

**HOUSE . . . . . No.**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

*Natalie M. Blais*

*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 rate equity for community health centers.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Natalie M. Blais</i>	<i>1st Franklin</i>	<i>1/15/2025</i>

**HOUSE . . . . . No.**

[Pin Slip]

**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, as appearing in the 2022 Official  
2 Edition, is hereby amended by inserting after section 33 the following new section:-

3 Section 34. (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, as appearing in the 2022 Official  
15 Edition, is hereby amended by inserting after 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, as appearing in the 2022 Official Edition,  
23 is hereby amended by inserting after section 47UU the following new section:-

24 Section 47VV. (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, as appearing in the 2022 Official  
57 Edition, is hereby amended by inserting after 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, as so appearing is hereby further  
77 amended by inserting 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 further amended by inserting after section 15A the  
92 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 further amended by inserting after section 33 the  
107 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, as so appearing, is further amended by inserting after  
122 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, as appearing in the 2022 Official  
131 Edition, is hereby amended by inserting after 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.