

HOUSE No. 1320

The Commonwealth of Massachusetts

PRESENTED BY:

Margaret R. Scarsdale

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 reducing the administrative burden for preauthorization.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Margaret R. Scarsdale</i>	<i>1st Middlesex</i>	<i>1/17/2025</i>

HOUSE No. 1320

By Representative Scarsdale of Pepperell, a petition (accompanied by bill, House, No. 1320) of Margaret R. Scarsdale relative to the preauthorization process for certain health care services. Financial Services.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Fourth General Court
(2025-2026)**

An Act relative to reducing the administrative burden for preauthorization.

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 176O of the General Laws is hereby amended by inserting after section 12B the
2 following section:- 12C.

3 SECTION 1. (a) A carrier that uses a preauthorization process for health care services
4 shall not require a physician or provider to obtain preauthorization for a particular health care
5 service if, in the most recent six-month evaluation period, as described by subsection (b), the
6 carrier has approved or would have approved not less than 90 percent of the preauthorization
7 requests submitted by the physician or provider for the particular health care service.

8 (b) Except as provided by subsection (c), a carrier shall evaluate whether a physician
9 or provider qualifies for an exemption from preauthorization requirements under Subsection (a)
10 once every six months.

11 (c) A carrier may continue an exemption under subsection (a) without evaluating
12 whether the physician or provider qualifies for the exemption under subsection (a) for a
13 particular evaluation period.

14 (d) A physician or provider is not required to request an exemption under Subsection
15 (a) to qualify for the exemption.

16 (e) A carrier that determines a provider or physician qualifies for the exemption must
17 inform the provider or physician within 48 hours of determination.

18 SECTION 2. (a) A physician's or provider's exemption from preauthorization
19 requirement remains in effect for six months from the date of notification by the carrier or until:

20 (1) the 30th day after the date the carrier notifies the physician or provider of the
21 carrier's determination to rescind the exemption if the physician or provider does not appeal the
22 carrier's determination; or

23 (2) if the physician or provider appeals the determination, the fifth day after the
24 date the appeal concludes and the rescission is confirmed.

25 SECTION 3. (a) Sections 1 and 2 shall take effect on July 1, 2026.