

# SENATE . . . . . No. 3003

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Senate, July 13, 2022 -- Text of the Senate amendment to the House Bill expanding protections for reproductive and gender-affirming care (House, No. 4954) (being the text of Senate, No. 2996, printed as amended)

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## The Commonwealth of Massachusetts

In the One Hundred and Ninety-Second General Court  
(2021-2022)

1 SECTION 1. Section 1 of chapter 9A of the General Laws, as appearing in the 2020  
2 Official Edition, is hereby amended by inserting after the definition of “Application assistant”  
3 the following 3 definitions:-

4 “Gender-affirming health care services”, all supplies, care and services of a medical,  
5 behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative,  
6 rehabilitative or supportive nature relating to the treatment of gender dysphoria.

7 “Legally-protected health care activity”, (i) the exercise and enjoyment, or attempted  
8 exercise and enjoyment, by any person of rights to reproductive health care services or gender-  
9 affirming health care services secured by the constitution or laws of the commonwealth or the  
10 provision insurance coverage for such services; or (ii) any act or omission undertaken to aid or  
11 encourage, or attempt to aid or encourage, any person in the exercise and enjoyment, or  
12 attempted exercise and enjoyment, of rights to reproductive health care services or gender-  
13 affirming health care services secured by the constitution or laws of the commonwealth or to  
14 provide insurance coverage for such services; provided, however, that the provision of such a  
15 health care service by a person duly licensed under the laws of the commonwealth and physically

16 present in the commonwealth and the provision of insurance coverage for such services shall be  
17 legally protected if the service is permitted under the laws of the commonwealth, regardless of  
18 the patient's location; and provided further, that "legally-protected health care activity" shall not  
19 include any service rendered below an applicable professional standard of care or that would  
20 violate anti-discrimination laws of the commonwealth.

21 "Reproductive health care services", all supplies, care and services of a medical,  
22 behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative,  
23 rehabilitative or supportive nature relating to pregnancy, contraception, assisted reproduction,  
24 miscarriage management or the termination of a pregnancy.

25 SECTION 2. Section 2 of said chapter 9A, as so appearing, is hereby amended by  
26 striking out subsection (1) and inserting in place thereof the following subsection:-

27 (1)(a) Upon recommendation of an application assistant, an adult person, a parent or  
28 guardian acting on behalf of a minor or a guardian acting on behalf of an incapacitated person  
29 may apply to the secretary to have an address designated by the secretary serve as the person's  
30 address or the address of the minor or incapacitated person.

31 (b) Individuals engaged in the provision, facilitation or promotion of legally-protected  
32 health care activity may apply to the secretary to have an address designated by the secretary  
33 serve as the health care professional's address; provided, however, that in such cases, no  
34 recommendation of an application assistant shall be required.

35 SECTION 3. Said chapter 9A is hereby further amended by striking out section 7, as so  
36 appearing, and inserting in place thereof the following section:-

37           Section 7. The secretary shall promulgate regulations to implement this chapter and in  
38 doing so shall consult with the secretary of health and human services, Jane Doe Inc.: The  
39 Massachusetts Coalition Against Sexual Assault and Domestic Violence, GLBTQ Legal  
40 Advocates & Defenders, Inc., Planned Parenthood League of Massachusetts, Inc., ABCD, Inc.  
41 on behalf of the MA Family Planning Association, The Massachusetts League of Community  
42 Health Centers, Inc., the Maternal Outcomes for Translational Health Equity Research Lab,  
43 Resilient Sisterhood Project, Inc., Health Care Without Walls, Inc., Our Bodies Ourselves and  
44 Reproductive Equity Now, Inc.

45           SECTION 4. Chapter 12 of the General Laws is hereby amended by inserting after  
46 section 11I the following 2 sections:-

47           Section 11I½. (a) As used in this section, the following words shall have the following  
48 meanings unless the context clearly requires otherwise:

49           “Gender-affirming health care services”, all supplies, care and services of a medical,  
50 behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative,  
51 rehabilitative or supportive nature relating to the treatment of gender dysphoria.

52           “Interfere through abusive litigation”, to deter, prevent, sanction or punish any person  
53 engaging in legally-protected health care activity by: (i) filing or prosecuting any action in any  
54 state other than the commonwealth where liability, in whole or part, directly or indirectly, is  
55 based on legally-protected health care activity that occurred in the commonwealth, including any  
56 action in which liability is based on any theory of vicarious, joint or several liability derived  
57 therefrom; or (ii) attempting to enforce any order or judgment issued in connection with any such  
58 action by any party to the action or any person acting on behalf of a party to the action; provided,

59 however, that a lawsuit shall be considered to be based on conduct that occurred in the  
60 commonwealth if any part of any act or omission involved in the course of conduct that forms  
61 the basis for liability in the lawsuit occurs or is initiated in the commonwealth, whether or not  
62 such act or omission is alleged or included in any pleading or other filing in the lawsuit.

63 “Legally-protected health care activity”, (i) the exercise and enjoyment, or attempted  
64 exercise and enjoyment, by any person of rights to reproductive health care services or gender-  
65 affirming health care services secured by the constitution or laws of the commonwealth or the  
66 provision of insurance coverage for such services; or (ii) any act or omission undertaken to aid or  
67 encourage, or attempt to aid or encourage, any person in the exercise and enjoyment, or  
68 attempted exercise and enjoyment, of rights to reproductive health care services or gender-  
69 affirming health care services secured by the constitution or laws of the commonwealth;  
70 provided, however, that the provision of such a health care service by a person duly licensed  
71 under the laws of the commonwealth and physically present in the commonwealth and the  
72 provision of insurance coverage for such services shall be legally protected if the service is  
73 permitted under the laws of the commonwealth, regardless of the patient's location; and provided  
74 further, that “legally-protected health care activity” shall not include any service rendered below  
75 an applicable professional standard of care or that would violate anti-discrimination laws of the  
76 commonwealth.

77 “Reproductive health care services”, all supplies, care and services of a medical,  
78 behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative,  
79 rehabilitative or supportive nature relating to pregnancy, contraception, assisted reproduction,  
80 miscarriage management or the termination of a pregnancy.

81 (b) Access to reproductive health care services and gender-affirming health care services  
82 is a right secured by the constitution and laws of the commonwealth. Interference with this right,  
83 whether or not under the color of law, is against the public policy of the commonwealth.

84 (c) Any public act or record of a foreign jurisdiction that prohibits, criminalizes,  
85 sanctions, authorizes a person to bring a civil action against or otherwise interferes with a person,  
86 provider, carrier or other entity in the commonwealth that seeks, receives, causes, aids in access  
87 to, aids or abets or provides, or attempts or intends to seek, receive, cause, aid in access to, aid or  
88 abet or provide, reproductive health care services or gender-affirming health care services shall  
89 be an interference with the exercise and enjoyment of the rights secured by the constitution and  
90 laws of the commonwealth and shall be a violation of the public policy of the commonwealth.

