

**From:** noreply@formstack.com  
**Sent:** Thursday, June 18, 2015 4:55 PM  
**To:** [REDACTED]  
**Subject:** Regulatory Review

**Categories:** Red Category



## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 06/18/15 4:55 PM

**Name (optional)::**

**Company/Organization (if applicable)  
(optional)::**

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::**

**CMR Number (If known): :** 801 CMR 52

**General Regulatory Themes::** State/Local Government Relations

**Please list the Agency or Agencies affiliated  
with this regulation::** Administration and Finance

**Describe the regulatory issue or  
observation::** 801 CMR 52 has requirment for all local government entities to  
submit health insurance data for each fiscal year

**Suggestions for easing regulatory  
compliance::** remove the annual reporting requirement

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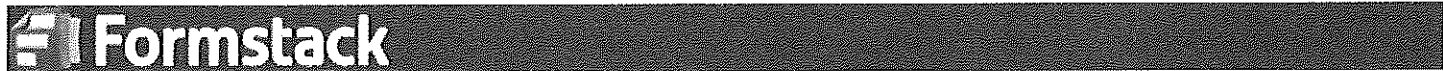
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**Subject:** Regulatory Review

**Categories:** Red Category



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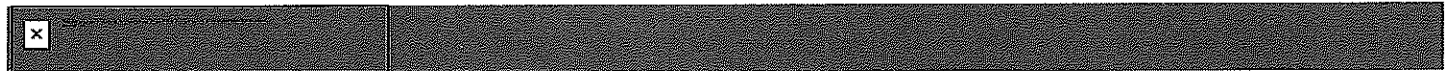
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<b>Name (optional)::</b>	
<b>Company/Organization (if applicable) (optional)::</b>	
<b>Address (optional)::</b>	
<b>Primary Phone (optional)::</b>	
<b>Email (optional)::</b>	
<b>CMR Number (If known): :</b>	801 CMR 52
<b>General Regulatory Themes::</b>	State/Local Government Relations
<b>Please list the Agency or Agencies affiliated with this regulation::</b>	Administration and Finance
<b>Describe the regulatory issue or observation::</b>	801 CMR 52 has requirment for all local government entities to submit health insurance data for each fiscal year
<b>Suggestions for easing regulatory compliance::</b>	remove the annual reporting requirement

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**From:** [REDACTED] <noreply+42faa7a77306fa96@formstack.com>  
**Sent:** Monday, July 13, 2015 3:16 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

**Categories:** Red Category



## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 07/13/15 3:14 PM

<b>Name (optional)::</b>	bill lytle
<b>Company/Organization (if applicable) (optional)::</b>	KEY Program
<b>Address (optional)::</b>	
<b>Primary Phone (optional)::</b>	[REDACTED]
<b>Email (optional)::</b>	[REDACTED]
<b>CMR Number (If known): :</b>	
<b>General Regulatory Themes::</b>	Children and Families
<b>Please list the Agency or Agencies affiliated with this regulation::</b>	Operational Services Division
<b>Describe the regulatory issue or observation::</b>	OSD's requirement of an annual filing of the Uniform Financial Report
<b>Suggestions for easing regulatory compliance::</b>	Put together a workgroup that includes EOHHS non-profits to make the report easier to complete

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**From:** noreply@formstack.com  
**Sent:** Sunday, July 26, 2015 11:16 AM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 07/26/15 11:15 AM

**Name (optional)::**

**Company/Organization (if applicable) (optional)::** Teddy Bear Day Care

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::**

**CMR Number (If known): :**

**General Regulatory Themes::** Doing Business in MA

**Please list the Agency or Agencies affiliated with this regulation::**

**Describe the regulatory issue or observation::**

My daughter owns rental property in MA. She actually rented the property to a child care center. When that center owner moved out of state, one of my daughter in laws planned to buy the bs and planned to continue to pay rent to my daughter at the same rate as the prior tenant. She quickly learned however that because she was doing bs with the state, she could not pay her the same rent as the prior tenant. Needless to say, she did not buy the business because the cost of rent would impact her 5% allowed profit. She would have needed to buy it and re-locate to a property owned by someone unrelated, paid to renovate the space at her expense and could then pay that person the same rent. How does this make sense??

