

HOUSE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Mindy Domb and Vanna Howard

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 relative to preventing discrimination against persons with disabilities in the provision of health care.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Mindy Domb</i>	<i>3rd Hampshire</i>	<i>1/15/2025</i>
<i>Vanna Howard</i>	<i>17th Middlesex</i>	<i>1/15/2025</i>

HOUSE No.

[Pin Slip]

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE HOUSE, NO. 1180 OF 2023-2024.]

The Commonwealth of Massachusetts

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

An Act relative to preventing discrimination against persons with disabilities in the provision of 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. Section 1 of chapter 151B of the General Laws, as appearing in the 2020
2 Official Edition, is hereby amended by striking out, in line 138, the word “handicap” and
3 inserting in place thereof the following word:- disability.

4 SECTION 2. Section 4 of said chapter 151B, as so appearing, is hereby amended by
5 adding the following subsection:-

6 (a) As used in this subsection, the following words shall have the following meaning
7 unless the context clearly requires otherwise:

8 “Disability”, shall have the same meaning as defined in section 1 of chapter 151B.

9 “Short-term survival”, an individual’s assessed probability of surviving an acute illness
10 from which they are presently suffering and being successfully discharged from a
11 hospital or
12 other inpatient medical facility.

13 (b) It shall be an unlawful practice:

14 (i) For any public or private entity or agency of the commonwealth, to approve or
15 implement a plan for the distribution of scarce healthcare resources during a crisis,
16 including, but
17 not limited to, crisis standards of care implemented during a public health emergency,
18 that deny
19 an individual lifesaving treatment or place an individual at reduced priority for lifesaving
20 treatment if such a determination is based on: (A) a presumption that an individual has a
21 reduced
22 quality of life due to a disability or chronic health condition; (B) a presumption that an
23 individual’s life is less worth saving due to a disability or chronic health condition; or (C)
24 any
25 measure, metric, or third party analysis which has the effect of setting a value for the life
26 of an

27 individual or individuals with a specific disability or medical diagnosis that is less than
28 the value

29 given to the life of an individual or individuals without a disability; provided however
30 that this

31 subsection shall not prohibit such a plan from considering an individual's prospects for
32 short-

33 term survival in determining whether they are prioritized for care.

34 (ii) For any public or private entity or agency of the commonwealth, to withhold any

35 medical treatment to an individual based on: (A) a presumption that an individual has a
36 reduced

37 quality of life due to a disability or chronic health condition; (B) a presumption that an

38 individual's life is less worth saving due to a disability or chronic health condition; or (C)
39 any

40 measure, metric, or third party analysis which has the effect of setting a value for the life
41 of an

42 individual or individuals with a specific disability or medical diagnosis that is less than
43 the value

44 given to the life of an individual or individuals without a disability.

45 (iii) For any public or private entity or agency of the commonwealth, when determining

46 whether a healthcare treatment should be available within a formulary, or determining the
47 value
48 of a healthcare treatment, to employ a measure or metric which assigns a reduced value to
49 the
50 life extension provided by a treatment based on a pre-existing disability or chronic health
51 condition of the individuals whom the treatment would benefit.

52 (iv) For a hospital or other entity engaged in the provision of healthcare to: (A) condition
53 the provision of procedures or treatment on an individual having an order to not
54 resuscitate, POLST (Physician Orders for Life-Sustaining Treatment), advance directive
55 or any instruction relating to the administration, withholding or withdrawing of life-
56 sustaining
57 procedures or artificially administered nutrition and hydration; (B) communicate to any
58 individual or person acting on behalf of the individual, before or after admission to the
59 hospital,
60 that treatment is conditioned on the individual having an order to not resuscitate, an
61 advance
62 directive or any instruction relating to the administration, withholding or withdrawing of
63 life-

64 sustaining procedures or artificially administered nutrition and hydration; (C) suggest to
65 any
66 individual, or person acting on behalf of the individual, who contacts the hospital
67 regarding
68 treatment for the individual that admission or treatment is conditioned on the individual
69 having
70 an order to not resuscitate, an advance directive or any instruction relating to the
71 administration,
72 withholding or withdrawing of life-sustaining procedures or artificially administered
73 nutrition
74 and hydration; or (D) discriminate in any other way against an individual based on
75 whether the
76 individual has an order to not resuscitate, an advance directive or any instruction relating
77 to the
78 administration, withholding or withdrawing of life-sustaining procedures or artificially
79 administered nutrition and hydration.

80 (c) This subsection shall not prohibit a hospital from providing written materials and
81 information about advance directives to an individual or prohibit a licensed health care

82 professional from engaging in a discussion with an individual about the written materials
83 and
84 information, so long as the professional does not disproportionately advise an individual
85 to sign
86 an advanced directive based on the race, ethnicity, gender, sexuality, or disability status
87 of said
88 individual.

89 (d) Nothing in this subsection shall prevent healthcare practitioners, hospitals or other
90 healthcare entities from providing a medically appropriate course of treatment to an
91 individual
92 that they believe will extend that individual's life, improve their symptoms or alleviate
93 pain and
94 suffering.

95 (e) The secretary of health and human services shall promulgate regulations to implement
96 this subsection.

97 SECTION 3. The secretary of health and human services shall promulgate regulations for
98 the implementation of subsection 20 of section 4 of chapter 151B not later than 60 days
99 after the
100 effective date of this act.