



# *The Commonwealth of Massachusetts*

HOUSE OF REPRESENTATIVES  
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House Ways and Means  
Environment, Natural Resources & Agriculture  
Children, Families and Persons with Disabilities  
Housing

Mr. David Seltz  
Executive Director  
Health Policy Commission  
50 Milk Street  
Boston, MA 02109

February 5, 2016

Dear Mr. Seltz:

Thank you for the opportunity to comment on the draft ACO Certification Standards. I appreciate your efforts and those of the Commission to support high quality, high value healthcare and consumer choice here in Massachusetts. With respect to the draft standards document, I offer the following:

**Criterion #4: Meaningful specialist participation**

I fully support this requirement to include a broad range of stakeholders in ACO governance structures. In particular, I was pleased to see addiction and mental health services specifically called out in this section. My constituents are consistently finding it difficult to access the mental health and addiction services they need and providing these specialties with a formal voice within organizational structures will help ensure adequate access to and integration of these essential services. In addition to the specialties already mentioned, I request that you consider adding specialty providers that are essential to wellness and prevention including physical therapists.

**Criterion #9: Cross continuum network**

I strongly support this provision which requires ACOs to assess the effectiveness of collaborative relationships and referrals to a number of providers, including specialists and behavioral health providers. Clear and concrete mechanisms to evaluate providers and referrals within ACO networks will ensure a breadth of high quality services is available to patients, including community based options.

**Criterion #10: Agreements with addiction specialists**

I fully support this requirement which recognizes that mental health and addiction services are essential to comprehensively meeting patients' needs. Over the past several years I have become

very aware of the lack of adequate services in these areas, and I applaud the HPC for proposing an ACO certification structure that supports compliance with mental health parity.

With respect to addiction services, I request that you consider requiring agreements and/or a policy with respect to referrals to out-of-state substance abuse treatment facilities. As you know, the number of treatment beds available in Massachusetts does not meet the current need. Out-of-state facilities that meet high quality standards may offer a solution for those who need immediate placement. In addition, for some addicts an out-of-state placement may result in a better health outcome, because it increases the separation between the patient and the influence of peer groups that may contribute to relapse.

**Criterion #24: Transparency in identification of preferred "in network" providers**

I strongly support this provision which requires more transparency in determining how in-network providers are selected. This provision to ensure fair, consistent criteria based on quality and value is essential to ensuring the highest quality patient care. I request that in addition to reviewing this information for certification purposes, the HPC considers making these criteria available to the public. The current practice, which does not require an open process, can provide an unnecessary roadblock to high quality providers that want to be part of an ACO system. This can result in the unfortunate outcome of decreased patient choice and access. When finalizing this criterion, please be aware that some ACOs are using 3<sup>rd</sup> party contractors to make decisions about preferred providers. Your final policy should clearly require that these organizations be subject to the same transparency requirements as the ACOs themselves.

The need for more transparency and clear rules around selection of in-network providers is not a challenge to Massachusetts alone, but has also been highlighted at the federal level where concerns with physician self-referral are being debated. In the Commonwealth we have the opportunity to increase transparency that will lead to maximum consumer convenience and choice, while also supporting the primary goal of healthcare reform - to provide the strongest incentives to high quality, high value patient care.

Thank you for your consideration and I welcome the chance to address any questions you may have.

Sincerely,

A handwritten signature in cursive script, reading "Carolyn Dykema".

Carolyn Dykema