**Suggestions for easing regulatory compliance::**

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**From:** noreply@formstack.com  
**Sent:** Saturday, July 25, 2015 2:20 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 07/25/15 2:20 PM

**Name (optional)::**

**Company/Organization (if applicable) (optional)::**

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::**

**CMR Number (If known): :**

**General Regulatory Themes::** Other

**Please list the Agency or Agencies affiliated with this regulation::** Operational Services Division

**Describe the regulatory issue or observation::**

808 CMR 1.05 (8) Related Party Transaction Costs. Costs which are associated with a Related Party transaction are reimbursable only to the extent that the costs do not exceed the lower of either the market price or the Related Party's actual costs. Notwithstanding the above provision, Related Party transaction costs are reimbursable up to market price when the following conditions are satisfied:

- (a) the transaction is for a good or service which the Related Party sells to the general public;
  - (b) the Related Party's transactions with the Contractor in the reporting year comprise less than 10% of the Related Party's annual sales of that good or service to the general public (excluding sales to other parties also related to the Related Party under FASB 57); and
  - (c) the Contractor has approved the transaction by vote of independent directors, or a committee of independent directors, following full disclosure of the Related Party's interests.
- Further, costs associated with a Related Party transaction which would not be Reimbursable Operating Costs to a Contractor under 808 CMR 1.02 and 808 CMR 1.05 are non-reimbursable. Transactions with a Related Party totaling less than \$100 annually may be reimbursed at market prices.

**Suggestions for easing regulatory compliance::**

When I first began doing business 35 years ago, related party costs were reimbursable if they were at fair market value. Currently, if a business owner

owns a building and the building is completely paid, then that owner cannot charge rent. I am in a field where the STATE determines the rate for services and I provide the service at the state's rate, yet according to the above regulation I cannot charge rent. The rent is NOT an additional charge over and above the state rate. I think that related party costs should be reimbursable at a fair market rate, which was the case when I first began doing business in the state. This is especially so because the state determines the rate and reimburses all vendors at the same rate for the same service.

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**Sent:** Sunday, July 26, 2015 11:03 AM  
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**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 07/26/15 11:03 AM

**Name (optional)::**

**Company/Organization (if applicable) (optional)::**

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::**

**CMR Number (If known): :** related party issues

**General Regulatory Themes::** Doing Business in MA

**Please list the Agency or Agencies affiliated with this regulation::**

**Describe the regulatory issue or observation::**

Related party regulation--lower of cost or market. I am a child care provider who owns my properties. When I initially began my business every dollar which was a profit went to pay off the mortgage so when I got old enough to retire I would not still have loans. When I began doing business with the state my accountant and I met with Kent Barkhouse to discuss the proper way to report. I was allowed to charge fair mkt value for rent on my properties as long as an independent appraiser went in every two years to assess. Several years ago I was told that rule no longer applied and I could only charge lower of cost or mkt. Because my 5% profit had always gone toward my loans my properties were paid sooner rather than later. If you owned my bs I could pay you rent but I was not allowed to pay myself rent for anything above cost. Furthermore, initially the states money was used for the states children and any costs associated with doing business with the state. When Kent Barkhouse left, any money coming into my bs even that from private paying customers began being regulated by the state. The paperwork involved in doing bs with the state had been used in part to pay the salaries of the people who were doing only state paperwork. It was changed so that even our private parents must pay a portion of the voucher and contract employees salaries. Because we are a for profit bs, we do not get donations to supplement income. Income is solely from private families and subsidized families. If I didn't love my job I would have sold my businesses to an outside party and just rented the property to them which would have given me more income and less stress. However, I do believe my company makes a

difference in the lives of the families we serve and therefore I have kept my business in spite of the hoops we have had to jump thru for the state. I have reached retirement age but this regulation should really be reviewed. It encourages people to be inefficient. If I had not paid off my properties early I could have continued the mortgage and let the state pay the reimbursable interest on the loan. I could have spent my profit on frivolous things and let the state support me in my old age. I wasn't brought up that way and have not brought up my own children that way. The law states as a business owner I have the right to make a reasonable profit. It should also apply if I am doing business with the state. My choice to do bs with the state lies only in my choice to help as many children as I can to grow up learning to be self confident, hard working and self sufficient and not have to rely on the state to support them.

**Suggestions for easing  
regulatory compliance::**

related parties should be able to collect a fair rate for their services. It shouldn't be dictated by lower of cost or mkt which completely eliminates any type of profit once costs are paid.

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**Sent:** Tuesday, August 25, 2015 11:31 AM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

**Formstack Submission for form A Clearer Code: Regulatory Reform**

Submitted at 08/25/15 11:31 AM

**Name (optional)::** Patricia Gentile

**Company/Organization (if applicable) (optional)::** North Shore Community College

**Address (optional)::** [REDACTED]  
[REDACTED]  
[REDACTED]

**Primary Phone (optional)::** [REDACTED]

**Email (optional)::** [REDACTED]

**CMR Number (If known): :**

**General Regulatory Themes::** Other

**Please list the Agency or Agencies affiliated with this regulation::** Massachusetts Life Science Center  
Administration and Finance Department

