

HOUSE No. 5015

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, February 5, 2026.

The committee on Financial Services, to whom was referred the petition (accompanied by bill, House, No. 1096) of Natalie M. Blais and others relative to rates for community health centers, reports recommending that the accompanying bill (House, No. 5015) ought to pass.

For the committee,

JAMES M. MURPHY.

The Commonwealth of Massachusetts

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

An Act relative to rate equity for community health centers.

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. Chapter 32A of the General Laws is hereby amended by inserting after
2 section 34 the following new section:-

3 Section 35. (a) For the purposes of this section, the following terms shall have the
4 following meanings unless the context clearly requires otherwise:

5 "Federally Qualified Health Center", any entity receiving a grant under 42 U.S.C. 254B.

6 "Federally Qualified Health Center Services", as such term is defined in 42 U.S.C.

7 1396d(a)(2)(C), and as further defined in 101 CMR 304.00.

8 (b) Notwithstanding any general or special law to the contrary, the Commission shall
9 ensure that the rate of payment for any Federally Qualified Health Center services provided to a
10 patient by a community health center, shall be reimbursed in an amount at least equivalent to the
11 annual aggregate revenue that the health center would have received if reimbursed by

12 MassHealth pursuant to methodology that conforms with 42 U.S.C. § 1396a(bb) and
13 1396b(m)(2)(A)(ix) as they appear in Title 42 of the United States Code as of January 1, 2025.

14 SECTION 2. Chapter 118E of the General Laws is hereby amended by inserting after
15 section 13d ½ the following new section:-

16 Section 13d ¾. (a) For purposes of this section, the term “community health center” shall
17 mean any entity reimbursed as a community health center under this chapter.

18 (b) Notwithstanding any general or special law to the contrary, reimbursement for
19 community health centers under this chapter, shall be through a methodology that conforms with
20 42 USC § 1396a(bb) and 1396b(m)(2)(A)(ix) as appearing in Title 42 of the United States Code
21 as of January 1, 2025.

22 SECTION 3. Chapter 175 of the General Laws is hereby amended by inserting before
23 section 47CCC the following new section:-

24 Section 47AAA. (a) For the purposes of this section, the following terms shall have the
25 following meanings unless the context clearly requires otherwise:

26 “Federally Qualified Health Center”, any entity receiving a grant under 42 U.S.C. 254B.

27 “Federally Qualified Health Center Services”, as such term is defined in 42 U.S.C.
28 1396d(a)(2)(C), and as further defined in 101 CMR 304.00.

29 (b) Notwithstanding any general or special law to the contrary, insurers organized under
30 this chapter shall ensure that the rate of payment for any Federally Qualified Health Center
31 services provided to a patient by a community health center, shall be reimbursed in an amount at
32 least equivalent to the annual aggregate revenue that the health center would have received if

33 reimbursed by MassHealth pursuant to methodology that conforms with 42 U.S.C. § 1396a(bb)
34 and 1396b(m)(2)(A)(ix) as they appear in Title 42 of the United States Code as of January 1,
35 2025.

36 (c) The division of insurance shall issue regulations governing issuance of payments to
37 community health centers to conform with this section. The division of insurance shall consult
38 with MassHealth to receive technical assistance regarding the per visit payment rate for each
39 individual Federally Qualified Health Center for a given year. MassHealth shall provide the
40 Division of Insurance with a proxy rate for any Federally Qualified Health Center who has not
41 received an individual prospective payment system rate and the division of insurance shall make
42 available to health plans upon request the necessary prospective payment system rate information
43 regarding their contracted Federally Qualified Health Centers such that the health plan can
44 ensure compliance with this requirement. The division of insurance shall promulgate regulations
45 no later than January 1, 2027 in order to implement the provisions of this Chapter.

46 (d) Any entity licensed by the division of insurance and providing reimbursement to
47 federally qualified health centers for services provided to patients, including, but not limited to,
48 non-profit hospital service corporations, medical service corporations, dental service
49 corporations, health maintenance organizations, and preferred provider organizations, or any
50 other entity not specifically enumerated hereunder licensed by the division of insurance and
51 providing reimbursement to federally qualified health centers for services provided to patients,
52 shall submit an annual report to the division of insurance as a condition of their licensure
53 evidencing that the total reimbursement to Federally Qualified Health Centers for services
54 provided to patients in the prior year was equivalent to the annual aggregate revenue the health
55 center would have received if reimbursed by MassHealth.

56 SECTION 4. Chapter 176A of the General Laws is hereby amended by inserting after

57 Section 38 the following new section:-

58 Section 39. (a) For the purposes of this section, the following terms shall have the

59 following meanings unless the context clearly requires otherwise:

60 “Federally Qualified Health Center”, any entity receiving a grant under 42 U.S.C. 254B.

61 “Federally Qualified Health Center Services”, as such term is defined in 42 U.S.C.

62 1396d(a)(2)(C), and as further defined in 101 CMR 304.00.

63 (b) Notwithstanding any general or special law to the contrary, any corporation organized

64 under this chapter shall ensure that the rate of payment for any Federally Qualified Health Center

65 services provided to a patient by a community health center, shall be reimbursed in an amount at

66 least equivalent to the annual aggregate revenue that the health center would have received if

67 reimbursed by MassHealth pursuant to methodology that conforms with 42 U.S.C. § 1396a(bb)

68 and 1396b(m)(2)(A)(ix) as they appear in Title 42 of the United States Code as of January 1,

69 2025.

