

SENATE No. 3131

The Commonwealth of Massachusetts

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

SENATE, July 9, 2026.

The committee on Revenue to whom was referred the petition (accompanied by bill, Senate, No. 1938) of Joanne M. Comerford, Jason M. Lewis, Michael D. Brady, Jacob R. Oliveira and other members of the Senate for legislation to establish an advisory council on family caregiving, report the accompanying bill (Senate, No. 3131).

For the committee,
James B. Eldridge

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

An Act supporting family caregivers.

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 6A of the General Laws, as appearing in the 2022 Official Edition,
2 is hereby amended by inserting after section 16FF the following section:-

3 Section 16GG. (a) There shall be an advisory council on family caregiving. The advisory
4 council shall consist of: the secretary of health and human services, or a designee; the secretary
5 of aging and independence, or a designee; the commissioner of public health, or a designee; the
6 secretary of veterans’ services, or a designee; the secretary of labor and workforce development,
7 or a designee; the house and senate chairs of the joint committee on elder affairs, or their
8 designees; and 10 persons to be appointed, in a manner that ensures, as much as possible,
9 geographic and demographic diversity, by the governor, including 2 family caregiver advocates,
10 2 family caregivers, 2 health care providers, 2 representatives of state-based academic
11 institutions, 1 of whom is a gerontologist, and 2 representatives from state-based advocacy
12 organizations that provide services to family caregivers, including information, referral and
13 support services.

14 (b) The advisory council shall meet at least quarterly and shall advise the executive office
15 of health and human services and the general court on the development of family caregiving
16 policy for the commonwealth. The advisory council shall work with the secretary of health and
17 human services to identify resources available, and services needed for these individuals and
18 associated costs.

19 (c) Annually, not later than March 1, the advisory council shall provide a report to the
20 executive office of health and human services, the clerks of the senate and the house of
21 representatives, the joint committee on children, families, and persons with disabilities, the joint
22 committee on elder affairs, and the joint committee on public health which shall include: (i)
23 information and recommendations on family caregiving policy and (ii) an evaluation of all state-
24 funded efforts in caregiving research, clinical care, institutional and home-based and community-
25 based services and supports.

26 SECTION 2. Chapter 19A of the General Laws, as appearing in the 2022 Official
27 Edition, is hereby amended by inserting after section 4D the following section:-

28 Section 4E. (a) As used in this subsection, the following words shall have the following
29 meanings unless the context clearly requires otherwise:

30 "Activities of daily living", everyday functions and activities, which individuals usually
31 do without help including, but not limited to, bathing, continence, dressing, eating, toileting and
32 transferring.

33 "Eligible family member", an individual who (i) is at least 18 years of age during a
34 taxable year, (ii) requires assistance with at least 1 activity of daily living, and (iii) qualifies as a

35 dependent, spouse, parent or other relation by blood or marriage, including an in-law,
36 grandparent, grandchild, step-parent, aunt, uncle, niece or nephew of the family caregiver.

37 "Family caregiver", an individual who is a resident for the year and had eligible
38 caregiving actions, excluding those described in paragraph (d) of this subsection, with respect to
39 1 or more eligible family members during the year.

40 "Respite services", a program that provides short term relief to family caregivers from the
41 demands of caring for individuals with chronic or other health conditions, disabilities or
42 functional limitations.

43 (b) A family caregiver is eligible to receive a voucher for respite services up to 100
44 percent of the eligible expenditures incurred by the family caregiver, with a maximum allowable
45 voucher of \$1,500, provided that the family caregiver has an annual income of no more than
46 \$135,000 for an individual or no more than \$250,000 of combined household income. One year
47 following the enactment of this section, and annually thereafter, the executive office of aging and
48 independence shall increase such income eligibility criteria over that of the previous fiscal year
49 to reflect the annual cost of living adjustment in Social Security income, if any.

50 (c) Expenditures eligible to be claimed for the voucher include the costs associated with
51 respite services.

52 (d) No family caregiver shall be entitled to claim a respite voucher under this subsection
53 for the same eligible expenditures claimed by another family caregiver.

54 (e) The secretary of the executive office of aging and independence shall promulgate
55 rules and regulations relative to the administration and enforcement of this subsection.

56 (f) The secretary shall annually, not later than September 1, file a report with the house
57 and senate committees on ways and means and the chairs of the joint committee on elder affairs
58 identifying, by municipality, the total amount of caregiver respite vouchers claimed for the
59 preceding fiscal year.

60 SECTION 3. Section 1 of chapter 151A of the General Laws, as appearing in the 2022
61 Official Edition, is hereby amended by inserting after subsection (dd) the following 3
62 subsections:-

63 (ee) "Activities of daily living", everyday functions and activities, which individuals
64 usually do without help including, but not limited to, bathing, continence, dressing, eating,
65 toileting and transferring.

66 (ff) "Eligible family member", an individual who (i) is at least 18 years of age during a
67 taxable year, (ii) requires assistance with at least 1 activity of daily living, and (iii) qualifies as a
68 dependent, spouse, parent or other relation by blood or marriage, including an in-law,
69 grandparent, grandchild, step-parent, aunt, uncle, niece or nephew of the family caregiver.

