

SENATE No. 780

The Commonwealth of Massachusetts

PRESENTED BY:

John F. Keenan

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.

PETITION OF:

NAME:

John F. Keenan

DISTRICT/ADDRESS:

Norfolk and Plymouth

SENATE No. 780

By Mr. Keenan, a petition (accompanied by bill, Senate, No. 780) of John F. Keenan for legislation relative to accountable care. Health Care Financing.

The Commonwealth of Massachusetts

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

An Act relative to accountable care.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 Chapter 118E of the General Laws, as appearing in the 2018 Official Edition, is hereby
2 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 meanings:

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

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

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

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

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

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

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

29 e. Any additional data that MassHealth deem appropriate.

30 (C) The Division, in consultation with the Department of Mental Health, shall also report
31 annually in a public document the total cost of care for all members in the Fee for Service
32 Program. The analysis shall differentiate those who receive Community Partner coordination

- 33 services due to their enrollment in the Department of Mental Health Adult Community Clinical
- 34 Services and those who do not.