

HOUSE No. 5019

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, February 5, 2026.

The committee on Financial Services, to whom was referred the petition (accompanied by bill, House, No. 1218) of Patrick Joseph Kearney relative to insurance coverage for stuttering speech therapy, reports recommending that the accompanying bill (House, No. 5019) ought to pass.

For the committee,

JAMES M. MURPHY.

HOUSE No. 5019

The Commonwealth of Massachusetts

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

An Act relative to access to health 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. Chapter 32A of the General Laws is hereby amended by adding the
2 following section:-

3 Section 35. (a) For the purposes of this section, the following words shall, unless the
4 context clearly requires otherwise, have the following meanings:

5 “Habilitative services”, health care services that help a person keep, learn or improve
6 skills and functioning for daily living.

7 “Habilitative stuttering speech therapy treatment”, speech therapy that helps an individual
8 to keep, learn or improve skills and functioning for daily living.

9 “Rehabilitative services”, health care services that help a person restore or improve skills
10 and functioning for daily living that have been lost or impaired.

11 “Rehabilitative stuttering speech therapy treatment”, speech therapy that helps an
12 individual restore or improve skills and functioning of daily life that have been lost or impaired.

13 “Stuttering speech therapy”, therapeutic care provided to an individual for the treatment
14 of stuttering administered by a licensed speech language pathologist.

15 “Telehealth”, the application of telecommunication technology to deliver speech therapy
16 services at a distance for assessment, intervention or consultation.

17 “Utilization review”, a set of formal techniques designed to monitor the use of or
18 evaluate the medical necessity, appropriateness, efficacy or efficiency of health care services,
19 procedures or settings, including: prior authorization, second opinion, certification, concurrent
20 review, case management, discharge planning or retrospective review, in order to make a
21 determination regarding coverage of the service under the terms of a health insurance policy or
22 an agreement with the department of health and human services.

23 (b) Any coverage offered by the commission to an active or retired employee of the
24 commonwealth insured through the commission shall provide coverage for the cost of: (i)
25 habilitative services that shall provide coverage for habilitative stuttering speech therapy
26 treatment as a treatment for stuttering, regardless of whether the stuttering is classified as
27 developmental; (ii) rehabilitative services that shall provide coverage for rehabilitative stuttering
28 speech therapy treatment as a treatment for stuttering; or (iii) both habilitative services and
29 rehabilitative services under clauses (i) and (ii).

30 (c) Habilitative services and rehabilitative services coverage required under this section
31 shall not be: (i) subject to any maximum annual benefit limit, including any limits on the number
32 of visits an insured may make to a speech language pathologist; (ii) limited based on the type of
33 disease, injury, disorder or other medical condition that resulted in the stuttering; or (iii) subject

34 to utilization review or utilization management requirements, including prior authorization or a
35 determination that the speech therapy services are medically necessary.

36 (d) Habilitative services and rehabilitative services required under this section shall
37 include coverage for speech therapy provided in person and via telehealth. Telehealth coverage
38 required under this subsection shall: (i) not be less than the coverage required for health benefit
39 plans; and (ii) include the use of any communication technology, application or platform to
40 deliver telehealth services, except coverage may be restricted to technology, applications or
41 platforms that are compliant with any applicable privacy provisions of the Federal Health
42 Insurance Portability and Accountability Act of 1996, 42 U.S.C. sec. 1320d et seq.

43 (e) Habilitative services and rehabilitative services required under this section shall
44 include: (i) treatment of speech, language, voice, communication, fluency or auditory processing
45 disorder for individual service; and (ii) treatment of speech, language, voice, communication or
46 auditory processing disorder for group service with 2 or more individuals.

47 SECTION 2. Chapter 118E of the General Laws is hereby amended by inserting after
48 section 10Z the following new section:-

49 Section 10AA. (a) For the purposes of this section, the following words shall, unless the
50 context clearly requires otherwise, have the following meanings:

51 “Habilitative services”, health care services that help a person keep, learn or improve
52 skills and functioning for daily living.

