

July 24, 2025

Katherine Scarborough Mills
Senior Director, Market Oversight and Transparency
Massachusetts Health Policy Commission
50 Milk Street
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Re: Comments for the Massachusetts Health Policy Commission on the Proposed 2025 Updates to the Massachusetts Registration of Provider Organizations Program

Thank you for the opportunity to comment on the proposed 2025 updates to the Massachusetts Registration of Provider Organizations Program. The Brown University Center for Advancing Health Policy through Research (CAHPR) is a nonpartisan research and policy center that advances the understanding and development of policies that will lower spending growth, improve patient outcomes, and enhance the US healthcare delivery system. As a team of health economists, health services researchers, and lawyers, our Center's investigators conduct research and develop solutions to improve state health care markets.

CAHPR's responses to the proposed 2024 updates to the Massachusetts Registration of Provider Organizations Program are below.

- 1) The template could require that significant equity investors, real estate investment trusts (REITs), and management services organizations (MSOs) provide **all** business identification numbers, beyond just EINs.
 - a) The Indiana provider registration bill ([HB 1666](#)) that was signed into law in May 2025 requires significant equity investors to provide: "Any of the following identification numbers, if applicable, for a person or entity identified...:
 - i) National provider identifier (NPI).
 - ii) Taxpayer identification number (TIN).
 - iii) Employer identification number (EIN).
 - iv) CMS certification number (CCN).
 - v) National Association of Insurance Commissioners identification number.
 - vi) A personal identification number associated with a license issued by the department of insurance."
 - b) Both original version of the Washington provider registration bill ([HB 1686](#)) that was signed into law in April 2025 (in a pared-back form), as well as the NASHP [model legislation](#) on market consolidation, include the same list of business identification numbers as Indiana, with the addition of pharmacy benefit manager identification numbers.
- 2) The template could require business addresses for significant equity investors, REITs, and MSOs.
 - a) The Indiana law requires a complete business address for every significant equity investor, and bans PO boxes from being listed as a business address.

- b) The original Washington bill also required business addresses to be included.
- c) The NASHP model legislation also requires the reporting of business addresses for significant equity investors.
- 3) The template could require the name and phone number of a representative of significant equity investors, REITs, and MSOs.
 - a) This, along with a business address, would ensure that the state has actual points of contact with the entities that are associated with the health care system.
- 4) The template could require EINs, other business identification numbers, business addresses, and the name and phone number of a representative of each private equity firm invested in an MSO. The template currently only requires the reporting of the name and the ownership interest of private equity firms invested in MSOs.
- 5) The template could be more explicit that providers must report on REITs that own **any part of** the property or facility on which a provider facility is located.
 - a) The prompt in cell C6 in the “Real Estate Investment Trusts” sheet could be rewritten to say: “Are any of the Provider Organization’s or its corporate affiliates' licensed Facilities, or **any part of** the property on which a licensed Facility operates, owned by a Health Care Real Estate Investment Trust? If yes, please complete the information below for each Facility.”
- 6) The template could require providers to include copies of any lease, master lease, sublease, license or any other agreement involving a real estate investment trust. Currently, the template just requires providers to report the name of the REIT, the REIT’s EIN, and the start date of the affiliation with the REIT.

We appreciate the opportunity to provide feedback on this critical issue and appreciate the Health Policy Commission’s steps to strengthen the Massachusetts Registration of Provider Organizations Program. We welcome the opportunity to engage further or provide additional information as needed. Should you have any questions about our comments, please contact Erin Fuse Brown at erin_fuse_brown@brown.edu or Nathan Hostert, Assistant Director for State Policy at nathan_hostert@brown.edu.

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