



March 20, 2026

Susan M. Flanagan-Cahill, Deputy General Counsel
Massachusetts Health Policy Commission
50 Milk Street, 8th Floor
Boston, MA 02109

Re: Mass Senior Care Association Comments on 958 CMR 6, Registration of Provider Organizations and 958 CMR 7, Notices of Material Change and Cost and Market Impact Reviews

Dear Deputy General Counsel Susan Flanagan-Cahill,

On behalf of the Massachusetts Senior Care Association (MSCA), representing approximately 350 long-term care facilities across the Commonwealth, we appreciate the opportunity to submit comments on the Massachusetts Health Policy Commission's (HPC's) proposed amendments to 958 CMR 6, Registration of Provider Organizations, and 958 CMR 7, Notices of Material Change and Cost and Market Impact Reviews.

The state's 348 nursing facilities provide a core government service to older adults and people with disabilities who can no longer be cared for safely at home, as determined by the regional Aging Service Access Points (ASAPs). Nursing facilities are the ultimate safety net. There is no alternative to the care that we provide to 33,000 vulnerable individuals, 70% of whom have their care paid for by MassHealth. Nursing facilities are highly regulated and are subject to extensive financial, operational, and ownership oversight by multiple state and federal agencies – including the Massachusetts Department of Public Health, the Executive Office of Health and Human Services, the Center for Health Information and Analysis (CHIA), the federal Centers for Medicare & Medicaid Services, and the Massachusetts Attorney General's Office.

We appreciate and laud HPC's efforts to implement the Market Review Law, Chapter 343 of the Acts of 2024, which expands oversight of health care transactions and ownership structures. MSCA supports the law's core objective of enhancing transparency. However, to avoid duplicative oversight and unnecessary regulatory burden on a highly regulated sector that serves some of the Commonwealth's most vulnerable residents, MSCA respectfully requests clarification that nursing facility provider organizations are not subject to registration under 958 CMR 6. Since the establishment of the HPC in 2012, nursing facilities have not been required to register as Providers or Provider Organizations, and this longstanding approach reflects sound



policy. Nursing facilities are already subject to comprehensive federal and state agency oversight through the collection of extensive financial, ownership, and operational information, including cost reports, audited financial statements, ownership and related-party disclosures, change-of-ownership filings, quality and staffing data, and compliance reporting. No nursing facility may operate without licensure approval issued by the Department of Public Health.

In addition, MassHealth and CHIA are implementing enhanced ownership transparency requirements, including a new Provider Ownership Disclosure Form as part of 2025 regulatory updates. Together, these measures significantly expand the Commonwealth's ability to review nursing facility ownership structures and financial arrangements. Imposing an additional HPC registration requirement would therefore duplicate existing reporting systems without generating materially new transparency, while diverting limited operational resources away from resident care and layering an additional compliance framework onto an already complex regulatory environment.

Nursing facilities also do not present the market-consolidation concerns that we believe HPC registration was designed to address. Unlike hospitals and large physician organizations, nursing facilities operate in a rate-regulated environment, generally do not negotiate commercial rates, and have experienced contraction rather than consolidation in recent years. Most facilities are small- or mid-sized operators serving local communities. Extending HPC's registration framework to licensed nursing facilities would not meaningfully advance the Commission's cost-growth oversight mission.

To preserve clarity and avoid unintended expansion of the registration requirement, MSCA respectfully proposes that HPC adopt regulatory language explicitly excluding licensed nursing facilities from the definition of "Provider Organization" for purposes of 958 CMR 6.

- Provider Organization. Any corporation, partnership, business trust, association or organized group of persons, and all corporate affiliates thereof, which is in the business of health care delivery or management, whether incorporated or not that represents one or more Health Care Providers in contracting with Payers for the payment of Health Care Services; provided that the definition shall include, but not be limited to, physician organization, physician-hospital organization, independent practice association, Provider network, accountable care organization, and any other organization that contracts with Payers for payment for Health Care Services; *provided, however, that "Provider Organization" shall not include any person or Entity that is primarily engaged in the ownership and operation of one or more long-term care facilities licensed under M.G.L. c. 111, §71.*



MSCA appreciates the Commission's efforts to implement the Market Review Law in a thoughtful and transparent manner and remains committed to working collaboratively with HPC and other stakeholders. We respectfully request that HPC clarify that licensed nursing facility provider organizations are not subject to registration under 958 CMR 6. This modest, technical clarification will avoid duplicative oversight and unnecessary regulatory burden on a highly regulated sector that serves some of the Commonwealth's most vulnerable residents.

Thank you for the opportunity to comment.

Sincerely,

A handwritten signature in black ink, appearing to read "Tara M. Gregorio", written in a cursive style.

Tara M. Gregorio
President