HOUSE DOCKET, NO. FILED ON: 1/14/2009

**HOUSE . . . . . . . . . . . . . . No.**

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The Commonwealth of Massachusetts

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PRESENTED BY:

**Robert P. Spellane**

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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 administrative simplification for MassHealth.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

PETITION OF:

|  |  |
| --- | --- |
| Name: | District/Address: |
| Robert P. Spellane | 13th Worcester |

The Commonwealth of Massachusetts

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**In the Year Two Thousand and Nine**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

An Act relative to administrative simplification for MassHealth.

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

Chapter 118E of the General Laws is hereby amended by inserting after Section 12 the following new section:

Section 12A – Accreditation of Medicaid Managed Care Organizations

A managed care organization, that has contracted with the Commonwealth to provide managed care services to MassHealth enrollees, shall be deemed to be in compliance with the office of Medicaid’s standards if the managed care organization: (1) is accredited by a national accreditation organization; and (2) demonstrates compliance with, for the time period under which the plan is accredited and has obtained a score equal to or above 80% of the standard in effect at the time of the most recent review by the National Committee for Quality Assurance for the accreditation of managed care organizations in the categories of utilization management, quality management and improvement, and members’ rights and responsibilities; or a score equal to or above the rating of “accredited” in the categories of utilization management, network management, quality management and member protections for the most recent review of health plan standards by the Utilization Review Accreditation Commission. The office of Medicaid shall make efforts to ensure the rules are consistent with the deeming rules as established by the Division of Insurance. This provision shall take effect as of the latest date that MassHealth requires by contract that Managed Care Organizations be NCQA accredited. Nothing in this subsection shall be construed to require a managed care organization, as a condition of certification, to obtain accreditation by a national organization.