53 “Habilitative stuttering speech therapy treatment”, speech therapy that helps an individual
54 to keep, learn or improve skills and functioning for daily living.

55 “Rehabilitative services”, health care services that help a person restore or improve skills
56 and functioning for daily living that have been lost or impaired.

57 “Rehabilitative stuttering speech therapy treatment”, speech therapy that helps an
58 individual restore or improve skills and functioning of daily life that have been lost or impaired.

59 “Stuttering speech therapy”, therapeutic care provided to an individual for the treatment
60 of stuttering administered by a licensed speech language pathologist.

61 “Telehealth”, the application of telecommunication technology to deliver speech therapy
62 services at a distance for assessment, intervention or consultation.

63 “Utilization review”, a set of formal techniques designed to monitor the use of or
64 evaluate the medical necessity, appropriateness, efficacy or efficiency of health care services,
65 procedures or settings, including: prior authorization, second opinion, certification, concurrent
66 review, case management, discharge planning or retrospective review, in order to make a
67 determination regarding coverage of the service under the terms of a health insurance policy or
68 an agreement with the department of health and human services.

69 (b) The division and its contracted health insurers, health plans, health maintenance
70 organizations and third-party administrators under contract to a Medicaid managed care
71 organization, primary care clinician plan or an accountable care organization shall provide
72 coverage for habilitative stuttering speech therapy treatment as a treatment for stuttering,
73 regardless of whether the stuttering is classified as developmental; (ii) rehabilitative services that
74 shall provide coverage for rehabilitative stuttering speech therapy treatment as a treatment for
75 stuttering; or (iii) both habilitative services and rehabilitative services under clauses (i) and (ii).

76 (c) Habilitative services and rehabilitative services coverage required under this section
77 shall not be: (i) subject to any maximum annual benefit limit, including any limits on the number
78 of visits an insured may make to a speech language pathologist; (ii) limited based on the type of
79 disease, injury, disorder or other medical condition that resulted in the stuttering; or (iii) subject
80 to utilization review or utilization management requirements, including prior authorization or a
81 determination that the speech therapy services are medically necessary.

82 (d) Habilitative services and rehabilitative services required under this section shall
83 include coverage for speech therapy provided in person and via telehealth. Telehealth coverage
84 required under this subsection shall: (i) not be less than the coverage required for health benefit
85 plans; and (ii) include the use of any communication technology, application or platform to
86 deliver telehealth services, except coverage may be restricted to technology, applications or
87 platforms that are compliant with any applicable privacy provisions of the Federal Health
88 Insurance Portability and Accountability Act of 1996, 42 U.S.C. sec. 1320d et seq.

89 (e) Habilitative services and rehabilitative services required under this section shall
90 include: (i) treatment of speech, language, voice, communication, fluency or auditory processing
91 disorder for individual service; and (ii) treatment of speech, language, voice, communication or
92 auditory processing disorder for group service with 2 or more individuals.

93 SECTION 3. Chapter 175 of the General Laws is hereby amended by inserting before
94 section 47CCC the following new section:-

95 Section 47AAA. (a) For the purposes of this section, the following words shall, unless the
96 context clearly requires otherwise, have the following meanings:

97 “Habilitative services”, health care services that help a person keep, learn or improve
98 skills and functioning for daily living.

99 “Habilitative stuttering speech therapy treatment”, speech therapy that helps an individual
100 to keep, learn or improve skills and functioning for daily living.

101 “Rehabilitative services”, health care services that help a person restore or improve skills
102 and functioning for daily living that have been lost or impaired.

103 “Rehabilitative stuttering speech therapy treatment”, speech therapy that helps an
104 individual restore or improve skills and functioning of daily life that have been lost or impaired.

105 “Stuttering speech therapy”, therapeutic care provided to an individual for the treatment
106 of stuttering administered by a licensed speech language pathologist.

107 “Telehealth”, the application of telecommunication technology to deliver speech therapy
108 services at a distance for assessment, intervention or consultation.

