

SENATE No. 3069

The Commonwealth of Massachusetts

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

SENATE, May 18, 2026.

The committee on Health Care Financing to whom was referred the Senate Bill ensuring access to healthcare and medically necessary food for children (Senate, No. 691), - reports, recommending that the same ought to pass with an amendment substituting a new draft with the same title (Senate, No. 3069) (estimated cost greater than \$100,000).

For the committee,
Cindy F. Friedman

SENATE No. 3069

The Commonwealth of Massachusetts

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

An Act ensuring access to healthcare and medically necessary food for children.

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 inserting after
2 section 34 the following section:-

3 Section 35. (a) For the purpose of this section, the following words shall have the
4 following meanings:

5 “Food protein allergy”, Immunoglobulin E and non-Immunoglobulin E-mediated
6 allergies to food proteins, including: (i) food protein-induced enterocolitis syndrome; (ii)
7 Immunoglobulin E and non-Immunoglobulin E-mediated allergies to food proteins; and (iii)
8 Eosinophilic disorders, including eosinophilic esophagitis, eosinophilic gastroenteritis,
9 eosinophilic colitis, and post-transplant eosinophilic disorders.

10 “Medically necessary food”, a low protein modified food product, an amino acid
11 preparation product, a modified fat preparation product, or a nutritional formula, including such a
12 formula that does not require a prescription, that is: (i) furnished pursuant to the prescription,
13 order, or recommendation, as applicable, of a physician or other health care professional

14 qualified to make such prescription, order, or recommendation, for the dietary management of a
15 food protein allergy; (ii) a specially formulated and processed product for the partial or exclusive
16 feeding of an individual by means of oral intake or enteral feeding by tube; (iii) intended for the
17 dietary management of an individual who, because of therapeutic or chronic medical needs, has
18 limited or impaired capacity to ingest, digest, absorb, or metabolize ordinary food stuffs or
19 certain nutrients, or who has other special medically determined nutrient requirements, the
20 dietary management of which cannot be achieved by the modification of the normal diet alone;
21 (iv) intended to be used under medical supervision, which may include in a home setting; and (v)
22 intended only for an individual receiving active and ongoing medical supervision wherein the
23 individual requires medical care on a recurring basis for, among other things, instructions on the
24 use of the food. The term “Medically necessary food” shall not include: (i) foods taken as part of
25 an overall diet designed to reduce the risk of a disease or medical condition or as weight loss
26 products, even if they are recommended by a physician or other health professional; (ii) foods
27 marketed as gluten-free for the management of celiac disease or non-celiac gluten sensitivity;
28 and (iii) foods marketed for the management of diabetes.

29 (b) The commission shall provide coverage for the cost of medically necessary food from
30 a supplier participating in such carrier’s health provider network, for persons with a food protein
31 allergy under the age of 18. An increase in patient cost sharing shall not be allowed to achieve
32 compliance with this section.

33 (c) The commission shall not: (i) require an insured to obtain a referral from a primary
34 care provider for specialty care, provided by an immunologist or family practitioner participating
35 in such carrier's health care provider network, related to medically necessary food for a food
36 protein allergy for persons under the age of 18 as described in this section; or (ii) categorize

37 prescription coverage for medically necessary food for a food protein allergy for persons under
38 the age of 18 as “durable medical equipment.”

39 SECTION 2. Chapter 175 of the General Laws is hereby amended by inserting after
40 section 230 the following section:-

41 Section 231. (a) For the purpose of this section, the following words shall have the
42 following meanings:

43 “Food protein allergy”, Immunoglobulin E and non-Immunoglobulin E-mediated
44 allergies to food proteins, including: (i) food protein-induced enterocolitis syndrome; (ii)
45 Immunoglobulin E and non-Immunoglobulin E-mediated allergies to food proteins; and (iii)
46 Eosinophilic disorders, including eosinophilic esophagitis, eosinophilic gastroenteritis,
47 eosinophilic colitis, and post-transplant eosinophilic disorders.

