

**The Commonwealth of Massachusetts**

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**JOURNAL OF THE HOUSE.**



**THURSDAY, MAY 16, 2024.**

[47]\*

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# JOURNAL OF THE HOUSE.

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Thursday, May 16, 2024.

Met according to adjournment at eleven o'clock A.M., with Mr. Donato of Medford in the Chair (having been appointed by the Speaker, under authority conferred by Rule 5, to perform the duties of the Chair).

At the request of the Chair (Mr. Donato), the members, guests and employees joined with him in reciting the pledge of allegiance to the flag.

Pledge of allegiance.

## *Statement Concerning Representative Rogers of Cambridge.*

A statement of Ms. Peisch of Wellesley concerning Mr. Rogers of Cambridge was spread upon the records of the House, as follows:

MR. SPEAKER: I would like to call to the attention of the House the fact that one of our colleagues, Representative Rogers of Cambridge, was unable to be present in the House Chamber for the sittings of yesterday and today. If he had been present yesterday, he would have voted in the affirmative on roll call No. 105, on adoption of consolidated amendment "A" and also on roll call No. 106, on the question on passing to be engrossed the House Bill to provide for the future informational technology needs of Massachusetts; and if he had been present for today's sitting, he would have voted in the affirmative on passing to be engrossed the House Bill enhancing the market review process.

Statement concerning Mr. Rogers of Cambridge.

## *Resolutions.*

The following resolutions (filed with the Clerk) were referred, under Rule 85, to the committee on Rules:

Resolutions (filed by Representative Hogan of Stow) commending the Melanoma Action Coalition Inc. for recognizing Skin Cancer Prevention and Detection Month, the first Monday of May as Melanoma Monday, and the Friday before Memorial Day as Don't Fry Day;

Skin Cancer Prevention and Detection Month.

Resolutions (filed by Representative Arciero of Westford) recognizing the month of May 2024 as Hypertension Awareness Month in the Commonwealth of Massachusetts;

Hypertension Awareness Month.

Resolutions (filed by Representatives Fernandes of Falmouth and Vieira of Falmouth) congratulating the Woods Hole Golf Club on the occasion of its one hundred and twenty-fifth anniversary;

Woods Hole Golf Club.

Resolutions (filed by Representative LeBoeuf of Worcester and other members of the House) commending the Ehlers-Danlos Society in its recognition of May 2024 as Ehlers-Danlos Syndromes and Hypermobility Spectrum Disorders Awareness Month;

Ehlers-Danlos Awareness Month.

Resolutions (filed by Representative Madaro of Boston) commending Massachusetts Association for Mental Health, Inc. on its recognition of May 24, 2024 as Schizophrenia Awareness Day; and

Schizophrenia Awareness Day.

**UNCORRECTED PROOF.**

Resolutions (filed by Representatives Xiarhos of Barnstable and Jones of North Reading) honoring law enforcement officers during National Police Week;

National  
Police Week.

Mr. Galvin of Canton, for the committee on Rules, reported, in each instance, that the resolutions ought to be adopted. Under suspension of the rules, in each instance, on motion of Mr. Day of Stoneham, the resolutions (reported by the committee on Bills in the Third Reading to be correctly drawn) were considered forthwith; and they were adopted.

*Petitions.*

Petitions severally were presented and referred as follows:

By Representative Ciccolo of Lexington, a petition (accompanied by bill, House, No. 4650) of Michelle L. Ciccolo, Cindy F. Friedman and Michael J. Barrett (by vote of the town) that the town of Lexington be authorized to satisfy legal notice requirements by digital publication. To the committee on Municipalities and Regional Government.

Lexington,—  
digital legal  
notice.

By Representative LeBoeuf of Worcester, a petition (accompanied by bill, House, No. 4651) of David Henry Argosky LeBoeuf (by vote of the town) that the office of chief of police in the town of Leicester be exempt from certain provisions of the civil service law; and

Leicester,—  
civil service  
law exemption.

By the same member, a petition (accompanied by bill, House, No. 4652) of David Henry Argosky LeBoeuf (by vote of the town) that the town of Leicester be authorized to continue the employment of Kenneth M. Antanavica, the police chief of said town.

