

Electronic Filing of Reports

1 SECTION 4. Chapter 6 of the General Laws is hereby amended by adding the
2 following section:-

3 Section 222. Notwithstanding any general or special law to the contrary, the
4 executive and judicial branches of the government of the commonwealth, any special
5 legislative commission created by the general court and all agencies, departments, quasi-
6 state agencies or other entities of the commonwealth required by law to file reports with
7 the legislature shall make any such report available online in searchable format and shall
8 provide an electronic copy of the report to the clerks of the senate and house of
9 representatives. The clerks of the senate and house of representatives shall: (i) make all
10 such reports available online to the public in an accessible searchable format through the
11 general court’s website; and (ii) create and maintain an archive of all such reports that is
12 available online in searchable format. The clerks of the senate and house of
13 representatives shall develop procedures and requirements for the preparation of the
14 reports to facilitate their collection and storage. The branch, commission or entity
15 submitting a report shall notify in writing every entity that is required by law to receive
16 the report of the availability of the report on the general court’s website and the means of
17 accessing the report. The branch, commission or entity shall provide a copy in hard copy
18 format of any report upon request from an entity that is required by law to receive the
19 report. Compliance with this section shall fulfill any filing requirements established by
20 any general or special law.

Delegation Threshold 1

1 SECTION 5. Section 5 of chapter 7C of the General Laws, as appearing in the
2 2020 Official Edition, is hereby amended by striking out, in lines 4 and 13, the figure
3 “\$250,000” and inserting in place thereof, in each instance, the following figure:-
4 \$500,000.

Delegation Threshold 2

1 SECTION 6. Section 46 of said chapter 7C, as so appearing, is hereby amended
2 by striking out, in line 68, the figure “\$30,000” and inserting in place thereof the
3 following figure:- \$50,000.

Delegation Threshold 3

1 SECTION 7. Said section 46 of said chapter 7C, as so appearing, is hereby further
2 amended by striking out, in line 70, the figure “\$300,000” and inserting in place thereof
3 the following figure:- \$500,000.

Delegation Threshold 4

1 SECTION 8. Section 51 of said chapter 7C, as so appearing, is hereby amended
2 by striking out, in line 51, the figure “\$30,000” and inserting in place thereof the
3 following figure:- \$50,000.

Delegation Threshold 5

1 SECTION 9. Said section 51 of said chapter 7C, as so appearing, is hereby further
2 amended by striking out, in line 53, the figure “\$300,000” and inserting in place thereof
3 the following figure:- \$500,000.

Cashless Lottery Payments

1 SECTION 10. Section 24 of chapter 10 of the General Laws, as so appearing, is
2 hereby amended by inserting after the word “agents”, in line 17, the following words:- ;

3 provided further, that said restriction shall not govern the transmittal of lottery
4 information and sales for the purpose of facilitating point of sale transactions; provided
5 further, that said restriction shall govern point of sale transactions involving credit cards
6 as defined in section 1 of chapter 140D and that point-of-sale transactions under this
7 section shall be subject to the restrictions set forth in subsection (b) of section 5I of
8 chapter 18.

Inclusive Concurrent Enrollment 1

1 SECTION 11. Section 7 of chapter 15A of the General Laws, as so appearing, is
2 hereby amended by inserting after the word “students”, in line 35, the following words:-
3 and students with severe intellectual disabilities, severe autism spectrum disorders or
4 other severe developmental disabilities.

Inclusive Concurrent Enrollment 2

1 SECTION 12. The second sentence of subsection (b) of section 7A of said chapter
2 15A, as so appearing, is hereby amended by striking out clauses (8) and (9) and inserting
3 in place thereof the following 3 clauses:- (8) supporting early childhood to grade 12
4 education programs; (9) maximizing fundraising from private sources; and (10) providing
5 access for students with severe intellectual disabilities, severe autism spectrum disorders
6 or other severe developmental disabilities consistent with section 30A.

Inclusive Concurrent Enrollment 3

1 SECTION 13. The second sentence of subsection (i) of said section 7A of said
2 chapter 15A, as so appearing, is hereby amended by striking out clauses (8) and (9) and
3 inserting in place thereof the following 3 clauses:- (8) to ensure cost-effective use of
4 resources; (9) to maximize fundraising from private sources; and (10) to provide access

5 for students with severe intellectual disabilities, severe autism spectrum disorders or other
6 severe developmental disabilities consistent with section 30A.

Inclusive Concurrent Enrollment 4

1 SECTION 14. Said chapter 15A is hereby further amended by inserting after
2 section 30 the following section:-

3 Section 30A. (a) In order to ensure that individuals with severe intellectual
4 disabilities, severe autism spectrum disorders or other severe developmental disabilities
5 may participate as non-matriculated students in undergraduate academic courses,
6 internships, work-based trainings, extracurricular activities and all other aspects of
7 campus life that include other students not participating under this section, such
8 individuals shall not be required to: (i) take any standardized college entrance aptitude
9 test; (ii) have a high school diploma or its equivalent; (iii) meet high school course
10 requirements; (iv) meet minimum grade point average requirements; or (v) obtain a
11 passing score on the statewide assessment tests utilized as a basis for competency
12 determination under section 1D of chapter 69; provided, however, that such individuals
13 shall enroll in noncredit and credit-bearing courses in audit status in situations where
14 such individuals do not meet course prerequisites and requirements.

15 (b) Public institutions of higher education, in consultation with the department of
16 higher education and consistent with the purposes of this section, shall establish
17 guidelines to select students to participate in higher education pursuant to this section,
18 including, but not limited to, guidelines addressing campus capacity regarding the
19 number of students that may participate. Public institutions of higher education may
20 coordinate selection of students with relevant local, state or other public agencies serving

21 students with severe intellectual disabilities, severe autism spectrum disorders or other
22 severe developmental disabilities. An individual shall not be denied an opportunity to
23 participate in higher education solely due to the individual's disability status. Public
24 institutions of higher education, in consultation with the department of higher education
25 and consistent with the purposes of this section, shall also establish course selection
26 guidelines to ensure that participating individuals select courses that are appropriate to
27 their individual strengths, needs, preferences and interests. Participating individuals shall
28 be permitted to: (i) take a credit-bearing, undergraduate academic course for credit if they
29 have met the course prerequisites and requirements; or (ii) audit a credit-bearing,
30 undergraduate academic course, consistent with campus policies governing selection of
31 students for audit participation, if they have not met the course prerequisites and
32 requirements. Individuals participating in a public institution of higher education
33 pursuant to this section shall have the opportunity to participate for the same number of
34 semesters as the average number of semesters required of matriculating students to earn a
35 degree at the institution; provided, however, that any public institution of higher
36 education may allow an individual to participate for a longer duration to address the
37 circumstances and needs of the individual.

38 Nothing in this section shall require a public institution of higher education to
39 provide course enrollment or audit preference for individuals with severe intellectual
40 disabilities, severe autism spectrum disorders or other severe developmental disabilities
41 relative to other individuals seeking to enroll in or audit a course. Nothing in this section
42 shall require a public institution of higher education to include individuals with severe
43 intellectual disabilities, severe autism spectrum disorders or other severe developmental

44 disabilities in graduate programs and courses, programs and courses with selective
45 admission or continuing education courses.

46 (c) In order to support inclusion of participating students in academic courses,
47 extracurricular activities and other aspects of campus life, individual supports and
48 services shall be provided to individuals participating in higher education pursuant to this
49 section, subject to availability of sufficient public or private funds, including, but not
50 limited to, the Massachusetts Inclusive Concurrent Enrollment Initiative Trust Fund
51 established pursuant to section 2VVVVV of chapter 29; provided, however, that a public
52 institution of higher education shall not be required to bear the costs of individual
53 supports and services that exceed the kind of supports and services generally provided by
54 the public institution of higher education. Costs associated with supporting participation
55 in public institutions of higher education under this section shall be: (i) an approved
56 expense as a special education service pursuant to section 5 of chapter 71B and shall be
57 considered secondary school education; provided, however, that a student's participation
58 in higher education is addressed in the student's Individualized Education Program under
59 section 3 of said chapter 71B for students ages 18 to 21 years old, inclusive; provided
60 further, that such student is considered to have a severe intellectual disability, a severe
61 autism spectrum disorder or other severe developmental disability; provided further, that
62 in the case of students who are age 18 or 19, participation shall be limited to students who
63 have been unable to obtain a passing score on the statewide assessment tests utilized as a
64 basis for competency determination under section 1D of chapter 69; provided further, that
65 in the case of students ages 20 or 21, participation shall be limited to students who have
66 been unable to obtain a passing score on the statewide assessment tests utilized as a basis

67 for competency determinations under said section 1D of said chapter 69 or who have
68 already been determined eligible for special education and have also been determined by
69 the Individualized Education Program team to have severe functional delays impacting
70 independent living, communication or behavioral skills resulting in skills that are
71 significantly below chronological age; and provided further, that nothing in this section
72 shall impose an additional cost on a school committee beyond the cost of what is required
73 under said chapter 71B or 20 U.S.C. 1400 et seq.; (ii) subject to the availability of federal
74 funding and appropriation provided under section 74 of chapter 6 for individuals who are
75 determined eligible for vocational rehabilitation services; provided, however, that access
76 to higher education assists in the attainment of an identified employment goal, as
77 determined by the Massachusetts rehabilitation commission, consistent with all
78 applicable regulations and subject to the development of an individualized plan for
79 employment; or (iii) subject to appropriation, for individuals 22 years of age or older who
80 are determined eligible for services under chapter 19B; provided, however, that the
81 individual supports and services are determined to be an appropriate support, of the type,
82 frequency and duration identified in an assessment conducted by the department of
83 developmental services, and subject to the development of an annual individual support
84 plan. Costs of participation may be covered by any other public or private sources
85 available to the student. The initial planning, implementation, coordination, staffing,
86 administrative and other related costs to support participation may be covered by the
87 Massachusetts Inclusive Concurrent Enrollment Initiative Trust Fund established
88 pursuant to section 2VVVVV of chapter 29 or the grant program established pursuant to
89 section 17 of chapter 71B.

90 (d) Individuals participating under this section shall be required to follow the
91 public institution of higher education’s student behavioral policies, including the student
92 code of conduct and anti-discrimination and sexual violence policies; provided, however,
93 that the public institution of higher education shall provide such policies in accessible
94 formats and shall provide reasonable accommodations for participating individuals in any
95 process instituted thereunder.

96 (e) Nothing in this section shall impose any liability against any school district or
97 any public institution of higher education, including trustees, officers, administrators or
98 employees of the school district or public institution of higher education.

99 (f) Nothing in this section shall create or impose a specific duty of care nor shall
100 this section create or impose a private right of action against any school district or any
101 public institution of higher education, including trustees, officers, administrators or
102 employees of a school district or public institution of higher education.

