall notify the provider rendering or requesting the service within 24 hours and shall provide written or electronic notification to the insured and the provider within one working day thereafter. The service shall be continued without liability to the insured until the insured has been notified of the determination.