Leicester,—  
Kenneth  
Antanavica.

Severally to the committee on Public Service.

Severally sent to the Senate for concurrence.

*Reports of Committees.*

By Mr. Honan of Boston, for the committee on Steering, Policy and Scheduling, that the House Bill regarding the age requirement for police officers for the city of Malden (House, No. 4526) [Local Approval Received] be scheduled for consideration by the House.

Malden,—  
police  
officers.

Under suspension of Rule 7A, on motion of Mr. Day of Stoneham, the bill was read a second time forthwith; and it was ordered to a third reading.

By Ms. Fiola of Fall River, for the committee on Municipalities and Regional Government, on House, Nos. 2016, 2020, 2021, 2026, 2032, 2033, 2035, 2036, 2039, 2041, 2042, 2043, 2044, 2050, 2053, 2056, 2057, 2060, 2061, 2063, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2073, 2079, 2080, 2085, 2088, 2090, 2091, 2101, 2104, 2105, 2106, 2107, 2109, 2110, 2114, 2116, 2119, 2120, 3552, 3603, 3726, 3745, 3776, 3789, 3790, 3801, 3823, 3889 and 3895, an Order relative to authorizing the committee on Municipalities and Regional Government to make an investigation and study of certain House documents relative to parking and pedestrian safety, wetlands, municipal ordinances and other related matters (House, No. 4573) [Representative Connolly of Cambridge dissenting]. Referred, under Joint Rule 29, to the committees on Rules of the two branches, acting concurrently.

Parking and  
pedestrian  
safety; wetlands;  
municipal  
ordinances and  
other related  
matters,—  
study.

Mr. Galvin of Canton, for said committee, reported asking to be discharged from further consideration of the order; and recommending that the same be referred to the House committee on Rules.

**UNCORRECTED PROOF.**

Under Rule 42, the report was considered forthwith; and it was accepted.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill to ensure access to medical parole (House, No. 2319) [Senator Velis dissenting]. Referred, under Joint Rule 1E, to the committee on Health Care Financing.

Medical  
parole.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill establishing a commission to study post-traumatic stress disorder in law enforcement officers (House, No. 2322) [Senator Velis dissenting]. Read; and referred, under Joint Rule 29, to the committees on Rules of the two branches, acting concurrently.

Law  
enforcement,—  
P.T.S.D.  
study.

By Mr. Schmid of Westport, for the committee on Agriculture, on a petition, a Bill relative to the healthy incentives program (House, No. 185, changed in section 2, in lines 24 and 25, by striking out the following: “no later than 12 months within” and inserting in place thereof the following: “within 12 months of the”; and in line 26, by striking out the word “department’s” and inserting in place thereof the word “departments”).

Healthy  
incentives  
program.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill relative to ghost guns (House, No. 2312) [Senator Velis and Representatives Zlotnik of Gardner and Vieira of Falmouth dissenting].

Ghost  
guns.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill relative to fire safety education in schools and colleges (House, No. 2313) [Senator Velis and Representative Vieira of Falmouth dissenting].

Fire safety,—  
schools.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill to strengthen family and community connection with incarcerated people (House, No. 2314) [Senator Velis dissenting].

Visitation  
of inmates.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill relative to elevator inspection fee waiver for non-profits (House, No. 2316) [Senator Velis dissenting].

Elevator  
inspection fees,—  
waivers.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill relative to the establishment of the PFAS research and development public safety fund (House, No. 2317) [Senator Velis dissenting].

PFAS  
research fund.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill relative to safe building materials (House, No. 2321) [Senator Velis dissenting].

Safe building  
materials.

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill relative to emergency planning (House, No. 2324) [Senator Velis dissenting].

Nuclear  
power plant  
preparedness.

Severally read; and referred, under Rule 33, to the committee on Ways and Means.

By Mr. Diggs of Barnstable, for the committee on Labor and Workforce Development, on House, Nos. 1841 and 1931, a Bill protecting wages of employees who receive wages through an electronic wage card (House, No. 1841).

Employees,—  
electronic wage  
payments.

