

HOUSE No. 02785

The Commonwealth of Massachusetts

PRESENTED BY:

Daniel K. Webster

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 passage of the accompanying bill:

An Act relative to managed care services .

PETITION OF:

NAME:	DISTRICT/ADDRESS:
<i>Daniel K. Webster</i>	<i>6th Plymouth</i>
<i>Donald F. Humason, Jr.</i>	<i>4th Hampden</i>
<i>Steven L. Levy</i>	<i>4th Middlesex</i>
<i>Bradley H. Jones, Jr.</i>	<i>20th Middlesex</i>

HOUSE No. 02785

By Mr. Webster of Pembroke, a petition (accompanied by bill, House, No. 2785) of Levy and others relative to managed care services Joint Committee on Health Care Financing.

The Commonwealth of Massachusetts

In the Year Two Thousand Eleven

An Act relative to managed 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. Chapter 118E of the General Laws, as appearing in the 2008 Official Edition, is
2 hereby amended by adding the following new section:- Section 63. The executive office of
3 health and human services shall discontinue membership in the MassHealth fee-for-service
4 program and primary care clinician plan, and shall begin enrolling all members meeting
5 eligibility requirements as established pursuant to applicable federal and state law and regulation,
6 and for whom the discontinuation would result in cost savings for the MassHealth program, into
7 a Medicaid managed care organization that has contracted with the commonwealth to deliver
8 such managed care services, in accordance with the enrollment and assignment processes for
9 other eligible categories and at the appropriate levels of premium. The office shall submit a
10 report to the joint committee on health care financing and the clerks of the house and the senate
11 by June 30, 2012 detailing which members it has newly enrolled in a Medicaid managed care
12 organization, which members it has maintained in the MassHealth fee-for-service program and

13 primary care clinician plan, and an actuarial justification for those members who have not been
14 transferred to a Medicaid managed care organization.”.