

**HOUSE . . . . . No. 4838**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

***Marjorie C. Decker***

*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 expanding access to perimenopause and menopause care.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Marjorie C. Decker</i>	<i>25th Middlesex</i>	<i>11/13/2025</i>
<i>Hadley Luddy</i>	<i>4th Barnstable</i>	<i>11/25/2025</i>

# HOUSE . . . . . No. 4838

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By Representative Decker of Cambridge, a petition (subject to Joint Rule 12) of Marjorie C. Decker relative to a special commission (including members of the General Court) on perimenopause and menopause care. Public Health.

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## The Commonwealth of Massachusetts

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In the One Hundred and Ninety-Fourth General Court  
(2025-2026)  
\_\_\_\_\_

An Act expanding access to perimenopause and menopause care.

*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. (a) There shall be a special legislative commission on perimenopause and  
2 menopause care in the commonwealth. The commission shall consist of 19 members: 1 member  
3 of the senate appointed by the senate president, who shall serve as co-chair; 1 member of the  
4 house of representatives appointed by the speaker of the house of representatives, who shall  
5 serve as co-chair; the commissioner of public health or a designee; the executive director of the  
6 health policy commission, or a designee; the assistant secretary for MassHealth or a designee;  
7 the executive director of the center for health information and analysis or a designee; the  
8 secretary of labor and workforce development or a designee; 2 members appointed by the  
9 Massachusetts Medical Society who hold current certification from the Menopause Society as a  
10 Menopause Society Certified Practitioner; 1 member appointed by the NAACP New England  
11 Area Conference with experience in healthcare in Massachusetts; 1 member appointed by the  
12 Massachusetts Health and Hospital Association, Inc. with not less than 5 years of experience in  
13 perimenopause, menopause, and midlife healthcare; and 8 members appointed by the governor, 1

of whom shall be a representative of the Tufts Center for Black Maternal Health and Reproductive Justice; 1 of whom shall be representative of the Massachusetts chapter of the American College of Obstetricians and Gynecologists, 1 of whom shall be a representative of the Planned Parenthood League of Massachusetts, 1 of whom shall be a representative of the Massachusetts Nurses Association, 1 of whom shall be a representative of the New England Medical Association, 1 of whom shall be a representative of the Massachusetts League of Community Health Centers, 1 of whom shall be a representative of the Massachusetts Commission on the Status of Women and 1 of whom shall be a certified community health worker with experience in perimenopause, menopause, and midlife healthcare.

(b) The special legislative commission shall: (i) collect and assess data regarding perimenopause and menopause in a manner that protects personal privacy and complies with federal law, including information disaggregated by race, ethnicity, health insurance status, disability, income level and geography on the prevalence of, the incidence of and knowledge about perimenopause and menopause; (ii) study the current availability of and access to perimenopause and menopause care and services across the commonwealth; (iii) assess coverage for evaluation and treatment options for symptoms of perimenopause and menopause and related chronic conditions, including but not limited to, telehealth services and existing prior authorization requirements; (iv) identify gaps in the provision of health care services for individuals experiencing perimenopause and menopause; (v) identify gaps in medical education and training related to perimenopause and menopause diagnosis and management practices among licensed health care providers under chapter 112; (vi) develop methods to improve patient and clinician awareness of the menopause transition; (vii) evaluate the impact of perimenopause and menopause on the workforce and the scope and effectiveness of existing perimenopause and

menopause-related workplace policies; and (viii) issue a report on the commission's findings and recommendations to increase awareness, improve access to high-quality, evidence-based health care, enhance education and training, and improve health outcomes relative to perimenopause and menopause in the commonwealth.

