Spotlight on State: Massachusetts

This is part of a <u>series of summaries</u> that highlight notable legislation and initiatives in health policy and reform of all 50 states. Check back on The Source as we roll out additional states each week.

See <u>Massachusetts</u> state page.

Massachusetts remains a leader on the healthcare cost containment, price transparency, and market regulation fronts. Massachusetts' <u>Health Policy Commission</u> (HPC), a unique and independent state agency, monitors healthcare spending growth in the state. Based upon the data it collects, the Commission recommends delivery and payment reform policies with the goal of improving healthcare and lowering costs.

The state is a staunch supporter of price transparency. The Massachusetts Center for Health Information and Analysis (CHIA) operates an active, comprehensive <u>all-payer claims</u> <u>database</u> with claims from public and private insurance payers in the state. Statute requires CHIA to maintain and annually update the online database that compares the quality and costs of several healthcare services, provides standardized quality measures, lists services available for persons with disabilities, and more. The state also requires health insurance carriers to notify consumers of any additional charges for out-of-network providers with a summary and description of the services provided. Finally, the state prohibits gag clauses that would limit the ability of health insurance carriers or providers from disclosing out-of-pocket costs to an insured.

Additionally, state law requires coverage parity for

telemedicine when given by an in-network provider who would be covered for in-person services. The law further requires a form of cost-sharing parity by prohibiting the costs that patients pay for telemedicine services from exceeding those applicable to in-person consultations.

Massachusetts has robust antitrust laws that protect consumers from anticompetitive practices in health care. Statutes prohibit health insurance carriers from using most-favored nation, guaranteed participation, non-compete, all-or-nothing, and anti-tiering provisions in contracts with health care providers. In merger review, the state requires notice prior to any merger or acquisition of hospitals or physician groups. Major antitrust cases in recent years demonstrate that the state practices strong antitrust enforcement, including the merger of Beth Israel Deaconess Medical Center-Lahey Health and multiple consolidation efforts involving Partners Healthcare.

Massachusetts operates a state-based health insurance exchange under the Affordable Care Act named <u>Health Connector</u>. The state unsuccessfully <u>applied</u> for a federal 1332 innovation waiver in 2017, which the Centers for Medicare and Medicaid Services <u>deemed incomplete</u>. Various pieces of legislation introduced in recent years have also called for a public option health insurance plan or a single payer system, but neither of these proposals have passed yet.

See below for an overview of existing Massachusetts state mandates. Click on citation tab for detailed information of specific statutes (click link to download statute text).