

SENATE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Julian Cyr

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 modern family building.

PETITION OF:

NAME:

Julian Cyr

DISTRICT/ADDRESS:

Cape and Islands

SENATE No.

[Pin Slip]

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 622 OF 2023-2024.]

The Commonwealth of Massachusetts

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

An Act relative to modern family building.

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 17T of chapter 32A of the General Laws, as appearing in section 74
2 of chapter 140 of the acts of 2024, is hereby amended by inserting after the word "processes", in
3 subsection (b), the following words:- , provided that such storage shall be covered from the date
4 of cryopreservation until the individual reaches the age of 35, or for a period of not less than five
5 years, whichever is later.

6 SECTION 2. Said chapter 32A is hereby amended by inserting after section 17T the
7 following section:-

8 Section 17U. (a) For purposes of this section, the following terms shall have the
9 following meanings unless the context clearly requires otherwise:

10 “Fertility diagnostic care”, procedures, products, genetic testing, medications and
11 services intended to provide information and counseling about an individual’s fertility, including
12 laboratory assessments and imaging studies.

13 “Fertility treatment”, procedures, products, genetic testing, medications and services,
14 including but not limited to in vitro fertilization, intended to achieve a pregnancy that results in a
15 live birth and that are provided in a manner consistent with established medical practice and
16 professional guidelines published by the American Society for Reproductive Medicine, its
17 successor organization, or a comparable organization, including preconception care,
18 procurement, cryopreservation and storage of gametes, embryos or other reproductive tissue.

19 “Infertility”, any of the following: (i) a licensed physician’s findings, based on a patient’s
20 medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any
21 combination of these factors; (ii) the need for medical intervention, including, but not limited to,
22 the use of donor gametes or donor embryos in order to achieve a successful pregnancy either as
23 an individual or with a partner; or (iii) the inability to establish a pregnancy after regular,
24 unprotected sexual intercourse for a period of no more than twelve months for an intended
25 gestational parent under the age of 35 and of no more than 6 months for an intended gestational
26 parent who is 35 years of age or older, provided that pregnancy resulting in miscarriage or
27 stillbirth does not restart said 12-month or 6-month time period, (iv) an individual’s increased
28 risk, independently or with the individual’s partner, of transmitting a serious, inheritable genetic
29 or chromosomal abnormality to a child; or (v) as otherwise defined by the American Society of
30 Reproductive Medicine or its successor organization.

31 (b) The commission shall provide to any active or retired employee of the commonwealth
32 who is insured under the group insurance commission coverage, to the same extent that benefits
33 are provided for other pregnancy-related procedures, coverage for fertility diagnostic care and
34 fertility treatment for individuals residing within the commonwealth diagnosed with infertility as
35 defined in subsection (a), performed by any licensed medical providers acting within the scope
36 of practice for their profession, including physicians, nurse practitioners, certified nurse-
37 midwives and licensed certified professional midwives. No conditions, including but not limited
38 to prior treatment, age, sexual orientation, gender identity or familial status, shall be imposed to
39 receive benefits under this section.

40 (c) A policy that provides coverage for services required under this section shall cover: (i)
41 no fewer than four completed oocyte retrievals; (ii) unlimited embryo transfers from retrievals
42 covered under this section or from any other completed oocyte retrieval; (iii) unlimited cycles of
43 intrauterine insemination; and (iv) unlimited intracervical insemination. No policy shall be
44 required to provide coverage for any nonmedical costs relating to the procurement of gametes,
45 donor embryos, or surrogacy services.

46 (d) Said coverage may not include any of the following: (i) any exclusion, limitation or
47 other restriction on coverage of fertility medications that are different from those imposed on
48 other prescription medications; (ii) any exclusion or denial of coverage of any fertility treatment
49 based on a covered individual's participation in fertility services provided by a third party,
50 including gestational carriers, surrogates and the donation or use of said third party's genetic
51 material; and (iii) any deductible, copayment, coinsurance, benefit maximum or other limitation
52 on coverage for services rendered pursuant to this section that are different from those imposed
53 upon services not relating to infertility or fertility treatment.

