

SENATE No. 594

The Commonwealth of Massachusetts

PRESENTED BY:

Nick Collins

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 addressing duplicative notifications of UR approvals (administrative simplification).

PETITION OF:

NAME:

Nick Collins

DISTRICT/ADDRESS:

First Suffolk

SENATE No. 594

By Mr. Collins, a petition (accompanied by bill, Senate, No. 594) of Nick Collins for legislation to address duplicative notifications of UR approvals (administrative simplification). Financial Services.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 635 OF 2021-2022.]

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Third General Court
(2023-2024)**

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:

1 SECTION 1. Section 12 of Chapter 176O of the General Laws is hereby amended by
2 striking out subsections (b) and (c) and inserting in place thereof the following subsections:-

3 (b) A carrier or utilization review organization shall make an initial determination
4 regarding a proposed admission, procedure or service that requires a determination within two
5 working days of obtaining all necessary information. For purposes of this section, "necessary
6 information" shall include the results of any face-to-face clinical evaluation or second opinion
7 that may be required. In the case of a determination to approve an admission, procedure or
8 service, the carrier or utilization review organization shall notify the provider rendering or
9 requesting the service within 24 hours. In the case of an adverse determination, the carrier or
10 utilization review organization shall notify the provider rendering or requesting the service

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

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