

PROPOSED REGULATION 114.6 CMR 13.00: Health Safety Net Eligible Services

The proposed regulation implements provisions of Chapter 58 of the Acts of 2006 which repealed the Uncompensated Care Pool and authorized establishment of the Health Safety Net Trust Fund. The Fund is established to pay hospitals and community health centers for services provided to the low income insured and underinsured and is administered by the Health Safety Net Office ("Office"). The proposed regulation specifies the Reimbursable Services to be paid by the Health Safety Net Office, which are consistent with the services covered by MassHealth Standard.

There are **three categories of Eligible Health Safety Net Services**: Services to Low Income Patients, Medical Hardship Services, and Bad Debt.

Health Safety Net – Primary: To encourage eligible individuals to enroll in insurance programs, only individuals with household incomes less than 200% of the federal poverty limits (FPL) who are ineligible for MassHealth or Commonwealth Care, or do not have access to affordable employer sponsored insurance (ESI) under the affordability standards of the Commonwealth Health Insurance Connector Authority will be eligible for Health Safety Net - Primary.

Health Safety Net – Secondary: Health Safety Net – Secondary is available for insured individuals with incomes less than 200% of FPL and will provide coverage for Reimbursable Services not covered by their primary insurer.

Partial Health Safety Net coverage: Individuals with household incomes between 201% - 400% FPL are eligible for partial Health Safety Net coverage, after meeting a deductible equal to 40% of income in excess of 200% FPL.

Cost-sharing requirements for low-income patients: The regulation establishes cost sharing requirements for Low Income Patients.

- Co-payments are set at \$5 for outpatient;
- \$50 for an emergency room visit (waived if admitted); \$50 for an inpatient admission,
- \$1 for a generic drug, and \$3 for a single source drug.
- There are no co-payments for individuals with family incomes from 0 to 100% of FPL; and no co-payments for individuals with family income between 100% and 400% of FPL for services provided by free standing Community Health Centers and hospitals exempt from the critical access provision, except for co-payments for prescription drugs.
- There will be a monthly deductible equal to \$35 per month for Health Safety Net Primary patients with incomes between 150-200% FPL. This will accrue monthly regardless of whether or not an individual receives services in a given month, for a maximum annual deductible of \$420.
- Children with family incomes below 200% FPL are exempt from all cost sharing – including co-pays and deductibles.

The proposal also establishes criteria for Medical Hardship for medical debt based on a defined percentage of income based on a sliding scale, without regard to assets.

The Office will pay providers for unpaid medical expenses in excess of the specified income percentages. The regulation also specifies the criteria for providers to submit claims for bad debt. Providers may not submit bad debt claims for individuals with insurance, and must submit information about the Provider's collection efforts. Community health centers may submit claims for urgent bad debt.

The Division is proposing this regulation to implement the requirements of Chapter 58, to ensure health care access to the low income uninsured, and to encourage maximum enrollment of uninsured individuals into public and private health insurance. Low Income Patients will be required to pay co-payments and incur deductibles for health services as a result of this regulation. There is no fiscal impact on cities and towns.

All persons who desire to be heard on this regulation are hereby notified to appear at the designated time and place. Persons who notify the Division in advance of the hearing, by 5:00 p.m., by August 21, 2007 of their intention to speak will be afforded an early opportunity to testify. All other interested parties will be heard subsequently. Copies of the proposed regulations are available for inspection and/or purchase at the Division, Two Boylston Street, Boston, MA 02116 and on the Division's website at www.mass.gov/dhcfp. Written comments may be sent to this address. Copies of the proposed regulation are also available in each county law library in the Commonwealth. A copy of this notice is being sent to the CMS Regional Office, in reference to 42 CFR, Part 447.

8/16/07 Community Partners has excerpted the information above from the Department of Health Care Finance and Policy Hearing Notice for this regulation at www.mass.gov/dhcfp. Click here for the [original Hearing Notice and links to current and proposed regulations](#).