

HOUSE No. 2158

The Commonwealth of Massachusetts

PRESENTED BY:

Tricia Farley-Bouvier

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 recognizing EMS as a disease dangerous to the public health, requiring inclusion in MAVEN, establishing the Massachusetts EMS registry and requiring biennial reporting as part of population health trends.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Tricia Farley-Bouvier</i>	<i>2nd Berkshire</i>	<i>1/18/2023</i>
<i>Vanna Howard</i>	<i>17th Middlesex</i>	<i>2/1/2023</i>
<i>Mary S. Keefe</i>	<i>15th Worcester</i>	<i>2/6/2023</i>
<i>Estela A. Reyes</i>	<i>4th Essex</i>	<i>5/5/2023</i>

HOUSE No. 2158

By Representative Farley-Bouvier of Pittsfield, a petition (accompanied by bill, House, No. 2158) of Tricia Farley-Bouvier, Vanna Howard and Mary S. Keefe that the Department of Public Health add electromagnetic sensitivity (EMS) to the list of diseases dangerous to the public health. Public Health.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Third General Court
(2023-2024)**

An Act recognizing EMS as a disease dangerous to the public health, requiring inclusion in MAVEN, establishing the Massachusetts EMS registry and requiring biennial reporting as part of population health trends.

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

1 Chapter 111 of the General Laws is hereby amended by inserting after section 243 the
2 following section:-

3 SECTION 244 EMS Disease Classification and Registry

4 (a) The department shall add Electromagnetic Sensitivity (EMS) to the list of diseases
5 dangerous to the public health in 105 CMR 300.000 and 300.100 in order to facilitate reporting
6 and surveillance requirements within the Disease Surveillance and Case Management System
7 (MAVEN) implemented in 105 CMR 300.050 and identification of incidences that are part of a
8 cluster or outbreak for purposes of 105 CMR 300.134.

9 (b) The department shall include EMS to the list of diseases possibly linked to
10 environmental exposures in 105 CMR 300.192.

11 (c) The department shall collect and disseminate to health care providers (including but
12 not limited to pediatricians) and the public recommended educational materials and diagnosis
13 guidelines for identification of the symptoms associated with EMS. These materials shall
14 include, but not be limited to the EUROPAEM EMF Guideline 2016 for the prevention,
15 diagnosis and treatment of EMF-related health problems and illnesses, Clinical Practice
16 Guidelines in the Diagnosis and Management of Electromagnetic Field Hypersensitivity,
17 Environmental Health Clinic, Women’s College Hospital (Toronto, CA) and Guideline of the
18 Austrian Medical Association for the diagnosis and treatment of EMF related health problems
19 and illnesses (EMF syndrome).

20 (d) (1) The department shall establish an EMS disease registry for the collection of
21 information necessary to determine the incidence and prevalence of EMS in the commonwealth.

22 (2) There shall be within the department an EMS disease registry advisory committee to
23 advise and assist in the development, implementation and progress of the EMS disease registry
24 established in subsection (d)(1). The committee shall review and submit recommendations on: (i)
25 what data shall be collected, including, but not limited to, demographic information and data by
26 areas and regions of the commonwealth, with specific data from urban, low and median income
27 communities and minority communities of the commonwealth; (ii) the means of collecting and
28 disseminating such data; (iii) how to ensure privacy and confidentiality of such data; (iv) the
29 purpose, design and functionality of the registry; and (v) the implementation of the registry. The
30 committee shall recommend to the department any information deemed necessary and
31 appropriate for the statistical identification and planning for treatment and education of health
32 care providers and persons diagnosed with EMS.

33 (3) The committee shall consist of the commissioner, or a designee, and 10 members to
34 be appointed by the commissioner as follows: 3 physicians, 1 of whom shall be a general
35 neurologist, 1 of whom shall be an environmental health specialist and 1 of whom shall be a
36 pediatrician; 1 health informaticist; 2 population health researchers familiar with registries; 2
37 EMS researchers; and 2 persons diagnosed with EMS. The committee shall meet at least bi-
38 annually to assess registry progress and recommend changes.

39 (e) The commissioner shall include EMS as part of the data systems and biennial reports
40 required by each population health trends required by chapter 111 section 237.

41 (f) Definition: for purposes of this section “Electromagnetic Sensitivity” (EMS), also
42 known as EMF Syndrome, Electromagnetic Field Hypersensitivity or Nonionizing Radiation
43 Sickness, means the recognized constellation of mainly neurological spectrum condition
44 symptoms that have been associated with exposure to nonionizing electromagnetic energy. They
45 include headaches, memory, cognitive and sleep problems, heart palpitations and/or increased
46 heart rate, ringing in the ears, fatigue, skin rashes, tingling, nose bleeds, unremitting flu-like
47 symptoms, dizziness, and burning sensations.