109 “Utilization review”, a set of formal techniques designed to monitor the use of or
110 evaluate the medical necessity, appropriateness, efficacy or efficiency of health care services,
111 procedures or settings, including: prior authorization, second opinion, certification, concurrent
112 review, case management, discharge planning or retrospective review, in order to make a
113 determination regarding coverage of the service under the terms of a health insurance policy or
114 an agreement with the department of health and human services.

115 (b) An individual policy of accident and sickness insurance issued under section 108 that
116 provides hospital expense and surgical expense insurance and any group blanket or general
117 policy of accident and sickness insurance issued under section 110 that provides hospital expense

118 and surgical expense insurance, which is issued or renewed within or without the
119 commonwealth, shall provide coverage for the cost of: (i) habilitative services that shall provide
120 coverage for habilitative stuttering speech therapy treatment as a treatment for stuttering,
121 regardless of whether the stuttering is classified as developmental; (ii) rehabilitative services that
122 shall provide coverage for rehabilitative stuttering speech therapy treatment as a treatment for
123 stuttering; or (iii) both habilitative services and rehabilitative services under clauses (i) and (ii).

124 (c) Habilitative services and rehabilitative services coverage required under this section
125 shall not be: (i) subject to any maximum annual benefit limit, including any limits on the number
126 of visits an insured may make to a speech language pathologist; (ii) limited based on the type of
127 disease, injury, disorder or other medical condition that resulted in the stuttering; or (iii) subject
128 to utilization review or utilization management requirements, including prior authorization or a
129 determination that the speech therapy services are medically necessary.

130 (d) Habilitative services and rehabilitative services required under this section shall
131 include coverage for speech therapy provided in person and via telehealth. Telehealth coverage
132 required under this subsection shall: (i) not be less than the coverage required for health benefit
133 plans; and (ii) include the use of any communication technology, application or platform to
134 deliver telehealth services, except coverage may be restricted to technology, applications or
135 platforms that are compliant with any applicable privacy provisions of the Federal Health
136 Insurance Portability and Accountability Act of 1996, 42 U.S.C. sec. 1320d et seq.

137 (e) Habilitative services and rehabilitative services required under this section shall
138 include: (i) treatment of speech, language, voice, communication, fluency or auditory processing

139 disorder for individual service; and (ii) treatment of speech, language, voice, communication or
140 auditory processing disorder for group service with 2 or more individuals.

141 SECTION 4. Chapter 176A of the General Laws is hereby amended by inserting after
142 section 8DDD the following section:-

143 Section 8EEE. (a) For the purposes of this section, the following words shall, unless the
144 context clearly requires otherwise, have the following meanings:

145 “Habilitative services”, health care services that help a person keep, learn or improve
146 skills and functioning for daily living.

147 “Habilitative stuttering speech therapy treatment”, speech therapy that helps an individual
148 to keep, learn or improve skills and functioning for daily living.

149 “Rehabilitative services”, health care services that help a person restore or improve skills
150 and functioning for daily living that have been lost or impaired.

151 “Rehabilitative stuttering speech therapy treatment”, speech therapy that helps an
152 individual restore or improve skills and functioning of daily life that have been lost or impaired.

153 “Stuttering speech therapy”, therapeutic care provided to an individual for the treatment
154 of stuttering administered by a licensed speech language pathologist.

155 “Telehealth”, the application of telecommunication technology to deliver speech therapy
156 services at a distance for assessment, intervention or consultation.

157 “Utilization review”, a set of formal techniques designed to monitor the use of or
158 evaluate the medical necessity, appropriateness, efficacy or efficiency of health care services,

159 procedures or settings, including: prior authorization, second opinion, certification, concurrent
160 review, case management, discharge planning or retrospective review, in order to make a
161 determination regarding coverage of the service under the terms of a health insurance policy or
162 an agreement with the department of health and human services.