48 “Medically necessary food”, a low protein modified food product, an amino acid
49 preparation product, a modified fat preparation product, or a nutritional formula, including such a
50 formula that does not require a prescription, that is: (i) furnished pursuant to the prescription,
51 order, or recommendation, as applicable, of a physician or other health care professional
52 qualified to make such prescription, order, or recommendation, for the dietary management of a
53 food protein allergy; (ii) a specially formulated and processed product for the partial or exclusive
54 feeding of an individual by means of oral intake or enteral feeding by tube; (iii) intended for the
55 dietary management of an individual who, because of therapeutic or chronic medical needs, has
56 limited or impaired capacity to ingest, digest, absorb, or metabolize ordinary food stuffs or
57 certain nutrients, or who has other special medically determined nutrient requirements, the
58 dietary management of which cannot be achieved by the modification of the normal diet alone;

59 (iv) intended to be used under medical supervision, which may include in a home setting; and (v)
60 intended only for an individual receiving active and ongoing medical supervision wherein the
61 individual requires medical care on a recurring basis for, among other things, instructions on the
62 use of the food. The term “Medically necessary food” shall not include: (i) foods taken as part of
63 an overall diet designed to reduce the risk of a disease or medical condition or as weight loss
64 products, even if they are recommended by a physician or other health professional; (ii) foods
65 marketed as gluten-free for the management of celiac disease or non-celiac gluten sensitivity;
66 and (iii) foods marketed for the management of diabetes.

67 (b) Any policy, contract, agreement, plan or certificate of insurance issued, delivered or
68 renewed within the commonwealth, which is considered creditable coverage under section 1 of
69 chapter 111M, shall provide coverage for the cost of medically necessary food from a supplier
70 participating in such carrier’s health provider network, for persons with a food protein allergy
71 under the age of 18. An increase in patient cost sharing shall not be allowed to achieve
72 compliance with this section.

73 (c) A carrier under this chapter, as defined in section 1 of chapter 12C, shall not: (i)
74 require an insured to obtain a referral from a primary care provider for specialty care, provided
75 by an immunologist or family practitioner participating in such carrier's health care provider
76 network, related to medically necessary food for a food protein allergy for persons under the age
77 of 18 as described in this section; or (ii) categorize prescription coverage for medically necessary
78 food for a food protein allergy for persons under the age of 18 as “durable medical equipment.”

79 SECTION 3. Chapter 176A of the General Laws is hereby amended by inserting after
80 section 38 the following section:-

81 Section 39. (a) For the purpose of this section, the following words shall have the
82 following meanings:

83 “Food protein allergy”, Immunoglobulin E and non-Immunoglobulin E-mediated
84 allergies to food proteins, including: (i) food protein-induced enterocolitis syndrome; (ii)
85 Immunoglobulin E and non-Immunoglobulin E-mediated allergies to food proteins; and (iii)
86 Eosinophilic disorders, including eosinophilic esophagitis, eosinophilic gastroenteritis,
87 eosinophilic colitis, and post-transplant eosinophilic disorders.

88 “Medically necessary food”, a low protein modified food product, an amino acid
89 preparation product, a modified fat preparation product, or a nutritional formula, including such a
90 formula that does not require a prescription, that is: (i) furnished pursuant to the prescription,
91 order, or recommendation, as applicable, of a physician or other health care professional
92 qualified to make such prescription, order, or recommendation, for the dietary management of a
93 food protein allergy; (ii) a specially formulated and processed product for the partial or exclusive
94 feeding of an individual by means of oral intake or enteral feeding by tube; (iii) intended for the
95 dietary management of an individual who, because of therapeutic or chronic medical needs, has
96 limited or impaired capacity to ingest, digest, absorb, or metabolize ordinary food stuffs or
97 certain nutrients, or who has other special medically determined nutrient requirements, the
98 dietary management of which cannot be achieved by the modification of the normal diet alone;
99 (iv) intended to be used under medical supervision, which may include in a home setting; and (v)
100 intended only for an individual receiving active and ongoing medical supervision wherein the
101 individual requires medical care on a recurring basis for, among other things, instructions on the
102 use of the food. The term “Medically necessary food” shall not include: (i) foods taken as part of
103 an overall diet designed to reduce the risk of a disease or medical condition or as weight loss

104 products, even if they are recommended by a physician or other health professional; (ii) foods
105 marketed as gluten-free for the management of celiac disease or non-celiac gluten sensitivity;
106 and (iii) foods marketed for the management of diabetes.

107 (b) Any contract between a subscriber and the corporation under an individual or group
108 hospital service plan that is delivered, issued or renewed within the commonwealth shall provide
109 coverage for the cost of medically necessary food from a supplier participating in such carrier's
110 health provider network, for persons with a food protein allergy under the age of 18. An increase
111 in patient cost sharing shall not be allowed to achieve compliance with this section.

112 (c) A carrier under this chapter, as defined in section 1 of chapter 12C, shall not: (i)
113 require an insured to obtain a referral from a primary care provider for specialty care, provided
114 by an immunologist or family practitioner participating in such carrier's health care provider
115 network, related to medically necessary food for a food protein allergy for persons under the age
116 of 18 as described in this section; or (ii) categorize prescription coverage for medically necessary
117 food for a food protein allergy for persons under the age of 18 as "durable medical equipment."

