

SENATE No. 1577

The Commonwealth of Massachusetts

PRESENTED BY:

Liz Miranda

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 to improve access to health care for people with Long COVID.

PETITION OF:

NAME:

Liz Miranda

DISTRICT/ADDRESS:

Second Suffolk

SENATE No. 1577

By Ms. Miranda, a petition (accompanied by bill, Senate, No. 1577) of Liz Miranda for legislation to improve access to health care for people with Long COVID. Public Health.

The Commonwealth of Massachusetts

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

An Act to improve access to health care for people with Long COVID.

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, as so appearing in the 2022 Official Edition, is hereby
2 amended by inserting after section 24O the following section:-

3 Section 24P. (a)The department, subject to appropriation, shall develop and implement an
4 evidence-based culturally-specific patient navigation pilot program for people living with a Long
5 COVID diagnosis, aligned with the National Academies of Sciences, Engineering, and Medicine
6 (NASEM) Long COVID definition, .

7 (b)The department shall design the pilot program to: (i) reduce barriers for Long COVID
8 patients in accessing timely and knowledgeable medical treatment, (ii) provide referrals for
9 clinical care and nonclinical support to patients with Long COVID and their families, (iii)
10 facilitate access to medical information and resources to help meet daily needs and emotional
11 support, (iv) integrate within healthcare teams for maximum efficacy, and (v) improve health
12 equity in Long COVID care in the commonwealth.

13 (c) The department shall develop guidelines to standardize Long COVID patient
14 navigator care, which could include appropriate training to ensure skills and knowledge needed
15 to deliver the proposed service.

16 (d) The pilot program shall include, but not be limited to, the following activities:

17 (i) collecting and sharing data;

18 (ii) making initial contact with patients, conducting social and medical needs
19 assessments;

20 (iii) providing navigation on clinical needs including assistance for patients with Long
21 COVID to identify appropriate subspecialty care, making referrals and connections to clinicians,
22 facilitating communication among providers and with the patient's health care team, scheduling
23 medical appointments, and optimizing insurance coverage and disability insurance coverage;

24 (iv) providing navigation on social and emotional support needs including providing
25 connections for patients with Long COVID to lay support group services to address stress for
26 patients with long COVID and to social services to address issues that include transportation,
27 language barriers and interpretation, food insecurity, housing insecurity, unemployment
28 assistance, connections to community-based organizations and other services;

29 (v) providing resources to inform shared decision-making and the availability of social
30 and community services;

31 (vi) establishing reimbursement for patient navigator services and supervision of such
32 services.

33 (e) The department may establish a consumer advisory board consisting primarily of
34 people living with Long COVID in the Commonwealth and healthcare providers engaged in this
35 care, who shall assist the department in developing the pilot program to ensure that the program
36 considers the varied needs and populations of those living with Long COVID across the
37 Commonwealth. The department may develop guidelines and process to issue stipend payments
38 to reimburse for participation in the consumer advisory board.

39 (f) Not later than one year after the implementation of the pilot program said department
40 shall provide a report to the clerks of the house and the senate and to the joint committees on
41 public health and health care financing. The report shall include, but not be limited to; (i) the
42 activities of the pilot, including services provided, the geographical locations of services, (ii) the
43 number of patients who participated and the region where they live, and (iii) the advisability of
44 expanding the pilot program.