70 (gg) "Family Caregiver", an individual resident of Massachusetts who is at least 18 years
71 of age and who provides assistance in the activities of daily living, with respect to 1 or more
72 eligible family members during the year.

73 SECTION 4. Subsection (c) of Section 24 of said chapter 151A of the General Laws, as
74 appearing in the 2022 Official Edition, is hereby amended by inserting after the second sentence
75 the following sentence:-

76 An individual who can provide certified medical documentation showing that they act as
77 a family caregiver, as defined in section 1 of this chapter, to an eligible family member requiring
78 assistance with activities of daily living shall be deemed to be available for work under clause (b)
79 of the first paragraph of this section.

80 SECTION 5. Section 1 of chapter 151B of the General Laws, as appearing in the 2022
81 Official Edition, is hereby amended by inserting after the definition of “genetic test” the
82 following 3 definitions:-

83 24. The term "activities of daily living", shall mean everyday functions and activities,
84 which individuals usually do without help including, but not limited to, bathing, continence,
85 dressing, eating, toileting and transferring.

86 25. The term “eligible family member”, shall mean an individual who (i) is at least 18
87 years of age during a taxable year, (ii) requires assistance with at least 1 activity of daily living,
88 and (iii) qualifies as a dependent, spouse, parent or other relation by blood or marriage, including
89 an in-law, grandparent, grandchild, step-parent, aunt, uncle, niece or nephew of the family
90 caregiver.

91 26. The term “family caregiver”, shall mean an individual resident of Massachusetts who
92 is at least 18 years of age and who provides assistance in the activities of daily living, with
93 respect to 1 or more eligible family members during the year.

94 SECTION 6. Section 4 of said chapter 151B of the General Laws, as so appearing, is
95 hereby amended by inserting after the word “veteran,” in line 8, line 190 and line 213, in each
96 instance, the following words:- or status as a family caregiver

97 SECTION 7. Said section 4 of said chapter 151B of the General Laws, as so appearing, is
98 hereby further amended by inserting after the word “blind,” in line 296 and line 302, in each
99 instance, the following words:- or because such person is as a family caregiver

100 SECTION 8. Said section 4 of said chapter 151B of the General Laws, as so appearing, is
101 hereby further amended by inserting after the word “handicap,” in line 315, the following
102 words:- or because such person is as a family caregiver

103 SECTION 9. Said section 4 of said chapter 151B of the General Laws, as so appearing, is
104 hereby further amended by inserting the word “ancestry,” in line 361, line 369 and line 379, in
105 each instance, the following:- or status as a family caregiver

106 SECTION 10. Chapter 32A of the General Laws is hereby amended by inserting after
107 section 17S the following section:-

108 Section 17T. (1) The commission shall provide, to an active or retired employee of the
109 commonwealth who is insured under the group insurance commission, an additional 30-day
110 supply of any current prescription of the insured, at the same level of coverage as a normal refill
111 of such prescription drug upon the declaration of a state of emergency pursuant to Chapter 639 of
112 the Acts of 1950.

113 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
114 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
115 all schedule II and schedule III controlled substances with the exception of those prescribed
116 through a hospice agency physician for purposes of treating end-of-life symptoms including
117 pain, nausea, anxiety or delirium.

118 SECTION 11. Chapter 118E of the General Laws is hereby amended by inserting after
119 section 10Q the following section:-

120 Section 10R. (1) The division and its contracted health insurers, health plans, health
121 maintenance organizations, behavioral health management firms and third party administrators
122 under contract to a Medicaid managed care organization or primary care clinician plan shall
123 provide an additional 30-day supply of any current prescription of the insured, at the same level
124 of coverage as a normal refill of such prescription drug upon the declaration of a state of
125 emergency pursuant to Chapter 639 of the Acts of 1950.

126 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
127 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
128 all schedule II and schedule III controlled substances with the exception of those prescribed
129 through a hospice agency physician for purposes of treating end-of-life symptoms including
130 pain, nausea, anxiety or delirium.

131 SECTION 12. Chapter 176A of the General Laws is hereby amended by inserting after
132 section 8VV the following section:-

133 Section 8WW. (1) A contract between a subscriber and the corporation under an
134 individual or group hospital service plan that is delivered, issued or renewed within or without
135 the commonwealth shall provide an additional 30-day supply of any current prescription of the
136 insured, at the same level of coverage as a normal refill of such prescription drug upon the
137 declaration of a state of emergency pursuant to Chapter 639 of the Acts of 1950.

138 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
139 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,

140 all schedule II and schedule III controlled substances with the exception of those prescribed
141 through a hospice agency physician for purposes of treating end-of-life symptoms including
142 pain, nausea, anxiety or delirium.

