

**SENATE . . . . . No. 436**

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The Commonwealth of Massachusetts

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PRESENTED BY:

***Benjamin B. Downing***

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*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 collection of health care co-insurance and deductibles.

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PETITION OF:

NAME:

*Benjamin B. Downing*

DISTRICT/ADDRESS:

*Berkshire, Hampshire, Franklin and Hampden*

**SENATE . . . . . No. 436**

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By Mr. Downing, a petition (accompanied by bill, Senate, No. 436) of Benjamin B. Downing for legislation relative to collection of health care co-insurance and deductibles. Financial Services.

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The Commonwealth of Massachusetts

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**In the Year Two Thousand Thirteen**  
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An Act relative to collection of health care co-insurance and deductibles.

*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 24B of chapter 175 of the General Laws, as appearing in the 2010  
2 Official Edition, is hereby amended by inserting after the first paragraph the following  
3 paragraph:-

4 The commissioner shall further require a carrier; as defined under section 1 of chapter  
5 176O, to recover all co-insurance and deductible amounts due from patients for covered services  
6 as required under the carrier’s health benefit plan. For purposes of this paragraph, “co-  
7 insurance” is defined as a percentage of the allowed charge, after a co-payment, if any, that an  
8 insured will pay for covered benefits. A “deductible” is defined as an annual dollar amount that  
9 must be paid by an insured for covered benefits that the insured uses before the carrier’s health  
10 benefit plan becomes obligated to pay for covered benefits; such deductible does not include any  
11 portion of premiums paid by an insured. Carriers shall include the co-insurance and deductible  
12 amounts due from the insured for covered benefits in their payments to providers; provided  
13 however, that such payment shall not be dependent on the carrier recovering the co-insurance  
14 and deductible prior to processing and paying a claim made by a provider. Nothing in this  
15 section shall prohibit providers and carriers from mutually agreeing to alternative billing and  
16 payment processes when it has been determined that the insured has secondary health benefits  
17 for the health care services provided. This paragraph shall not pertain to the collection of co-  
18 payments, which is a fixed dollar amount structured by the carrier that is paid by an insured to a  
19 provider, at the time the insured receives covered services.

20 SECTION 2: The Commissioner of Insurance shall promulgate regulations to enforce the  
21 provisions of this Act no later than 90 days after the effective date of the Act, which shall be

22 effective for provider contracts which are entered into, renewed, or amended on or after the  
23 regulations effective date.