

HOUSE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Joyce A. Spiliotis

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.

PETITION OF:

NAME:

Joyce A. Spiliotis

DISTRICT/ADDRESS:

12th Essex

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. 870 OF 2007-2008.]

The Commonwealth of Massachusetts

In the Year Two Thousand and Nine

AN ACT RELATIVE TO ADMINISTRATIVE SIMPLIFICATION.

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 12 of Chapter 176O of the General Laws, as appearing in the 2006
2 Official Edition, is hereby amended by striking out subsections (b) and (c) and inserting in place
3 thereof the following subsections:—

4
5 (b) A carrier or utilization review organization shall make a determination regarding the medical
6 necessity of a proposed admission, procedure or service that requires a determination within two
7 working days of obtaining all necessary information. For purposes of this section, “necessary
8 information” shall include the results of any face-to-face clinical evaluation or second opinion
9 that may be required. In the case of a determination to approve an admission, procedure or
10 service, the carrier or utilization review organization shall notify 14 the provider rendering or
11 requesting the service within 24 hours. In the case of an adverse determination, the carrier or
12 utilization review 16 organization shall notify the provider rendering or requesting the service
13 within 24 hours, and shall provide written or electronic confirmation of the notification to the
14 insured and the provider within one working day thereafter.

15
16 (c) A carrier or utilization review organization shall make a concurrent review determination
17 within one working day of obtaining all necessary information. In the case of a determination to
18 approve an extended stay or additional services, the carrier or utilization review organization
19 shall notify the provider rendering or requesting the service within one working day.

20 In the case of an adverse determination, the carrier or utilization review organization shall notify the
21 provider rendering or requesting the service within 24 hours and shall provide written or electronic
22 notification to the insured and the provider within one working day thereafter. The service shall be
23 continued without liability to the insured until the insured has been notified of the determination.

24 SECTION 2. Subsection (a) of Section 6 of Chapter 176O of the General Laws, as so appearing in the
25 2006 Official Edition, is hereby amended by striking out clause (2) thereof.