143 SECTION 13. Chapter 176B of the General Laws is hereby amended by inserting after
144 section 4VV the following section:-

145 Section 4WW. (1) A subscription certificate under an individual or group medical service
146 agreement delivered, issued or renewed within the commonwealth shall provide an additional
147 30-day supply of any current prescription of the insured, at the same level of coverage as a
148 normal refill of such prescription drug upon the declaration of a state of emergency pursuant to
149 Chapter 639 of the Acts of 1950.

150 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
151 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
152 all schedule II and schedule III controlled substances with the exception of those prescribed
153 through a hospice agency physician for purposes of treating end-of-life symptoms including
154 pain, nausea, anxiety or delirium.

155 SECTION 14. Chapter 176G of the General Laws is hereby amended by inserting after
156 section 4NN the following section:-

157 Section 4OO. (1) Any health maintenance organization subject to this chapter that is
158 issued or renewed within the commonwealth shall provide an additional 30-day supply of any
159 current prescription of the insured, at the same level of coverage as a normal refill of such
160 prescription drug upon the declaration of a state of emergency pursuant to Chapter 639 of the
161 Acts of 1950.

162 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
163 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
164 all schedule II and schedule III controlled substances with the exception of those prescribed
165 through a hospice agency physician for purposes of treating end-of-life symptoms including
166 pain, nausea, anxiety or delirium.

167 SECTION 15. Chapter 176I of the General Laws is hereby amended by inserting after
168 section 3A the following section:-

169 Section 3B. (1) A preferred provider contract between a covered person and an
170 organization that participates in the market shall provide an additional 30-day supply of any
171 current prescription of the insured, at the same level of coverage as a normal refill of such
172 prescription drug upon the declaration of a state of emergency pursuant to Chapter 639 of the
173 Acts of 1950.

174 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
175 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
176 all schedule II and schedule III controlled substances with the exception of those prescribed
177 through a hospice agency physician for purposes of treating end-of-life symptoms including
178 pain, nausea, anxiety or delirium.

179 SECTION 16. Chapter 176J of the General Laws is hereby amended by inserting after
180 section 14 the following section:-

181 Section 14A. (1) Any carrier subject to this chapter that participates in the market shall
182 provide an additional 30-day supply of any current prescription of the insured, at the same level

183 of coverage as a normal refill of such prescription drug upon the declaration of a state of
184 emergency pursuant to Chapter 639 of the Acts of 1950.

185 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
186 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
187 all schedule II and schedule III controlled substances with the exception of those prescribed
188 through a hospice agency physician for purposes of treating end-of-life symptoms including
189 pain, nausea, anxiety or delirium.

190 SECTION 17. Chapter 176K of the General Laws is hereby amended by inserting after
191 section 4 the following section:-

192 Section 4A. (1) Any carrier subject to this chapter that participates in the market shall
193 provide an additional 30-day supply of any current prescription of the insured, at the same level
194 of coverage as a normal refill of such prescription drug upon the declaration of a state of
195 emergency pursuant to Chapter 639 of the Acts of 1950.

196 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
197 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
198 all schedule II and schedule III controlled substances with the exception of those prescribed
199 through a hospice agency physician for purposes of treating end-of-life symptoms including
200 pain, nausea, anxiety or delirium.

201 SECTION 18. Section 2 of chapter 176M of the General Laws is hereby amended by
202 inserting after paragraph (1) of subsection (c) the following paragraph:-

203 (1 1/2) Any nongroup health plan subject to this chapter that participates in the market
204 shall provide an additional 30-day supply of any current prescription of the insured, at the same
205 level of coverage as a normal refill of such prescription drug upon the declaration of a state of
206 emergency pursuant to Chapter 639 of the Acts of 1950. The commissioner of insurance shall
207 promulgate a list of prescription drugs which shall not be subject to the provisions of this
208 paragraph. Such list shall include, but not be limited to, all schedule II and schedule III
209 controlled substances with the exception of those prescribed through a hospice agency physician
210 for purposes of treating end-of-life symptoms including pain, nausea, anxiety or delirium.

211 SECTION 19. Chapter 176Q of the General Laws is hereby amended by inserting after
212 section 5 the following section:-

213 Section 5A. (1) Any plan that participates in the market shall provide an additional 30-
214 day supply of any current prescription of the insured, at the same level of coverage as a normal
215 refill of such prescription drug upon the declaration of a state of emergency pursuant to Chapter
216 639 of the Acts of 1950.

217 (2) The commissioner of insurance shall promulgate a list of prescription drugs which
218 shall not be subject to the provisions of this section. Such list shall include, but not be limited to,
219 all schedule II and schedule III-controlled substances with the exception of those prescribed
220 through a hospice agency physician for purposes of treating end-of-life symptoms including
221 pain, nausea, anxiety or delirium.

222 SECTION 20. Notwithstanding any general or special law to the contrary, the secretary
223 of health and human services, in conjunction with the secretary of aging and independence, shall
224 take action, including requesting federal approval, if required, to permit spouses to serve as paid

225 caregivers in the MassHealth program. Any federal approvals that may be required to implement
226 this section shall be filed no later than 6 months after the effective date of this act.