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Bulletin HPC-2025-02: Guidance for Provider Organizations Relative to the Amended Revenue Threshold and the Expansion of the Provider Types Required to Register with the Massachusetts Registration of Provider Organizations (MA-RPO) Program (Pursuant to Chapter 343 of the Acts of 2024)

BULLETIN HPC-2025-02

Issued: 6/9/25

To: Provider Organizations required to register with the MA-RPO Program

From: David M. Seltz, Executive Director, Health Policy Commission (HPC)

Date: June 9, 2025

Re: Guidance for Provider Organizations Relative to the Amended Revenue Threshold and the Expansion of the Provider Types Required to Register with the Massachusetts Registration of Provider Organizations (MA-RPO) Program (Pursuant to Chapter 343 of the Acts of 2024)

[Chapter 343 of the Acts of 2024](#) (*An act enhancing the market review process*) was signed into law on January 8, 2025. As further described in this guidance, the law expanded the Health Policy Commission's (HPC) oversight of the health care market, including requiring the HPC to increase transparency and oversight of provider organizations. The law specifies additional information to be reported to the MA-RPO Program and expands the Net Patient Service Revenue (NPSR) registration threshold to include revenue from all payers, not just from carriers (i.e., commercial payers) and third-party administrators. Accordingly, when determining whether a Provider Organization meets the NPSR threshold to require registration, the MA-RPO Program will consider NPSR from all payers, effective for the 2025 MA-RPO filing.

In addition, to implement the new law, the HPC will require new provider types to register. Starting in 2025, subject to the Registration Thresholds below, provider organizations that establish contracts on behalf of specialty non-acute hospitals, chronic care hospitals, ambulatory surgery centers, urgent care centers, independent laboratories, and freestanding imaging clinics will be required to register with the MA-RPO Program.

Registration Threshold. Registration with the MA-RPO Program in 2025 is newly required for any of the above provider types that meets the following updated registration threshold:

A Provider Organization, including its corporate affiliates, that (a) collectively receives \$25,000,000 or more in annual NPSR from payers, or represents one or more Providers or

Provider Organizations that collectively receives \$25,000,000 or more in annual NPSR from payers; and (b) has a Patient Panel greater than 15,000 patients or represents one or more Providers or Provider Organizations that have a Patient Panel greater than 15,000 patients.

Changes to the MA-RPO Program’s Data Submission Manual (DSM) will be released in the coming weeks.

For the avoidance of doubt, except insofar as this guidance and the DSM addresses expanded requirements, 958 CMR 6.00 remains in effect.

The amended regulation will supersede the requirements of this guidance. Accordingly, the amended regulation may differ from this guidance.

Guidance

In addition to the requirements of 958 CMR 6.00, and pending adoption of an amended regulation, the following requirements will be in effect beginning with the 2025 MA-RPO filing, pursuant to M.G.L. c. 6D, § 11 and § 12 (as amended by Chapter 343 of the Acts of 2024).

1. 958 CMR 6.03 Applicability; 958 CMR 6.04 Requirement to Register; 958 CMR 6.05 Registration

- A. Removal of the commercial revenue limitation when determining applicability. Section 23 of the Chapter 343 of the Acts of 2024 amended the revenue threshold used to determine the applicability of the MA-RPO Program to a Provider Organization by striking the words “carriers and third-party administrators” and replacing them with the word “payers.”
- B. Additional Information. Section 1 of Chapter 6D defines the relevant terms as follows:

“Carrier” is defined as an insurer licensed or otherwise authorized to transact accident or health insurance under chapter 175; a nonprofit hospital service corporation organized under chapter 176A; a nonprofit medical service corporation organized under chapter 176B; a health maintenance organization organized under chapter 176G; and an organization entering into a preferred provider arrangement under chapter 176I; provided, that this shall not include an employer purchasing coverage or acting on behalf of its employees or the employees of 1 or more subsidiaries or affiliated corporations of the employer; provided that, unless otherwise noted, the term "carrier" shall not include any entity to the extent it offers a policy, certificate or contract that provides coverage solely for dental care services or visions care services.

“Patient Panel” is defined as the total number of individual patients seen over the course of the most recent complete 36-month period.

“Payer” is defined as any entity, other than an individual, that pays providers for the provision of health care services; provided, however, that “payer” shall include both governmental and private entities; and provided further, that “payer” shall include self-insured plans to the extent allowed under the Employee Retirement Income Security Act of 1974.

"Third party administrator" is defined as an entity that administers payments for health care services on behalf of a client in exchange for an administrative fee.

2. M.G.L. 6D, s. 11 and 12; Chapter 343 of the Acts of 2024

- A. Background. M.G.L. c. 6D, s. 11 & 12 require all provider organizations meeting the Registration Threshold to register. To streamline administration, the MA-RPO Program has phased in certain reporting requirements since the Program's inception, including the types of Provider Organizations meeting the Registration Threshold that are required to register. See 958 CMR 6.05. To implement the enhanced market oversight provisions of Chapter 343, the MA-RPO Program is requiring additional provider types to register, effective for the 2025 filing.

- B. Provider types required to register with the MA-RPO Program. Beginning with the 2025 MA-RPO filing, in addition to provider organizations that establish contract(s) on behalf of a physician group, Acute Hospital, rehabilitation hospital, long term care acute hospital, or behavioral health provider, and entities that are Risk Bearing Provider Organizations, the following provider types are required to register:
 - a. Specialty non-acute hospitals and chronic care hospitals
 - b. Ambulatory Surgery Centers
 - c. Urgent Care Centers
 - d. Independent Labs
 - e. Freestanding Imaging Clinics

Questions

The HPC encourages stakeholders with specific questions to contact the HPC. Please submit questions to HPC-RPO@mass.gov.