70 SECTION 5. Section 1 of Chapter 176B of the General Laws, as appearing in the 2022

71 Official Edition, is hereby amended by inserting after the definition of “Dependent” the

72 following new definitions:-

73 “Federally Qualified Health Center”, any entity receiving a grant under 42 U.S.C. 254B.

74 “Federally Qualified Health Center Services”, as such term is defined in 42 U.S.C.

75 1396d(a)(2)(C), and as further defined in 101 CMR 304.00.

76 SECTION 6. Chapter 176B of the General Laws is hereby further amended by inserting
77 after Section 25 the following new section:-

78 Section 26: (a) Notwithstanding any general or special law to the contrary, any medical
79 service plan organized under this chapter shall ensure that the rate of payment for any Federally
80 Qualified Health Center services provided to a patient by a community health center, shall be
81 reimbursed in an amount at least equivalent to the annual aggregate revenue that the health
82 center would have received if reimbursed by MassHealth pursuant to methodology that conforms
83 with 42 U.S.C. § 1396a(bb) and 1396b(m)(2)(A)(ix) as they appear in Title 42 of the United
84 States Code as of January 1, 2025.

85 SECTION 7. Section 1 of Chapter 176E of the General Laws, as appearing in the 2022
86 Official Edition, is hereby amended by inserting after the definition of “Dental Service
87 Corporation” the following new definitions:-

88 “Federally Qualified Health Center”, any entity receiving a grant under 42 U.S.C. 254B.
89 “Federally Qualified Health Center Services”, as such term is defined in 42 U.S.C.
90 1396d(a)(2)(C), and as further defined in 101 CMR 304.00.

91 SECTION 8. Said Chapter 176E is hereby further amended by inserting after section 15A
92 the following new section:-

93 Section 15B. (a) Notwithstanding any general or special law to the contrary, any Dental
94 Service Corporation organized under this chapter shall ensure that the rate of payment for any
95 Federally Qualified Health Center services provided to a patient by a community health center,
96 shall be reimbursed in an amount at least equivalent to the annual aggregate revenue that the

97 health center would have received if reimbursed by MassHealth pursuant to methodology that
98 conforms with 42 U.S.C. § 1396a(bb) and 1396b(m)(2)(A)(ix) as they appear in Title 42 of the
99 United States Code as of January 1, 2025.

100 SECTION 9. Section 1 of Chapter 176G of the General Laws, as appearing in the 2022
101 Official Edition, is hereby amended by inserting after the definition of “Evidence of Coverage”
102 the following new definitions:-

103 “Federally Qualified Health Center”, any entity receiving a grant under 42 U.S.C. 254B.
104 “Federally Qualified Health Center Services”, as such term is defined in 42 U.S.C.
105 1396d(a)(2)(C), and as further defined in 101 CMR 304.00.

106 SECTION 10. Said Chapter 176G is hereby further amended by inserting after section 33
107 the following new section:-

108 Section 34. (a) Notwithstanding any general or special law to the contrary, any Health
109 Maintenance Organization organized under the laws of the Commonwealth shall ensure that the
110 rate of payment for any Federally Qualified Health Center services provided to a patient by a
111 community health center, shall be reimbursed in an amount at least equivalent to the annual
112 aggregate revenue that the health center would have received if reimbursed by MassHealth
113 pursuant to methodology that conforms with 42 U.S.C. § 1396a(bb) and 1396b(m)(2)(A)(ix) as
114 they appear in Title 42 of the United States Code as of January 1, 2025.

115 SECTION 11. Section 1 of Chapter 176I of the General Laws, as appearing in the 2022
116 Official Edition, is hereby amended by inserting after the definition of “Emergency Care” the
117 following new definitions:-

118 “Federally Qualified Health Center”, any entity receiving a grant under 42 U.S.C. 254B.

119 “Federally Qualified Health Center Services”, as such term is defined in 42 U.S.C.

120 1396d(a)(2)(C), and as further defined in 101 CMR 304.00.

121 SECTION 12. Said chapter 176I of the General Laws is hereby further amended by

122 inserting after section 13 the following new section:-

123 Section 14. (a) Notwithstanding any general or special law to the contrary, any preferred
124 provider contract shall ensure that the rate of payment for any Federally Qualified Health Center
125 services provided to a patient by a community health center, shall be reimbursed in an amount at
126 least equivalent to the annual aggregate revenue that the health center would have received if
127 reimbursed by MassHealth pursuant to methodology that conforms with 42 U.S.C. § 1396a(bb)
128 and 1396b(m)(2)(A)(ix) as they appear in Title 42 of the United States Code as of January 1,
129 2025.

130 SECTION 13. Chapter 15A of the General Laws is hereby amended by inserting after

131 section 18 the following new section:-

132 Section 18A. (a) For the purposes of this section, the following terms shall have the
133 following meanings unless the context clearly requires otherwise:

134 “Federally Qualified Health Center”, any entity receiving a grant under 42 U.S.C. 254B.

135 “Federally Qualified Health Center Services”, as such term is defined in 42 U.S.C.

136 1396(a)(2)(C), and as further defined in 101 CMR 304.00.

137 (b) Notwithstanding any general or special law to the contrary, any student health
138 insurance program or plan authorized under section 18 of chapter 15A shall ensure that the rate

139 of payment for any Federally Qualified Health Center services provided to a patient by a
140 community health center, shall be reimbursed in an amount at least equivalent to the annual
141 aggregate revenue that the health center would have received if reimbursed by MassHealth
142 pursuant to methodology that conforms with 42 U.S.C. § 1396a(bb) and 1396b(m)(2)(A)(ix) as
143 they appear in Title 42 of the United States Code as of January 1, 2025.