Hospital Assessment 1

1 SECTION 15. Subsection (a) of section 2WWWW of chapter 29 of the General
2 Laws, as appearing in the 2020 Official Edition, is hereby amended by striking out the
3 second sentence and inserting in place thereof the following sentence:- There shall be
4 credited to the fund: (i) any transfers from the Health Safety Net Trust Fund established
5 in section 66 of chapter 118E; (ii) an amount equal to any federal financial participation
6 revenues claimed and received by the commonwealth for eligible expenditures made
7 from the fund; (iii) any revenue from appropriations or other money authorized by the
8 general court and specifically designated to be credited to the fund; and (iv) interest
9 earned on any money in the fund.

Substance Use Disorder Trust Fund

1 SECTION 16. Section 2YYYY of said chapter 29 is hereby further amended by
2 striking out the second paragraph, inserted by section 16 of chapter 24 of the acts of
3 2021, and inserting in place thereof the following paragraph:-

4 The secretary may expend from the fund, per fiscal year, without further
5 appropriation, not more than: (i) \$105,000,000 to expand and support the residential
6 treatment system to treat individuals with a substance use disorder or co-occurring mental
7 health and substance use disorder and to expand and increase access to the 24-hour
8 diversionary system; (ii) \$135,000,000 to reduce stigma, expand access, support
9 implementation and increase competencies for medications for substance use disorder;
10 (iii) \$35,000,000 to support access to evidence-based recovery services through peer and
11 paraprofessional services; and (iv) \$80,000,000 to ensure appropriate assessment for
12 levels of care utilizing American Society of Addiction Medicine criteria or other
13 evidence-based modalities and to support integration of physical health, mental health
14 and substance use disorder care across all provider settings. For the purpose of
15 accommodating timing discrepancies between the receipt of revenues and related
16 expenditures, the fund may incur expenses, and the comptroller shall certify for payment,
17 amounts not to exceed the most recent revenue estimate as certified by the MassHealth
18 director, as reported in the state accounting system. Amounts credited to the fund shall
19 not be subject to further appropriation and money remaining in the fund at the end of a
20 fiscal year shall not revert to the General Fund and shall be available for expenditure in
21 the subsequent fiscal year.

Hospital Assessment 2

1 SECTION 17. Section 2AAAAA of said chapter 29, as appearing in the 2020
2 Official Edition, is hereby amended by striking out the second paragraph and inserting in
3 place thereof the following paragraph:-

4 There shall be credited to the fund: (i) any transfers from the Health Safety Net
5 Trust Fund established in section 66 of chapter 118E; (ii) any revenue from
6 appropriations or other money authorized by the general court and specifically designated
7 to be credited to the fund; (iii) an amount equal to any federal financial participation
8 revenues claimed and received by the commonwealth for eligible expenditures made
9 from the fund; and (iv) interest earned on any money in the fund. Money from the fund
10 shall be expended for payments to providers that qualify under an approved federal
11 waiver and in accordance with said waiver. Amounts credited to the fund shall not be
12 subject to further appropriation. At the end of each fiscal year, the secretary of health and
13 human services shall determine, in the secretary's sole discretion, the amount of any
14 money in the fund that is in excess of the money needed to make payments from the fund
15 in accordance with said waiver; provided, however, that the money needed to make such
16 payments shall include any money needed to make any payments that are unearned as of
17 the end of such year, but potentially earned in a subsequent year. Subject to the terms of
18 said waiver, the secretary of health and human services shall transfer to the Health Safety
19 Net Trust Fund established in said section 66 of said chapter 118E the state share of any
20 such excess money, multiplied by a fraction, the numerator of which is \$62,500,000 and
21 the denominator of which is the total amount transferred to or deposited in the fund for
22 such fund year, excluding any federal funds. Money remaining in the fund at the end of a
23 fiscal year shall not revert to the General Fund and shall be available for expenditure in

24 subsequent fiscal years. To accommodate timing discrepancies between the receipt of
25 revenue and related expenditures, the comptroller may certify for payment amounts not to
26 exceed the most recent revenue estimates as certified by the secretary of health and
27 human services to be transferred, credited or deposited under this section.

Hospital Assessment 3

1 SECTION 18. Said section 2AAAAA of said chapter 29, as so appearing, is
2 hereby further amended by striking out the second paragraph and inserting in place
3 thereof the following paragraph:-

4 There shall be credited to the fund: (i) any transfers from the Health Safety Net
5 Trust Fund established in section 66 of chapter 118E; (ii) any revenue from
6 appropriations or other money authorized by the general court and specifically designated
7 to be credited to the fund; (iii) an amount equal to any federal financial participation
8 revenues claimed and received by the commonwealth for eligible expenditures made
9 from the fund; and (iv) interest earned on any money in the fund. Money from the fund
10 shall be expended for payments to providers that qualify under an approved federal
11 waiver and in accordance with said waiver. Amounts credited to the fund shall not be
12 subject to further appropriation. Money remaining in the fund at the end of a fiscal year
13 shall not revert to the General Fund and shall be available for expenditure in subsequent
14 fiscal years. To accommodate timing discrepancies between the receipt of revenue and
15 related expenditures, the comptroller may certify for payment amounts not to exceed the
16 most recent revenue estimates as certified by the secretary of health and human services
17 to be transferred, credited or deposited under this section.

Chapter 29 Funds

1 SECTION 19. Said chapter 29 is hereby further amended by inserting after
2 section 2SSSSS the following 3 sections:-

3 Section 2TTTTT. (a) There shall be a Hospital Investment and Performance Trust
4 Fund. The secretary of health and human services shall be the trustee of the fund and
5 shall expend money in the fund to make payments to acute hospitals or to care
6 organizations under contract with the executive office of health and human services to
7 provide MassHealth services pursuant to an approved state plan or federal waiver;
8 provided, however, that such care organizations shall use all such payments to make
9 payments to qualifying acute hospitals. There shall be credited to the fund: (i) any
10 transfers from the Health Safety Net Trust Fund established in section 66 of chapter
11 118E; (ii) an amount equal to any federal financial participation revenues claimed and
12 received by the commonwealth for eligible expenditures made from the fund; (iii) any
13 revenue from appropriations or other money authorized by the general court and
14 specifically designated to be credited to the fund; and (iv) interest earned on any money
15 in the fund. Amounts credited to the fund shall be expended without further
16 appropriation.

17 (b) Money in the fund shall be expended for Medicaid payments under an
18 approved state plan or federal waiver; provided, however, that all payments from the fund
19 shall be: (i) subject to the availability of federal financial participation; (ii) made only
20 under federally-approved payment methods; (iii) consistent with federal funding
21 requirements and all applicable federal payment limits as determined by the secretary;
22 and (iv) subject to the terms and conditions of applicable agreements between acute
23 hospitals or care organizations and the executive office of health and human services. To

24 accommodate timing discrepancies between the receipt of revenue and related
25 expenditures, the comptroller may certify for payment amounts not to exceed the most
26 recent revenue estimates as certified by the secretary to be transferred, credited or
27 deposited under this section. The secretary shall, to the maximum extent possible,
28 administer the fund to obtain federal financial participation for the expenditures of non-
29 federal money from the fund. Money remaining in the fund at the end of a fiscal year
30 shall not revert to the General Fund and shall be available for expenditure in subsequent
31 fiscal years. The payments from the fund shall supplement and not supplant Medicaid
32 payments that would be made to providers in the absence of such payments.

33 (c)(1) The secretary shall expend money in the fund, including all amounts
34 credited to the fund, for payments to qualifying acute hospital providers under contract
35 with the executive office of health and human services or under subcontracts with care
36 organizations that contract with the executive office in connection with the MassHealth
37 program as provided further in paragraphs (2) to (4), inclusive.

38 (2) The secretary shall annually expend amounts from the fund averaging, over a
39 period of 5 years, not less than \$1,210,000,000 per year; provided, however, that all such
40 payments shall fall into 1 of the following categories: (i) health equity incentive
41 payments; (ii) clinical quality incentive payments; (iii) rate payments for services
42 provided to MassHealth members; or (iv) targeted payments to: (A) freestanding
43 pediatric acute hospitals; or (B) non-profit teaching acute hospitals that provide medical,
44 surgical, emergency and obstetrical services and are affiliated with a state-owned medical
45 school. The secretary may determine funding allocations among and within each such
46 category within a given year; provided, however, that such allocations shall be consistent

47 with all approved federal waivers and state plan provisions; and provided further, that the
48 secretary shall allocate an average of not less than \$560,000,000 per year, over a period
49 of 5 years, for the rate payments described in clause (iii).

50 (3) Of the targeted payments described in clause (iv) of paragraph (2), the
51 secretary shall expend annually from the fund: (i) \$25,000,000 to freestanding pediatric
52 acute hospitals, of which 90 per cent shall be paid to the freestanding pediatric hospital
53 with the largest volume of inpatient discharges in fiscal year 2019; and (ii) \$25,000,000
54 to non-profit teaching acute hospitals that provide medical, surgical, emergency and
55 obstetrical services and are affiliated with a state-owned medical school.

56 (4) Of the health equity incentive payments and clinical quality incentive
57 payments described in clauses (i) and (ii) of paragraph (2), the secretary shall make
58 interim payments to qualifying hospitals based on the secretary's estimate of each such
59 hospital's final payment for the measurement period, with each such estimate as
60 determined by the secretary. As soon as practicable after the close of the measurement
61 period, the secretary shall determine the final amount of each qualifying hospital's health
62 equity incentive payment and clinical quality incentive payment and shall reconcile each
63 hospital's interim payment with its final payment.

64 (d) If any portion of the final annual amount allocated by the secretary to health
65 equity incentive payments or clinical quality incentive payments is unearned during the
66 relevant measurement period for such payment, as determined by the secretary, the
67 secretary shall transfer the state's share of that unearned amount to the Health Safety Net
68 Trust Fund established in section 66 of chapter 118E.

69 Section 2UUUUU. (a) There shall be a Population Health Investment Trust Fund.
70 The secretary of health and human services shall be the trustee of the fund and shall
71 expend money in the fund to make payments to providers or care organizations under
72 contract to provide MassHealth services pursuant to an approved state plan or federal
73 waiver. There shall be credited to the fund: (i) any transfers from the Health Safety Net
74 Trust Fund established in section 66 of chapter 118E; (ii) an amount equal to any federal
75 financial participation revenues claimed and received by the commonwealth for eligible
76 expenditures made from the fund; (iii) any revenue from appropriations or other money
77 authorized by the general court and specifically designated to be credited to the fund; and
78 (iv) interest earned on any money in the fund. Amounts credited to the fund shall be
79 expended without further appropriation.

80 (b) Money in the fund may be expended for Medicaid payments under an
81 approved state plan or federal waiver; provided, however, that all payments from the fund
82 shall be: (i) subject to the availability of federal financial participation; (ii) made only
83 under federally-approved payment methods; (iii) consistent with federal funding
84 requirements and all applicable federal payment limits as determined by the secretary;
85 and (iv) subject to the terms and conditions of applicable agreements between providers
86 or care organizations and the executive office of health and human services. To
87 accommodate timing discrepancies between the receipt of revenue and related
88 expenditures, the comptroller may certify for payment amounts not to exceed the most
89 recent revenue estimates as certified by the secretary to be transferred, credited or
90 deposited under this section. The secretary shall, to the maximum extent possible,
91 administer the fund to obtain federal financial participation for the expenditures of non-

92 federal money from the fund. Money remaining in the fund at the end of a fiscal year
93 shall not revert to the General Fund and shall be available for expenditure in subsequent
94 fiscal years. The payments from the fund shall supplement and not supplant Medicaid
95 payments that would be made to hospitals in the absence of such payments.