By the same member, for the same committee, on a petition, a Bill relative to employee fairness (House, No. 1941).

Employees,—  
drug tests.

**UNCORRECTED PROOF.**

By Mr. González of Springfield, for the committee on Public Safety and Homeland Security, on a petition, a Bill to enhance child passenger safety (House, No. 2318) [Senator Velis dissenting].

Child  
safety belts.

By Mr. Gordon of Bedford, for the committee on Public Service, on House, No. 4640, a Bill establishing a sick leave bank for Kendra Winner (House, No. 4644).

Kendra Winner,—  
sick leave.

By Mr. Straus of Mattapoissett, for the committee on Transportation, on a petition, a Bill designating a portion of state highway route 7 in the town of Sheffield as the Brigadier-General John G. Barnard highway (House, No. 4617).

Sheffield,—  
Barnard  
highway.

By the same member, for the same committee, on a petition, a Bill designating a portion of state highway route 41 in the town of West Stockbridge as the Gene Dellea highway (House, No. 4618).

West  
Stockbridge,—  
Dellea highway.

By the same member, for the same committee, on a petition, a Bill designating a portion of state highway route 23 west and 41 south in the town of Egremont as the George McGurn memorial highway (House, No. 4619).

Egremont,—  
McGurn  
highway.

Severally read; and referred, under Rule 7A, to the committee on Steering, Policy and Scheduling.

*Orders of the Day.*

The Senate Bill authorizing the town of Easton to establish a means tested senior citizen property tax exemption (Senate, No. 2515), reported by the committee on Bills in the Third Reading to be correctly drawn, was read a third time; and it was passed to be engrossed, in concurrence.

Third  
reading  
bill.

The House Bill designating a certain intersection in the town of Pembroke as the Lavina A. Hatch corner (House, No. 3293), reported by the committee on Bills in the Third Reading to be correctly drawn, was read a third time; and it was passed to be engrossed. Sent to the Senate for concurrence.

Id.

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The House Bill authorizing the city of Somerville to continue the employment of Charles J. Femino as acting chief of police (House, No. 4465), reported by the committee on Bills in the Third Reading to be correctly drawn, was read a third time forthwith.

Somerville,—  
Charles Femino.

Pending the question on passing the bill to be engrossed, Mr. Walsh of Peabody moved to amend it by substitution of a bill with the same title (House, No. 4649), which was read.

The amendment was adopted; and the substituted bill was passed to be engrossed. Sent to the Senate for concurrence.

*Engrossed Bill.*

The engrossed Bill authorizing the city of Somerville to continue the employment of Charles J. Femino as acting chief of police (see Senate, No. 2515) (which originated in the Senate), having been certified by the Clerk to be rightly and truly prepared for final passage, was passed to be enacted; and it was signed by the acting Speaker and sent to the Senate.

Bill  
enacted.

**UNCORRECTED PROOF.**

*Recess.*

At five minutes after eleven o'clock A.M., on motion of Mr. Smola of Warren (Mr. Donato of Medford being in the Chair), the House recessed until one o'clock P.M.; and at two minutes before one o'clock the House was called to order with Mr. Donato of Medford in the Chair.

Recess.

*Order.*

The Order (filed by Mr. Madaro of Boston) relative to extending until Monday, June 17, 2024 the time within which the committee on Mental Health, Substance Use and Recovery is authorized to report on current Senate and House document (House, No. 4647) was referred, under Joint Rule 30, to the committees on Rules of the two branches, acting concurrently.

Mental Health,  
Substance Use  
and Recovery,—  
extension of time  
for reporting.

Mr. Galvin of Canton, for the committees on Rules, reported that the order ought to be adopted. Under suspension of the rules, on motion of Mr. Hawkins of Attleboro, the order was considered forthwith; and it was adopted. Sent to the Senate for concurrence.

*Orders of the Day.*

Ms. Hogan of Stow being in the Chair,—

The House Bill enhancing the market review process (House, No. 4643), reported by the committee on Bills in the Third Reading to be correctly drawn, was read a third time.

Health care,—  
market review.