(d) The commission shall study: (i) symptoms associated with perimenopause and menopause and related chronic conditions; (ii) diagnosis and treatment of perimenopause and menopause; (iii) quality of care and health care outcomes; (iv) barriers to accessing perimenopause and menopause care; (v) racial and ethnic disparities in perimenopause and menopause; (vi) the availability, affordability and adequacy of insurance coverage, public or private, relative to perimenopause and menopause care; (vii) training and education regarding perimenopause and menopause diagnosis and management for licensed health care providers under chapter 112, including but not limited to, the use of continuing medical education credits on perimenopause and menopause for health care providers; and (viii) trends in practice patterns regarding menopause diagnosis and treatment by specialty, region, sex, race or ethnicity, medical practice setting, and experience.

(d) Not later than December 31, 2027, the special legislative commission shall submit a report of its findings to the clerks of the house of representatives and the senate, the house and senate committees on ways and means, the joint committee on health care financing and the joint committee on public health.

SECTION 2. (a) The department of public health shall develop and disseminate to the public, information regarding perimenopause and menopause, which shall include information on: (i) symptoms, physical and emotional changes, treatment options and long-term health

considerations associated with perimenopause and menopause and related chronic conditions; (ii) the awareness of perimenopause and menopause and the incidence and prevalence of perimenopause and menopause among adults; (iii) the accessibility of the range of evidence-based treatment options, as medically appropriate, for perimenopause and menopause, including, but not limited to, hormone therapy, vaginal estrogen, prasterone, and other necessary procedures and medications and culturally responsive supports including acupuncture and pelvic floor therapy. The department shall ensure that information disseminated pursuant to this section is available in multiple languages, including, but not limited to Spanish, Portuguese, Mandarin, Cantonese, Haitian Creole and other spoken languages in the commonwealth.

(b) The department may disseminate information to the public directly through the department's website or through arrangements with agencies carrying out intra-agency initiatives, nonprofit organizations, consumer groups, community organizations, institutions of higher education or state or local public-private partnerships, to aid adult individuals and their families in understanding and identifying perimenopause and menopause and how to navigate available resources and obtain treatment.

(c) The department shall develop and coordinate programs for conducting and supporting evidence-based research with respect to the causes of perimenopause and menopause and treatment options.

(d) The department shall, in consultation with and in accordance with guidelines from relevant professional boards of registration, develop and disseminate comprehensive education materials about perimenopause and menopause to health care workers, including but not limited to, physicians, nurse practitioners, physician assistants, registered nurses, and community health

workers, (i) to ensure that such health care workers remain informed about current information regarding perimenopause and menopause and prioritize both the physical and mental health care of patients experiencing perimenopause and menopause and (ii) to aid them in diagnosing, treating or making appropriate referrals for individuals experiencing perimenopause and menopause.

SECTION 3. Section 2 of chapter 112 of the General Laws, as appearing in the 2024 Official Edition, is hereby amended by adding the following paragraph:-

The board shall require that any continuing education requirements necessary for the renewal of a physician's certificate of registration include the 1-time completion of a course of training and education on the diagnosis, treatment and care of patients with perimenopause and menopause; provided, however, that this course requirement shall only apply to physicians who serve perimenopausal and menopausal age populations.

SECTION 4. Section 9F of said chapter 112, as so appearing, is hereby amended by adding the following paragraph:-

The board shall require that any continuing education requirements necessary for the renewal of a physician assistant's certificate of registration include the 1-time completion of a course of training and education on the diagnosis, treatment and care of patients with perimenopause and menopause; provided, however, that this course requirement shall only apply to physician assistants who serve perimenopausal and menopausal age populations.

SECTION 5. Section 74 of said chapter 112, as so appearing, is hereby amended by adding the following paragraph:-

The board shall require that any continuing education requirements necessary for the renewal of a registered nurse's certificate of registration include the 1-time completion of a course of training and education on the diagnosis, treatment and care of patients with perimenopause and menopause; provided, however, that this course requirement shall only apply to registered nurses who serve perimenopausal and menopausal age populations.