96 (c)(1) The secretary shall annually expend money in the fund for payments to
97 qualifying providers or care organizations under contract with the executive office, as
98 further provided in paragraph (2).

99 (2) The secretary shall annually expend amounts from the fund averaging, over a
100 period of 5 years, not less than \$255,000,000 per year; provided, however, that such
101 payments shall promote the continued implementation of certain federally-approved
102 delivery system reform activities, including to support primary care and complex care
103 management and to address health-related social needs.

104 Section 2VVVVV. (a) There shall be a Massachusetts Inclusive Concurrent
105 Enrollment Initiative Trust Fund that shall be administered by the commissioner of higher
106 education, in consultation with the executive office of education. The fund shall consist
107 of: (i) amounts credited to the fund from any appropriations, grants, gifts or other money
108 authorized by the general court or another party and specifically designated to be credited
109 to the fund; and (ii) any income derived from the investment of amounts credited to the
110 fund. Any unexpended balance in the fund at the end of a fiscal year shall not revert to
111 the General Fund and shall be available for expenditure in the subsequent fiscal year.

112 (b) All amounts credited to the fund shall be used without further appropriation to
113 make grants to support public higher education institutions providing access to inclusive
114 higher education opportunities to students with severe intellectual disabilities, severe

115 autism spectrum disorder or other severe developmental disabilities pursuant to section
116 30A of chapter 15A.

117 (c) Annually, not later than October 1, the commissioner shall report to the clerks
118 of the senate and house of representatives, the joint committee on higher education and
119 the senate and house committees on ways and means on the activities of the fund.

Hospital Assessment 4

1 SECTION 20. Section 2TTTTT of said chapter 29, as inserted by section 19, is
2 hereby amended by striking out subsection (c) and inserting in place thereof the
3 following subsection:-

4 (c) [reserved].

Hospital Assessment 5

1 SECTION 21. Section 2UUUUU of said chapter 29, as so inserted, is hereby
2 amended by striking out subsection (c) and inserting in place thereof the following
3 subsection:-

4 (c) [reserved].

Personal Income Tax Conformity 1

1 SECTION 22. Section 1 of chapter 62 of the General Laws, as appearing in the
2 2020 Official Edition, is hereby amended by striking out, in line 6, the figure “2005” and
3 inserting in place thereof the following figure:- 2022.

Student Loan Forgiveness Income Tax Exemption

1 SECTION 23. Paragraph (2) of subsection (a) of section 2 of said chapter 62 of
2 the General Laws, as so appearing, is hereby amended by adding the following
3 subparagraph:-

4 (R) To the extent not otherwise excluded from gross income, in whole or in part,
5 income attributable to the discharge of:

6 (i) any loan provided expressly for postsecondary education, regardless of
7 whether provided through the educational institution or directly to the borrower;
8 provided, however, that the loan was made, insured or guaranteed by: (A) the United
9 States or an instrumentality or agency thereof; (B) a state, territory or possession of the
10 United States, the District of Columbia or any political subdivision thereof; or (C) an
11 eligible educational institution as defined in section 25A(f)(2) of the Code, as amended
12 and in effect for the taxable year;

13 (ii) any private education loan as defined in 15 U.S.C. 1650(a)(8);

14 (iii) any loan made by any educational organization that normally maintains a
15 regular faculty and curriculum and normally has a regularly enrolled body of pupils or
16 students in attendance at the place where its educational activities are regularly carried
17 on; provided, however, that the loan was made pursuant to: (A) an agreement with any
18 entity described in clause (i) or any private education lender, as defined in said 15 U.S.C.
19 1650(a)(8), under which the funds from which the loan was made were provided to such
20 educational organization; or (B) a program of the educational organization that is
21 designed to encourage students to serve in occupations with unmet needs or in areas with
22 unmet needs; and provided further, that the service provided by the students or former
23 students are for, or under the direction of, a governmental unit or an organization
24 described in section 501(c)(3) of the Code, as amended and in effect for the taxable year,
25 and are exempt from tax under section 501(a) of the Code, as amended and in effect for
26 the taxable year; or

27 (iv) any loan made by an educational organization that normally maintains a
28 regular faculty and curriculum and normally has a regularly enrolled body of pupils or
29 students in attendance at the place where its educational activities are regularly carried on
30 or by an organization exempt from tax under section 501(a) of the Code, as amended and
31 in effect for the taxable year, to refinance a loan to an individual to assist the individual in
32 attending any such educational organization; provided, however, that the refinancing loan
33 shall be pursuant to a program of the refinancing organization that complies with the
34 requirements of subclause (B) of clause (iii); and provided further, that this subparagraph
35 shall not apply to the discharge of a loan made by an educational organization described
36 in clause (iii) or made by a private education lender, as defined in 15 U.S.C. 1650(a)(7),
37 for services performed for the educational organization or for the private education
38 lender.

Personal Income Tax Conformity 2

1 SECTION 24. Paragraph (1) of subsection (d) of said section 2 of said chapter 62,
2 as so appearing, is hereby amended by adding the following subparagraph:-

3 (Q) The deduction allowed by section 199A of the Code, as amended and in effect
4 for the current tax year.

Controlled Substances Tax Act Repeal

1 SECTION 25. Chapter 64K of the General Laws is hereby repealed.

Charter School Facilities Reimbursement

1 SECTION 26. Subsection (ff) of section 89 of chapter 71 of the General Laws, as
2 appearing in the 2020 Official Edition, is hereby amended by striking out the second

3 sentence and inserting in place thereof the following sentence:- In fiscal year 2023 and
4 thereafter, such funding shall not be less than \$1,088.

Inclusive Concurrent Enrollment 5

1 SECTION 27. Section 2 of chapter 71B of the General Laws, as so appearing, is
2 hereby amended by adding the following paragraph:-

3 Students who are 18 to 21 years old, inclusive, have severe intellectual
4 disabilities, severe autism spectrum disorders or other severe developmental disabilities
5 and are receiving special education services may also have program options offered by an
6 institution of higher education including, but not limited to, participation in credit and
7 noncredit courses that include students who are not participating under section 30A of
8 chapter 15A, development of independent living skills, development of skills necessary
9 for employment and development of skills to access community services. Participation of
10 such students in institutions of higher education under this section shall be considered an
11 approved expense as a special education service pursuant to section 5 and shall be
12 considered secondary school education; provided, however, that this service is addressed
13 in the student’s Individualized Education Program under section 3 of this chapter.

Inclusive Concurrent Enrollment 6

1 SECTION 28. Said chapter 71B is hereby amended by adding the following
2 section:-

3 Section 17. (a) Subject to appropriation, the department of higher education shall
4 develop and administer a discretionary grant program, which shall include planning and
5 implementation grants, to provide money to school committees and public institutions of
6 higher education partnering to offer inclusive concurrent enrollment options for school-

7 aged individuals who are 18 to 21 years old, inclusive, and have severe intellectual
8 disabilities, severe autism spectrum disorders or other severe developmental disabilities.
9 The program shall be limited to individuals who: (i) are 18 or 19 years old and have: (A)
10 a severe intellectual disability, severe autism spectrum disorder or other severe
11 developmental disability; and (B) been unable to achieve the competency determination
12 necessary to pass the statewide assessment test pursuant to section 1D of chapter 69; or
13 (ii) are 20 or 21 years old and have: (A) a severe intellectual disability, severe autism
14 spectrum disorder or other severe developmental disability; and (B) been unable to obtain
15 a passing score on the statewide assessment tests utilized as a basis for competency
16 determination under said section 1D of said chapter 69 or have been determined by the
17 Individualized Education Program team to have severe functional delays impacting
18 independent living, communication or behavioral skills resulting in skills that are
19 significantly below chronological age; provided, however, that public institutions of
20 higher education may also include students with severe intellectual disabilities, severe
21 autism spectrum disorders or other severe developmental disabilities over the age of 21
22 who have been unable to obtain a passing score on the statewide assessment tests utilized
23 as a basis for competency determination under said section 1D of said chapter 69.

24 (b) The grant program shall enable school committees to partner with public
25 institutions of higher education to assist in meeting the transitional needs of eligible
26 students pursuant to subsection (a), which shall include facilitating transition from school
27 to post-school activities and competitive employment. Operation of the grant program
28 shall be focused on improving academic and functional achievement for students in
29 accordance with the federal Individuals with Disabilities Education Act.

30 (c) The grant program shall allow participation of any relevant state agency or
31 other entity serving students with severe intellectual disabilities, severe autism spectrum
32 disorders or other severe developmental disabilities, including, but not limited to, the
33 department of developmental services, the Massachusetts rehabilitation commission or
34 any other vocational rehabilitation agency or organization supporting student academic
35 success, participation in student life of the college community and competitive
36 employment.

37 (d) The grant program shall support partnerships that offer: (i) access to inclusive
38 higher education opportunities pursuant to section 30A of chapter 15A; (ii) participation
39 in credit-bearing or non-credit courses that include students without disabilities, including
40 participation in credit-bearing courses in audit status for students who do not meet course
41 prerequisites; (iii) participation in on-campus student life activities; (iv) preparation for
42 competitive employment; (v) a waiver of tuition for courses by the public institution of
43 higher education; (vi) the provision of supports and services necessary to facilitate a
44 student's participation in higher education pursuant to said section 30A of said chapter
45 15A and support inclusion in academic courses, extracurricular activities, internships,
46 work experiences and other aspects of the institution's postsecondary program; (vii)
47 education, training and technical assistance for teachers, faculty and other personnel
48 regarding strategy and teaching methodology to achieve successful inclusion of
49 individuals with severe intellectual disabilities, severe autism spectrum disorders or other
50 severe developmental disabilities; (viii) full inclusion of students with severe intellectual
51 disabilities, severe autism spectrum disorders or other severe developmental disabilities
52 with other students not participating under said section 30A of said chapter 15A in all

53 aspects of higher education including, but not limited to, academic and social activities;
54 and (ix) person-centered planning in the development of the course of study for each
55 participating student. Partnerships with institutions of higher education that offer
56 dormitory living may also include opportunities for students with severe intellectual
57 disabilities, severe autism spectrum disorders or other severe developmental disabilities
58 to live in residential housing offered to other students not participating under said section
59 30A of said chapter 15A.

