

**JOINT COMMITTEE ON FINANCIAL SERVICES
2025-2026 (194th) BILL SUMMARY**

Bill No: H1156

Title: AN ACT RELATIVE TO UNCOLLECTED CO-PAYS, CO-INSURANCE AND DEDUCTIBLES

Sponsor: Rep. Carole A. Fiola (*Fall River*)

Hearing Date: July 15, 2025

Reporting Deadline: August 13, 2025

Prior History:

2023-24 (H1009): Ordered to a House Study

2021-22 (H1086): Ordered to a House Study

2019-20 (H976): Ordered to a House Study

2017-18 (H523): Ordered to a House Study

2015-16 (S496): Ordered to a Senate Study

Similar Matters: S758 (Finegold – Identical); H1196 (Howitt)

CURRENT LAW:

M.G.L. c. 176O Health Insurance Consumer Protections

42 CFR 413.89 Medicare reimburses 65 percent of uncollected deductible, and coinsurance (cost sharing) amounts for Medicare beneficiaries.

SUMMARY:

This bill would add a new section to the Health Insurance Consumer Protection statute: *Section 7A. Equitable Funding for Health Care Provider Bad Debt*

A health insurance carrier would reimburse a health care provider at least 65 percent of each co-payment, co-insurance or deductible amount due under an insured's health benefit plan that remains unpaid under the following conditions:

- The wholly or partially uncollected co-payment, co-insurance or deductible:
 - Equals or exceeds \$250.
 - Reflects a unique covered service under the health benefit plan per insured.
 - Is fully documented as unpaid and not subject to an on-going payment plan for more than 120 days from the date the first bill was mailed.
 - Has been subject to a reasonable effort at collection by the health care provider.

Each year a health care provider would submit an aggregate reimbursement request for all of their uncollected co-payments, co-insurance or deductibles to the appropriate insurance carrier.

Health insurance carriers would submit annual reports to the Division of Insurance (DOI) showing the total number and number of uncollected co-payments, co-insurances, and deductibles, indicating those reimbursed and those denied. DOI would make the reports publicly available on their website.

The DOI would promulgate regulations within ninety days of the effective date of this Act consistent with Centers for Medicare & Medicaid Services rules for reasonable collection efforts required by a health care provider prior to submission of a request of reimbursement to a carrier.