**Describe the regulatory issue or observation::**

The "reimbursement" grant regulatory environment is detrimental to grant awardees in that it requires the awardee to expend the awarded amount on the proposed activities/equipment and then wait for the awardee's entire purchasing process to occur (purchase, receive, pay, get cancelled checks) and then submit quarterly reports BEFORE the Commonwealth will reimburse the awardee for the expenditures. This incurs 5-6 month time delays for reimbursement of expenditures already approved by the state in the grant process. The upshot is a big hit on cash management for the agency/organization that was awarded the grant and, due to state process problems, a much longer than agreed upon time for reimbursement (award says 45 day, in actual process about 5 to 6 months). Whether an organization is big or small, it is a major negative impact to enter into a reimbursement grant opportunity with the state. In our instance, we have a NS MLS Consortium grant with \$500,000 for our partnership equipment that has been expended - it's a tough road to float the Commonwealth's extremely slow repayment. Another partner is a very small organization that has had to postpone payments to vendors, take out cash flow loans, and pay back the cost of interest in order to float the reimbursement process.

**Suggestions for easing regulatory compliance::**

Model the grant payment process on the federal grant system that allows a percentage up front and a draw down (electronic) on a monthly basis. Stop the practice of waiting until a quarterly report is in to process the reimbursements.

The end result will be a more competitive environment where more agencies and organizations would be willing to enter into a grant agreement with the Commonwealth.

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**From:** [REDACTED] <noreply+77ffffddcc9eb8aa@formstack.com>  
**Sent:** Tuesday, September 01, 2015 4:34 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 09/01/15 4:33 PM

**Name (optional)::** Michael Weekes

**Company/Organization (if applicable) (optional)::** Providers' Council

**Address (optional)::** [REDACTED]

**Primary Phone (optional)::** [REDACTED]

**Email (optional)::** [REDACTED]

**CMR Number (If known): :** 815 CMR 3.00

**General Regulatory Themes::** Other

**Please list the Agency or Agencies affiliated with this regulation::** The agencies affiliated with this regulation include the Executive Office of Health and Human Services.

**Describe the regulatory issue or observation::** As noted above, Ready Payments are codified in state finance law (815 CMR 3.00).

At the Executive Office of Health and Human Services, a prior administration had strongly encouraged its agencies to eliminate the practice of Ready Payments. The state never reached out to the Providers' Council or our community-based human services providers to discuss how this change would affect the sector or the most vulnerable residents to whom we provide services. It is our express wish that Ready Payments remain codified in the Code of Massachusetts Regulations and that the Executive Office of Health and Human Services reminds its state agencies that they can and should use Ready Payments to ensure human services organizations are receiving appropriate and timely funding.

Ready Payments are critical for this sector. As EOHHS itself noted in its 2007 study on the sector's financial health:

1. One-third of providers have over 45 days of unpaid receivables;
2. Sixty percent of providers have less than one month cash on hand at year end; and
3. Almost half of providers do not generate sufficient cash to pay for

operations.

Ready Payments, in many cases, have provided financial solvency so organizations can continue to provide essential services without disruptions. We do not know of any compelling reason for the state to not pay legitimate expenses on time and, therefore, we are concerned about these developments that recently took place at EOHHS.

In fact, a number of agencies approached Ready Payments in different ways at the end of last year.

1. The Department of Developmental Services continued Ready Payments in FY '15, but the Department of Mental Health decided to drop them.
2. The Department of Youth Services had long, protracted discussions with our members about Ready Payments until the agency finally agreed to retain them.
3. It is unclear about the status of Ready Payments at other agencies.

We surveyed our statewide membership at the end of 2014 to determine the level of importance for Ready Payments to the human services sector. More than 80 percent of providers we surveyed said the elimination of Ready Payments would have an adverse fiscal impact on their organization. At least half of providers stated they would need to extend their line of credit to meet payroll if the state eliminates Ready Payments.

The discrepancies in the ways agencies within EOHHS use Ready Payments and the directive from a prior administration to eliminate Ready Payments is extremely concerning to the Providers' Council and our members. If Ready Payments were eliminated, some large providers may be able to eventually recover and survive, though their costs of credit, reimbursed with additional state funds, would likely increase. Additionally, removing this payment system would destabilize midsize and smaller providers that are also providing high-quality services to our Commonwealth's most vulnerable residents. At worst, programs may not be able to meet payroll obligations and could be forced to lay off staff or close, thereby forcing clients and consumers to confront service disruptions.

**Suggestions for easing  
regulatory compliance::**

The Providers' Council and our members would like EOHHS and the Executive Office of Administration and Finance to protect the regulations at 815 CMR 3.00 that codify Ready Payments in the state code. They are necessary for the community-based human services sector, and we hope EOHHS and EOAF will ensure Ready Payments remain mandated in regulation. The fact of the matter is that Ready Payment is essentially timely payments that help organization's cash flow and reduce their state reimbursed expense of interest payment should loans be necessary. Providers and the state should both appreciate that funding does not have to be redirected from client and consumer services to unnecessary administrative costs.