60 (e) The department of higher education shall establish an inclusive concurrent
61 enrollment advisory board to advise the department on efforts to implement inclusive
62 concurrent enrollment and to participate in educational outreach efforts related to
63 inclusive concurrent enrollment. The advisory board shall include the following members
64 or their designees, who shall serve without compensation: the commissioner of higher
65 education, who shall serve as co-chair; the commissioner of developmental services, who
66 shall serve as co-chair; the secretary of education; the inclusive concurrent enrollment
67 coordinator; the commissioner of elementary and secondary education; the commissioner
68 of the Massachusetts rehabilitation commission; a representative from the University of
69 Massachusetts as appointed by the president of the university; a representative of the state
70 universities as appointed by the Council of Presidents of the Massachusetts State
71 University System; a representative of the community colleges as appointed by the
72 Massachusetts Association of Community Colleges; a member appointed by the
73 Massachusetts Administrators for Special Education; a member appointed by the
74 Massachusetts Association of School Committees, Inc.; a member appointed by the
75 Massachusetts Association of School Superintendents, Inc.; a member appointed by

76 Massachusetts Advocates for Children, Inc.; a member appointed by the Federation for
77 Children with Special Needs, Inc.; a member appointed by the Institute for Community
78 Inclusion; a member appointed by the Massachusetts Down Syndrome Congress, Inc.; a
79 member appointed by the Advocates for Autism of Massachusetts; 2 representatives of
80 school districts and public institutions of higher education that have successfully
81 implemented inclusive concurrent enrollment initiatives, to be appointed by the co-chairs;
82 and 2 students who are participating or have participated in an inclusive concurrent
83 enrollment program, to be appointed by the co-chairs. The advisory board shall meet not
84 less than quarterly. If an inclusive concurrent enrollment coordinator is not designated
85 pursuant to subsection (f), the commissioner of higher education shall select an
86 alternative appointee.

87 (f) Subject to appropriation, the commissioner of higher education shall designate
88 an inclusive concurrent enrollment coordinator to manage grant administration and
89 coordinate reporting.

90 (g) Annually, not later than December 1, the department of higher education shall
91 file a report on the status of the inclusive concurrent enrollment grant program
92 established pursuant to subsection (a) with the joint committee on education, the joint
93 committee on higher education and the senate and house committees on ways and means.
94 The report shall include, but not be limited to: (i) enrollment data detailing the number of
95 students enrolled in the inclusive concurrent enrollment program each semester,
96 including the count of total students served by the inclusive concurrent enrollment
97 program at each institution of higher education; (ii) a list of all full-time and part-time
98 employment positions supported by the grant program that are dedicated to supporting

99 students participating in the inclusive concurrent enrollment program and the average
100 salary for those positions including, but not limited to: (A) educational coaches; (B)
101 educational specialists; (C) job coaches and vocational specialists; (D) program
102 specialists; (E) program directors; (F) peer mentors, note-takers and tutors; (G) contracted
103 employees; and (H) parent and school committee liaisons; (iii) a list of all courses taken
104 by students participating in the inclusive concurrent enrollment program during the
105 academic year indicating whether the student audited the course or participated in the
106 course for credit and whether the student completed the course; (iv) a summary of
107 innovative strategies and practices implemented at each institution of higher education
108 that helped foster relationships with school committees; (v) employment data for students
109 participating in the inclusive concurrent enrollment program, obtained to the best of the
110 ability of participating school committees and institutions of higher education; and (vi)
111 the total funding received for the program, including amounts allocated to each grantee
112 and any executive agency or participating state board, department or institute of higher
113 education.

Emergency Aid to the Elderly, Disabled and Children Asset Limit

1 SECTION 29. Section 3 of chapter 117A of the General Laws is hereby amended
2 by striking out, in line 6, as appearing in the 2020 Official Edition, the words “one
3 hundred and fifty-one A” and inserting in place thereof the following words:- 151A;
4 provided, however, that an individual living in a rest home licensed under section 71 of
5 chapter 111 shall not be eligible for assistance under this chapter if the individual has
6 assets in excess of \$2,000.

Direct Negotiations for Rebates on Certain Drugs and Non-Drug Products

1 SECTION 30. Chapter 118E of the General Laws is hereby amended by inserting
2 after section 12A the following section:-

3 Section 12B. (a) Notwithstanding any general or special law to the contrary, the
4 secretary of health and human services may directly negotiate rebate agreements with
5 manufacturers of non-drug products and drugs that are not covered outpatient drugs under
6 42 U.S.C. 1396r-8 if such agreements maximize value to the commonwealth; provided,
7 however, that the secretary shall not be subject to any otherwise applicable requirements
8 set forth in 801 CMR 21.00 or any successor regulation. Such agreements may be based
9 on the value, efficacy or outcomes of the non-drug product or drug.

10 (b) Annually, not later than October 15, the secretary shall report on activities
11 pursuant to this section including, but not limited to: (i) the amount of rebate agreements
12 received under this section; (ii) the number of pharmaceutical drugs receiving a rebate
13 under this section, broken down by manufacturer; (iii) the number of non-drug products
14 receiving a rebate under this section, broken down by manufacturer; and (iv) a
15 breakdown of the duration of the rebates received. The report shall be filed with the
16 clerks of the senate and the house of representatives, the joint committee on health care
17 financing and the senate and house committees on ways and means.

Medicare Saving Plan Expansion

1 SECTION 31. Said chapter 118E is hereby further amended by striking out
2 section 25A, as appearing in the 2020 Official Edition, and inserting in place thereof the
3 following section:-

4 Section 25A. (a) For individuals 65 years of age or older, the division shall not
5 consider income in an amount equivalent to 90 per cent of the federal poverty level or

6 assets in an amount equivalent to the federal resource limit for the Medicare Saving
7 programs, each as adjusted annually, in determining eligibility for the Qualified Medicare
8 Beneficiary, Specified Low-Income Medicare Beneficiary and Qualified Individual
9 programs, described in 42 U.S.C. 1396a(a)(10)(E), also known as the Medicare Saving or
10 Medicare Buy-In programs; provided, however, that until the division receives the federal
11 approvals described in subsection (b), the division shall not consider income in the
12 amount equal to 30 per cent of the federal poverty level. Enrollment in the Qualified
13 Individual program shall be capped if the federal allotment for the program is exhausted.

14 (b) Prior to implementing subsection (a), the division shall obtain all required
15 federal approvals, including amending its state plan and amending its 1115 waiver, as
16 necessary, and shall promulgate regulations to implement this section.

Hospital Assessment 6

1 SECTION 32. Section 64 of said chapter 118E, as so appearing, is hereby
2 amended by striking out the definition of “Total acute hospital assessment amount” and
3 inserting in place thereof the following definition:-

4 “Total hospital assessment amount”, a fixed amount equal to \$880,000,000, which
5 is the sum of \$160,000,000 and the amounts transferred, pursuant to section 66, to the
6 Safety Net Provider Trust Fund established in section 2AAAAA of chapter 29, the
7 Hospital Investment and Performance Trust Fund established in section 2TTTTT of said
8 chapter 29, the Population Health Investment Trust Fund established in section 2UUUUU
9 of said chapter 29 and the Non-Acute Care Hospital Reimbursement Trust Fund
10 established in section 2WWWW of said chapter 29, plus 50 per cent of the estimated

11 cost, as determined by the secretary of administration and finance, of administering the
12 health safety net and related assessments in accordance with sections 65 to 69, inclusive.

Hospital Assessment 7

1 SECTION 33. Said section 64 of said chapter 118E is hereby further amended by
2 striking out the definition of “Total hospital assessment amount”, inserted by section 32,
3 and inserting in place thereof the following definition:-

4 “Total acute hospital assessment amount”, an amount equal to \$160,000,000, plus
5 50 per cent of the estimated cost, as determined by the secretary of administration and
6 finance, of administering the health safety net and related assessments in accordance with
7 sections 65 to 69, inclusive.

Hospital Assessment 8

1 SECTION 34. Section 65 of said chapter 118E, as appearing in the 2020 Official
2 Edition, is hereby amended by striking out subsection (b) and inserting in place thereof
3 the following subsection:-

4 (b) The office shall: (i) administer the Health Safety Net Trust Fund, established
5 under section 66, and require payments to the fund consistent with hospitals’ and
6 surcharge payors’ liability to the fund, as determined under sections 67 and 68, and any
7 further regulations promulgated by the office; (ii) set, in consultation with the office of
8 Medicaid, reimbursement rates for payments from the fund to acute hospitals and
9 community health centers for reimbursable health services provided to uninsured and
10 underinsured patients and to disburse money from the fund consistent with such rates;
11 provided, however, that the office shall implement a fee-for-service reimbursement
12 system for acute hospitals; (iii) promulgate regulations further defining: (A) eligibility

13 criteria for reimbursable health services; (B) the scope of health services that are eligible
14 for reimbursement by the Health Safety Net Trust Fund; (C) standards for medical
15 hardship; and (D) standards for reasonable efforts to collect payments for the costs of
16 emergency care; provided, however, that the office shall verify eligibility using the
17 eligibility system of the office of Medicaid and other appropriate sources to determine the
18 eligibility of uninsured and underinsured patients for reimbursable health services and
19 shall establish other procedures to ensure that payments from the fund are made for
20 health services for which there is no other public or private third-party payer, including
21 disallowance of payments to acute hospitals and community health centers for health
22 services provided to individuals if reimbursement is available from other public or private
23 sources; (iv) develop programs and guidelines to encourage maximum enrollment of
24 uninsured individuals who receive health services reimbursed by the fund into health care
25 plans and programs of health insurance offered by public and private sources and to
26 promote the delivery of care in the most appropriate setting; provided, however, that the
27 programs and guidelines shall be developed in consultation with the commonwealth
28 health insurance connector, established pursuant to chapter 176Q; and provided further,
29 that these programs shall not deny payments from the fund because services should have
30 been provided in a more appropriate setting if the hospital was required to provide the
31 services under 42 U.S.C. 1395dd; (v) conduct a utilization review program designed to
32 monitor the appropriateness of services for which payments were made by the fund and
33 promote the delivery of care in the most appropriate setting; (vi) administer
34 demonstration programs that reduce Health Safety Net Trust Fund liability to acute
35 hospitals, including a demonstration program to enable disease management for patients

36 with chronic diseases, substance use disorders and psychiatric disorders through
37 enrollment of patients in community health centers and community mental health centers
38 and through coordination between these centers and acute hospitals; provided, however,
39 that the office shall report the results of these reviews annually to the joint committee on
40 health care financing and the senate and house committees on ways and means; (vii) enter
41 into agreements or transactions with any federal, state or municipal agency or other
42 public institution or with a private individual, partnership, firm, corporation, association
43 or other entity and to make contracts and execute all instruments necessary or convenient
44 for the carrying on of its business; (viii) secure payment, without imposing undue
45 hardship upon any individual, for unpaid bills owed to acute hospitals by individuals for
46 health services that are ineligible for reimbursement from the Health Safety Net Trust
47 Fund that have been accounted for as bad debt by the hospital and that are voluntarily
48 referred by a hospital to the department for collection; provided, however, that such
49 unpaid charges shall be considered debts owed to the commonwealth and all payments
50 received shall be credited to the fund; and provided further, that all actions to secure such
51 payments shall be conducted in compliance with a protocol previously submitted by the
52 office to the joint committee on health care financing; (ix) require hospitals and
53 community health centers to submit data that it reasonably considers necessary to the
54 office; (x) make, amend and repeal rules and regulations to effectuate the efficient use of
55 money from the Health Safety Net Trust Fund; provided, however, that the regulations
56 shall be promulgated only after notice and hearing and only upon consultation with the
57 board of the commonwealth health insurance connector, representatives of the
58 Massachusetts Health and Hospital Association, Inc., the Massachusetts Council of

59 Community Hospitals, Inc., the Alliance of Massachusetts Safety Net Hospitals, the
60 Conference of Boston Teaching Hospitals, Inc. and the Massachusetts League of
61 Community Health Centers, Inc.; and (xi) provide an annual report at the close of each
62 fund fiscal year to the joint committee on health care financing and the senate and house
63 committees on ways and means evaluating the processes used to determine eligibility for
64 reimbursable health services, including the Virtual Gateway. The report shall include, but
65 not be limited to: (A) an analysis of the effectiveness of these processes in enforcing
66 eligibility requirements for publicly-funded health programs and in enrolling uninsured
67 residents into programs of health insurance offered by public and private sources; (B) an
68 assessment of the impact of these processes on the level of reimbursable health services
69 by providers; and (C) recommendations for ongoing improvements to enhance the
70 performance of eligibility determination systems and reduce hospital administrative costs.