91 (d) If a person, including any plaintiff, prosecutor, attorney or law firm, whether or not  
92 acting under color of law, engages or attempts to engage in abusive litigation that infringes on,  
93 interferes with or attempts to infringe on or interfere with legally-protected health care activity,  
94 any aggrieved person, provider, carrier or other entity, including any defendant in such abusive  
95 litigation, may institute and prosecute a civil action for injunctive, monetary or other appropriate  
96 relief within 3 years after the cause of action accrues

97 Any aggrieved person, provider, carrier or other entity, including any defendant in such  
98 abusive litigation, may move to modify or quash any subpoena issued in connection with such  
99 abusive litigation on the grounds that the subpoena is unreasonable, oppressive or inconsistent  
100 with the public policy of the commonwealth pursuant to the Massachusetts Rules of Civil  
101 Procedure.

102           If the court finds for the petitioner in an action authorized by this section, recovery shall  
103 be in the amount of actual damages, which shall include damages for the amount of any  
104 judgment issued in connection with any abusive litigation, and any and all other expenses, costs  
105 or reasonable attorney’s fees incurred in connection with the abusive litigation.

106           (e) A court may exercise jurisdiction over a person in an action authorized by this section  
107 if: (i) personal jurisdiction is found under section 3 of chapter 223A; (ii) the person has  
108 commenced any action in any court in the commonwealth and, during the pendency of that  
109 action or any appeal therefrom, a summons and complaint is served on the person or the attorney  
110 appearing on the person’s behalf in that action or as otherwise permitted by law; or (iii) the  
111 exercise of jurisdiction is permitted under the Constitution of the United States.

112           (f) This section shall not apply to a lawsuit or judgment entered in another state that is  
113 based on conduct for which a cause of action exists under the laws of the commonwealth if the  
114 course of conduct that forms the basis for liability had occurred entirely in the commonwealth,  
115 including any contract, tort, common law or statutory claims.

116           Section 11I <sup>3</sup>/<sub>4</sub>. Notwithstanding any general or special law or common law conflict of  
117 law rule to the contrary, the laws of the commonwealth shall govern in any case or controversy  
118 heard in the commonwealth related to reproductive health care services or gender-affirming  
119 health care services, as those terms are defined in section 11I <sup>1</sup>/<sub>2</sub>, except as may be required by  
120 federal law.

121           SECTION 5. Section 105 of chapter 13 of the General Laws, as amended by section 23 of  
122 chapter 39 of the acts of 2021, is hereby further amended by adding the following 2 paragraphs:-

123 Notwithstanding any general or special law to the contrary, a person licensed under this  
124 section or in accordance with sections 255 or 256 of chapter 112 shall not be subject to discipline  
125 by the board, including the revocation, suspension or cancellation of the certificate of registration  
126 or reprimand, censure or monetary fine, for providing or assisting in the provision of  
127 reproductive health care services or gender-affirming health care services, as those terms are  
128 defined in section 111½ of chapter 12, or for any judgment, discipline or other sanction arising  
129 from such health care services if the services as provided would have been lawful and consistent  
130 with the standards of conduct for genetic counselors if they occurred entirely in the  
131 commonwealth; provided further, that the board shall not take adverse action on an application  
132 for registration of a qualified genetic counselor based on a criminal or civil action or disciplinary  
133 action by a licensing board of another state that arises from such health care services that, as  
134 provided, would have been lawful and consistent with the standards of conduct for genetic  
135 counselors if they occurred entirely in the commonwealth.

136 Nothing in this section shall be construed to regulate the practice of genetic counselors in  
137 any other state.

138 SECTION 6. Chapter 15A of the General Laws is hereby amended by adding the  
139 following 2 sections:-

140 Section 46. (a) As used in this section and section 47, the following words shall have the  
141 following meanings unless the context clearly requires otherwise:

142 “Institution”, a public institution of higher education listed in section 5.

143 “Medication abortion”, abortion provided by medication techniques.

144 “Medication abortion readiness”, each institution’s preparedness to provide medication  
145 abortions to students or assist students in obtaining medication abortions, including, but not  
146 limited to, having in place equipment, protocols, patient educational materials, informational  
147 websites and training for staff; provided, however, that “medication abortion readiness” may  
148 include the provision of medication abortions.

149 “Health center”, a clinic or health center providing primary health care services to  
150 students operated by an institution.

151 (b) (1) Each institution shall develop a medication abortion readiness plan for its students.

152 (2) The department of public health shall issue guidance to all institutions regarding the  
153 required contents of medication abortion readiness plans in accordance with the varied  
154 capabilities of institutions to provide services including, but not limited to, directly providing  
155 medication abortions to students in a health center, providing referrals for abortion care services  
156 not provided in the health center or providing information to students about obtaining a  
157 medication abortion. In developing the guidance, the department shall consider factors including,  
158 but not limited to, whether the institution has an operational health center on campus, the  
159 institution’s proximity to a hospital, clinic or other facility that provides medication abortion,  
160 availability, convenience and cost of public transportation between the institution and closest  
161 facility that provides medication abortion and whether the institution employs health care  
162 workers on campus.

163 (3) The department of public health shall review medication abortion readiness plans  
164 annually, taking into consideration any changes to the capacity of each institution to provide  
165 services to students since the preceding approval of the plan.



166 (c) Each institution shall annually submit any amendments or revisions to its medication  
167 abortion readiness plan to the department of public health.

168 (d) Annually, not later than January 31, the department of public health shall determine  
169 whether the plan is adequate in proportion to each institution's capacity. The department shall  
170 provide further guidance to institutions with plans deemed inadequate that includes remedial  
171 measures for the institution to develop an adequate plan.

172 Section 47. (a) There shall be established and set up on the books of the commonwealth a  
173 separate fund to be known as the Public University Health Center Sexual and Reproductive  
174 Health Preparation Fund for the purpose of medication abortion readiness. The fund shall be  
175 administered by the department of public health, in consultation with the department of higher  
176 education. The fund shall be credited with: (i) revenue from appropriations or other money  
177 authorized by the general court and specifically designated to be credited to the fund; and (ii)  
178 funds from non-state entities, including, but not limited to, gifts, grants and donations from  
179 private entities and local and federal government agencies. Amounts credited to the fund shall  
180 not be subject to further appropriation and any money remaining in the fund at the end of a fiscal  
181 year shall not revert to the General Fund.

