

**SENATE . . . . . No.**

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**The Commonwealth of Massachusetts**

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PRESENTED BY:

***William J. Driscoll***

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*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 insurance coverage of mobile integrated health.**

\_\_\_\_\_

PETITION OF:

NAME:

*William J. Driscoll*

DISTRICT/ADDRESS:

*Norfolk, Plymouth and Bristol*

**SENATE . . . . . No.**

[Pin Slip]

[SIMILAR MATTER FILED IN PREVIOUS SESSION  
SEE SENATE, NO. 718 OF 2023-2024.]

**The Commonwealth of Massachusetts**

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

An Act relative to insurance coverage of mobile integrated health.

*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 2020 Official  
2 Edition, is hereby amended by inserting after section 17O the following new section:-

3 Section 17O 1/2. The group insurance commission and any carrier as defined in section 1  
4 of chapter 176O or other entity which contracts with the commission to provide health benefits  
5 to eligible employees and retirees and their eligible dependents shall not decline to provide  
6 coverage for medical, behavioral or health care services solely on the basis that those services  
7 were delivered by a health care provider, as defined in section 1 of chapter 111O, participating in  
8 a mobile integrated health care program approved by the department of public health pursuant to  
9 chapter 111O. Medical, behavioral or health care services delivered by way of an approved  
10 mobile integrated health care program shall be covered to the same extent as if they were  
11 provided in a health care facility, as defined in section 1 of chapter 111O, and the rates of

12 payments for otherwise covered services shall not be reduced on the grounds that those services  
13 were delivered by a health care provider participating in an approved mobile integrated health  
14 care program. A contract that provides coverage for care delivered may contain a provision for a  
15 deductible, copayment or coinsurance requirement for a service provided by a health care  
16 provider participating in an approved mobile integrated health care program as long as the  
17 deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance  
18 applicable to delivery of the same services within a health care facility.

19 SECTION 2. Section 1 of chapter 111C of the General Laws, as so appearing, is hereby  
20 amended by adding the following subsection:-

21 (c) MIH programs that are focused on behavioral health services shall not be subject to  
22 application and registration fees.

23 SECTION 3. Chapter 118E of the General Laws, as so appearing, is hereby amended by  
24 inserting after section 10K the following new section:-

25 Section 10KK. The division and its contracted health insurers, health plans, health  
26 maintenance organizations, behavioral health management firms and third party administrators  
27 under contract to a Medicaid managed care organization, the Medicaid primary care clinician  
28 plan, or an accountable care organization shall not decline to provide coverage for medical,  
29 behavioral or health care services solely on the basis that those services were delivered by a  
30 health care provider, as defined in section 1 of chapter 111O, participating in a mobile integrated  
31 health care program approved by the department of public health pursuant to chapter 111O.  
32 Medical, behavioral or health care services delivered by way of an approved mobile integrated  
33 health care program shall be covered to the same extent as if they were provided in a health care

34 facility, as defined in section 1 of chapter 111O, and the rates of payments for otherwise covered  
35 services shall not be reduced on the grounds that those services were delivered by a health care  
36 provider participating in an approved mobile integrated health care program. A contract that  
37 provides coverage for care delivered may contain a provision for a deductible, copayment or  
38 coinsurance requirement for a service provided by a health care provider participating in an  
39 approved mobile integrated health care program as long as the deductible, copayment or  
40 coinsurance does not exceed the deductible, copayment or coinsurance applicable to delivery of  
41 the same services within a health care facility.

42 SECTION 4. Chapter 175 of the General Laws, as so appearing, is hereby amended by  
43 inserting after section 47II the following new section:-

44 Section 47III. Any policy, contract, agreement, plan or certificate of insurance issued,  
45 delivered or renewed within the commonwealth, shall not decline to provide coverage for  
46 medical, behavioral or health care services solely on the basis that those services were delivered  
47 by a health care provider, as defined in section 1 of chapter 111O, participating in a mobile  
48 integrated health care program approved by the department of public health pursuant to chapter  
49 111O. Medical, behavioral or health care services delivered by way of an approved mobile  
50 integrated health care program shall be covered to the same extent as if they were provided in a  
51 health care facility, as defined in section 1 of chapter 111O, and the rates of payments for  
52 otherwise covered services shall not be reduced on the grounds that those services were delivered  
53 by a health care provider participating in an approved mobile integrated health care program. A  
54 contract that provides coverage for care delivered may contain a provision for a deductible,  
55 copayment or coinsurance requirement for a service provided by a health care provider  
56 participating in an approved mobile integrated health care program as long as the deductible,

57 copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable  
58 to delivery of the same services within a health care facility.