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**Sent:** Tuesday, September 01, 2015 4:33 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 09/01/15 4:32 PM

**Name (optional)::** Michael Weekes

**Company/Organization (if applicable) (optional)::** Providers' Council

**Address (optional)::** [REDACTED]  
[REDACTED]  
[REDACTED]

**Primary Phone (optional)::** [REDACTED]

**Email (optional)::** [REDACTED]

**CMR Number (If known): :** 808 CMR 1.03 (7)

**General Regulatory Themes::** Doing Business in MA

**Please list the Agency or Agencies affiliated with this regulation::** The agencies affiliated with this regulation include the Executive Office of Health and Human Services.

**Describe the regulatory issue or observation::**

The Not-for-Profit Contractor Surplus Revenue Retention provision of 808 CMR 1.03, says, in part, the following:

"If, through cost savings initiatives implemented consistent with programmatic and contractual obligations, a non-profit Contractor accrues an annual net surplus from the revenues and expenses associated with services provided to Departments which are subject to 808 CMR 1.00, the Contractor may retain, for future use, a portion of that surplus not to exceed 5% of said revenues. The cumulative amount of a Contractor's surplus may not exceed 20% of the prior year's revenues from Departments."

The Providers' Council and our members feel this regulation, which was put into place by the state nearly 20 years ago, is outdated and unnecessary. We are unsure why the state has maintained this provision for so long.

Due in part to just the simple passage of time, this cumulative limit of a 20 percent "lifetime" cap has become a major problem for providers. While the state has a 5 percent annual cap – ensuring no provider would have more than a 5 percent surplus in any one year – a provider who averaged even a modest 1 percent surplus per year from when the state issued this regulation has now reached its cap. We challenge the rationale for this cap. Why is our

sector the only major vendor in the state with an annual regulatory cap of 5 percent? We would argue that as long as any savings are directed toward state-supported activities in Massachusetts and not for outside matters, then the cap should be lifted. In addition, we believe the ostensibly lifetime 20 percent cap on Surplus Revenue Retention is counterproductive.

Existing language already brings the 20 percent cap into conflict with ordinary experiences. The regulation states that the "...cumulative amount of a Contractor's surplus may not exceed 20% of the prior year's revenues from Departments." We work in a field where, through no fault of a provider, revenue shifts from year-to-year and funding can decrease as a result of a state agency's funding level, a change in program models and/or switching funding to a non-purchase-of-service source, such as MassHealth. Essentially, if the base number has a unforeseen, radical change, it could adversely affect the calculation.

Both the 5 percent and 20 percent cap are actually harmful to the Commonwealth. The caps:

- Reduce an incentive for providers to exercise cost-savings initiatives;
- Jeopardize the availability for providers to have cash on hand to meet needs for major items;
- Hamper the ability of human services providers to borrow funds and maintain compliance with lending covenants;
- Penalize long-term providers that have had consistent, strong management; and
- Treat for-profit firms more favorably than nonprofit providers that, in many cases, may be doing similar work.

We recognize that the Operational Services Division may want to maintain the 5 percent cap on annual surplus revenue retention, but the state should examine eliminating both caps – or at the very least, the 20 percent cap.

Simply put, providers who do not earn any reserve over time become less viable. Those who do realize a modest surplus over expenses are able to increase their financial health and operate more responsibly with a small cushion. We want providers to have the right incentives for managing their revenues and expenses as effectively as possible. When providers who have only retained 1 percent per year are now bumping up against the 20 percent cap, it is certainly time to remove the outdated regulation. Furthermore, we know from the state's 2007 "Financial Health of Providers in the Massachusetts Human Service System" nearly 60 percent of providers have cumulative deficits on their Commonwealth activities and almost one-third of providers experience organization-wide deficits each year.

#### **Suggestions for easing regulatory compliance::**

The Providers' Council urges the Executive Office of Health and Human Services, the Executive Office of Administration & Finance and the Operational Services Division to eliminate the 5 percent and 20 percent cap provision present in 808 CMR 1.03 (7). This provision has a net negative impact on the Commonwealth and the most vulnerable residents from whom we have been asked to care and it should be eliminated to create a stronger human services system.

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x

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 09/01/15 4:30 PM

**Name (optional)::** Michael Weekes

**Company/Organization (if applicable) (optional)::** Providers' Council

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::**

**CMR Number (If known): :** 808 CMR 1.00

**General Regulatory Themes::** Other

**Please list the Agency or Agencies affiliated with this regulation::** The agencies affiliated with this regulation include the Executive Office of Health and Human Services.