163 (b) Any contract between a subscriber and a corporation under an individual or group
164 hospital service plan which is delivered, issued or renewed within the commonwealth shall
165 provide coverage for habilitative stuttering speech therapy treatment as a treatment for stuttering,
166 regardless of whether the stuttering is classified as developmental; (ii) rehabilitative services that
167 shall provide coverage for rehabilitative stuttering speech therapy treatment as a treatment for
168 stuttering; or (iii) both habilitative services and rehabilitative services under clauses (i) and (ii).

169 (c) Habilitative services and rehabilitative services coverage required under this section
170 shall not be: (i) subject to any maximum annual benefit limit, including any limits on the number
171 of visits an insured may make to a speech language pathologist; (ii) limited based on the type of
172 disease, injury, disorder or other medical condition that resulted in the stuttering; or (iii) subject
173 to utilization review or utilization management requirements, including prior authorization or a
174 determination that the speech therapy services are medically necessary.

175 (d) Habilitative services and rehabilitative services required under this section shall
176 include coverage for speech therapy provided in person and via telehealth. Telehealth coverage
177 required under this subsection shall: (i) not be less than the coverage required for health benefit
178 plans; and (ii) include the use of any communication technology, application or platform to
179 deliver telehealth services, except coverage may be restricted to technology, applications or

180 platforms that are compliant with any applicable privacy provisions of the Federal Health
181 Insurance Portability and Accountability Act of 1996, 42 U.S.C. sec. 1320d et seq.

182 (e) Habilitative services and rehabilitative services required under this section shall
183 include: (i) treatment of speech, language, voice, communication, fluency or auditory processing
184 disorder for individual service; and (ii) treatment of speech, language, voice, communication or
185 auditory processing disorder for group service with 2 or more individuals.

186 SECTION 5. Chapter 176B of the General Laws is hereby amended by inserting after
187 section 4DDD the following section:-

188 Section 4EEE. (a) For the purposes of this section, the following words shall, unless the
189 context clearly requires otherwise, have the following meanings:

190 “Habilitative services”, health care services that help a person keep, learn or improve
191 skills and functioning for daily living.

192 “Habilitative stuttering speech therapy treatment”, speech therapy that helps an individual
193 to keep, learn or improve skills and functioning for daily living.

194 “Rehabilitative services”, health care services that help a person restore or improve skills
195 and functioning for daily living that have been lost or impaired.

196 “Rehabilitative stuttering speech therapy treatment”, speech therapy that helps an
197 individual restore or improve skills and functioning of daily life that have been lost or impaired.

198 “Stuttering speech therapy”, therapeutic care provided to an individual for the treatment
199 of stuttering administered by a licensed speech language pathologist.

200 “Telehealth”, the application of telecommunication technology to deliver speech therapy
201 services at a distance for assessment, intervention or consultation.

202 “Utilization review”, a set of formal techniques designed to monitor the use of or
203 evaluate the medical necessity, appropriateness, efficacy or efficiency of health care services,
204 procedures or settings, including: prior authorization, second opinion, certification, concurrent
205 review, case management, discharge planning or retrospective review, in order to make a
206 determination regarding coverage of the service under the terms of a health insurance policy or
207 an agreement with the department of health and human services.

208 (b) Any subscription certificate under an individual or group medical service agreement
209 delivered, issued or renewed within the commonwealth shall provide coverage for habilitative
210 stuttering speech therapy treatment as a treatment for stuttering, regardless of whether the
211 stuttering is classified as developmental; (ii) rehabilitative services that shall provide coverage
212 for rehabilitative stuttering speech therapy treatment as a treatment for stuttering; or (iii) both
213 habilitative services and rehabilitative services under clauses (i) and (ii).

214 (c) Habilitative services and rehabilitative services coverage required under this section
215 shall not be: (i) subject to any maximum annual benefit limit, including any limits on the number
216 of visits an insured may make to a speech language pathologist; (ii) limited based on the type of
217 disease, injury, disorder or other medical condition that resulted in the stuttering; or (iii) subject
218 to utilization review or utilization management requirements, including prior authorization or a
219 determination that the speech therapy services are medically necessary.