After remarks on the question on passing the bill to be engrossed, at twenty-seven minutes before three o'clock P.M., on motion of Mr. Frost of Auburn, the House recessed subject to the call of the Chair; and at ten minutes after four o'clock the House was called to order with the Speaker in the Chair.

Recess.

Pending the question on passing the bill to be engrossed, Miss Gregoire of Marlborough moved to amend it by striking out section 37; and the amendment was adopted.

Ms. Decker of Cambridge then moved to amend the bill by adding the following section:

“SECTION 271. Section 184B of chapter 111 of the General Laws, as appearing in the 2020 Official Edition, is hereby amended by inserting after the words ‘federal hospitals,’ the following: ‘not-for-profit organizations registered as a blood establishment with the federal Food and Drug Administration.’”

The amendment was adopted.

Ms. Fluker Oakley of Boston then moved to amend the bill in section 20, in line 160, by inserting after the word “delivery” the words “health equity advocacy.”;

In section 40, in line 665, by inserting after the word “representatives” the words “, health equity advocates.”;

By inserting after section 56 the following section:—

SECTION 56A. Said section 2A of said chapter 12C, as so appearing, is hereby further amended by inserting after the word “cybersecurity”, in line 9, the following words:— and 1 of whom shall have experience in health equity advocacy.”; and

In section 109, in line 1234, by inserting after the word “patients” the words “, including considerations of health equity.

The amendments were adopted.

Mr. Cahill of Lynn then moved to amend the bill in section 30, in line 313, by inserting after the word “behalf.” the following sentence: “The commission, in consultation with the center, shall annually publish a list of acute hospitals that qualify as low historic relative price hospitals under this section.

The amendment was adopted.

Ms. Barber of Somerville then moved to amend the bill in section 19, in line 120, by striking out the words “or population health”; and the amendment was adopted.

Ms. Kane of Shrewsbury then moved to amend the bill in section 40, in line 622, by inserting after the words “pulmonary care” the words “, rare diseases care”; and the amendment was adopted.

After remarks on passing the bill, as amended, to be engrossed, Mr. Diggs of Barnstable moved to amend it in section 40, in line 611, by inserting after the word “analysis” the words “, including an analysis of health care workforce needs”; and the amendment was adopted.

Mr. Jones of North Reading then moved to amend the bill, in section 121, in line 1473, by inserting after the word “center.”, the following sentence: “The department shall consult with the board of registration in medicine prior to promulgating regulations or establishing rules or practice standards pursuant to this section.”; and the amendment was adopted.

Ms. Decker of Cambridge then moved to amend the bill by inserting after section 266 the following section:

“SECTION 266A. (a) The health policy commission, in collaboration with the center for health information and analysis and the division of health insurance, shall conduct an analysis and report on the use of prior authorization for health care services and its impact on cost, quality and access.

(b) The report shall include, but not be limited to: (i) an assessment and inventory of admissions, items, services, treatments, procedures and medications that require prior authorization and that have a high rate of approval or denial for standard and expedited requests, including after appeal; (ii) the timeline for review and adjudication, including the time to adjudicate an appeal, for standard and expedited requests for admissions, items, services, treatments, procedures and medications that require prior authorization; (iii) total health care expenditures associated with the submission and processing, including appeals, of prior authorization determinations; (iv) an analysis of the impact of prior authorization requirements on patient access to and cost of care by patient demographics, geographic region and type of service; (v) identification of admissions, items, services, treatments, procedures and medications subject to prior authorization that have low variation in utilization across providers and carriers, or low denial rates across carriers; (vi) identification of admissions, items, services, treatments, procedures and medications subject to prior authorization for certain chronic disease services that negatively impact chronic disease management; (vii) review and analysis of the integration of standardized electronic prior authorization attachments, standardized forms, requirements and decision support into electronic health records and other practice management software to promote transparency and efficiency; (viii) review and analysis of a waiver of prior authorization based on a carrier’s standards or policies, or ‘gold-carding status,’ so called, and whether such status is available to all providers in a carrier’s network; and (ix) recommendations regarding the simplification of health insurance prior authorization standards and processes to improve health care access and reduce the burden on health care providers.