Hospital Assessment 9

1 SECTION 35. Section 66 of said chapter 118E, as so appearing, is hereby
2 amended by striking out, in lines 14 and 15, the words “and the commonwealth care
3 health insurance program under chapter 118H”.

Hospital Assessment 10

1 SECTION 36. Said section 66 of said chapter 118E, as so appearing, is hereby
2 further amended by striking out subsection (b) and inserting in place thereof the
3 following subsection:-

4 (b) The fund shall consist of: (i) all amounts paid by hospitals and surcharge
5 payors under sections 67 and 68; (ii) all appropriations for the purpose of payments to
6 acute hospitals or community health centers for health services provided to uninsured and

7 underinsured residents; (iii) any transfers from the Commonwealth Care Trust Fund
8 established in section 2000 of chapter 29; (iv) any transfers from the Safety Net
9 Provider Trust Fund established in section 2AAAAA of said chapter 29; (v) any transfers
10 from the Hospital Investment and Performance Trust Fund established in section
11 2TTTTT of said chapter 29; and (vi) all property and securities acquired by and through
12 the use of money belonging to the fund and all interest thereon. There shall also be
13 credited to the fund an amount equal to any federal financial participation claimed and
14 received by the commonwealth for eligible expenditures made from the fund and
15 financed by money transferred from the Hospital Investment and Performance Trust Fund
16 established in said section 2TTTTT of said chapter 29 or from the Safety Net Provider
17 Trust Fund established in said section 2AAAAA of said chapter 29. To accommodate
18 timing discrepancies between the receipt of such revenue and related expenditures, the
19 comptroller may certify for payment amounts not to exceed the most recent revenue
20 estimates as certified by the secretary of health and human services to be transferred,
21 credited or deposited under this subsection. Annually, the office shall transfer from the
22 non-federal money in the fund: (A) \$62,500,000 to the Safety Net Provider Trust Fund
23 established in said section 2AAAAA of said chapter 29; (B) \$532,000,000 to the Hospital
24 Investment and Performance Trust Fund established in said section 2TTTTT of said
25 chapter 29; (C) \$115,500,000 to the Population Health Investment Trust Fund established
26 in section 2UUUUU of said chapter 29; and (D) \$10,000,000 to the Non-Acute Care
27 Hospital Reimbursement Trust Fund established in section 2WWWW of said chapter 29.
28 The office shall expend amounts in the fund, except for amounts transferred to the Safety
29 Net Provider Trust Fund, the Hospital Investment and Performance Trust Fund, the

30 Population Health Investment Trust Fund and the Non-Acute Care Hospital
31 Reimbursement Trust Fund, for payments to hospitals and community health centers for
32 reimbursable health services provided to uninsured and underinsured residents, consistent
33 with the requirements of this section, section 69 and the regulations adopted by the office.
34 The office shall also annually expend money from the fund for the expenses of the
35 executive office, including the health safety net office under subsection (a), for the
36 administration of the health safety net and related assessments. The office shall also
37 expend not more than \$6,000,000 annually from the fund for demonstration projects that
38 use case management and other methods to reduce the liability of the fund to acute
39 hospitals. Any amounts collected from surcharge payors in any year in excess of the total
40 surcharge amount, adjusted to reflect applicable surcharge credits, shall be transferred to
41 the General Fund to support a portion of the costs of the Medicaid program. Any annual
42 balance remaining in the fund after these payments have been made shall be retained in
43 the fund and shall not revert to the General Fund. All interest earned on the amounts in
44 the fund shall be deposited or retained in the fund. The director shall from time-to-time
45 requisition from the fund amounts that the director considers necessary to meet the
46 current obligations of the office for the purposes of the fund and estimated obligations for
47 a reasonable future period.

Hospital Assessment 11

1 SECTION 37. Said section 66 of said chapter 118E is hereby further amended by
2 striking out subsection (b), inserted by section 36, and inserting in place thereof the
3 following subsection:-

4 (b) The fund shall consist of: (i) all amounts paid by hospitals and surcharge
5 payors under sections 67 and 68; (ii) all appropriations for the purpose of payments to
6 acute hospitals or community health centers for health services provided to uninsured and
7 underinsured residents; (iii) any transfers from the Commonwealth Care Trust Fund
8 established in section 2000 of chapter 29; (iv) any transfers from the Safety Net
9 Provider Trust Fund established in section 2AAAAA of said chapter 29; (v) any transfers
10 from the Hospital Investment and Performance Trust Fund established in section
11 2TTTTT of said chapter 29; and (vi) all property and securities acquired by and through
12 the use of money belonging to the fund and all interest thereon. There shall also be
13 credited to the fund an amount equal to any federal financial participation claimed and
14 received by the commonwealth for eligible expenditures made from the fund and
15 financed by money transferred from the Hospital Investment and Performance Trust Fund
16 established in said section 2TTTTT of said chapter 29 or from the Safety Net Provider
17 Trust Fund established in said section 2AAAAA of said chapter 29. To accommodate
18 timing discrepancies between the receipt of such revenue and related expenditures, the
19 comptroller may certify for payment amounts not to exceed the most recent revenue
20 estimates as certified by the secretary of health and human services to be transferred,
21 credited or deposited under this subsection. Annually, the office shall transfer an amount
22 equal to all amounts paid by privately-owned, nonfederal hospitals under subsection (b)
23 of section 67 to the Non-Acute Care Hospital Reimbursement Trust Fund established in
24 section 2WWWW of said chapter 29. The office shall expend amounts in the fund, except
25 for amounts transferred to the Non-Acute Care Hospital Reimbursement Trust Fund, for
26 payments to hospitals and community health centers for reimbursable health services

27 provided to uninsured and underinsured residents, consistent with the requirements of this
28 section, section 69 and the regulations adopted by the office. The office shall also
29 annually expend money from the fund for the expenses of the executive office, including
30 the health safety net office under subsection (a), for the administration of the health
31 safety net and related assessments. The office shall also expend not more than \$6,000,000
32 annually from the fund for demonstration projects that use case management and other
33 methods to reduce the liability of the fund to acute hospitals. Any amounts collected from
34 surcharge payors in any year in excess of the total surcharge amount, adjusted to reflect
35 applicable surcharge credits, shall be transferred to the General Fund to support a portion
36 of the costs of the Medicaid program. Any annual balance remaining in the fund after
37 these payments have been made shall be retained in the fund and shall not revert to the
38 General Fund. All interest earned on the amounts in the fund shall be deposited or
39 retained in the fund. The director shall from time-to-time requisition from the fund
40 amounts that the director considers necessary to meet the current obligations of the office
41 for the purposes of the fund and estimated obligations for a reasonable future period.

Hospital Assessment 12

1 SECTION 38. Said chapter 118E is hereby further amended by striking out
2 section 67, as appearing in the 2020 Official Edition, and inserting in place thereof the
3 following section:-

4 Section 67. (a) Subject to all required federal approvals, including any required
5 waivers under 42 CFR 433.68, a hospital’s annual liability to the fund shall be calculated
6 in accordance with this section. The annual aggregate liability of all hospitals to the fund
7 shall equal the total hospital assessment amount.

8 (b) [reserved].

9 (c) The office shall promulgate regulations to establish an appropriate mechanism
10 for enforcing each hospital's liability to the fund if a hospital does not make a scheduled
11 payment to the fund.

12 (d) For the purposes of the assessment described in this section, all hospitals in
13 the commonwealth shall be divided into the following 5 groups:

14 (i) safety net hospitals, defined for the purposes of this section as any hospital
15 identified in the MassHealth demonstration waiver approved under subsection (a) of
16 section 1115 of Title XI of the federal Social Security Act;

17 (ii) academic, teaching and specialty hospitals, defined for the purposes of this
18 section as any academic medical center, teaching hospital or specialty hospital, as
19 determined by the center for health information and analysis as of September 30, 2019,
20 but excluding any safety net hospital;

21 (iii) private acute hospitals, defined for the purposes of this section as any private
22 hospital licensed under section 51 of chapter 111 and that contains a majority of medical-
23 surgical, pediatric, obstetric and maternity beds, as defined by the department of public
24 health, and operating as of September 30, 2019, but excluding any safety net hospital or
25 academic, teaching and specialty hospital;

26 (iv) non-state public hospitals, defined for the purposes of this section as any non-
27 state-owned public hospital in the commonwealth, as determined by the secretary; and

28 (v) non-acute hospitals, defined for the purposes of this section as any nonpublic
29 hospital licensed by the department of public health under said section 51 of said chapter
30 111 but not defined as an acute care hospital under section 25B of said chapter 111, or

31 any nonpublic hospital licensed as an inpatient facility by the department of mental health
32 under section 19 of chapter 19 and regulations promulgated thereunder but not
33 categorized as a class VII licensee under the regulations.

34 (e) Each of the 5 groups described in subsection (d) shall be subject to the
35 following assessment rates: (i) safety net hospitals shall be subject to a rate of 16.05430
36 per cent for inpatient services and 1.19950 per cent for outpatient services; (ii) academic,
37 teaching and specialty hospitals shall be subject to a rate of 4.66730 per cent for inpatient
38 services and 0.74400 per cent for outpatient services; (iii) private acute hospitals shall be
39 subject to a rate of 8.58690 per cent for inpatient services and 0.89340 per cent for
40 outpatient services; (iv) non-state public hospitals shall be subject to a rate of 1.61490 per
41 cent for inpatient services and 0.55320 per cent for outpatient services; and (v) non-acute
42 hospitals shall be subject to a rate of 1.35000 per cent for inpatient services and 1.35000
43 per cent for outpatient services; provided, however, that the office shall increase each
44 such rate by the amount necessary to generate 50 per cent of the estimated cost, as
45 determined by the secretary of administration and finance, of administering the health
46 safety net and related assessments in accordance with sections 65 to 69, inclusive.

