

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.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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