

**HOUSE . . . . . No. 1240**

---

The Commonwealth of Massachusetts

PRESENTED BY:

*Harriett L. Stanley*

*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 sustainable health care cost containment.

PETITION OF:

NAME:

*Harriett L. Stanley*

DISTRICT/ADDRESS:

*2nd Essex*

**HOUSE . . . . . No. 1240**

---

By Ms. Stanley of West Newbury, a petition (accompanied by bill, House, No. 1240) of Harriett L. Stanley relative to sustainable health care cost containment. Health Care Financing.

---

The Commonwealth of Massachusetts

—————  
In the Year Two Thousand Eleven  
—————

An Act relative to sustainable health care cost containment.

*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 118E of the General Laws, as appearing in the 2008 Official  
2 Edition, is hereby amended by adding the following new section:

3 Section 62. – The Executive Office of Health and Human Services shall discontinue  
4 membership in the MassHealth fee-for-service program and primary care clinician plan, and for  
5 plan years beginning on or after January 1, 2011, shall begin to enroll all members meeting  
6 eligibility requirements, as established pursuant to applicable federal and state law and  
7 regulation, into a Medicaid managed care organization that has contracted with the  
8 commonwealth to deliver such managed care services, in accordance with the enrollment and  
9 assignment process for other eligible categories and at the appropriate levels of premium.

10 SECTION 2. Notwithstanding any general or special law to the contrary, the Executive  
11 Office of Health and Human Services shall move away from fee for service payment to all  
12 providers of medical care or services for which medical assistance and medical benefits are  
13 available under Chapter 118E. In accordance with the recommendations of the Special

14 Commission on Payment Reform created pursuant to Section 44 of Chapter 305 of the Acts of  
15 2008 and any subsequent commission on payment reform, any medical assistance provided  
16 under Chapter 118E shall be reimbursed by a global capitation payment or other payment that  
17 demonstrates lower payments for more coordinated and efficient care. The Secretary shall  
18 provide an annual report to the house and senate committee on ways and means and the joint  
19 committee on health care financing on or before December 31st outlining in detail the changes  
20 that have been made to date and the savings that have resulted.