SECTION 6. Section 74A of said chapter 112, as so appearing, is hereby amended by adding the following paragraph:-

The board shall require that any continuing education requirements necessary for the renewal of a practical nurse's certificate of registration include the 1-time completion of a course of training and education on the diagnosis, treatment and care of patients with perimenopause and menopause; provided, however, that this course requirement shall only apply to practical nurses who serve perimenopausal and menopausal age populations.

SECTION 7. All physicians, physician assistants, registered nurses and practical nurses licensed as of the effective date of this act and required to complete the continuing education requirement of a 1-time course of training and education on the diagnosis, treatment and care of patients with perimenopause and menopause pursuant to sections 2, 9F, 74 and 74A of chapter 112 of the General Laws shall complete that 1-time course requirement not more than 4 years after the effective date of this act.

SECTION 8. Section 4 of chapter 151B of the General Laws, as most recently amended by section 76 of chapter 205 of the acts of 2024, is hereby further amended by striking out subsection 1 and inserting in place thereof the following subsection:-

1. For an employer, by themselves or their agent, because of the race, color, religious creed, national origin, sex, gender identity, sexual orientation, which shall not include persons whose sexual orientation involves minor children as the sex object, genetic information, pregnancy or a condition related to said pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, ancestry or status as a veteran of any individual to refuse to hire or employ or to bar or to discharge from employment such individual or to discriminate against such individual in compensation or in terms, conditions or privileges of employment, unless based upon a bona fide occupational qualification.

SECTION 9. Said section 4 of said chapter 151B, as so amended, is hereby further amended by striking out subsection 1E and inserting in place thereof the following subsection:-

1E. (a) As used in this subsection, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Reasonable accommodation”, may include, but shall not be limited to: (i) more frequent or longer paid or unpaid breaks; (ii) time off to attend to a pregnancy complication, recover from childbirth or attend to reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, with or without pay; (iii) acquisition or modification of equipment or seating; (iv) temporary transfer to a less strenuous or hazardous position; (v) job restructuring; (vi) light duty; (vii) private non-bathroom space for expressing breast milk; (viii) assistance with manual labor; or (ix) a modified work schedule; provided, however, that an employer shall not be required to discharge or transfer an employee with more seniority or



promote an employee who is not able to perform the essential functions of the job with or without a reasonable accommodation.

“Undue hardship”, an action requiring significant difficulty or expense; provided, however, that the employer shall have the burden of proving undue hardship; provided further, that in making a determination of undue hardship, the following factors shall be considered: (i) the nature and cost of the needed accommodation; (ii) the overall financial resources of the employer; (iii) the overall size of the business of the employer with respect to the number of employees and the number, type and location of its facilities; and (iv) the effect on expenses and resources or any other impact of the accommodation on the employer’s program, enterprise or business.

(b) For an employer to deny a reasonable accommodation for an employee’s pregnancy or any condition related to the employee’s pregnancy, including, but not limited to, lactation or the need to express breast milk for a nursing child if the employee requests such an accommodation, or for reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition; provided, however, that an employer may deny such an accommodation if the employer can demonstrate that the accommodation would impose an undue hardship on the employer’s program, enterprise or business. It shall also be an unlawful practice under this subsection to:

(i) take adverse action against an employee who requests or uses a reasonable accommodation in terms, conditions or privileges of employment including, but not limited to, failing to reinstate the employee to the original employment status or to an equivalent position

with equivalent pay and accumulated seniority, retirement, fringe benefits and other applicable service credits when the need for a reasonable accommodation ceases;

(ii) deny an employment opportunity to an employee if the denial is based on the need of the employer to make a reasonable accommodation to the known conditions related to the employee's pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or to the employee's reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition.

(iii) require an employee affected by pregnancy or menopause, or require said employee affected by a condition related to pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or for reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, to accept an accommodation that the employee chooses not to accept, if that accommodation is unnecessary to enable the employee to perform the essential functions of the job;

(iv) require an employee to take a leave if another reasonable accommodation may be provided for the known conditions related to the employee's pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or to the employee's reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, without undue hardship on the employer's program, enterprise or business;

(v) refuse to hire a person who is pregnant because of the pregnancy or because of a condition related to the person's pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or because of a condition related to the person's reproductive health, including, but not limited to, perimenopause, menopause or a related

187 medical condition; provided, however, that the person is capable of performing the essential  
188 functions of the position with a reasonable accommodation and that reasonable accommodation  
189 would not impose an undue hardship, demonstrated by the employer, on the employer's program,  
190 enterprise or business.

