

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

<u>Bill Number:</u>	House, No. 1415
<u>Title:</u>	AN ACT TO PROTECT QUALIFIED MEDICARE BENEFICIARIES FROM IMPROPER BILLING
<u>Sponsor:</u>	Representative Steven Ultrino (Malden)
<u>Hearing Date:</u>	July 1, 2025
<u>Reporting Deadline:</u>	August 30, 2025
<u>Prior History:</u>	New File
<u>Similar Matters:</u>	S883 (Lewis – Identical, Health Care Financing)

Current Law:

M.G.L. Ch. 118E § 1 designates the Executive Office of Health and Human Services [EOHHS] as the single state agency responsible for the administration of any programs of medical assistance and medical benefits established pursuant to Chapter 118E. The Secretary of EOHHS is authorized to take actions, through the division of medical assistance [DMA] and the secretary of aging and independence, as appropriate, in this capacity, in accordance with section 2 of Chapter 118E.

M.G.L. Ch. 118E § 9 establishes the Massachusetts Medicaid program and outlines its basic eligibility criteria.

M.G.L. Ch. 118E § 9A authorizes DMA to implement a combined Medicaid program and Children's Health Insurance Program (CHIP), known as MassHealth, in accordance with the terms and conditions of a demonstration projects approved by the Secretary or any other federal waiver or demonstration authority and lists beneficiary categories for whom MassHealth may provide medical benefits.

M.G.L. Ch. 118E § 12 authorizes MassHealth to enter into any type of contracts with providers of medical services and establish or negotiate rates with providers of care and manufacturers of medical services, equipment and supplies for the provision of such services to its enrollees, as governed by sections 13 through 13K, inclusive, and sections 64 through 70, inclusive.

M.G.L. Ch. 118E 25A sets eligibility standards for Qualified Medicare Beneficiary, Specified Low-Income Medicare Beneficiary and Qualified Individual programs, known as the Medicare Saving or Medicare Buy-In programs, including the for including the consideration of certain income and assets.

Summary:

The proposed legislation inserts a new section in Chapter 118E, Section 25B, consisting of the following 2 subsections:

Subsection (a) prohibits providers from billing Medicare, Medicare Advantage, Medicare Saving, and Medicare Buy-In programs for cost-sharing "pursuant to federal and state law."

Subsection (b) directs DMA to promulgate regulations within 90 days of the effective date of this act establishing sanctions, including monetary fines, for violations of the cost-sharing billing provision in subsection (a).