(c) The report shall be informed by data and information submitted by carriers to the division of health insurance and shall include, but not be limited to the following:

(1) a list of all admissions, items, services, treatments, procedures and medications that require prior authorization;

(2) the number and percentage of standard prior authorization requests that were approved, individualized for each admission, item, service, treatment, procedure and medication;

(3) the number and percentage of standard prior authorization requests that were denied, individualized for each admission, item, service, treatment, procedure and medication;

(4) the number and percentage of standard prior authorization requests that were initially denied and approved after appeal, individualized for each admission, item, service, treatment, procedure and medication;

(5) the number and percentage of prior authorization requests for which the timeframe for review was extended, and the request was approved, individualized for each admission, item, service, treatment, procedure and medication;

(6) the number and percentage of expedited prior authorization requests that were approved, individualized for each admission, item, service, treatment, procedure and medication;

(7) the number and percentage of expedited prior authorization requests that were denied, individualized for each admission, item, service, treatment, procedure and medication;

(8) the average mean and median time that elapsed between the submission of a request and a determination by the carrier for standard prior authorizations, individualized for each admission, item, service, treatment, procedure and medication;

(9) the average and median time that elapsed between the submission of a request and a decision by the carrier for expedited prior authorizations, individualized for each admission, item, service, treatment, procedure and medication;

(10) the average and median time that elapsed to process an appeal submitted by a health care provider initially denied by the carrier for standard prior authorizations, individualized for each admission, item, service, treatment, procedure and medication; and

(11) the average and median time that elapsed to process an appeal submitted by a health care provider initially denied by the carrier for expedited prior authorizations, individualized for each admission, item, service, treatment, procedure and medication.

(d) The report and any legislative recommendations shall be submitted to the chairs of the joint committee on health care financing, the house and senate committees on ways and means not later than 1 year from the effective date of this act.”.

The amendment was adopted.

The same member then moved to amend the bill, in section 20, in line 161, by striking out the words “or health care benefits management” and inserting in place thereof the words “health care benefits management or expertise in behavioral health, substance use disorder, mental health services and mental health reimbursement systems.”; and the amendment was adopted.

Mr. Cahill of Lynn then moved to amend the bill by striking out section 116 and inserting in place thereof the following section:



**UNCORRECTED PROOF.**

“SECTION 116. Section 51G of said chapter 111, as so appearing, is hereby further amended by striking out paragraph (4) and inserting in place thereof the following paragraph:—

(4) Any hospital shall inform the department 90 days prior to the closing of the hospital or the discontinuance of any essential health service provided therein. The department shall by regulation define the words ‘essential health service’ for the purposes of this section. The department shall, in the event that a hospital proposes to discontinue an essential health service or services, conduct a public hearing on the closure of said essential services or of the hospital, and the department may seek an analysis of the impact of the closure from the health policy commission. The department shall determine whether any such discontinued services are necessary for preserving access and health status in the hospital’s service area and shall require hospitals to submit a plan for assuring access to such necessary services following the hospital’s closure of the service and assure continuing access to such services in the event that the department determines that their closure will significantly reduce access to necessary services. The department shall conduct a public hearing prior to a determination on the closure of said essential services or of the hospital. No original license shall be granted to establish or maintain an acute-care hospital, as defined in section 25B, unless the applicant submits a plan, to be approved by the department, for the provision of community benefits, including the identification and provision of essential health services. In approving the plan, the department may take into account the applicant’s existing commitment to primary and preventive health care services and community contributions as well as the primary and preventive health care services and community contributions of the predecessor hospital. The department may waive this requirement, in whole or in part, at the request of the applicant that has provided or at the time the application is filed, is providing, substantial primary and preventive health care services and community contributions in its service area.”.

The amendment was adopted.