54 SECTION 3. Chapter 112 of the General Laws is hereby amended by inserting after
55 section 5O the following section:-

56 Section 5P. (a) The bureau of health professions licensure shall, in collaboration with
57 experts in lesbian, gay, bisexual, transgender and queer, hereinafter LGBTQ, family building,
58 and in coordination with the American Society for Reproductive Medicine or the Society for
59 Assisted Reproductive Technology, develop or provide for, and make available to the board of
60 registration in medicine, the board of registration in midwifery, the board of registration in
61 nursing and any clinical laboratories licensed under 105 CMR 140.000 that collects, stores or
62 distributes any genetic material for fertility treatment a professional development training
63 module regarding resources and services available to LGBTQ couples seeking to expand their
64 families. The goal of the training module shall be to encourage physicians to speak with their
65 patients, and to increase a physician's competency in having effective discussions with patients
66 and families in an appropriate manner. The training module shall include information on: (i) the
67 prevention and elimination of discrimination based on sexual orientation, gender identity and
68 expression in medical settings; (ii) improving access to services for LGBTQ individuals; and (iii)
69 options for LGBTQ individuals seeking to start or grow their family.

70 (b) The training module developed shall be accepted by the board of registration in
71 medicine, the board of registration in midwifery and the board of registration in nursing as up to
72 2 continuing professional development credits.

73 SECTION 4. Chapter 118E of the General Laws is hereby amended by inserting after
74 section 10A1/2 the following section:-

75 Section 10AA. The division shall provide coverage for fertility diagnostic care, any
76 medically necessary ovulation-enhancing drugs and medical services related to prescribing and
77 monitoring the use of ovulation-enhancing drugs, and intrauterine insemination that is intended
78 to treat infertility and achieve a pregnancy that results in a live birth that includes at least 3
79 cycles of ovulation-enhancing medication treatment over a medical assistance recipient's
80 lifetime.

81 SECTION 5. Chapter 175 of the General Laws is hereby amended by striking out section
82 47H, as appearing in the 2022 Official Edition, and inserting in place thereof the following
83 section:-

84 Section 47H. (a) For purposes of this section, the following terms shall have the
85 following meanings unless the context clearly requires otherwise:

86 "Fertility diagnostic care", procedures, products, genetic testing, medications and
87 services intended to provide information and counseling about an individual's fertility, including
88 laboratory assessments and imaging studies.

89 "Fertility treatment", procedures, products, genetic testing, medications and services,
90 including but not limited to in vitro fertilization, intended to achieve a pregnancy that results in a
91 live birth and that are provided in a manner consistent with established medical practice and
92 professional guidelines published by the American Society for Reproductive Medicine, its
93 successor organization, or a comparable organization, including preconception care,
94 procurement, cryopreservation and storage of gametes, embryos or other reproductive tissue.

95 "Infertility", any of the following: (i) a licensed physician's findings, based on a patient's
96 medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any

97 combination of these factors; (ii) the need for medical intervention, including, but not limited to,
98 the use of donor gametes or donor embryos in order to achieve a successful pregnancy either as
99 an individual or with a partner; or (iii) the inability to establish a pregnancy after regular,
100 unprotected sexual intercourse for a period of no more than twelve months for an intended
101 gestational parent under the age of 35 and of no more than 6 months for an intended gestational
102 parent who is 35 years of age or older, provided that pregnancy resulting in miscarriage or
103 stillbirth does not restart said 12-month or 6-month time period, (iv) an individual's increased
104 risk, independently or with the individual's partner, of transmitting a serious, inheritable genetic
105 or chromosomal abnormality to a child; or (v) as otherwise defined by the American Society of
106 Reproductive Medicine or its successor organization.

107 (b) Any blanket or general policy of insurance, except a blanket or general policy of
108 insurance which provides supplemental coverage to medicare or other governmental programs,
109 described in subsections (a), (c) or (d) of section 110 that provides hospital expense or surgical
110 expense insurance that includes pregnancy-related benefits and is issued or subsequently
111 renewed by agreement between the insurer and the policyholder, within or without the
112 commonwealth, while this provision is effective, or any policy of accident and sickness
113 insurance as described in section one hundred and eight that provides hospital expense or
114 surgical expense insurance that includes pregnancy-related benefits and is delivered or issued for
115 delivery or subsequently renewed by agreement between the insurer and the policyholder in the
116 commonwealth while this provision is effective, or any employees' health and welfare fund that
117 provides hospital expense and surgical expense benefits that includes pregnancy-related benefits
118 and is promulgated or renewed to any person or group of persons in the commonwealth while
119 this provision is effective shall provide, to the same extent that benefits are provided for other

120 pregnancy-related procedures, coverage for fertility diagnostic care and fertility treatment for
121 individuals residing within the commonwealth diagnosed with infertility as defined in subsection
122 (a), performed by any licensed medical providers acting within the scope of practice for their
123 profession, including physicians, nurse practitioners, certified nurse-midwives and licensed
124 certified professional midwives.

