

The Commonwealth of Massachusetts

PRESENTED BY:

Carmine Lawrence Gentile

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act clarifying rate setting processes for home health and home care services.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Carmine Lawrence Gentile	13th Middlesex	1/11/2023
Patricia D. Jehlen	Second Middlesex	1/20/2023
Lindsay N. Sabadosa	1st Hampshire	1/30/2023
Vanna Howard	17th Middlesex	1/31/2023
Steven Ultrino	33rd Middlesex	2/3/2023
Margaret R. Scarsdale	1st Middlesex	2/6/2023
Joseph D. McKenna	18th Worcester	2/8/2023
Joanne M. Comerford	Hampshire, Franklin and Worcester	2/9/2023
Peter J. Durant	6th Worcester	2/9/2023
Natalie M. Higgins	4th Worcester	2/9/2023
Mathew J. Muratore	1st Plymouth	2/10/2023
Patrick Joseph Kearney	4th Plymouth	2/10/2023
Thomas M. Stanley	9th Middlesex	2/10/2023
Todd M. Smola	1st Hampden	2/10/2023
Colleen M. Garry	36th Middlesex	2/13/2023
Michelle M. DuBois	10th Plymouth	2/13/2023
Donald R. Berthiaume, Jr.	5th Worcester	2/15/2023
Brian W. Murray	10th Worcester	2/16/2023

James B. Eldridge	Middlesex and Worcester	2/18/2023
Rebecca L. Rausch	Norfolk, Worcester and Middlesex	2/23/2023
Michael D. Brady	Second Plymouth and Norfolk	3/1/2023

By Representative Gentile of Sudbury, a petition (accompanied by bill, House, No. 1195) of Carmine Lawrence Gentile and others relative to the rate setting processes for home health and home care services. Health Care Financing.

The Commonwealth of Massachusetts

In the One Hundred and Ninety-Third General Court (2023-2024)

An Act clarifying rate setting processes for home health and home care services.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1	SECTION 1: Section 13D of Chapter 118E of the general laws is amended after the
2	second paragraph by inserting the following new paragraph:

3 Such rates for home health agencies, as defined under section 51K of chapter 111, shall 4 be established at least biennially. In setting such rates, the executive office shall use as base year 5 costs for rate determination purposes the reported costs of the calendar year not more than 4 6 years prior to the current rate year, adjusted for reasonableness and to incorporate any new 7 regulatory costs imposed since said base year costs. In establishing rates of payment to home 8 health agencies, the executive office shall consider all costs which must be incurred by 9 efficiently and economically operated providers. The rates shall also include an allowance for 10 reasonable administrative expenses and a reasonable profit factor, as determined by the executive 11 office. Such cost analysis shall include, but not be limited to, the following: costs of similar 12 services provided in other care settings; use of national or regional indices to measure increases

13 or decreases in reasonable costs incurred since the base year costs; the revision of existing 14 historical cost bases, where applicable, to reflect changing norms or models of efficient service 15 delivery; and other means to encourage the cost-efficient delivery of services. The Secretary 16 shall, concurrent with the completion of setting such rates, provide a report to the house and 17 senate committees on ways and means detailing how the rates issued under this paragraph were 18 analyzed and revised; provided further, that the report shall compare the inflationary 19 considerations made in the adopted rate with the most recent "Home Health Agency Market 20 Basket" index posted by the United States Department of Health and Human Services, Centers 21 for Medicare and Medicaid Services; provided further, that if the adopted rate does not rely on 22 the "Home Health Agency Market Basket" index for the purpose of determining inflationary 23 adjustments, then the report will simulate what the rate would have been if such index was a 24 factor in rate development. In determining the methodology for setting rates, the Secretary shall 25 consult with stakeholders impacted by the rates.

SECTION 2: Section 4 of Chapter 19A is hereby amended by adding after Section 4D the
 following new section:

SECTION 4E: In establishing rates of payment pursuant to the second paragraph of section 13C of chapter 118E of the M.G.L., the executive office shall consider changes to the state minimum wage or changes to employer payroll tax obligations as governmental mandates that affect the costs of providing homemaker and personal care homemaker services to elderly clients under this section.

33 The executive office shall also consider and analyze rates of payment and wages
34 associated with providing similar services in both the public and private settings. In calculating

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35 operating costs, the executive office shall consider costs of; health insurance, employee benefits 36 and training, payroll taxes, technology costs, administrative allocation and staff salaries using the latest available national or regional indices and benchmarked to the latest available Bureau of 37 38 Labor Statistics median wage data. Nothing in this section shall be construed as limiting 39 consideration of other governmental mandates or operating costs that affect the cost of providing 40 services pursuant to section 4 of chapter 19A of the General Laws. In determining the 41 methodology for setting rates, the Secretary shall consult with stakeholders impacted by the 42 rates.

43 The Secretary of Elder Affairs shall, concurrent with the promulgation of the final rates 44 of payment for services under section 4 of chapter 19A, issue a report to the House and Senate 45 committees on ways and means detailing how the rates promulgated were analyzed and 46 determined in compliance with the provisions set forth in the second paragraph of section 13C of 47 chapter 118E of the General Laws. The report shall detail the department's analysis of changes in 48 the costs of providing homemaker and personal care homemaker services since the immediately 49 preceding rate determination; provided further, that the report shall compare the inflationary 50 considerations made in the adopted rate with the most recent "Home Health Agency Market 51 Basket" index posted by the United States Department of Health and Human Services, Centers 52 for Medicare and Medicaid Services; provided further, that if the adopted rate does not rely on 53 the "Home Health Agency Market Basket" index for the purpose of determining inflationary 54 adjustments, then the report will simulate what the rate would have been if such index was a 55 factor in rate development.

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