SENATE DOCKET, NO. 822 FILED ON: 1/14/2025

SENATE . . . . . No. 818

The Commonwealth of Massachusetts

PRESENTED BY:

Pavel M. Payano

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 eliminating the PCP referral requirement for specialty gynecological care.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Pavel M. Payano	*First Essex*	
Rebecca L. Rausch	*Norfolk, Worcester and Middlesex*	*10/6/2025*

SENATE DOCKET, NO. 822 FILED ON: 1/14/2025

SENATE . . . . . No. 818

By Mr. Payano, a petition (accompanied by bill, Senate, No. 818) of Pavel M. Payano for legislation to eliminate the PCP referral requirement for specialty gynecological care. Financial Services.

The Commonwealth of Massachusetts

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

An Act relative to eliminating the PCP referral requirement for specialty gynecological care.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

Subsection (g) of section 15 of chapter 176O of the General Laws, as appearing in the 2022 Official Edition, is hereby amended by striking out the first sentence and inserting in place thereof the following sentence:- No carrier shall require an insured to obtain a referral or prior authorization from a primary care provider for specialty care provided by an obstetrician, gynecologist, certified nurse-midwife or family practitioner participating in such carrier's health care provider network for the following: (i) annual preventive gynecologic health examinations, including any subsequent obstetric or gynecological services determined by such obstetrician, gynecologist, certified nurse-midwife or family practitioner to be medically necessary as a result of such examination; (ii) preventative gynecologic health care and menstrual health conditions such as abnormal uterine bleeding, dysmenorrhea and pelvic pain; (iii) maternity care; and (iv) medically necessary evaluations and resultant health care services for acute or emergency gynecological conditions.