Mr. Moran of Lawrence then moved to amend the bill by inserting after section 266A (inserted by amendment) the following section:

“SECTION 266B. (a) Notwithstanding any general or special law to the contrary, the secretary of health and human services shall direct monthly payments to eligible hospitals in the form of enhanced Medicaid payments, supplemental payments or other appropriate mechanisms. Each payment made to an eligible hospital shall equal 5 per cent of the eligible hospital’s average monthly Medicaid payments, as determined by the secretary, for inpatient and outpatient acute hospital services for the preceding year or the most recent year for which data is available; provided, however, that such enhanced Medicaid payments shall not be used in subsequent years by the secretary to calculate an eligible hospital’s average monthly payment; and provided further, that such payments shall not offset existing Medicaid payments for which an eligible hospital may be qualified to receive. In any fiscal year, the total sum of all payments made to eligible hospitals under this section shall not exceed \$35,000,000.

(b) The secretary may require as a condition of receiving payment any such reasonable condition of payment that the secretary determines necessary to ensure the availability, to the extent possible, of federal financial participation for the payments, and the secretary may incur expenses and the comptroller may certify amounts for payment in anticipation of expected receipt of federal financial participation for the payments.

(c) The executive office of health and human services may promulgate regulations as necessary to carry out this section.

**UNCORRECTED PROOF.**

(d) For the purposes of this section ‘eligible hospital’ shall mean an acute care hospital licensed under section 51 of chapter 111 of the General Laws that: (i) has a statewide relative price equal to or less than 0.90, as calculated by the center for health information and analysis according to data from the most recent available year; (ii) has a public payer mix equal to or greater than 60 per cent, as calculated by the center for health information and analysis according to data from the most recent available year; and (iii) is not owned by or financially consolidated or corporately affiliated with a provider organization, as defined by section 1 of chapter 6D of the General Laws, that: (A) owns or controls 2 or more acute care hospitals licensed under said section 51 of said chapter 111; and (B) the total net assets of all affiliated acute care hospitals within the provider organization is greater than \$800,000,000, as calculated by the center for health information and analysis according to data from the most recent available year.

(e) For the purposes of subsection (d), a hospital’s mere clinical affiliation with a provider organization, absent ownership, financial consolidation or corporate affiliation, shall not disqualify an eligible hospital from payments authorized under this section”; and

By adding the following 2 sections:

“SECTION 271. Section 266B is hereby repealed.

SECTION 272. Section 271 shall take effect 2 years from the effective date of this act.”.

After remarks the amendments were adopted.

Mr. Pignatelli of Lenox then moved to amend the bill by inserting after section 112, the following section:

“SECTION 112A. Said section 25C of said chapter 111, as so appearing, is hereby further amended by adding the following subsection:—

(o) For a critical access hospital affiliated with a federally designated sole community hospital, with respect to any substantial capital expenditure or substantial change in services not otherwise exempt from determination of need requirements, the department may promulgate regulations to modify its review of such applications as follows: (i) the department may review and process such applications in an expedited manner to the maximum extent possible; (ii) the department may elect to use the delegated review process; and (iii) the department may, in its discretion, exempt or grant waivers to such critical access hospitals from other requirements in this section or in requirements promulgated by regulations pursuant to this section.”.

The amendment was adopted.

Mr. Michlewitz of Boston then moved to amend the bill in section 117, in line 1388 and also in lines 1399 and 1403, by inserting after the word “granted”, in each instance, the words “, nor renewed,”; and the amendments were adopted.

On the question on passing the bill, as amended, to be engrossed, the sense of the House was taken by yeas and nays, at the request of Mr. Finn of West Springfield; and on the roll call 152 members voted in the affirmative and 1 in the negative.

**[See [Yea and Nay No. 107](#) in Supplement.]**

Therefore the bill (House, No. 4653, printed as amended) was passed to be engrossed. Sent to the Senate for concurrence.

Bill passed to  
be engrossed,—  
yea and nay  
No. 107.

*Order.*

On motion of Mr. Garballey of Arlington,—

**UNCORRECTED PROOF.**

*Ordered,* That when the House adjourns today, it adjourn to meet Monday next at eleven o'clock A.M.

Next  
sitting.

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Accordingly, without proceeding to consideration of the matters in the Orders of the Day, at twenty-six minutes before seven o'clock P.M., on motion of Mr. Jones of North Reading (the Speaker being in the Chair), the House adjourned, to meet the following Monday at eleven o'clock A.M., in an Informal Session.