**Describe the regulatory issue or observation::**

The Uniform Financial Statements and Independent Auditor's Report (UFR) is a uniform reporting system, established by the Division of Purchased Services (DPS), consisting of basic financial statements prepared and audited in accordance with generally accepted accounting principles (GAAP) and generally accepted government auditing standards (GAGAS), supplemental schedules and other information as deemed necessary.

Our members repeatedly question the purpose of the UFR and whether the document needs to be adjusted. Some funding agencies have historically used it as a planning document to set rates, but it fails to capture the true market costs.

For example, some of our members employ human services social workers, and they compete in a market with the state (the largest employer of social workers) and the health care community (including hospitals) to recruit and retain these employees. Yet the experiences of neither the state nor hospitals are taken into account when setting benchmark salaries for human services social workers.

The UFR, therefore, helps state agencies set rates but does so with some rates that have been depressed for more than 20 years and fail to provide for competitive wages that would attract the "best and brightest" to our provider

community. Setting rates is not the intended purpose of the UFR; if it is used for this purpose, it is likely harmful to the human service sector.

The UFR is, at best, an auditing tool to determine what was spent. Yet even then, providers must pay large fees to obtain certified financial audits that determine what was spent and if it was spent in accordance with GAAP. Additionally, provider auditors check expenditures against 808 CMR 1.00, which is also done by the Operational Services Division when they conduct their own UFR reviews. We truly feel the usefulness of the UFR as a planning document is nebulous, and as an auditing tool, too expensive and unnecessary.

The Providers' Council and our members have long worked with state government to make updates and improvements to the UFR. There still is, however, much work to be done to improve this complicated, burdensome and outdated document. There are several ways the state could simplify the UFR, making it easier for providers to understand and complete while also making it more useful for the state.

For example, one positive change recommended by providers for FY '15 was a one-time waiver that allowed them to report all programs with the same Massachusetts Management Accounting and Reporting System (MMARS) code together. By consolidating the MMARS code into one, providers were allowed to consolidate all expenses for the entire code into one program for FY '15. Some organizations that had 20 programs with the same MMARS code previously had to report each program's expenses separately; the waiver meant they could now report all the expenses at once through the same code. This is simply one small change that would make a big difference to providers if the state adopted this on a permanent basis rather than as a waiver.

Another example of how the document is outdated involves the section of the UFR that compares budgets to actual costs is superfluous; this section should be eliminated. The majority of human services programs are now priced under Chapter 257, and the state is complying to update the remaining services. Providers, therefore, do not have budgets that they themselves have negotiated. The UFR now, in many ways, no longer applies to the way providers do business in the current funding environment.

The UFR could also be improved if this massive document was sent to organizations annually with pre-populated information. It is the exception for organizations' names, program names, codes, locations or other information change. We would encourage the state to pre-populate this information in the future. Not only would pre-populating this information reduce the reporting burden, but it would also reduce the possibility of clerical errors being added with repeated data entry.

#### **Suggestions for easing regulatory compliance::**

The Providers' Council and representatives of our Business Practices Committee seek an audience with EOHHS and the Executive Office of Administration & Finance – specifically the Operational Services Division – to discuss the ways the Uniform Financial Statements and Independent Auditor's Report can be made more user friendly and useful for both providers and the state.

At one point, the state had a workgroup examining changes to the UFR, and we were advised by EOHHS that the state is seriously considering changes to the document. The Council and our members hope to either join those conversations that are already happening with a group examining the UFR or



begin a discussion with EOHHS and OSD about how the document can be improved and updated to reflect the current business environment in which providers are working.

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**From:** [REDACTED] <noreply+5c43c12dd87b6592@formstack.com>  
**Sent:** Monday, September 28, 2015 10:56 AM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

**Formstack Submission for form A Clearer Code: Regulatory Reform**

*Submitted at 09/28/15 10:56 AM*

**Name (optional)::** James Major

**Company/Organization (if applicable) (optional)::** Massachusetts Association of 766 Approved Private Schools (maaps)

**Address (optional)::** [REDACTED]  
[REDACTED]  
[REDACTED]

**Primary Phone (optional)::** [REDACTED]

**Email (optional)::** [REDACTED]

**CMR Number (If known): :** 808 CMR 1.00-The Uniform Financial Statements and Independent Auditor's Report (UFR)

**General Regulatory Themes::** Building Codes/Accessibility Standards

**Please list the Agency or Agencies affiliated with this regulation::** Operational Services Division (OSD).  
Executive Office of Health and Human Services (EOHHS)  
Department of Elementary and Secondary Education