47 (f) The assessment rates described in subsection (e) shall be applied to each
48 hospital's fiscal year 2019 assessed charges for inpatient and outpatient services, as
49 determined by the secretary of health and human services; provided, however, that the
50 term "assessed charges" shall have the meaning ascribed to it in section 64. The total of
51 the resulting products shall equal a hospital's annual assessment liability.

52 (g) Subject to receipt of all required federal approvals, the executive office shall
53 implement the assessment structure described in this section and shall promulgate

54 regulations, in consultation with the Massachusetts Health and Hospital Association, Inc.,
55 necessary to support implementation of said assessment structure. In promulgating such
56 regulations, and in consultation with the Massachusetts Health and Hospital Association,
57 Inc., the executive office shall, at a minimum: (i) specify an appropriate mechanism for
58 determination and payment of an acute hospital's liability to the fund; (ii) identify the
59 hospitals that belong to each group identified in subsection (d); (iii) specify an
60 appropriate mechanism for the determination of a hospital's liability in cases of merger or
61 transfer of ownership; and (iv) specify an appropriate mechanism by which any amounts
62 paid by a hospital in excess of a hospital's total annual assessment liability may be
63 refunded or otherwise credited to the hospital.

Hospital Assessment 13

1 SECTION 39. Said chapter 118E is hereby further amended by striking out
2 section 67, inserted by section 38, and inserting in place thereof the following section:-
3 Section 67. (a) An acute hospital's liability to the fund shall equal the product of:
4 (i) the ratio of its assessed charges to all acute hospitals' assessed charges; and (ii) the
5 total acute hospital assessment amount. Annually, not later than October 1, the executive
6 office shall establish each acute hospital's liability to the fund using the best data
7 available as determined by the health safety net office and shall update each acute
8 hospital's liability to the fund as updated information becomes available. The executive
9 office shall specify by regulation an appropriate mechanism for interim determination
10 and payment of an acute hospital's liability to the fund. An acute hospital's liability to the
11 fund shall, in the case of a transfer of ownership, be assumed by the successor in interest
12 to the acute hospital.

13 (b) There shall be imposed in each fiscal year a uniform assessment upon the
14 assessed charges of all: (i) nonpublic hospitals licensed by the department of public
15 health under section 51 of chapter 111 but not defined as acute care hospitals under
16 section 25B of said chapter 111; and (ii) nonpublic hospitals licensed as inpatient
17 facilities by the department of mental health under section 19 of chapter 19 and
18 regulations promulgated thereunder but not categorized as class VII licensees under the
19 regulations; provided, however, that such uniform assessment shall be set as a percentage
20 of the assessed charges of each such hospital and, for each fiscal year, the percentage
21 shall be equal to the ratio of: (A) the total acute hospital assessment amount as defined in
22 section 64 for the same fiscal year; to (B) the total assessed charges as defined in said
23 section 64 of acute care hospitals in the same fiscal year and as the amount of those
24 charges is determined by the health safety net office under this section. A non-acute
25 hospital's liability to the fund shall, in the case of a transfer of ownership, be assumed by
26 the successor in interest to the non-acute hospital.

27 (c) The executive office shall establish by regulation an appropriate mechanism
28 for enforcing each hospital's liability to the fund in the event that a hospital does not
29 make a scheduled payment to the fund.

Hospital Assessment 14

1 SECTION 40. Subsection (b) of section 69 of said chapter 118E, as appearing in
2 the 2020 Official Edition, is hereby amended by adding the following sentence:- All
3 reimbursements from the fund financed by any money transferred from the Safety Net
4 Provider Trust Fund established in section 2AAAAA of chapter 29 or the Hospital
5 Investment and Performance Trust Fund established in section 2TTTTT of said chapter

6 29, in any fund fiscal year, shall be applied to reduce such shortfall unless no shortfall
7 exists in that fund fiscal year.

Department of Correction and Sheriff Facility Reporting 1

1 SECTION 41. Chapter 124 of the General Laws is hereby amended by inserting
2 after section 6 the following section:-

3 Section 6A. (a) The department of correction, in collaboration with the
4 Massachusetts Sheriffs' Association, Inc., shall report on the use of all facilities of the
5 department and of each sheriff's office during the periods of January 1 to June 30,
6 inclusive, and July 1 to December 31, inclusive, of each year. The reports shall be due not
7 later than 30 days after the close of each period. Each report shall include, but not be
8 limited to: (i) an inventory of all buildings that are used or have been used to house
9 inmates since January 1, 2018; (ii) a catalog of changes in use or purpose for all housing
10 units and buildings during the preceding period; (iii) all housing units in each building
11 and the original design capacity of each; (iv) all cells or rooms in each housing unit and
12 the number of beds in each cell or room; (v) a brief description of the housing unit
13 including, but not limited to, the custody level and function of the unit; (vi) the average
14 daily amount of time offered out of cell for recreation, programs, education or
15 employment to inmates in each housing unit during the preceding period; (vii) the
16 average inmate count in each housing unit for the preceding period; (viii) an inventory of
17 all buildings in all correctional facilities, regardless of whether the building has ever been
18 occupied by inmates, with a brief description of each building and a statement as to
19 whether the building is used for housing; provided, however, that if the building is used
20 for housing, the report shall include whether it is occupied, unoccupied but available for

21 future habitation or no longer considered habitable; and (ix) the last date on which an
22 inmate was housed in a housing unit or building that does not currently house inmates.

23 (b) The report shall be submitted to the executive office for administration and
24 finance, the senate and house committees on ways and means, the joint committee on the
25 judiciary and the joint committee on public safety and homeland security. The report
26 shall be published in document form and downloadable spreadsheet form on the website
27 of the department of correction. The Massachusetts Sheriffs' Association, Inc. shall
28 furnish all data necessary for this report to the department of correction.

Enhanced Notice to Quit

1 SECTION 42. Chapter 186 of the General Laws is hereby amending by adding
2 the following section:-

3 Section 31. (1) A notice to quit for nonpayment of rent given in writing by a
4 landlord to a residential tenant pursuant to this chapter shall be accompanied by a form
5 that shall include, but not be limited to: (i) documentation of any agreements between the
6 tenant and landlord for the tenant to repay the landlord for non-payment of rent; and (ii)
7 information on: (A) rental assistance programs including, but not limited to, the
8 residential assistance for families in transition program; (B) applicable trial court rules,
9 standing orders or emergency administrative orders pertaining to actions for summary
10 process; and (C) any relevant federal or state legal restrictions on residential evictions.

11 The form shall also prominently display the following statement:

12 "THIS NOTICE TO QUIT IS NOT AN EVICTION. YOU DO NOT NEED TO
13 IMMEDIATELY LEAVE YOUR UNIT. YOU ARE ENTITLED TO A LEGAL

14 PROCEEDING IN WHICH YOU CAN DEFEND AGAINST THE EVICTION. ONLY
15 A COURT ORDER CAN FORCE YOU TO LEAVE YOUR UNIT.”

16 (2) The executive office of housing and economic development shall develop the
17 form required pursuant to this section and make it publicly available on its website. The
18 information in clause (ii) of paragraph (1) shall be made available in the 5 most common
19 languages in the commonwealth, in addition to English. No court having jurisdiction over
20 an action for summary process pursuant to chapter 239, including the Boston municipal
21 court department, shall, in an eviction for nonpayment of rent for a residential dwelling
22 unit, accept for filing a writ, summons or complaint without proof of delivery of the form
23 required under this section.

Committee for Public Counsel Services Rates 1

1 SECTION 43. Subsection (a) of section 11 of chapter 211D of the General Laws,
2 as most recently amended by section 63 of chapter 24 of the acts of 2021, is hereby
3 further amended by striking out the figure “\$110” and inserting in place thereof the
4 following figure:- \$120.

Committee for Public Counsel Services Rates 2

1 SECTION 44. Said subsection (a) of said section 11 of said chapter 211D, as so
2 amended, is hereby further amended by striking out the figure “\$75”, each time it
3 appears, and inserting in place thereof, in each instance, the following figure:- \$85.

Committee for Public Counsel Services Rates 3

1 SECTION 45. Said subsection (a) of said section 11 of said chapter 211D, as so
2 amended, is hereby further amended by striking out the figure “\$60”, each time it
3 appears, and inserting in place thereof, in each instance, the following figure:- \$65.

Children and Family Legal Representation Trust Fund

1 SECTION 46. Said chapter 211D is hereby further amended by adding the
2 following section:-

3 Section 17. (a) There shall be a Children and Family Legal Representation Trust
4 Fund to be administered by the chief counsel of the committee for public counsel
5 services. There shall be credited to the fund: (i) revenue from appropriations or other
6 money authorized by the general court and specifically designated to be credited to the
7 fund; (ii) reimbursement funds from federal sources for the legal representations of
8 children and families by the committee for public counsel services including, but not
9 limited to, reimbursements under Title IV-E of the federal Social Security Act; and (iii)
10 interest earned on such revenues and reimbursements in the fund. Amounts credited to
11 the fund that are unexpended at the end of a fiscal year shall not revert to the General
12 Fund.

13 (b) Money in the fund may be expended by the chief counsel, without further
14 appropriation, for the purposes of: (i) providing pre-petition representation and diversion
15 advocacy; (ii) increasing the availability of representation in underrepresented
16 communities; (iii) ensuring availability of education advocacy throughout the
17 commonwealth; (iv) improving the quality of advocacy through increased training
18 capacity and private bar performance evaluations; and (v) improving and modernizing
19 agency data collection, data reporting and billing systems. The chief counsel may
20 designate an administrator of the fund to implement approved activities consistent with
21 this section.

22 (c) Annually, not later than November 1, the chief counsel shall file a report on
23 the fund's activities with the clerks of the senate and house of representatives, the senate
24 and house committees on ways and means and the joint committee on the judiciary. The
25 report shall include, but not be limited to: (i) the source and amount of funds received;
26 (ii) the amounts distributed and the purpose of expenditures from the fund, including any
27 grants provided to early education and care programs, philanthropic organizations or
28 other stakeholder organizations; and (iii) anticipated revenue and expenditure projections
29 for the next calendar year.

Elimination of Probation and Parole Supervision and Surcharge Fees 1

1 SECTION 47. Section 87A of chapter 276 of the General Laws, as appearing in
2 the 2020 Official Edition, is hereby amended by striking out the second to eleventh
3 paragraphs, inclusive.

Department of Correction and Sheriff Facility Reporting 2

1 SECTION 48. Section 21 of chapter 799 of the acts of 1985 is hereby repealed.

Elimination of Probation and Parole Supervision and Surcharge Fees 2

1 SECTION 49. Section 368 of chapter 26 of the acts of 2003 is hereby repealed.

Hospital Assessment 15

1 SECTION 50. Sections 7, 8A and 14 of chapter 115 of the acts of 2016 are hereby
2 repealed.

Hospital Assessment 16

1 SECTION 51. Section 13 of said chapter 115 is hereby amended by striking out
2 the words "Sections 5 and 7" and inserting in place thereof the following words:- Section
3 5.