182 (b) The department of public health shall utilize money in the fund to:

183 (i) provide a grant to each health center to pay for the cost of direct and indirect  
184 medication abortion readiness; provided, however, that, the department shall prioritize  
185 applications from the University of Massachusetts and state university segments and create a  
186 simple application process for community colleges to apply for funding; and provided further,  
187 that allowable expenses under these grants shall include, but not be limited to: (A) the purchase

188 of equipment used in the provision of medication abortions; (B) facility and security upgrades;  
189 (C) costs associated with enabling the health center to deliver telehealth services; (D) costs  
190 associated with training staff in the provision of medication abortions; (E) staff cost  
191 reimbursement and clinical revenue offset while staff are in trainings; and (F) billing specialist  
192 consultation;

193 (ii) pay the direct and indirect costs of the department of public health associated with  
194 administration of the fund, including the costs of hiring staff; and

195 (iii) maintain a system of financial reporting on all aspects of the fund.

196 (c) Each health center grantee shall, as a condition of receiving a grant award from the  
197 fund, participate in an evaluation of its medication abortion readiness and its provision of  
198 medication abortions.

199 (d) The department of public health, working with the health centers, shall assist and  
200 advise on potential pathways for health centers to access public and private payers to provide  
201 funding for ongoing costs of providing medication abortions.

202 (e)(1) Annually, not later than December 31, the department of public health shall submit  
203 a report to the clerks of the senate and house of representatives, including, but not limited to, all  
204 of the following information for each reporting period:

205 (i) an accounting of the medication abortion plans of all institutions, including, but not  
206 limited to, a list of institutions that have submitted plans deemed adequate by the department, a  
207 list of institutions that are actively developing a remedial plan and a list of institutions that have  
208 not submitted an adequate plan to the department;

209 (ii) the number of medication abortions provided at health centers, disaggregated, to the  
210 extent possible, by the health center;

211 (iii) the total amount of funds granted by the department of public health to each  
212 institution and its health center from the fund that is expended on medication abortion readiness  
213 and the total amount of any other funds expended on medication abortion readiness and the  
214 source of those funds, disaggregated by use and, to the extent possible, health center; and

215 (iv) the total amount of funds expended on the provision of medication abortions and the  
216 source of those funds, disaggregated by use and, to the extent possible, health center.

217 (2) The report required in paragraph (1) and any associated data collected shall comply  
218 with state and federal privacy laws, including, but not limited to, section 70E of chapter 111, the  
219 federal Family Educational Rights and Privacy Act of 1974, 20 U.S.C. 1232g and the federal  
220 Health Insurance Portability and Accountability Act of 1996, Public Law 104-191.

221 SECTION 7. Section 17C of chapter 32A of the General Laws, as appearing in the 2020  
222 Official Edition, is hereby amended by inserting after the word “for”, in line 3, the following  
223 words:- abortion and abortion-related care as defined in section 12K of chapter 112,.

224 SECTION 8. Said section 17C of said chapter 32A, as so appearing, is hereby further  
225 amended by inserting after the second paragraph the following 2 paragraphs:-

226 Coverage provided under this section for abortion or abortion-related care shall not be  
227 subject to any deductible, coinsurance, copayment or any other cost-sharing requirement;  
228 provided, however, that deductibles, coinsurance or copayments shall be required if the  
229 applicable plan is governed by the federal Internal Revenue Code and would lose its tax-exempt

230 status as a result of the prohibition on deductibles, coinsurance or copayments for these services.  
231 Coverage for abortion or abortion-related care offered under this section shall not impose  
232 unreasonable restrictions or delays in the coverage.

233 Benefits for an enrollee under this section shall be the same for the enrollee's covered  
234 spouse and covered dependents.

235 SECTION 9. Chapter 94C of the General Laws is hereby amended by striking out section  
236 19A, as so appearing, and inserting in place thereof the following section:-

237 Section 19A. (a) As used in this section, unless the context clearly requires otherwise,  
238 "emergency contraception" shall mean any drug approved by the federal Food and Drug  
239 Administration as a contraceptive method for use after sexual intercourse, whether provided  
240 over-the-counter or by prescription.

241 (b) The department shall ensure that a statewide standing order is issued to authorize the  
242 dispensing of emergency contraception by a licensed pharmacist. The statewide standing order  
243 shall include, but not be limited to, written, standardized procedures or protocols for the  
244 dispensing of emergency contraception by a licensed pharmacist. Notwithstanding any general or  
245 special law to the contrary, the commissioner, or a physician designated by the commissioner  
246 who is registered to distribute or dispense a controlled substance in the course of professional  
247 practice pursuant to section 7, shall issue a statewide standing order that may be used by a  
248 licensed pharmacist to dispense emergency contraception under this section.

249 (c) Notwithstanding any general or special law to the contrary, a licensed pharmacist may  
250 dispense emergency contraception in accordance with the statewide standing order issued under  
251 subsection (b). Except for an act of gross negligence or willful misconduct, a pharmacist who,

252 acting in good faith, dispenses emergency contraception shall not be subject to any criminal or  
253 civil liability or any professional disciplinary action by the board of registration in pharmacy  
254 related to the use or administration of emergency contraception.

255 (d) Before dispensing emergency contraception authorized under this section, a  
256 pharmacist may complete a training program approved by the commissioner on emergency  
257 contraception; provided, however, that the training shall include, but not be limited to, proper  
258 documentation, quality assurance and referral to additional services, including appropriate  
259 recommendation that the patient follow-up with a medical practitioner.

260 (e) A pharmacist dispensing emergency contraception under this section shall annually  
261 provide to the department the number of times such emergency contraception is dispensed.  
262 Reports made pursuant to this section shall not identify any individual patient, shall be  
263 confidential and shall not be public records as defined by clause Twenty-sixth of section 7 of  
264 chapter 4 or section 10 of chapter 66.

265 (f) Except for an act of gross negligence or willful misconduct, the commissioner or a  
266 physician who issues the statewide standing order under subsection (b) and any medical  
267 practitioner who, acting in good faith, directly or through the standing order, prescribes or  
268 dispenses emergency contraception shall not be subject to any criminal or civil liability or any  
269 professional disciplinary action.

270 (g) The department, board of registration in medicine, board of registration in nursing  
271 and board of registration in pharmacy shall adopt regulations to implement this section.

272 SECTION 10. Said chapter 94C is hereby further amended by inserting after section 19D  
273 the following section:-

274 Section 19E. (a) A registered pharmacist may prescribe and dispense hormonal  
275 contraceptive patches and self-administered oral hormonal contraceptives to a person who is:

276 (i) 18 years of age or older, regardless of whether the person has evidence of a previous  
277 prescription from a primary care practitioner or women’s health care practitioner for a hormonal  
278 contraceptive patch or self-administered oral hormonal contraceptive; or

279 (ii) less than 18 years of age; provided, however, that the registered pharmacist may  
280 prescribe and dispense hormonal contraceptive patches and self-administered oral hormonal  
281 contraceptives to the person only if the person has evidence of a previous prescription from a  
282 primary care practitioner or women’s health care practitioner for a hormonal contraceptive patch  
283 or self-administered oral hormonal contraceptive.