**Describe the regulatory issue or observation::** The UFR is a reporting system consisting of financial statements audited in accordance with generally accepted accounting principles (GAAP) and generally accepted government auditing standards (GAGAS). In addition providers are required to prepare and submit with its UFR filing a Supplemental Schedule B (Schedule B) for each program it operates. Programs are often funded by a combination of funding sources and each Commonwealth of Massachusetts Purchase of Service (POS) funding source is assigned a Massachusetts Management Accounting and Reporting System (MMARS) code. The MMARS code is identified in the POS contract the provider has with the related Commonwealth of Massachusetts agency. Until recently providers were allowed to report one Schedule B for each of its programs. A program is generally defined as the integrated and coordinated delivery of a mix of services and resources that achieved a common objective. However, the EOHHS has recently set forth a list MMARS codes, in OSD's UFR Audit & Preparation Manual, that are related to contracts that are rate regulated under MGL Chapter 257 for which a separate Schedule B must be prepared and submitted with the UFR. This often results in revenue and expenses related to the same program being reported as separate programs. EOHHS has not set forth a minimum threshold for reporting in this manner which has resulted in additional costs and a significantly increased

administrative burden for providers to allocate revenue and expenses related to the same program between separate Schedule Bs on the UFR (which would not be allocated in this manner internally as the revenue and expenses are considered part of the same program).

An example of the increased reporting requirement is code 3168, which was previously used for day services, was split into codes 3163, 3181, 3196, and 3168; creating 3 more programs which must be reported.

Another example is foster care (DCF), foster care (DYS) and adoption which could previously be reported together under codes FNFO (which was replaced by FNIF in FY '15), 2509 AMSS now have to be separated under 3 different programs.

**Suggestions for  
improvements to the  
regulation::**

Adopt a "de minimis" rule as part of the UFR Audit and Preparation Manual allowing the revenue and expenses under MMARS codes with revenue of \$100,000 or less for the reporting period to be combined with the revenue and expenses of programs containing similar or related services. Establishing the \$100,000 in this manner would provide for a reasonable reporting standard.

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**Sent:** Wednesday, October 07, 2015 5:22 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

**Formstack Submission for form A Clearer Code: Regulatory Reform**

Submitted at 10/07/15 5:21 PM

**Name (optional)::** mary di angelis

**Company/Organization (if applicable) (optional)::**

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::** [REDACTED]

**CMR Number (If known): :**

**General Regulatory Themes::** Other

**Please list the Agency or Agencies affiliated with this regulation::**

**Describe the regulatory issue or observation::** Do feel that since this Executive Order was put into place in March only receiving notice of these hearing sessions a week prior is really not enough notice to get a good representation of the areas of concern from citizens of Massachusetts.  
Was like we have to give notice, let's give as little as is possible to fulfill the requirement but not get the turnout.

**Suggestions for improvements to the regulation::** Public notification of ample time.

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**From:** noreply@formstack.com  
**Sent:** Friday, October 16, 2015 12:31 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

**Categories:** Red Category

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 10/16/15 12:30 PM

**Name (optional)::** Tom Ennis

**Company/Organization (if applicable) (optional)::**

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::**

**CMR Number (If known): :** Executive Order #562

**General Regulatory Themes::** Other

**Please list the Agency or Agencies affiliated with this regulation::** Unknown

**Describe the regulatory issue or observation::**

Who is conducting this review.  
Regulations provide protections. Any changes need to be justified.  
Regulations were put in place over many years and after a thorough review process.  
Eliminating them now by sweeping executive order is a disservice to the public.  
It sounds like the purpose of the review is to try to give business a free rein to run roughshod over public welfare.

**Suggestions for improvements to the regulation::**

A year is much too short for any comprehensive review. The review process that put all the regulations in place took many years.

After all this, the governor is proposing a sweeping elimination by executive order?

Anyone proposing any changes to the regulations should have to go through normal channels to the appropriate regulatory body that initiated the regulation.

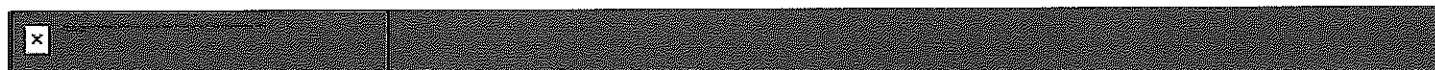
Changes to stiffen protections should be part of the process.

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**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

**Follow Up Flag:** Follow up  
**Flag Status:** Completed

**Categories:** Red Category



## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 10/14/15 7:14 PM

**Name (optional)::** Dan Conlon

**Company/Organization (if applicable) (optional)::** Warm Colors Apiary

**Address (optional)::** [REDACTED]  
South Deerfield, MA 01301

**Primary Phone (optional)::** [REDACTED]

**Email (optional)::** [REDACTED]

**CMR Number (If known): :** 562

**General Regulatory Themes::** Building Codes/Accessibility Standards

**Please list the Agency or Agencies affiliated with this regulation::** Governor's Office - Mandate #562

**Describe the regulatory issue or observation::**

**Suggestions for improvements to the regulation::**

To: Commissioner LeBlanc,

The following comments are in response to Governor Baker's Executive Order 562. I commend the Governor for this decision and agree that all of us struggle with restrictive & out of date regulations. Regulations should be reviewed annually and implemented for the good of those impacted, and the protection of Massachusetts citizens.