118 SECTION 4. Chapter 176B of the General Laws is hereby amended by inserting after
119 section 25 the following section:-

120 Section 26. (a) For the purpose of this section, the following words shall have the
121 following meanings:

122 "Food protein allergy", Immunoglobulin E and non-Immunoglobulin E-mediated
123 allergies to food proteins, including: (i) food protein-induced enterocolitis syndrome; (ii)
124 Immunoglobulin E and non-Immunoglobulin E-mediated allergies to food proteins; and (iii)

125 Eosinophilic disorders, including eosinophilic esophagitis, eosinophilic gastroenteritis,
126 eosinophilic colitis, and post-transplant eosinophilic disorders.

127 “Medically necessary food”, a low protein modified food product, an amino acid
128 preparation product, a modified fat preparation product, or a nutritional formula, including such a
129 formula that does not require a prescription, that is: (i) furnished pursuant to the prescription,
130 order, or recommendation, as applicable, of a physician or other health care professional
131 qualified to make such prescription, order, or recommendation, for the dietary management of a
132 food protein allergy; (ii) a specially formulated and processed product for the partial or exclusive
133 feeding of an individual by means of oral intake or enteral feeding by tube; (iii) intended for the
134 dietary management of an individual who, because of therapeutic or chronic medical needs, has
135 limited or impaired capacity to ingest, digest, absorb, or metabolize ordinary food stuffs or
136 certain nutrients, or who has other special medically determined nutrient requirements, the
137 dietary management of which cannot be achieved by the modification of the normal diet alone;
138 (iv) intended to be used under medical supervision, which may include in a home setting; and (v)
139 intended only for an individual receiving active and ongoing medical supervision wherein the
140 individual requires medical care on a recurring basis for, among other things, instructions on the
141 use of the food. The term “Medically necessary food” shall not include: (i) foods taken as part of
142 an overall diet designed to reduce the risk of a disease or medical condition or as weight loss
143 products, even if they are recommended by a physician or other health professional; (ii) foods
144 marketed as gluten-free for the management of celiac disease or non-celiac gluten sensitivity;
145 and (iii) foods marketed for the management of diabetes.

146 (b) Any subscription certificate under an individual or group medical service agreement
147 delivered, issued or renewed by agreement within the commonwealth shall provide coverage for

148 the cost of medically necessary food from a supplier participating in such carrier’s health
149 provider network, for persons with a food protein allergy under the age of 18. An increase in
150 patient cost sharing shall not be allowed to achieve compliance with this section.

151 (c) A carrier under this chapter, as defined in section 1 of chapter 12C, shall not: (i)
152 require an insured to obtain a referral from a primary care provider for specialty care, provided
153 by an immunologist or family practitioner participating in such carrier's health care provider
154 network, related to medically necessary food for a food protein allergy for persons under the age
155 of 18 as described in this section; or (ii) categorize prescription coverage for medically necessary
156 food for a food protein allergy for persons under the age of 18 as “durable medical equipment.”

157 SECTION 5. Chapter 176G of the General Laws is hereby amended by inserting after
158 section 33 the following section:-

159 Section 34. (a) For the purpose of this section, the following words shall have the
160 following meanings:

161 “Food protein allergy”, Immunoglobulin E and non-Immunoglobulin E-mediated
162 allergies to food proteins, including: (i) food protein-induced enterocolitis syndrome; (ii)
163 Immunoglobulin E and non-Immunoglobulin E-mediated allergies to food proteins; and (iii)
164 Eosinophilic disorders, including eosinophilic esophagitis, eosinophilic gastroenteritis,
165 eosinophilic colitis, and post-transplant eosinophilic disorders.

166 “Medically necessary food”, a low protein modified food product, an amino acid
167 preparation product, a modified fat preparation product, or a nutritional formula, including such a
168 formula that does not require a prescription, that is: (i) furnished pursuant to the prescription,
169 order, or recommendation, as applicable, of a physician or other health care professional