59 SECTION 5. Chapter 176A of the General Laws, as so appearing, is hereby amended by  
60 inserting after section 8L the following new section:-

61 Section 8LL. Any contract between a subscriber and the corporation under an individual  
62 or group hospital service plan which is delivered, issued or renewed within the commonwealth  
63 shall not decline to provide coverage for medical, behavioral or health care services delivered by  
64 a health care provider, as defined in section 1 of chapter 111O, participating in a mobile  
65 integrated health care program approved by the department of public health pursuant to chapter  
66 111O. Medical, behavioral or health care services delivered by way of an approved mobile  
67 integrated health care program shall be covered to the same extent as if they were provided in a  
68 health care facility, as defined in section 1 of chapter 111O, and the rates of payments for  
69 otherwise covered services shall not be reduced on the grounds that those services were delivered  
70 by a health care provider participating in an approved mobile integrated health care program. A  
71 contract that provides coverage for care delivered may contain a provision for a deductible,  
72 copayment or coinsurance requirement for a service provided by a health care provider  
73 participating in an approved mobile integrated health care program as long as the deductible,  
74 copayment or coinsurance does not exceed the deductible, copayment or coinsurance applicable  
75 to delivery of the same services within a health care facility.

76 SECTION 6. Chapter 176B of the General Laws, as so appearing, is hereby amended by  
77 inserting after section 4L the following new section:-

78           Section 4LL. Any subscription certificate under an individual or group medical service  
79 agreement delivered, issued or renewed within the commonwealth shall not decline to provide  
80 coverage for medical, behavioral or health care services delivered by a health care provider, as  
81 defined in section 1 of chapter 111O, participating in a mobile integrated health care program  
82 approved by the department of public health pursuant to chapter 111O. Medical, behavioral or  
83 health care services delivered by way of an approved mobile integrated health care program shall  
84 be covered to the same extent as if they were provided in a health care facility, as defined in  
85 section 1 of chapter 111O, and the rates of payments for otherwise covered services shall not be  
86 reduced on the grounds that those services were delivered by a health care provider participating  
87 in an approved mobile integrated health care program. A contract that provides coverage for care  
88 delivered may contain a provision for a deductible, copayment or coinsurance requirement for a  
89 service provided by a health care provider participating in an approved mobile integrated health  
90 care program as long as the deductible, copayment or coinsurance does not exceed the  
91 deductible, copayment or coinsurance applicable to delivery of the same services within a health  
92 care facility.

93           SECTION 7. Chapter 176G of the General Laws, as so appearing, is hereby amended by  
94 inserting after section 4C the following new section:-

95           Section 4CC. Any individual or group health maintenance contract that is issued or  
96 renewed shall not decline to provide coverage for medical, behavioral or health care services  
97 delivered by a health care provider, as defined in section 1 of chapter 111O, participating in a  
98 mobile integrated health care program approved by the department of public health pursuant to  
99 chapter 111O. Medical, behavioral, or health care services delivered by way of an approved  
100 mobile integrated health care program shall be covered to the same extent as if they were

101 provided in a health care facility, as defined in section 1 of chapter 111O, and the rates of  
102 payments for otherwise covered services shall not be reduced on the grounds that those services  
103 were delivered by a health care provider participating in an approved mobile integrated health  
104 care program. A contract that provides coverage for care delivered may contain a provision for a  
105 deductible, copayment or coinsurance requirement for a service provided by a health care  
106 provider participating in an approved mobile integrated health care program as long as the  
107 deductible, copayment or coinsurance does not exceed the deductible, copayment or coinsurance  
108 applicable to delivery of the same services within a health care facility.

109 SECTION 8. Chapter 176I of the General Laws, as so appearing, is hereby amended by  
110 inserting after section 12 the following new section:-

111 Section 13. An organization entering into a preferred provider contract shall not decline  
112 to provide coverage for medical, behavioral or health care services delivered by a health care  
113 provider, as defined in section 1 of chapter 111O, participating in a mobile integrated health care  
114 program approved by the department of public health pursuant to chapter 111O. Medical,  
115 behavioral, or health care services delivered by way of an approved mobile integrated health care  
116 program shall be covered to the same extent as if they were provided in a health care facility, as  
117 defined in section 1 of chapter 111O, and the rates of payments for otherwise covered services  
118 shall not be reduced on the grounds that those services were delivered by a health care provider  
119 participating in an approved mobile integrated health care program. A contract that provides  
120 coverage for care delivered may contain a provision for a deductible, copayment or coinsurance  
121 requirement for a service provided by a health care provider participating in an approved mobile  
122 integrated health care program as long as the deductible, copayment or coinsurance does not

- 123 exceed the deductible, copayment or coinsurance applicable to delivery of the same services
- 124 within a health care facility.