I strongly urge all apiary regulations be reviewed before any "sunset" rule is applied. The March 31st deadline does not allow for any discussion with those most impacted by the current regulations. I recommend that the Ag Commissioner establish a workgroup to review and make recommendations to MDAR regarding apiary regulations. The language, and many current regulations need to be changed and it will be best if all stakeholders are

included in the discussion.

## 8.02 Disease

Add – Apiary Inspectors will collect samples to determine pesticide kills of honeybees.

To allow Inspectors to collect samples when pesticides are suspected as the reason for bee kills. Inspectors will receive training to collect samples and act to protect honeybees from off label application and use of insecticides.

Inspectors are not allowed to collect samples when insecticides are thought to be the reason for honeybee kills. Inspectors are the first contact and could collect fresh samples when asked to investigate a possible insecticide kill. The reason they not authorized is a lack of training in the collection of samples. The on-going argument regarding pesticides cannot be resolved when no one has proof, either way, as to the number of bee kills actually caused by pesticide use. It is time we trusted our inspectors and require them to assist in the verification of pesticide complaints by beekeepers.

## 8.06 Interstate Permits

Add – State Inspectors will establish a list of approved apiaries to sell Queens and bees. This will include Massachusetts Apiaries and out of state suppliers of honeybees. Approved suppliers of honeybees will be made available to all state beekeepers.

- Application to sell bees should include an inspection and review of customer policies.
- An application fee to cover the cost of inspection should accompany application.
- Approval to sell bees should start in January and require renewal in December.

In recent years Massachusetts has become a dumping ground for unhealthy bees and Mass beekeepers are being cheated. It is thought that Inspectors approve out of state apiaries, but little is actually done until after the bees have been distributed. I would like to see a proactive approval that lists Apiaries (in and out of Mass) working with inspectors to provide the best available honeybees. This is common in many states and benefits beekeepers and those reputable bee suppliers selling bees.

Remove – all references to registering hives. This has not been done ever by MDAR, and before it is implemented a review needs to take place with state beekeepers, town officials, and MDAR. There is good reason to register if no spray zones are the result, but this is unlikely to work in towns with high concentrations of hives. There are tax and fee concerns that discourage beekeepers from supporting a hive registration requirement.

## 8.04 Inspection, Marketing and Introduction of Colonies

Add – Exemptions to the removable frame hive (a violation) will include Waring hives, Top Bar hives, experimental and historical hives will be subject to approval by the Apiary Inspector. Otherwise they are in violation of the requirement that hives have removable frames that allow inspection.

Dan Conlon  
Warm Colors Apiary

**From:** [REDACTED] <noreply+a0a89bdbc109287d@formstack.com>  
**Sent:** Friday, June 19, 2015 10:29 AM  
**To:** [REDACTED]  
**Subject:** Regulatory Review  
**Categories:** Red Category



## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 06/19/15 10:28 AM

**Name (optional)::** Michael Gallagher

**Company/Organization (if applicable) (optional)::**

**Address (optional)::**

**Primary Phone (optional)::** [REDACTED]

**Email (optional)::** [REDACTED]

**CMR Number (If known): :**

**General Regulatory Themes::** Building Codes/Accessibility Standards

**Please list the Agency or Agencies affiliated with this regulation::** JLMC  
HRD

**Describe the regulatory issue or observation::**

Civil Service and JLMC have outlived their usefulness.

The binding arbitration process currently in place for public safety is onerous to municipalities and the taxpayers. Arbitrators continue to burden already stressed budgets with unrealistic decisions.

IOD for public safety also adds undue stress and eliminates any incentive for the employee to return to duty. With the current salaries paid to police and the 24 hour shift worked by most firefighters, there is no longer an incentive to return to work. Police officers are often the highest paid employees in any municipality and working a 24 hour shift eight days each month firefighting has become a second profession with great benefits to most firefighters.

Proposed change to Chapter 41, Section 101A currently in the Joint Committee for Public Service is an example of additional burdens that are continuously placed on municipalities and the taxpayer and will take any teeth, that might exist, out of law. The caveat was placed in the law for a reason and to undo this now would be a slap in the face to the taxpayers of the Commonwealth. There have been only a handful, if that many, terminations using this option in the law, so there is no need to change it now. With all the information currently available, any member of a public safety



force should know the risks of smoking, which can lead to circulatory, respiratory and cardiac issues, which are all presumptions under the current law.

**Suggestions for easing  
regulatory compliance::**

It is time to eliminate the JLMC and binding arbitration. There is no longer a need for such and onerous process to be in place. Municipalities must be allowed to govern themselves and work with their collective bargaining units without interference from the state.