284 (b) The department shall adopt rules to establish, in consultation with the board of  
285 registration in medicine, the board of registration in pharmacy and MassHealth, and in  
286 consideration of guidelines established by the American Congress of Obstetricians and  
287 Gynecologists, standard procedures for the prescribing of hormonal contraceptive patches and  
288 self-administered oral hormonal contraceptives by pharmacists.(c) The rules adopted under this  
289 section shall: (i) require a pharmacist to: (A) complete a training program approved by the board  
290 of pharmacy that is related to prescribing hormonal contraceptive patches and self-administered  
291 oral hormonal contraceptives; (B) provide a self-screening risk assessment tool that the patient  
292 shall use prior to the pharmacist’s prescribing the hormonal contraceptive patch or self-  
293 administered oral hormonal contraceptive; (C) refer the patient to the patient’s primary care  
294 practitioner or women’s health care practitioner upon prescribing and dispensing the hormonal  
295 contraceptive patch or self-administered oral hormonal contraceptive; (D) provide the patient

296 with a written record of the hormonal contraceptive patch or self-administered oral hormonal  
297 contraceptive prescribed and dispensed and advise the patient to consult with a primary care  
298 practitioner or women's health care practitioner; and (E) dispense the hormonal contraceptive  
299 patch or self-administered oral hormonal contraceptive to the patient as soon as practicable after  
300 the pharmacist issues the prescription; and (ii) prohibit a pharmacist from: (A) requiring a patient  
301 to schedule an appointment with the pharmacist for the prescribing or dispensing of a hormonal  
302 contraceptive patch or self-administered oral hormonal contraceptive; and (B) prescribing and  
303 dispensing a hormonal contraceptive patch or self-administered oral hormonal contraceptive to a  
304 patient who previously received a prescription and dispensation of a hormonal contraceptive  
305 patch or self-administered oral hormonal contraceptive by a pharmacist and who does not have  
306 evidence of a clinical visit for women's health within 1 year immediately following such  
307 previous prescription and dispensation.

308 SECTION 11. Chapter 112 of the General Laws is hereby amended by inserting after  
309 section 5F the following section:-

310 Section 5F½. Notwithstanding any general or special law to the contrary, no person shall  
311 be subject to discipline by the board, including the revocation, suspension or cancellation of the  
312 certificate of registration or reprimand, censure or monetary fine, for providing or assisting in the  
313 provision of reproductive health care services or gender-affirming health care services, as those  
314 terms are defined in section 11I½ of chapter 12, or for any judgment, discipline or other sanction  
315 arising from such health care services if the services as provided would have been lawful and  
316 consistent with good medical practice if they occurred entirely in the commonwealth.

317           The board shall not make available for public dissemination on a physician’s individual  
318 profile record of any criminal conviction or charge for a felony or serious misdemeanor, final  
319 disciplinary action by a licensing board in another state or a medical malpractice court judgment,  
320 arbitration award or settlement that resulted from providing or assisting in the provision of  
321 reproductive health care services or gender-affirming health care services or for any judgment,  
322 discipline or other sanction arising from such health care services if the services as provided  
323 would have been lawful and consistent with good medical practice if they occurred entirely in  
324 the commonwealth. The board shall not take adverse action on an application for registration of a  
325 qualified physician based on a criminal or civil action, disciplinary action by a licensing board of  
326 another state or a medical malpractice claim in another state arising from the provision of  
327 reproductive health care services or gender-affirming health care services that, as provided,  
328 would have been lawful and consistent with good medical practice if they occurred entirely in  
329 the commonwealth.

330           Nothing in this section shall be construed to regulate the practice of medicine in any other  
331 state.

332           SECTION 12. Section 9H of said chapter 112, as appearing in the 2020 Official Edition,  
333 is hereby amended by inserting after the word “sections”, in line 4, the following words:- ;  
334 provided, however, that notwithstanding any general or special law to the contrary, no person  
335 shall be subject to discipline by the board, including the revocation, suspension or cancellation of  
336 the certificate of registration or reprimand, censure or monetary fine, for providing or assisting in  
337 the provision of reproductive health care services or gender-affirming health care services, as  
338 those terms are defined in section 11I½ of chapter 12, or for any judgment, discipline or other  
339 sanction arising from such health care services if the services as provided would have been



340 lawful and consistent with the standards of conduct for physician assistants if they occurred  
341 entirely in the commonwealth; provided further, that the board shall not take adverse action on  
342 an application for registration of a qualified physician assistant based on a criminal or civil  
343 action or disciplinary action by a licensing board of another state that arises from such health  
344 care services that, as provided, would have been lawful and consistent with the standards of  
345 conduct for physician assistants if they occurred entirely in the commonwealth.

346           Nothing in this section shall be construed to regulate the practice of physician assistants  
347 in any other state.

348           SECTION 13. Section 12K of said chapter 112, as so appearing, is hereby amended by  
349 inserting after the definition of “abortion” the following definition:-

350           "Abortion-related care", a service complementary or related to the provision of an  
351 abortion, including, but not limited to, any service related to managing a miscarriage.

352           SECTION 14. Said chapter 112 is hereby further amended by inserting after section 12N  
353 the following section:-

354           Section 12N½. (a) Each circumstance permitting an abortion for a pregnancy that has  
355 existed for 24 weeks or more under section 12N shall be considered independently by a treating  
356 physician and a patient or the patient’s health care proxy. No medical review process shall  
357 override a determination by a treating physician and a patient to provide an abortion consistent  
358 with said section 12N.

359           (b) Annually, not later than September 1, every facility authorized to perform health care  
360 services under section 12N shall submit to the department of public health a written report that

361 includes the facility's procedures and processes for providing services consistent with said  
362 section 12N and this section.

363 SECTION 15. Said chapter 112 is hereby further amended by inserting after section 12R  
364 the following section:-

365 Section 12R½. The department of public health, in consultation with Reproductive Equity  
366 Now, Inc., shall create and publish on its website and in print copy, as practicable, a list of  
367 abortion provider facilities opting to be included on the list. The listing shall be updated  
368 annually. The online listing shall be updated more frequently, as required or requested by a  
369 provider or provider facility and shall be sortable by geographic region.

370 SECTION 16. Section 32 of said chapter 112, as appearing in the 2020 Official Edition,  
371 is hereby amended by striking out, in lines 6 and 7, the words "one hundred and thirty-eight" and  
372 inserting in place thereof the following words:- 138; provided, however, that notwithstanding  
373 any general or special law to the contrary, no person, pharmacy or pharmacy department shall be  
374 subject to discipline by the board, including the revocation, suspension or cancellation of the  
375 certificate of registration or reprimand, censure or monetary fine, for providing or assisting,  
376 including dispensing of medication, in the provision of reproductive health care services or  
377 gender-affirming health care services, as those terms are defined in section 11I ½ of chapter 12,  
378 or for any judgment, discipline or other sanction arising from such health care services if the  
379 services as provided would have been lawful and consistent with the code of professional  
380 conduct for pharmacists if they occurred entirely in the commonwealth; provided further, that the  
381 board shall not take adverse action on an application for registration of a qualified pharmacist  
382 based on a criminal or civil action or disciplinary action by a licensing board of another state that

383 arises from such health care services, including the dispensing of medication, that, as provided,  
384 would have been lawful and consistent with the code of professional conduct for pharmacists if  
385 they occurred entirely in the commonwealth.