Hospital Assessment 17

1 SECTION 52. Sections 54 and 150 of chapter 47 of the acts of 2017 are hereby
2 repealed.

Substance Use Disorder Trust Fund Extension

1 SECTION 53. Section 58 of chapter 110 of the acts of 2017 is hereby amended by
2 striking out the figure “2023” and inserting in place thereof the following figure:- 2028.

Economic Development Project PAC

1 SECTION 54. Item 7008-1117 of section 2A of chapter 142 of the acts of 2019 is
2 hereby amended by striking out the figure “2022”, inserted by section 82 of chapter 24 of
3 the acts of 2021, and inserting in place thereof the following figure:- 2023.

Public Assistance Cliff Effect

1 SECTION 55. Subsection (b) of chapter 74 of the acts of 2021 is hereby amended
2 by striking out the words “and (v) a survey of existing public programs and services that
3 most effectively reduce poverty both in the commonwealth and in other states” and
4 inserting in place thereof the following words:- (v) a survey of existing public programs
5 and services that most effectively reduce poverty both in the commonwealth and in other
6 states; and (vi) an analysis of potential financial disincentives that occur when a family or
7 individual receiving public assistance increases their income and consequently becomes
8 ineligible for public assistance programs.

Middlesex County Restoration Center Commission

1 SECTION 56. (a) Notwithstanding any general or special law to the contrary,
2 there shall be a restoration center commission in the former county of Middlesex, as
3 previously established in section 225 of chapter 69 of the acts of 2018, to continue the

4 planning and implementation of the second phase of recommendations of said
5 commission.

6 (b) The commission shall consist of: the Middlesex county sheriff, or a designee,
7 who shall serve as co-chair; the president of the Massachusetts Association for Mental
8 Health, Inc., or a designee, who shall serve as co-chair; 1 member appointed by the
9 National Alliance for Mental Illness Massachusetts; 1 member appointed by the
10 Middlesex County Chiefs of Police Association from a police department within
11 Middlesex county that has received critical incident training or has established a local jail
12 diversion program; 1 member of the senate; 1 member of the house of representatives; a
13 member appointed by the chief justice of the trial court with specialty court experience; 3
14 members appointed by the secretary of health and human services, 1 of whom shall be
15 from MassHealth with knowledge of insurance vehicles, 1 of whom shall be from the
16 department of mental health with knowledge of criminal legal system diversion and
17 forensic services and 1 of whom shall be from the bureau of substance addiction services
18 with knowledge of criminal legal system diversion and forensic services; 1 member
19 appointed by the co-chairs from the philanthropic community with experience in funding
20 programs that divert individuals with behavioral health conditions from the criminal
21 justice system and emergency rooms into appropriate treatment; and 1 member appointed
22 by the Association for Behavioral Healthcare Inc., who shall serve as a non-voting
23 member of the commission.

24 (c) The commission shall: (i) oversee implementation planning and program
25 operation of the county restoration center and program to divert persons suffering from
26 mental illness or substance use disorder who interact with law enforcement or the court

27 system during a pre-arrest investigation or the pre-adjudication process from lock-up
28 facilities and hospital emergency departments to appropriate treatment; (ii) select an
29 independent evaluator to institute a rapid cycle evaluation of center implementation to
30 inform improvements to the center’s model of care; (iii) determine the advisability of
31 replicating the center’s model of care across the commonwealth based on input from
32 behavioral health provider organizations and program evaluation of and operating results
33 for the center and develop a framework for replicating the center’s model of care; and
34 (iv) establish a center of excellence to disseminate program knowledge, promote broad
35 scale adoption of the center’s model of care and implement a learning community for
36 statewide practice transformation.

37 (d) Annually, not later than November 1, the commission shall provide a written
38 report to the clerks of the senate and the house of representatives, the senate and house
39 committees on ways and means, the joint committee on mental health, substance use and
40 recovery and the joint committee on healthcare financing summarizing the commission’s
41 activities over the previous fiscal year.

Fiscal Year 2023 Regional Transit Authority Funding Distribution

1 SECTION 57. Notwithstanding any general or special law to the contrary, for
2 fiscal year 2023, of the \$96,500,000 transferred in item 1595-6370 of section 2E,
3 \$94,000,000 shall be considered operating assistance and distributed to regional transit
4 authorities based on fiscal year 2022 distributions, in accordance with the updated fiscal
5 year 2022 bilateral memorandum of understanding between each regional transit
6 authority and the Massachusetts Department of Transportation; provided, however, that
7 each regional transit authority shall receive operating assistance from said item 1595-

8 6370 of said section 2E of not less than the amount received in fiscal year 2022; provided
9 further, that notwithstanding the forgoing, \$3,500,000 of such operating assistance shall
10 be distributed to each regional transit authority using a formula based on total transit
11 ridership, the population of its member communities and service coverage area; and
12 provided further, that such formula shall be unanimously agreed to by all regional transit
13 authorities and approved by the department. The operating assistance amount shall be
14 spent to advance the goals and targets as agreed to in the memoranda of understanding
15 between each regional transit authority and the department.

16 Of the amount to be transferred under said item 1595-6370 of said section 2E,
17 \$2,500,000 shall be distributed as grants to regional transit authorities to design and
18 implement fare reduction pilot programs as described in said item 1595-6370 of said
19 section 2E. The Massachusetts Department of Transportation may require each regional
20 transit authority to provide data on ridership, customer service and satisfaction, asset
21 management and financial performance, including farebox recovery, and shall compile
22 any collected data into a report on the performance of regional transit authorities and each
23 authority's progress toward meeting the performance metrics established in the
24 memorandum of understanding. The report shall be filed with the clerks of the senate and
25 house of representatives, the senate and house committees on ways and means and the
26 joint committee on transportation not later than December 31, 2022.

Other Post-Employment Benefits Liability

1 SECTION 58. (a) Notwithstanding any general or special law to the contrary, the
2 unexpended balances in items 0699-0015 and 0699-9100 of section 2 shall be deposited
3 into the State Retiree Benefits Trust Fund established in section 24 of chapter 32A of the

4 General Laws before the certification of the fiscal year 2023 consolidated net surplus
5 under section 5C of chapter 29 of the General Laws. The amount deposited shall be an
6 amount equal to 10 per cent of all payments received by the commonwealth in fiscal year
7 2023 under the master settlement agreement in Commonwealth of Massachusetts v.
8 Philip Morris, Inc. et al., Middlesex Superior Court, No. 95-7378; provided, however,
9 that if in fiscal year 2023 the unexpended balances of said items 0699-0015 and 0699-
10 9100 of said section 2 are less than 10 per cent of all payments received by the
11 commonwealth in fiscal year 2023 under the master settlement agreement payments, an
12 amount equal to the difference shall be transferred to the State Retiree Benefits Trust
13 Fund from payments received by the commonwealth under the master settlement
14 agreement.

15 (b) Notwithstanding any general or special law to the contrary, the payment
16 percentage set forth in section 152 of chapter 68 of the acts of 2011 shall not apply in
17 fiscal year 2023.

Pension Cost of Living Adjustment

1 SECTION 59. Notwithstanding any general or special law to the contrary, the
2 amounts transferred pursuant to subdivision (1) of section 22C of chapter 32 of the
3 General Laws shall be made available for the Commonwealth's Pension Liability Fund
4 established in section 22 of said chapter 32. The amounts transferred pursuant to said
5 subdivision (1) of said section 22C of said chapter 32 shall meet the commonwealth's
6 obligations pursuant to said section 22C of said chapter 32, including retirement benefits
7 payable by the state employees' retirement system and the state teachers' retirement
8 system, for the costs associated with a 3 per cent cost-of-living adjustment pursuant to

9 section 102 of said chapter 32, for the reimbursement of local retirement systems for
10 previously authorized cost-of-living adjustments pursuant to said section 102 of said
11 chapter 32 and for the costs of increased survivor benefits pursuant to chapter 389 of the
12 acts of 1984. The state board of retirement and each city, town, county and district shall
13 verify these costs, subject to rules that shall be adopted by the state treasurer. The state
14 treasurer may make payments upon a transfer of funds to reimburse certain cities and
15 towns for pensions of retired teachers, including any other obligation that the
16 commonwealth has assumed on behalf of a retirement system other than the state
17 employees' retirement system or state teachers' retirement system, including the
18 commonwealth's share of the amounts to be transferred pursuant to section 22B of said
19 chapter 32. The payments under this section shall be made only pursuant to distribution
20 of money from the Commonwealth's Pension Liability Fund. Any distribution, and the
21 payments for which distributions are required, shall be detailed in a written report
22 prepared quarterly by the secretary of administration and finance and submitted to the
23 senate and house committees on ways and means and the joint committee on public
24 service in advance of the distribution. Distributions shall not be made in advance of the
25 date on which a payment is actually to be made. If the amount transferred pursuant to
26 said subdivision (1) of said section 22C of said chapter 32 exceeds the amount necessary
27 to adequately fund the annual pension obligations, the excess amount shall be credited to
28 the Pension Reserves Investment Trust Fund established in subdivision (8) of said section
29 22 of said chapter 32 to reduce the unfunded pension liability of the commonwealth.

Expanded Medicare Savings Program Transfer

1 SECTION 60. Notwithstanding any general or special law to the contrary, the
2 secretary of administration and finance, in consultation with the secretary of health and
3 human services, may transfer not more than a total of \$7,500,000 from the prescription
4 advantage program in item 9110-1455 of section 2 and the Health Safety Net Trust Fund
5 established in section 66 of chapter 118E of the General Laws in fiscal year 2023 to
6 support the Medicare Saving or Medicare Buy-In programs established in section 25A of
7 said chapter 118E; provided, however, that the secretary of health and human services
8 shall certify to the senate and house committees on ways and means, not less than 45
9 days in advance of the transfer, in writing, the amount to be transferred and an
10 explanation of the amount of expected savings to those programs resulting from the
11 transfer.

Health Safety Net Administration

1 SECTION 61. Notwithstanding any general or special law to the contrary,
2 payments from the Health Safety Net Trust Fund established in section 66 of chapter
3 118E of the General Laws may be made as safety net care payments under the
4 commonwealth's waiver pursuant to section 1115 of the federal Social Security Act, 42
5 U.S.C. 1315, as an adjustment to service rate payments under Title XIX and XXI of said
6 Social Security Act or a combination of both. Other federally permissible funding
7 mechanisms available for certain hospitals, as defined by regulations of the executive
8 office of health and human services, may be used to reimburse up to \$70,000,000 of
9 uncompensated care pursuant to sections 66 and 69 of said chapter 118E using sources
10 distinct from the funding made available to the Health Safety Net Trust Fund.

