

SENATE No. 555

The Commonwealth of Massachusetts

PRESENTED BY:

Richard T. Moore

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 to reduce health care fraud, waste and abuse.

PETITION OF:

NAME:

Richard T. Moore

DISTRICT/ADDRESS:

Worcester and Norfolk

SENATE No. 555

By Mr. Richard T. Moore, a petition (accompanied by bill, Senate, No. 555) of Richard T. Moore for legislation to reduce health care fraud, waste and abuse. Health Care Financing.

The Commonwealth of Massachusetts

In the Year Two Thousand Thirteen

An Act to reduce health care fraud, waste and abuse.

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. (a) Notwithstanding any general or special law to the contrary, not later
2 than July 31, 2014, the MassHealth program within the executive office of health and human
3 services shall implement provider data verification and provider screening technology, predictive
4 modeling and analytics technologies, clinical code editing technology, or any such technology,
5 strategy or system that is designed to prevent and detect healthcare fraud, waste and abuse in the
6 programs set forth in chapter 118E of the General Laws prior to claims being paid. The executive
7 office shall be exempt from the requirement to such technologies, strategies or systems if it has
8 reported not later than July 31, 2013, to the committee on health care financing, senate and house
9 committees on ways and means and the executive office for administration and finance that using
10 such technologies, strategies or systems would not be cost effective.

11 (b) Annually, on or before October 1, the executive office of health and human services
12 shall report to the committee on health care financing, senate and house committees on ways and
13 means and the executive office for administration and finance: (1) the current status of
14 implementation or use of any technologies, strategies or systems designed to prevent and detect
15 healthcare fraud, waste and abuse in the programs set forth in chapter 118E; (2) the actual or
16 projected savings to the programs as a result of the implementation or use of such technologies,
17 strategies or systems, including estimates of the amounts of such savings with respect to both
18 improper payments recovered and improper payments avoided; (3) the actual or projected
19 savings to the programs relative to the return on investment as a result of the use of such
20 technologies, strategies or systems; and (4) any further considerations or recommendations
21 relative to the implementation and cost of such technologies, strategies or systems. This report
22 may be integrated into the reporting requirement set forth in section 6 of chapter 118E of the
23 General Laws.