386 Nothing in this section shall be construed to regulate the practice of pharmacists in any  
387 other state.

388 SECTION 17. Section 77 of said chapter 112, as so appearing, is hereby amended by  
389 adding the following 4 paragraphs:-

390 Notwithstanding any general or special law to the contrary, no person shall be subject to  
391 discipline by the board, including the revocation, suspension or cancellation of the certificate of  
392 registration or reprimand, censure or monetary fine, for providing or assisting in the provision of  
393 reproductive health care services or gender-affirming health care services, as those terms are  
394 defined in section 11I ½ of chapter 12, or for any judgment, discipline or other sanction arising  
395 from such health care services if the services as provided would have been lawful and consistent  
396 with the standard of conduct for nurses if they occurred entirely in the commonwealth.

397 For advanced practice registered nurses, the board shall not make available for public  
398 dissemination on an advanced practice registered nurse's individual profile record of any criminal  
399 conviction or charge for a felony or serious misdemeanor, final disciplinary action by a licensing  
400 board in another state or a malpractice court judgment, arbitration award or settlement that  
401 resulted from providing or assisting in the provision of reproductive health care services or  
402 gender-affirming health care services or for any judgment, discipline or other sanction arising  
403 from such health care services if the services as provided would have been lawful and consistent

404 with the scope and standards of advanced practice registered nursing practice if they occurred  
405 entirely in the commonwealth.

406 The board shall not take adverse action on an application for registration of a qualified  
407 nurse based on a criminal or civil action or disciplinary action by a licensing board of another  
408 state or a medical malpractice claim in another state arising from such health care services that,  
409 as provided, would have been lawful and consistent with the standard of conduct for nurses if  
410 they occurred entirely in the commonwealth.

411 Nothing in this section shall be construed to regulate the practice of nursing in any other  
412 state.

413 SECTION 18. Section 128 of said chapter 112, as so appearing, is hereby amended by  
414 inserting after the word “inclusive”, in line 4, the following words:- ; provided, however, that  
415 notwithstanding any general or special law to the contrary, no person shall be subject to  
416 discipline by the board, including the revocation, suspension or cancellation of the certificate of  
417 registration or reprimand, censure or monetary fine, for providing or assisting in the provision of  
418 reproductive health care services or gender-affirming health care services, as those terms are  
419 defined in section 111½ of chapter 12, or for any judgment, discipline or other sanction arising  
420 from such health care services if the services as provided would have been lawful and consistent  
421 with the standard of conduct adopted by the board by regulation if they occurred entirely in the  
422 commonwealth; provided further, that the board shall not take adverse action on an application  
423 for registration of a qualified psychologist based on a criminal or civil action or disciplinary  
424 action by a licensing board of another state that arises from such health care services that, as

425 provided, would have been lawful and consistent with the standard of conduct adopted by the  
426 board by regulation if they occurred entirely in the commonwealth.

427           Nothing in this section shall be construed to regulate the practice of psychology in any  
428 other state.

429           SECTION 19. Section 137 of said chapter 112, as so appearing, is hereby amended by  
430 inserting after the word “practice”, in line 8, the following words:- ; provided, however, that  
431 notwithstanding any general or special law to the contrary, no person shall be subject to  
432 discipline by the board, including the revocation, suspension or cancellation of the certificate of  
433 registration or reprimand, censure or monetary fine, for providing or assisting in the provision of  
434 reproductive health care services or gender-affirming health care services, as those terms are  
435 defined in section 11I ½ of chapter 12, or for any judgment, discipline or other sanction arising  
436 from such health care services if the services as provided would have been lawful and consistent  
437 with the standards of professional practice and conduct for social workers if they occurred  
438 entirely in the commonwealth; provided further, that the board shall not take adverse action on  
439 an application for registration of a qualified social worker based on a criminal or civil action or  
440 disciplinary action by a licensing board of another state that arises from such health care services  
441 that, as provided, would have been lawful and consistent with the standards of professional  
442 practice and conduct for social workers if they occurred entirely in the commonwealth.

443           Nothing in this section shall be construed to regulate the practice of social work in any  
444 other state.

445           SECTION 20. Said chapter 112 is hereby further amended by striking out section 252, as  
446 so appearing, and inserting in place thereof the following section:-

447 Section 252. As used in sections 252 to 258, inclusive, the following words shall have the  
448 following meanings unless the context clearly requires otherwise:

449 "ABGC", the American Board of Genetic Counseling, a national agency for certification  
450 and recertification of genetic counselors or its successor agency.

451 "ABMGG", American Board of Medical Genetics and Genomics, a national agency for  
452 certification and recertification of genetic counselors, MD geneticists and PhD geneticists or its  
453 successor agency.

454 "ACGC", Accreditation Council for Genetic Counseling, a national agency for  
455 accreditation of genetic counselor training programs or its successor agency.

456 "Active Candidate Status", status of an individual who meets the requirements to sit for  
457 the ABGC genetic counselor certification exam.

458 "Board", the board of registration of genetic counselors.

459 "General supervision", a supervisor, whether a licensed genetic counselor or medical  
460 doctor, who has the overall responsibility to assess the work of a provisionally licensed genetic  
461 counselor, including regular meetings and chart review; provided, however, that an annual  
462 supervision contract signed by the supervisor and supervisee shall be on file with both parties.

463 "Licensed genetic counselor", a person licensed under section 105 of chapter 13 to  
464 engage in the practice of genetic counseling.

465 "Practice of genetic counseling", a communication process, conducted by 1 or more  
466 appropriately trained individuals, that may include:

467 (i) obtaining and evaluating individual, family and medical histories to determine genetic  
468 risk for genetic-medical conditions and diseases in a patient, their offspring and other family  
469 members;

470 (ii) discussing the features, natural history, means of diagnosis, genetic and  
471 environmental factors and management of risk for genetic-medical conditions and diseases;

472 (iii) identifying, ordering and coordinating genetic laboratory tests and other diagnostic  
473 studies as appropriate for the genetic assessment;

474 (iv) integrating genetic laboratory test results and other diagnostic studies with personal  
475 and family medical history to assess and communicate risk factors for genetic-medical conditions  
476 and diseases;

477 (v) explaining the clinical implications of genetic laboratory tests and other diagnostic  
478 studies and their results;

479 (vi) evaluating the client's, or their family's, responses to the condition or risk of  
480 recurrence and provide client-centered counseling and anticipatory guidance;

481 (vii) identifying and utilizing community resources that provide medical, educational,  
482 financial and psychosocial support and advocacy;

483 (viii) providing written documentation of medical, genetic and counseling information for  
484 families and health care professionals; and

485 (ix) any other criteria the board deems appropriate and consistent with this section.