Hospital Assessment 18

1 SECTION 62. Notwithstanding any general or special law to the contrary, the
2 secretary of health and human services shall seek any and all required federal approvals
3 the secretary deems necessary to implement: (i) the Hospital Investment and Performance
4 Trust Fund established in section 19; (ii) the Population Health Investment Trust Fund
5 established in said section 19; and (iii) sections 15, 17, 32, 36, 38, 40, 50, 51, 52 and 73,
6 including any required waivers under 42 CFR 433.68 necessary to implement the updates
7 to the hospital assessment described in section 67 of chapter 118E of the General Laws,
8 as amended by section 37.

9 If, after having received any required federal approval necessary to implement the
10 Hospital Investment and Performance Trust Fund established in said section 19, the
11 Population Health Investment Trust Fund established in said section 19 and said sections
12 15, 17, 32, 36, 38, 40, 50, 51, 52 and 73, such approval is withdrawn or is otherwise not
13 in effect or the secretary determines that a change in federal law, regulation or the federal
14 government’s administration of federal law or regulation requires a modification to the
15 hospital assessment described in section 67 of chapter 118E of the General Laws, as
16 amended by said section 38, or to the implementation of the Health Safety Net Trust
17 Fund established in section 66 of said chapter 118E, as amended by sections 35 and 36,
18 the Non-Acute Care Hospital Reimbursement Trust Fund established in section
19 2WWW of chapter 29 of the General Laws, as amended by said section 15, the Safety
20 Net Provider Trust Fund established in section 2AAAAA of said chapter 29, as amended
21 by said section 19, the Hospital Investment and Performance Trust Fund established in
22 said section 19 or the Population Health Investment Trust Fund established in said
23 section 19, the secretary shall notify the joint committee on health care financing and the

24 senate and house committees on ways and means and shall consult with the
25 Massachusetts Health and Hospital Association, Inc. to develop alternatives.

26 Not later than December 15, 2023, and annually thereafter, the secretary shall
27 report to the joint committee on health care financing and the senate and house
28 committees on ways and means: (i) the amount of the assessment made and collected
29 from each hospital pursuant to said section 38; and (ii) the amounts transferred to,
30 deposited in, expended from and transferred from the Hospital Investment and
31 Performance Trust Fund established in said section 19 and the Population Health
32 Investment Trust Fund established in said section 19.

Hospital Assessment 19

1 SECTION 63. Notwithstanding any general or special law to the contrary, in the
2 event that the commonwealth does not receive all federal approvals pursuant to section
3 62 that the secretary of health and human services determines necessary to implement:
4 (1) the Hospital Investment and Performance Trust Fund established in section 19; (2) the
5 Population Health Investment Trust Fund established in said section 19; and (3) sections
6 15, 17, 32, 36, 38, 40, 50, 51, 52 and 73, including any required waivers under 42 CFR
7 433.68, the hospital assessment described in sections 64 through 69, inclusive, of chapter
8 118E of the General Laws shall remain in effect as if said sections 15, 17, 32, 36, 38, 40,
9 50, 51, 52 and 73, the Hospital Investment and Performance Trust Fund established in
10 said section 19 and the Population Health Investment Trust Fund established in said
11 section 19 had not been enacted until the first full calendar month following the calendar
12 month in which the secretary determines all such federal approvals have been received.
13 The secretary, in consultation with representatives of the Massachusetts Health and

14 Hospital Association, Inc., shall continue to seek all federal approvals necessary to
15 implement the Hospital Investment and Performance Trust Fund established in said
16 section 19, the Population Health Investment Trust Fund established in said section 19
17 and said sections 15, 17, 32, 36, 38, 40, 50, 51, 52 and 73 until such federal approvals are
18 received or the United States Department of Health and Human Services or the federal
19 Centers for Medicare and Medicaid Services render a final determination that an
20 assessment established pursuant to said sections 65 through 69, inclusive, of said chapter
21 118E cannot be implemented.

Hospital Assessment 20

1 SECTION 64. Section 62 is hereby repealed.

Initial Gross Payments to Qualifying Acute Care Hospitals

1 SECTION 65. Notwithstanding any general or special law to the contrary, not
2 later than October 1, 2022 and without further appropriation, the comptroller shall
3 transfer from the General Fund to the Health Safety Net Trust Fund established in section
4 66 of chapter 118E of the General Laws the greater of \$45,000,000 or 1/12 of the total
5 expenditures to hospitals and community health centers required pursuant to this act for
6 the purposes of making initial gross payments to qualifying acute care hospitals for the
7 hospital fiscal year beginning October 1, 2022. These payments shall be made to
8 hospitals before, and in anticipation of, the payment by hospitals of their gross liability to
9 the Health Safety Net Trust Fund. The comptroller shall transfer from the Health Safety
10 Net Trust Fund to the General Fund, not later than June 30, 2023, the amount of the
11 transfer authorized by this section and any allocation of that amount as certified by the
12 director of the health safety net office.

Inspector General's Health Care Audits

1 SECTION 66. Notwithstanding any general or special law to the contrary, in
2 hospital fiscal year 2023, the office of inspector general may expend not more than
3 \$1,000,000 from the Health Safety Net Trust Fund established in section 66 of chapter
4 118E of the General Laws for costs associated with maintaining a health safety net audit
5 unit within the office. The unit shall continue to oversee and examine the practices in
6 hospitals including, but not limited to, the care provided to the uninsured and the
7 resulting free charges. The unit shall study and review the Medicaid program under said
8 chapter 118E including, but not limited to, a review of the program's eligibility
9 requirements, utilization, claims administration and compliance with federal mandates.
10 The inspector general shall submit a report to the senate and house committees on ways
11 and means on the results of the audits and any other completed analyses not later than
12 March 1, 2023.

MassHealth Delivery System Reform Trust Fund Transfer

1 SECTION 67. Notwithstanding any general or special law to the contrary, the
2 secretary of health and human services shall, not later than June 30, 2023, make available
3 \$40,000,000 from the MassHealth Delivery System Reform Trust Fund established in
4 section 2SSSS of chapter 29 of the General Laws to the comptroller for deposit in the
5 General Fund to reimburse the commonwealth for Medicaid-related expenses incurred in
6 fiscal year 2023 as certified by the secretary of health and human services.

Fiscal Year 2023 Stabilization Fund Transfer

1 SECTION 68. (a) For fiscal year 2023, to the extent funds are available, the
2 comptroller shall transfer \$786,017,903, or such amount as may be required, to the

3 Commonwealth Stabilization Fund established in section 2H of chapter 29 of the General
4 Laws, in the manner described in section 5G of said section 29.

5 (b) In addition, the following activities and events are expected to result in the
6 amounts set forth below being deposited in the Commonwealth Stabilization Fund: (i)
7 \$21,722,876 from gaming revenues, as provided in clause (f) of paragraph (2) of section
8 59 of chapter 23K of the General Laws; (ii) \$34,687,500 from growth in abandoned
9 property net revenue, as provided in section 5H of chapter 29 of the General Laws; and
10 (iii) \$12,000,000 from other sources.

11 (c) The total deposit made as a result of the actions described in subsections (a)
12 and (b) of this section is expected to be \$854,428,276.

Transfers Between Health Funds

1 SECTION 69. (a) Notwithstanding any general or special law to the contrary, the
2 comptroller, at the direction of the secretary of administration and finance, may transfer
3 up to \$15,000,000 from the Commonwealth Care Trust Fund established in section
4 2000 of chapter 29 of the General Laws to the Health Safety Net Trust Fund established
5 in section 66 of chapter 118E of the General Laws.

6 (b) The transfer required from the Commonwealth Care Trust Fund to the Health
7 Safety Net Trust Fund under subsection (b) of section 189 of chapter 149 of the General
8 Laws shall not apply in fiscal year 2023.

Inclusive Concurrent Enrollment 8

1 SECTION 70. The inclusive concurrent enrollment advisory board established in
2 subsection (e) of section 17 of chapter 71B of the General Laws shall convene a task
3 force to evaluate, develop and pilot mechanisms to support institutions of higher

4 education offering opportunities, pursuant to section 30A of chapter 15A, to include
5 individuals with severe intellectual disabilities, severe autism spectrum disorders or other
6 severe developmental disabilities over the age of 21. The evaluation shall include, but not
7 be limited to, an assessment of the: (i) needs relating to housing, employment, health
8 care, mental health care, transportation and social and leisure opportunities of
9 participating individuals over the age of 21; (ii) type, frequency and duration of support
10 that would be required to support public higher education opportunities for participating
11 individuals over the age of 21; (iii) costs associated with supporting higher education
12 opportunities at public higher education institutions for participating individuals over the
13 age of 21; and (iv) opportunities available to maximize federal financial participation
14 through Medicaid and federal financial aid to include individuals with severe intellectual
15 disabilities, severe autism spectrum disorders or other severe developmental disabilities
16 who are over the age of 21. The task force shall convene not later than October 15, 2022.

17 The task force shall file a report containing the results of its investigation and
18 study and shall make recommendations to the inclusive concurrent enrollment advisory
19 board, the clerks of the senate and house of representatives, the joint committee on higher
20 education and the senate and house committees on ways and means not later than April
21 15, 2023.

Inclusive Concurrent Enrollment 9

1 SECTION 71. The department of higher education and the department of
2 elementary and secondary education, in consultation with the inclusive concurrent
3 enrollment advisory board, the executive officer of the Council of Presidents of the
4 Massachusetts State University System, the president of the University of Massachusetts

5 and the executive director of the Massachusetts Association of Community Colleges,
6 shall issue regulations to implement section 17 of chapter 71B of the General Laws not
7 later than March 31, 2023.

Group Insurance Commission Coverage

1 SECTION 72. Notwithstanding any general or special law to the contrary, the
2 group insurance commission shall allow for a state employer to offer to a new state
3 employee, who is eligible for health insurance benefits and opts to receive health
4 insurance benefits provided by the group insurance commission, health insurance
5 coverage effective as of their employment start date if such start date falls on the first day
6 of the month, or as of the first day of the month following their employment start date if
7 such start date falls on any day other than the first day of the month. The group insurance
8 commission, in consultation with the comptroller and the executive office for
9 administration and finance, shall promulgate regulations to enforce this section.

Hospital Assessment Effective Date 1

1 SECTION 73. Sections 15, 17, the Hospital Investment and Performance Trust
2 Fund established in section 19 and the Population Health Investment Trust Fund
3 established in said section 19 and sections 32, 36, 38 and 40 shall take effect on October
4 1, 2022.

Hospital Assessment Effective Date 2

1 SECTION 74. Sections 18, 20, 21, 33, 37, 39 and 64 shall take effect on October
2 1, 2027.

Personal Income Tax Conformity & Student Loan Forgiveness Income Tax

Exemption Effective Date

1 SECTION 75. Sections 22 to 24, inclusive, shall take effect for taxable years
2 beginning on or after January 1, 2022.

Group Insurance Commission Coverage Effective Date

1 SECTION 76. Section 72 shall take effect on January 1, 2023.

Enhanced Notice to Quit & Department of Correction and Sheriff Facility

Reporting Effective Dates

1 SECTION 77. Sections 41, 42 and 48 shall take effect on April 1, 2023.

Effective Date

1 SECTION 78. Except as otherwise specified, this act shall take effect on July 1,
2 2022.