

HOUSE No. 1353

The Commonwealth of Massachusetts

PRESENTED BY:

Antonio F. D. Cabral

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 resolve:

Resolve establishing a report to analyze long hospital stays.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Antonio F. D. Cabral</i>	<i>13th Bristol</i>	<i>1/17/2025</i>
<i>Christopher Hendricks</i>	<i>11th Bristol</i>	<i>1/21/2025</i>
<i>Christopher M. Markey</i>	<i>9th Bristol</i>	<i>2/4/2025</i>
<i>Carole A. Fiola</i>	<i>6th Bristol</i>	<i>2/12/2025</i>

HOUSE No. 1353

By Representative Cabral of New Bedford, a petition (accompanied by resolve, House, No. 1353) of Antonio F. D. Cabral and others that the Health Policy Commission study acute care hospital stays that exceed 60 days. Health Care Financing.

The Commonwealth of Massachusetts

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

Resolve establishing a report to analyze long hospital stays.

1 **Resolved**, (a) The health policy commission, in consultation with the center for health
2 information and analysis, the department of public health, the division of health insurance, and
3 the division of medical assistance, shall conduct an analysis and issue a report on acute care
4 hospital stays that exceed 60 days.

5 (b) The report shall analyze the quantity, cost, and root causes of long acute care hospital
6 stays, including, but not limited to: (i) aggregate, de-identified information on the patients that
7 have long-term hospital stays including the medical conditions and diagnoses resulting in said
8 hospital stays, the insurance coverage of said patients and other demographic information; (ii)
9 barriers to reimbursement and insurance coverage due to immigration status; (iii) the average
10 length of such stays; (iv) barriers that prevent such patients from care in the appropriate setting;
11 (v) efforts by hospitals to safely and efficiently discharge or transfer said patients to clinically-
12 appropriate post-acute settings of care; (vi) the adequacy of existing funding sources and any
13 recommended additional funding sources available to reimburse hospitals for bad debt associated

14 with such stays; and (vii) any recommendations to ensure patients receive the most appropriate
15 level of care for their clinical needs.

16 (c) The report and any legislative recommendations shall be submitted to the chairs of the
17 joint committee on health care financing, the house and senate committees on ways and means
18 not later than 180 days from the effective date of this act.

19 (d) This act shall take effect upon its passage.