486 “Provisionally licensed genetic counselor”, a person with a provisional license issued  
487 under section 255.

488 SECTION 21. Said chapter 112 is hereby further amended by striking out sections 254  
489 through 257, inclusive, as so appearing, and inserting in place thereof the following 4 sections:-

490 Section 254. An applicant for registration as a genetic counselor shall have:

491 (i) earned a master’s degree from a genetic counseling training program that is accredited  
492 by the ACGC or an equivalent as determined by the ACGC, or a doctoral degree from a medical  
493 genetics training program that is accredited by the ABMGG or an equivalent as determined by  
494 the ABMGG;

495 (ii) successfully achieved ABGC certification as a genetic counselor by examination or  
496 the ABMGG certification by examination as a Ph.D. medical geneticist; and

497 (iii) completed such experience as may be required by the board; provided, however, that  
498 the board shall require continuing education as a condition for license renewals.

499 Section 255. A person who meets the qualifications for licensure as a genetic counselor  
500 except for certification and who has been granted Active Candidate Status by the ABGC may  
501 apply to practice as a provisionally licensed genetic counselor by filing an approved application  
502 with the board and payment of a fee to be determined by the secretary of administration and  
503 finance. The board may grant a provisional license to a person who successfully completes a  
504 genetic counseling education program approved by the board and is qualified to be admitted to  
505 the examination. The provisional license shall be valid for 2 years from the date of issue and may  
506 be renewed for an additional 1-year period if the applicant maintains Active Candidate Status



507 with the ABGC or if the applicant fails the first sitting of the ABMGG exam, as applicable. The  
508 provisional license shall expire automatically upon the earlier of: (i) issuance of a full license; or  
509 (ii) date printed on the temporary license.

510 An application for extension shall be signed by a supervising licensed genetic counselor.  
511 A provisionally licensed genetic counselor shall be under the general supervision of a licensed  
512 genetic counselor or a licensed physician with a current ABMGG certification in clinical  
513 genetics at all times during which the provisionally licensed genetic counselor performs clinical  
514 genetic counseling. The board shall adopt rules governing such supervision and direction;  
515 provided, however, that such rules shall not require the immediate physical presence of the  
516 supervising licensed genetic counselor.

517 Section 256. (a) The board shall examine applicants for certification as genetic  
518 counselors at such times and places as it may determine. The examination shall meet the  
519 standards established by the ACGC. The examination shall test an applicant's knowledge of  
520 basic and clinical sciences as they relate to genetic counseling theory and practice and other  
521 subjects as the board may deem useful to determine the applicant's fitness to engage in the  
522 practice of genetic counseling. The board may utilize a national examination that meets the  
523 requirements of this section.

524 (b) The board shall examine applicants for certification as Ph.D. medical geneticists at  
525 such times and places as it may determine. The examination shall meet the standards established  
526 by the ABMGG. The examination shall test an applicant's knowledge of basic and clinical  
527 sciences as they relate to genetic counseling theory and practice and other subjects as the board  
528 may deem useful to determine the applicant's fitness to engage in the practice of genetic

529 counseling. The board may utilize a national examination that meets the requirements of this  
530 section.

531           Section 257. No person shall hold himself out as a genetic counselor unless he is licensed  
532 pursuant to sections 255 or 256 of this chapter or section 105 of chapter 13. A person who is not  
533 so licensed shall not use in connection with his name or place of business the title “genetic  
534 counselor”, “licensed genetic counselor”, “gene counselor”, “genetic consultant”, “genetic  
535 associate” or any other words, letters, abbreviations or insignia indicating or implying a person  
536 holds a genetic counseling license.

537           Nothing in this section shall prevent or restrict the practice, service or activities of:

538           (i) a person licensed, certified or registered in the commonwealth by any other law other  
539 than as a genetic counselor from engaging in activities within the scope of practice of the  
540 profession or occupation for which the person is licensed; provided, however, that the person  
541 does not represent to the public, directly or indirectly, that they are licensed pursuant to sections  
542 255 or 256 of this chapter or section 105 of chapter 13 and does not use any name, title or  
543 designation indicating that the person is licensed under those sections;

544           (ii) a person employed as a genetic counselor by the federal government or an agency  
545 thereof if such person provides genetic counseling services solely under the direction and control  
546 of the organization by which they are employed;

547           (iii) a student or intern enrolled in an approved genetic counseling education program if:

548           (i) the genetic counseling services performed by the student are: (A) an integral part of the  
549 student’s course of study; and (B) under the direct supervision of a licensed genetic counselor  
550 assigned to supervise the student, who is on duty and available in the assigned patient care area;

551 and (ii) the student or intern is designated by a title which clearly indicates their status as a  
552 student or intern;

553 (iv) an individual trained as a Ph.D. medical geneticist who is reapplying for the  
554 ABMGG certification examination and is gathering logbook cases under a supervisor identified  
555 in the training program's ABMGG accreditation documents as a member of the training faculty;

556 (v) a visiting genetics counselor certified by the ABGC or ABMGG from outside the  
557 commonwealth operating as consultants; or

558 (vi) the use of occasional services of organizations from outside the commonwealth  
559 employing genetic counselors certified by the ABGC or ABMGG.

560 SECTION 22. Section 10A of chapter 118E of the General Laws, as so appearing, is  
561 hereby amended by inserting after the word "for", in line 1, the following words:- abortion and  
562 abortion-related care as defined in section 12K of chapter 112,.

563 SECTION 23. Said section 10A of said chapter 118E, as so appearing, is hereby further  
564 amended by adding the following paragraph:-

565 Coverage provided under this section shall not be subject to any deductible, coinsurance,  
566 copayment or any other cost-sharing requirement. Coverage offered under this section shall not  
567 impose unreasonable restrictions or delays in the coverage.

568 SECTION 24. Chapter 147 of the General Laws is hereby amended by adding the  
569 following section:-

570 Section 63. (a) As used in this section, the following words shall have the following  
571 meanings unless the context clearly requires otherwise:

572 “Law enforcement agency of the commonwealth”, any state, municipal, college or  
573 university police department, sheriff’s department, correctional facility, prosecutorial office,  
574 court, probation office, or a program of more than 1 of any such entity, or any other non-federal  
575 entity in the commonwealth charged with the enforcement of laws or the custody of detained  
576 persons.

577 (b) Notwithstanding any general or special law to the contrary and except as required by  
578 federal law, no officer or employee of a law enforcement agency of the commonwealth, while  
579 acting under color of law, shall provide information or assistance to a federal law enforcement  
580 agency or any other state’s law enforcement agency or any private citizen or quasi-law  
581 enforcement agent in relation to an investigation or inquiry into services constituting legally-  
582 protected health care activity, as defined in section 11I½ of chapter 12, if such services would be  
583 lawful as provided if they occurred entirely in the commonwealth.