170 qualified to make such prescription, order, or recommendation, for the dietary management of a
171 food protein allergy; (ii) a specially formulated and processed product for the partial or exclusive
172 feeding of an individual by means of oral intake or enteral feeding by tube; (iii) intended for the
173 dietary management of an individual who, because of therapeutic or chronic medical needs, has
174 limited or impaired capacity to ingest, digest, absorb, or metabolize ordinary food stuffs or
175 certain nutrients, or who has other special medically determined nutrient requirements, the
176 dietary management of which cannot be achieved by the modification of the normal diet alone;
177 (iv) intended to be used under medical supervision, which may include in a home setting; and (v)
178 intended only for an individual receiving active and ongoing medical supervision wherein the
179 individual requires medical care on a recurring basis for, among other things, instructions on the
180 use of the food. The term “Medically necessary food” shall not include: (i) foods taken as part of
181 an overall diet designed to reduce the risk of a disease or medical condition or as weight loss
182 products, even if they are recommended by a physician or other health professional; (ii) foods
183 marketed as gluten-free for the management of celiac disease or non-celiac gluten sensitivity;
184 and (iii) foods marketed for the management of diabetes.

185 (b) An individual group health maintenance contract that is issued or renewed within or
186 without the commonwealth shall provide coverage for the cost of medically necessary food from
187 a supplier participating in such carrier’s health provider network, for persons with a food protein
188 allergy under the age of 18. An increase in patient cost sharing shall not be allowed to achieve
189 compliance with this section.

190 (c) A carrier under this chapter, as defined in section 1 of chapter 12C, shall not: (i)
191 require an insured to obtain a referral from a primary care provider for specialty care, provided
192 by an immunologist or family practitioner participating in such carrier's health care provider

193 network, related to medically necessary food for a food protein allergy for persons under the age
194 of 18 as described in this section; or (ii) categorize prescription coverage for medically necessary
195 food for a food protein allergy for persons under the age of 18 as “durable medical equipment.”

196 SECTION 6. Chapter 176I of the General Laws is hereby amended by inserting after
197 section 13 the following section:-

198 Section 14. (a) For the purpose of this section, the following words shall have the
199 following meanings:

200 “Food protein allergy”, Immunoglobulin E and non-Immunoglobulin E-mediated
201 allergies to food proteins, including: (i) food protein-induced enterocolitis syndrome; (ii)
202 Immunoglobulin E and non-Immunoglobulin E-mediated allergies to food proteins; and (iii)
203 Eosinophilic disorders, including eosinophilic esophagitis, eosinophilic gastroenteritis,
204 eosinophilic colitis, and post-transplant eosinophilic disorders.

205 “Medically necessary food”, a low protein modified food product, an amino acid
206 preparation product, a modified fat preparation product, or a nutritional formula, including such a
207 formula that does not require a prescription, that is: (i) furnished pursuant to the prescription,
208 order, or recommendation, as applicable, of a physician or other health care professional
209 qualified to make such prescription, order, or recommendation, for the dietary management of a
210 food protein allergy; (ii) a specially formulated and processed product for the partial or exclusive
211 feeding of an individual by means of oral intake or enteral feeding by tube; (iii) intended for the
212 dietary management of an individual who, because of therapeutic or chronic medical needs, has
213 limited or impaired capacity to ingest, digest, absorb, or metabolize ordinary food stuffs or
214 certain nutrients, or who has other special medically determined nutrient requirements, the

215 dietary management of which cannot be achieved by the modification of the normal diet alone;
216 (iv) intended to be used under medical supervision, which may include in a home setting; and (v)
217 intended only for an individual receiving active and ongoing medical supervision wherein the
218 individual requires medical care on a recurring basis for, among other things, instructions on the
219 use of the food. The term “Medically necessary food” shall not include: (i) foods taken as part of
220 an overall diet designed to reduce the risk of a disease or medical condition or as weight loss
221 products, even if they are recommended by a physician or other health professional; (ii) foods
222 marketed as gluten-free for the management of celiac disease or non-celiac gluten sensitivity;
223 and (iii) foods marketed for the management of diabetes.

224 (b) A preferred provider contract between a covered person and an organization shall
225 provide coverage for the cost of medically necessary food from a supplier participating in such
226 carrier’s health provider network, for persons with a food protein allergy under the age of 18. An
227 increase in patient cost sharing shall not be allowed to achieve compliance with this section.

228 (c) A carrier under this chapter, as defined in section 1 of chapter 12C, shall not: (i)
229 require an insured to obtain a referral from a primary care provider for specialty care, provided
230 by an immunologist or family practitioner participating in such carrier's health care provider
231 network, related to medically necessary food for a food protein allergy for persons under the age
232 of 18 as described in this section; or (ii) categorize prescription coverage for medically necessary
233 food for a food protein allergy for persons under the age of 18 as “durable medical equipment.”

234 SECTION 7. Not later than 6 months after the enactment of this act, the division of
235 insurance shall promulgate the rules and regulations necessary for the implementation and
236 enforcement of the sections of this act.