220 (d) Habilitative services and rehabilitative services required under this section shall
221 include coverage for speech therapy provided in person and via telehealth. Telehealth coverage

222 required under this subsection shall: (i) not be less than the coverage required for health benefit
223 plans; and (ii) include the use of any communication technology, application or platform to
224 deliver telehealth services, except coverage may be restricted to technology, applications or
225 platforms that are compliant with any applicable privacy provisions of the Federal Health
226 Insurance Portability and Accountability Act of 1996, 42 U.S.C. sec. 1320d et seq.

227 (e) Habilitative services and rehabilitative services required under this section shall
228 include: (i) treatment of speech, language, voice, communication, fluency or auditory processing
229 disorder for individual service; and (ii) treatment of speech, language, voice, communication or
230 auditory processing disorder for group service with 2 or more individuals.

231 SECTION 6. Chapter 176G of the General Laws is hereby amended by inserting after
232 section 4VV the following section:-

233 Section 4WW. (a) For the purposes of this section, the following words shall, unless the
234 context clearly requires otherwise, have the following meanings:

235 “Habilitative services”, health care services that help a person keep, learn or improve
236 skills and functioning for daily living.

237 “Habilitative stuttering speech therapy treatment”, speech therapy that helps an individual
238 to keep, learn or improve skills and functioning for daily living.

239 “Rehabilitative services”, health care services that help a person restore or improve skills
240 and functioning for daily living that have been lost or impaired.

241 “Rehabilitative stuttering speech therapy treatment”, speech therapy that helps an
242 individual restore or improve skills and functioning of daily life that have been lost or impaired.

243 “Stuttering speech therapy”, therapeutic care provided to an individual for the treatment
244 of stuttering administered by a licensed speech language pathologist.

245 “Telehealth”, the application of telecommunication technology to deliver speech therapy
246 services at a distance for assessment, intervention or consultation.

247 “Utilization review”, a set of formal techniques designed to monitor the use of or
248 evaluate the medical necessity, appropriateness, efficacy or efficiency of health care services,
249 procedures or settings, including: prior authorization, second opinion, certification, concurrent
250 review, case management, discharge planning or retrospective review, in order to make a
251 determination regarding coverage of the service under the terms of a health insurance policy or
252 an agreement with the department of health and human services.

253 (b) Any individual or group health maintenance contract shall provide coverage for
254 habilitative stuttering speech therapy treatment as a treatment for stuttering, regardless of
255 whether the stuttering is classified as developmental; (ii) rehabilitative services that shall provide
256 coverage for rehabilitative stuttering speech therapy treatment as a treatment for stuttering; or
257 (iii) both habilitative services and rehabilitative services under clauses (i) and (ii).

258 (c) Habilitative services and rehabilitative services coverage required under this section
259 shall not be: (i) subject to any maximum annual benefit limit, including any limits on the number
260 of visits an insured may make to a speech language pathologist; (ii) limited based on the type of
261 disease, injury, disorder or other medical condition that resulted in the stuttering; or (iii) subject
262 to utilization review or utilization management requirements, including prior authorization or a
263 determination that the speech therapy services are medically necessary.

264 (d) Habilitative services and rehabilitative services required under this section shall
265 include coverage for speech therapy provided in person and via telehealth. Telehealth coverage
266 required under this subsection shall: (i) not be less than the coverage required for health benefit
267 plans; and (ii) include the use of any communication technology, application or platform to
268 deliver telehealth services, except coverage may be restricted to technology, applications or
269 platforms that are compliant with any applicable privacy provisions of the Federal Health
270 Insurance Portability and Accountability Act of 1996, 42 U.S.C. sec. 1320d et seq.

271 (e) Habilitative services and rehabilitative services required under this section shall
272 include: (i) treatment of speech, language, voice, communication, fluency or auditory processing
273 disorder for individual service; and (ii) treatment of speech, language, voice, communication or
274 auditory processing disorder for group service with 2 or more individuals.

275 SECTION 7. This act shall apply to all contracts entered into, renewed or amended on or
276 after January 1, 2026.