584 SECTION 25. Section 47F of chapter 175 of the General Laws, as appearing in the 2020  
585 Official Edition, is hereby amended by inserting after the word “of”, in line 20, the following  
586 words:- abortion and abortion-related care as defined in section 12K of chapter 112,.

587 SECTION 26. Said section 47F of said chapter 175, as so appearing, is hereby further  
588 amended by inserting after the third paragraph the following 3 paragraphs:-

589 Coverage provided under this section for abortion or abortion-related care shall not be  
590 subject to any deductible, coinsurance, copayment or any other cost-sharing requirement;  
591 provided, however, that deductibles, coinsurance or copayments shall be required if the  
592 applicable plan is governed by the federal Internal Revenue Code and would lose its tax-exempt  
593 status as a result of the prohibition on deductibles, coinsurance or copayments for these services.

594 Coverage offered under this section for abortion or abortion-related care shall not impose  
595 unreasonable restrictions or delays in the coverage.

596 Benefits for an enrollee under this section shall be the same for the enrollee's covered  
597 spouse and covered dependents.

598 A policy of accident and sickness insurance that is purchased by an employer that is a  
599 church or qualified church-controlled organization, as those terms are defined in subsection (j) of  
600 section 47W shall be exempt from covering abortion or abortion-related care at the request of the  
601 employer. An employer that invokes the exemption under this section shall provide written  
602 notice to prospective enrollees prior to enrollment with the plan and such notice shall list the  
603 health care methods and services for which the employer will not provide coverage for religious  
604 reasons.

605 SECTION 27. Section 193U of said chapter 175, as so appearing, is hereby amended by  
606 inserting after the word "specialty", in line 14, the following words:- ; provided further, that no  
607 medical malpractice insurer shall discriminate against a provider or adjust or otherwise calculate  
608 a provider's risk classification or premium charges on the basis that, applying the definitions of  
609 section 11I½ of chapter 12: (i) the health care provider offers reproductive health care services or  
610 gender-affirming health care services that are unlawful in another state; (ii) another state's laws  
611 create potential or actual liability for those services; or (iii) abusive litigation against a provider  
612 concerning reproductive health care services or gender-affirming health care services resulted in  
613 a judgment against the provider, if such health care services would be lawful and consistent with  
614 good medical practice as provided if they occurred entirely in the commonwealth.

615 SECTION 28. Section 8H of chapter 176A of the General Laws, as so appearing, is  
616 hereby amended by inserting after the word “for”, in line 8, the second time it appears, the  
617 following words:- abortion and abortion-related care as defined in section 12K of chapter 112,.

618 SECTION 29. Said section 8H of said chapter 176A, as so appearing, is hereby further  
619 amended by striking out, in lines 9 and 10, the words “to the same extent that benefits are  
620 provided for medical conditions not related to pregnancy”.

621 SECTION 30. Said section 8H of said chapter 176A, as so appearing, is hereby further  
622 amended by inserting after the third paragraph the following 3 paragraphs:-

623 Coverage provided under this section for abortion or abortion-related care shall not be  
624 subject to any deductible, coinsurance, copayment or any other cost-sharing requirement;  
625 provided, however, that deductibles, coinsurance or copayments shall be required if the  
626 applicable plan is governed by the federal Internal Revenue Code and would lose its tax-exempt  
627 status as a result of the prohibition on deductibles, coinsurance or copayments for these services.  
628 Coverage offered under this section for abortion or abortion-related care shall not impose  
629 unreasonable restrictions or delays in the coverage.

630 Benefits for an enrollee under this section shall be the same for the enrollee’s covered  
631 spouse and covered dependents.

632 A policy of accident and sickness insurance that is purchased by an employer that is a  
633 church or qualified church-controlled organization, as those terms are defined in subsection (j) of  
634 section 8W of this chapter shall be exempt from covering abortion or abortion-related care at the  
635 request of the employer. An employer that invokes the exemption under this subsection shall  
636 provide written notice to prospective enrollees prior to enrollment with the plan and such notice

637 shall list the health care methods and services for which the employer will not provide coverage  
638 for religious reasons.

639 SECTION 31. Section 4H of chapter 176B of the General Laws, as so appearing, is  
640 hereby amended by inserting after the word “for”, in line 8, the following words:- abortion and  
641 abortion-related care as defined in section 12K of chapter 112,.

642 SECTION 32. Said section 4H of said chapter 176B, as so appearing, is hereby further  
643 amended by striking out, in lines 8 to 10, inclusive, the words “to the same extent that benefits  
644 are provided for medical conditions not related to pregnancy”.

645 SECTION 33. Said section 4H of said chapter 176B, as so appearing, is hereby further  
646 amended by inserting after the third paragraph the following 3 paragraphs:-

647 Coverage provided under this section for abortion or abortion-related care shall not be  
648 subject to any deductible, coinsurance, copayment or any other cost-sharing requirement;  
649 provided, however, that deductibles, coinsurance or copayments shall be required if the  
650 applicable plan is governed by the federal Internal Revenue Code and would lose its tax-exempt  
651 status as a result of the prohibition on deductibles, coinsurance or copayments for these services.  
652 Coverage offered under this section for abortion or abortion-related care shall not impose  
653 unreasonable restrictions or delays in the coverage.

654 Benefits for an enrollee under this section shall be the same for the enrollee’s covered  
655 spouse and covered dependents.

656 A policy of accident and sickness insurance that is purchased by an employer that is a  
657 church or qualified church-controlled organization, as those terms are defined in subsection (j) of

658 section 4W shall be exempt from covering abortion or abortion-related care at the request of the  
659 employer. An employer that invokes the exemption under this subsection shall provide written  
660 notice to prospective enrollees prior to enrollment with the plan and such notice shall list the  
661 health care methods and services for which the employer will not provide coverage for religious  
662 reasons.

663 SECTION 34. Section 4I of chapter 176G of the General Laws, as so appearing, is hereby  
664 amended by inserting after the word “for”, in line 2, the following words:- abortion and abortion-  
665 related care as defined in section 12K of chapter 112,.

666 SECTION 35. Said section 4I of said chapter 176G, as so appearing, is hereby further  
667 amended by inserting after the second paragraph the following 3 paragraphs:-

668 Coverage provided under this section for abortion or abortion-related care shall not be  
669 subject to any deductible, coinsurance, copayment or any other cost-sharing requirement;  
670 provided, however, that deductibles, coinsurance or copayments shall be required if the  
671 applicable plan is governed by the federal Internal Revenue Code and would lose its tax-exempt  
672 status as a result of the prohibition on deductibles, coinsurance or copayments for these services.

673 Coverage offered under this section for abortion or abortion-related care shall not impose  
674 unreasonable restrictions or delays in the coverage.

675 Benefits for an enrollee under this section shall be the same for the enrollee’s covered  
676 spouse and covered dependents.