Massachusetts and Rhode Island are the only two states that continue to allow for 100% compensation for public safety personnel injured on duty. It is time to eliminate this outrageous benefit and move all public safety to Workers Comp like any other municipal employee.

Do not sign into law any changes to Chapter 41, Section 101A that adds further burden on municipalities and retirement systems. The only teeth currently in the law is the ability for municipalities to terminate employees who add to the risks of the professions by smoking.

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**From:** [REDACTED] <noreply+8f05eb8ddb63307f@formstack.com>  
**Sent:** Wednesday, December 02, 2015 1:57 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 12/02/15 1:57 PM

**Name (optional)::** Carl McKinney

**Company/Organization (if applicable) (optional)::** Town of Clarksburg

**Address (optional)::** [REDACTED]

**Primary Phone (optional)::** [REDACTED]

**Email (optional)::** [REDACTED]

**CMR Number (If known): :** MGL CH58 ss 13-17 and Ch59 ss 5G

**General Regulatory Themes::** Tax and Revenue

**Please list the Agency or Agencies affiliated with this regulation::** Department of Revenue Division of Local Services

**Describe the regulatory issue or observation::** The process to request a "State Owned Land Revision Request" is so cumbersome, and nearly impossible to complete, without access to the years prior commitment (tax) before the Commonwealth acquired said properties. The Commonwealth owns 53% of my Town, and I feel a comprehensive review along with clear and accurate accounting of State Owned land in a community should not be so difficult to determine. By making it so hard, Cities and Towns, realistically cannot contest the valuations (and hence the PILOT Payments) made for State Owned Land. Some of these parcels have been in the States' ownership for in excess of 50 years. How could one possibly obtain the prior years tax commitment from 50 years ago? Thus this avenue for redress is basically a facade which on the surface appears to allow for redress when in effect that is impossible.

**Suggestions for improvements to the regulation::**

Require the DCR and DOR to compile and certify actual ownership of each parcel owned in each time. Provide said data to the hosting municipality, and allow Cities and Towns a streamlined process to obtain a detailed accounting of State Owned Land parcel, the associated valuations and reasoning behind the distribution of PILOT payments.

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**Sent:** Thursday, December 03, 2015 1:31 PM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 12/03/15 1:30 PM

<b>Name (optional)::</b>	Nancy Holt
<b>Company/Organization (if applicable) (optional)::</b>	Town of Scituate
<b>Address (optional)::</b>	[REDACTED] [REDACTED] [REDACTED]
<b>Primary Phone (optional)::</b>	[REDACTED]
<b>Email (optional)::</b>	[REDACTED]
<b>CMR Number (If known): :</b>	
<b>General Regulatory Themes::</b>	State/Local Government Relations
<b>Please list the Agency or Agencies affiliated with this regulation::</b>	Massachusetts Board of Library Commissioners
<b>Describe the regulatory issue or observation::</b>	Annually, municipalities must certify to the Massachusetts Board of Library Commissioners that they have met their Municipal Appropriation Requirement (MAR) in order to qualify for state aid to public libraries. Should a municipality fail to meet the MAR, it may file for a waiver with the MBLC which entails the submission letters from various officials and certification as to the municipal budget for two fiscal years for all functions by category. This requirement becomes problematic for municipalities that are undergoing major renovations to a library building as they may reduce a municipal library budget for a fiscal year if the renovation has required a move to a smaller space requiring less utility costs, less supplies and a reduction in material purchases due to lack of temporary storage.
<b>Suggestions for improvements to the regulation::</b>	To provide automatic waivers to those municipalities that fail to meet the Municipal Appropriation Requirement (MAR) in a given fiscal year if that municipality is currently receiving drawdowns from a Public Library Construction grant administered through the MBLC.

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**Sent:** Friday, October 16, 2015 7:32 AM  
**To:** RegReform (ANF)  
**Subject:** A Clearer Code: Regulatory Reform

## Formstack Submission for form A Clearer Code: Regulatory Reform

Submitted at 10/16/15 7:31 AM

**Name (optional)::** Nigel Costoloe

**Company/Organization (if applicable) (optional)::** Catchlight, Inc

**Address (optional)::**

**Primary Phone (optional)::**

**Email (optional)::**

**CMR Number (If known): :**

**General Regulatory Themes::** Building Codes/Accessibility Standards

**Please list the Agency or Agencies affiliated with this regulation::** DLS

**Describe the regulatory issue or observation::** RRP regulations

**Suggestions for improvements to the regulation::** Here's our only feedback; the 3 month expiration of the RRP certificate is onerous; if we are working for the same homeowner on the same property in one calendar year, on multiple separate projects, the cert should be viable for 12 months.

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