

SENATE No. 1271

The Commonwealth of Massachusetts

PRESENTED BY:

Donald F. Humason, Jr., (BY REQUEST)

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act educating patients on environmental health risks such as wireless exposures.

PETITION OF:

NAME:

DISTRICT/ADDRESS:

Kirstin Beatty

SENATE No. 1271

By Mr. Humason (by request), a petition (accompanied by bill, Senate, No. 1271) of Kirstin Beatty for legislation to educate patients on environmental health risks such as wireless exposures. Public Health.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-First General Court
(2019-2020)**

An Act educating patients on environmental health risks such as wireless exposures.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Chapter 175 of the General Laws, as appearing the 2016 Official Edition, is
2 hereby amended by striking out

3 the text of Section 47CC and inserting in place thereof the following:-

4 (a) As used in this section, the following words shall have the following meanings:

5 “Relevant medical conditions,” are medical conditions that laboratory or epidemiological
6 studies indicate (as relevant) chemical pollutants, mold, habit, or non-ionizing radiation influence
7 a biological system which then impacts on the medical condition of the patient deleteriously,
8 regardless of whether the precise mechanism is understood. For example, relevant medical
9 conditions for non-ionizing radiation exposure include neurological, metabolic, and reproductive
10 systems as well as heart and cancer risk development.

11 “Education regarding non-ionizing radiation risks and protective measures,” is providing
12 precautionary information on current science indicating potential harms, including risks to
13 reproduction and to future children, and includes recommendations for identifying and reducing
14 exposure to non-ionizing radiation.

15 “Screen time” shall mean the amount of time spent in front of a technological screen,
16 including television, computer, virtual reality, video game, and other electronic device screens.

17 “Technology Addiction” or “TA” shall mean compulsive use of technology and inability
18 to control use combined with withdrawal from real life interactions, interpersonal relations, and
19 ordinary responsibilities or personal care. In less acute cases, developing addicts may continue to
20 attend to responsibilities, but progressively increase technology use during free time, losing
21 interest in other activities, and becoming more irritated or anxious from interruption of
22 technology use. Technology Addiction includes more specialized subsets of addiction such as
23 video game, mobile phone, or social media addiction. Certain subsets may be more vulnerable to
24 digital addiction, such as adolescents due to lack of impulse control, and children may be
25 indirectly impacted by the digital addiction of caretakers.

26 “Education regarding technology addiction and screen time” is providing precautionary
27 information on current science indicating potential harms from technology addiction and
28 excessive screen time as well as preventative measures.

29 (b) An individual policy of accident and sickness insurance issued under section 108 that
30 provides hospital expense and surgical expense insurance and any group blanket or general
31 policy of accident and sickness insurance issued under section 110 that provides hospital expense
32 and surgical expense insurance, which is issued or renewed within or without the

33 Commonwealth, shall provide benefits on a nondiscriminatory basis to residents of the
34 Commonwealth and to all policyholders having a principal place of employment in the
35 Commonwealth shall provide as follows for:

36 (1) Queries on non-ionizing radiation exposure and screen time in yearly physicals;

37 (2) Education regarding non-ionizing radiation risks and protective measures during
38 yearly physicals and also in prevention or treatment of relevant medical conditions;

39 (3) Education regarding technology addiction and screen time during yearly physicals
40 and as relevant to social and learning struggles or disabilities;

41 (4) Queries regarding cleanliness and dampness of living spaces in yearly physicals;

42 (5) Education regarding risks of exposure from mold development within construction
43 during yearly physicals and in reference to allergic or asthmatic conditions;

44 (6) Queries regarding use of and avoidance of chemicals in yearly physicals;

45 (6) Education to increase avoidance and awareness of exposure risks from chemical
46 pollutants in cleaning chemicals, paints, polish, plastics, lawn chemicals, and unfiltered water in
47 yearly physicals and and also in prevention or treatment of relevant medical conditions.

48 (c) Other than the limits set in subsections (d), (e), and (f), such policy shall be in
49 compliance if the policy does not contain annual or lifetime dollar or unit of service limitation on
50 coverage for the services pursuant to subsection (b) which is less than an annual or lifetime
51 dollar or unit of service limitation imposed on coverage for the treatment of physical conditions.

52 (d) This section shall not limit benefits that are otherwise available to an individual under
53 a health insurance policy.

54 (e) Coverage under this section shall not be subject to a limit on the number of visits an
55 individual may make to a provider.

56 (f) This section shall not affect an obligation to provide services to an individual under an
57 individualized family service plan, an individualized education program or an individualized
58 service plan. Services provided by school personnel under an individualized education program
59 are not subject to reimbursement under this section.

60 SECTION 2. Chapter 12C, is hereby amended, in Section 14, as appearing in the 2016
61 Official Edition, by adding after the third paragraph the following paragraph:-

62 The standard quality control sets shall include measures for assessing, tracking, and
63 reducing non-thermal non-ionizing radiation exposures which progressively strengthen non-
64 ionizing radiation reduction education and protection for patients and staff. Until independent
65 science shows lower levels to be necessary, emissions from 60 hertz field shall be equal to or less
66 than 0.6 milligauss (mG) and 3 volts per meter (V/m), where possible, and definitely below 2
67 mG and 10 V/m, while radio waves and microwaves (between 300 MHz to 30 Ghz) should
68 ideally be below 0.1 V/m peak and definitely below 1 V/m peak; similarly, transients and
69 harmonics shall be minimized progressively.

70 SECTION 3. Chapter 6D of the General Laws, is hereby amended, in Section 14, as
71 appearing in the Official 2016 Edition, by inserting in paragraph five after the clause “health
72 risks and chronic conditions,”the following clause:-

73 and including attention to reducing non-ionizing radiation exposures. Until independent
74 science shows lower levels to be necessary, emissions from 60 hertz field shall be equal to or less
75 than 0.6 milligauss (mG) and 3 volts per meter (V/m), where possible, and definitely below 2
76 mG and 10 V/m, while radiowaves and microwaves (between 300 MHz to 30 Ghz) should
77 ideally be below 0.1 V/m peak and definitely below 1 V/m peak; similarly, transients and
78 harmonics shall be minimized progressively.

79 SECTION 4. Chapter 111 of the General Laws, is hereby amended, in Section 5N, as
80 appearing in the 2016 Official Edition, by inserting after the first paragraph the following
81 paragraph:-

82 The department shall keep a list of registered non-ionizing radiation consultants with
83 professional equipment and relevant expertise, and publish a list of free-lance consultants that
84 includes the frequencies measured and types of customers served. The department shall insure
85 that less complex measurements may be provided at low cost by individuals who have completed
86 a minimal course of study or have otherwise acquired the appropriate experience necessary to
87 insure competent measurements for customers with an appropriate listing in the registry. The
88 department shall set guidelines for registration approval and set a higher bar of expertise and
89 accuracy for non-ionizing radiation consultants providing for complex measurements such as for
90 installation of medical equipment. Although registration shall not serve as proof of
91 qualifications, removal from the registration list shall occur when consultants have
92 misrepresented qualifications or failed to provide the service advertised. The department may
93 provide guidelines for taking measurements.