

Joint Committee on Health Care Financing 2025-2026 (194th) Bill Summary

<u>Bill Number:</u>	House, No. 1401
<u>Title:</u>	AN ACT INCREASING ACCESS TO MASSHEALTH DENTAL PROVIDERS
<u>Sponsor:</u>	Representative Edward R. Philips (Sharon)
<u>Hearing Date:</u>	July 15, 2025
<u>Reporting Deadline:</u>	September 13, 2025
<u>Prior History:</u>	A refile of H1236 & S779 from the 2023-2024 legislative session. Referred to the Joint Committee on Health Care Financing. Public hearing on October 17, 2023. Accompanied a study order (H4634) on May 9, 2024.
<u>Similar Matters:</u>	S888 (Mark - Identical, Health Care Financing)

Current Law:

M.G.L. Chapter 6A §2 establishes the Executive Office of Health and Human Services.

Chapter 118E of the General Laws pertains to the state Medicaid program [MassHealth].

M.G.L. Chapter 118E, § 13C directs EOHHS, or an agency designated by EOHHS, to establish MassHealth payment rates and the rates paid by governmental units for health care services and social service programs. Payment rates must be i) “adequate to meet the costs incurred by efficiently and economically operated facilities providing care and services in conformity with applicable state and federal laws and regulations and quality and safety standards” and ii) within the financial capacity of the Commonwealth.

M.G.L. Chapter 118E § 13D directs EOHHS, or an agency designated by EOHHS, to perform its rate making functions, after conducting a public hearing on proposed rates, at least annually for institutional providers and at least biennially for non-institutional providers.

M.G.L. Chapter 118E §53 establishes covered services for MassHealth and requires MassHealth Essential to include dental services to the same extent as MassHealth Basic

Summary:

This legislation adds a new section 83 to chapter 118E which establishes that, subject to appropriation, the secretary of health and human services must provide supplemental MassHealth payments to dental providers who treat at least ten more adult MassHealth beneficiaries (age 21 and older) each year than they did the previous year. These payments, initially set at \$31 per qualifying patient encounter, will be given as a rate add-on and are subject to periodic review under sections 13C and 13D of chapter 118E. Eligibility for these payments is limited to providers located in ten municipalities designated by the secretary as having high MassHealth enrollment but low dental service use. To qualify, dental providers must be licensed in Massachusetts, enrolled with MassHealth, meet the increased patient requirement and operate in an eligible municipality. MassHealth is tasked with issuing regulations to implement the program, including the selection of qualifying municipalities based on enrollment and utilization data.