191 (c) Upon request for an accommodation from the employee or prospective employee  
192 capable of performing the essential functions of the position involved, the employee or  
193 prospective employee and the employer shall engage in a timely, good faith and interactive  
194 process to determine an effective, reasonable accommodation to enable the employee or  
195 prospective employee to perform the essential functions of the employee's job or the position to  
196 which the prospective employee has applied. An employer may require that documentation about  
197 the need for a reasonable accommodation come from an appropriate health care or rehabilitation  
198 professional; provided, however, that an employer shall not require documentation from an  
199 appropriate health care or rehabilitation professional for the following accommodations: (i) more  
200 frequent restroom, food or water breaks; (ii) seating; (iii) limits on lifting more than 20 pounds;  
201 and (iv) private non-bathroom space for expressing breast milk. An "appropriate health care or  
202 rehabilitation professional" shall include, but shall not be limited to, a medical doctor, including  
203 a psychiatrist, a psychologist, a nurse practitioner, a physician assistant, a psychiatric clinical  
204 nurse specialist, a physical therapist, an occupational therapist, a speech therapist, a vocational  
205 rehabilitation specialist, a midwife, a lactation consultant or another licensed mental health  
206 professional authorized to perform specified mental health services. An employer may require  
207 documentation for an extension of the accommodation beyond the originally agreed to  
208 accommodation.

(d) Written notice of: (i) the right to be free from discrimination in relation to pregnancy or a condition related to the employee's pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or in relation to reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, and (ii) the right to reasonable accommodations for conditions related to pregnancy, perimenopause or menopause pursuant to this subsection, shall be distributed by an employer to its employees. The notice shall be provided in a handbook, pamphlet or other means of notice to all employees including, but not limited to: (i) new employees at or prior to the commencement of employment; and (ii) an employee who notifies the employer of a pregnancy or an employee who notifies the employer of a condition related to the employee's pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or of a condition related the employee's reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, not more than 10 days after such notification.

(e) Subject to appropriation, the commission shall develop courses of instruction and conduct public education efforts as necessary to inform employers, employees and employment agencies about the rights and responsibilities established under this subsection not more than 180 days after the appropriation.

(f) This subsection shall not be construed to preempt, limit, diminish or otherwise affect any other law relating to sex discrimination or pregnancy or in any way diminish the coverage for pregnancy or a condition related to pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child under section 105D of chapter 149, or for reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition.

SECTION 10. Said section 4 of said chapter 151B, as so amended, is hereby further amended by striking out subsection 3 and inserting in place thereof the following subsection:-

3. For any employer or employment agency to print or circulate or cause to be printed or circulated any statement, advertisement or publication, or to use any form of application for employment or to make any inquiry or record in connection with employment, which expresses, directly or indirectly, any limitation, specification or discrimination as to the race, color, religious creed, national origin, sex, gender identity, sexual orientation, which shall not include persons whose sexual orientation involves minor children as the sex object, age, genetic information, pregnancy or a condition related to said pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, ancestry or status as a veteran, or the handicap of a qualified handicapped person or any intent to make any such limitation, specification or discrimination, or to discriminate in any way on the ground of race, color, religious creed, national origin, sex, gender identity, sexual orientation, age, genetic information, pregnancy or a condition related to said pregnancy including, but not limited to, lactation or the need to express breast milk for a nursing child, or reproductive health, including, but not limited to, perimenopause, menopause or a related medical condition, ancestry, status as a veteran or the handicap of a qualified handicapped person, unless based upon a bona fide occupational qualification.