677 A health maintenance contract that is purchased by an employer that is a church or  
678 qualified church-controlled organization, as those terms are defined in subsection (j) of section  
679 4O shall be exempt from covering abortion or abortion-related care at the request of the



680 employer. An employer that invokes the exemption under this subsection shall provide written  
681 notice to prospective enrollees prior to enrollment with the plan and such notice shall list the  
682 health care methods and services for which the employer will not provide coverage for religious  
683 reasons.

684 SECTION 36. Section 4A of chapter 218 of the General Laws, as so appearing, is hereby  
685 amended by inserting after the word “filing”, in line 20, the following words:- ; provided further,  
686 that, except as required by federal law, a judgment creditor shall not file a copy of any foreign  
687 judgment under this section if the judgment was issued in connection with any litigation  
688 concerning legally-protected health care activity, as defined in section 11I½ of chapter 12.

689 SECTION 37. Subsection (g) of said section 4A of said chapter 218, as so appearing, is  
690 hereby amended by adding the following sentence:- In any action filed to enforce a judgment  
691 issued in connection with any litigation concerning legally-protected health care activity, as  
692 defined in section 11I½ of chapter 12, the court in the commonwealth hearing the action shall not  
693 give any force or effect to any judgment issued without jurisdiction.

694 SECTION 38. Section 11 of chapter 223A of the General Laws, as so appearing, is  
695 hereby amended by adding the following paragraph:-

696 Notwithstanding any other provision of this section to the contrary and except as required  
697 by federal law, a court of this commonwealth shall not order a person who is domiciled or found  
698 within this commonwealth to give testimony or statement or produce documents or other things  
699 for use in connection with any proceeding in a tribunal outside the commonwealth concerning  
700 legally-protected health care activity, as defined in section 11I½ of chapter 12.

701 SECTION 39. Section 59H of chapter 231 of the General Laws, as so appearing, is  
702 hereby amended by inserting after the word “case”, in line 1, the following words:- , except a  
703 case brought pursuant to section 11I½ of chapter 12,.

704 SECTION 40. Section 13A of chapter 233 of the General Laws, as so appearing, is  
705 hereby amended by inserting after the word “summons”, in line 32, the following words:- ,  
706 except that no justice shall issue a summons in a case, except as required by federal law, where  
707 prosecution is pending concerning legally-protected health care activity, as defined in section  
708 11I½ of chapter 12, or where a grand jury investigation concerning legally-protected health care  
709 activity has commenced or is about to commence for a criminal violation of a law of such other  
710 state unless the acts forming the basis of the prosecution or investigation would also constitute an  
711 offense if occurring entirely in the commonwealth.

712 SECTION 41. Section 13 of chapter 276 of the General Laws, as so appearing, is hereby  
713 amended by striking out the first paragraph and inserting in place thereof the following 2  
714 paragraphs:-

715 The governor may also surrender, on demand of the executive authority of any other  
716 state, any person in the commonwealth charged in such other state in the manner provided in  
717 section 14 with committing an act in this commonwealth, or in a third state, intentionally  
718 resulting in a crime in the state whose executive authority is making the demand, hereafter in this  
719 section and in sections 14 to 20P, inclusive, referred to as the demanding state, only when the  
720 acts for which extradition is sought would be punishable by the laws of the commonwealth if the  
721 consequences claimed to have resulted therefrom in the demanding state had taken effect in this  
722 commonwealth and the provisions of sections 11 to 20R, inclusive, not otherwise inconsistent

723 shall apply to such cases even though the accused was not in the demanding state at the time of  
724 the commission of the crime and has not fled therefrom; provided, however, that the governor  
725 may, in the governor's discretion, make any such surrender conditional upon agreement by the  
726 executive authority of the demanding state that the person so surrendered will be held to answer  
727 no criminal charges of any nature except those set forth in the requisition upon which such  
728 person is so surrendered, at least until such person has been given reasonable opportunity to  
729 return to the commonwealth after the person's acquittal, if the person shall be acquitted, or after  
730 the person shall be released from confinement, if the person shall be convicted.

731         Except as required by federal law, the governor shall not surrender a person charged in  
732 another state as a result of engaging in legally-protected health care activity, as defined in section  
733 11I½ of chapter 12, unless the executive authority of the demanding state shall allege in writing  
734 that the accused was physically present in the demanding state at the time of the commission of  
735 the alleged offense and that thereafter the accused fled from the demanding state.

736         SECTION 42. Section 14 of said chapter 276, as so appearing, is hereby amended by  
737 inserting the after word "state", in line 7, the following words:- only when the acts for which  
738 extradition is sought would be punishable by the laws of the commonwealth, if the consequences  
739 claimed to have resulted therefrom in the demanding state had taken effect in this  
740 commonwealth.

741         SECTION 43. Section 20A of said chapter 276, as so appearing, is hereby amended by  
742 inserting after the word "thirteen", in lines 5 and 12 and 13, the following words:- , with the  
743 exception of cases for which the governor shall not surrender a person under said section 13.

744 SECTION 44. Section 20B of said chapter 276, as so appearing, is hereby amended by  
745 adding the following sentence:- This section shall not apply to cases arising under section 13 for  
746 which the governor shall not surrender a person.

747 SECTION 45. Section 20C of said chapter 276, as so appearing, is hereby amended by  
748 inserting after the word “thirteen”, in line 4, the following words:- , with the exception of cases  
749 for which the governor shall not surrender a person under said section 13.”.

750 SECTION 46. Not later than April 1, 2023, the department of public health, in  
751 consultation with Reproductive Equity Now, Inc., shall issue a report to the senate and house  
752 committees on ways and means and the joint committee on public health identifying areas of the  
753 commonwealth in which pregnant people do not have access to abortion, as defined in section  
754 12K of chapter 112 of the General Laws, or birth care within a radius of 50 miles and providing  
755 recommendations to facilitate access to abortion and birth care in the identified areas. The report  
756 shall be made publicly available on the department’s website.

757 SECTION 47. Sections 7, 8, 22, 23, 25, 26 and 28 to 35, inclusive, shall apply to all  
758 policies, contracts and certificates of health insurance subject to chapters 32A, 118E, 175, 176A,  
759 176B and 176G of the General Laws that are delivered, issued or renewed on or after January 1,  
760 2023.

761 SECTION 48. An institution, as defined in section 46 of chapter 15A of the General  
762 Laws, shall not be required to utilize money from its general fund or student fees for medication  
763 abortion readiness required under said section 46 of said chapter 15A until January 1, 2026.

764 SECTION 49. Each institution’s first medication abortion readiness plan as required  
765 under subsection (b) of section 46 of chapter 15A of the General Laws shall be submitted to the

766 department of public health not later than November 30, 2023 and the department shall review  
767 such plans for suitability by January 31, 2024.

768 SECTION 50. Subsections (c) and (d) of section 46 of chapter 15A of the General Laws  
769 shall take effect on February 1, 2024.