125 (c) A policy that provides coverage for services required under this section shall cover: (i)
126 no fewer than four completed oocyte retrievals; (ii) unlimited embryo transfers from retrievals
127 covered under this section or from any other completed oocyte retrieval; (iii) unlimited cycles of
128 intrauterine insemination; and (iv) unlimited intracervical insemination. No policy shall be
129 required to provide coverage for any nonmedical costs relating to the procurement of gametes,
130 donor embryos, or surrogacy services.

131 (d) Said coverage may not include any of the following: (i) any exclusion, limitation or
132 other restriction on coverage of fertility medications that are different from those imposed on
133 other prescription medications; (ii) any exclusion or denial of coverage of any fertility treatment
134 based on a covered individual's participation in fertility services provided by a third party,
135 including gestational carriers, surrogates and the donation or use of said third party's genetic
136 material; and (iii) any deductible, copayment, coinsurance, benefit maximum or other limitation
137 on coverage for services rendered pursuant to this section that are different from those imposed
138 upon services not relating to infertility or fertility treatment.

139 SECTION 6. Section 47VV of said chapter 175, as appearing in section 145 of chapter
140 140 of the acts of 2024, is hereby amended by inserting after the word "tissue", in subsection (b),

141 the following words:- , provided that coverage for such storage shall extend until the individual
142 reaches the age of 35, or for a period of 5 years, whichever is later

143 SECTION 7. Chapter 176A of the General Laws is hereby amended by striking section
144 8K, as appearing in the 2022 Official Edition, and inserting in place thereof the following:-

145 Section 8K. (a) For purposes of this section, the following terms shall have the following
146 meanings unless the context clearly requires otherwise:

147 “Fertility diagnostic care”, procedures, products, genetic testing, medications and
148 services intended to provide information and counseling about an individual’s fertility, including
149 laboratory assessments and imaging studies.

150 “Fertility treatment”, procedures, products, genetic testing, medications and services,
151 including but not limited to in vitro fertilization, intended to achieve a pregnancy that results in a
152 live birth and that are provided in a manner consistent with established medical practice and
153 professional guidelines published by the American Society for Reproductive Medicine, its
154 successor organization, or a comparable organization, including preconception care,
155 procurement, cryopreservation and storage of gametes, embryos or other reproductive tissue.

156 “Infertility”, any of the following: (i) a licensed physician’s findings, based on a patient’s
157 medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any
158 combination of these factors; (ii) the need for medical intervention, including, but not limited to,
159 the use of donor gametes or donor embryos in order to achieve a successful pregnancy either as
160 an individual or with a partner; or (iii) the inability to establish a pregnancy after regular,
161 unprotected sexual intercourse for a period of no more than twelve months for an intended
162 gestational parent under the age of 35 and of no more than 6 months for an intended gestational

163 parent who is 35 years of age or older, provided that pregnancy resulting in miscarriage or
164 stillbirth does not restart said 12-month or 6-month time period, (iv) an individual's increased
165 risk, independently or with the individual's partner, of transmitting a serious, inheritable genetic
166 or chromosomal abnormality to a child; or (v) as otherwise defined by the American Society of
167 Reproductive Medicine or its successor organization.

168 (b) Any contract, except contracts providing supplemental coverage to medicare or other
169 governmental programs, between a subscriber and the corporation under an individual or group
170 hospital service plan which is delivered, issued for delivery or renewed in the commonwealth
171 while this provision is effective and that provides pregnancy-related benefits shall provide as a
172 benefit for all individual subscribers or members within the commonwealth and all group
173 members having a principal place of employment within the commonwealth, to the same extent
174 that benefits are provided for other pregnancy-related procedures, coverage for fertility
175 diagnostic care and fertility treatment for individuals residing within the commonwealth
176 diagnosed with infertility as defined in subsection (a), performed by any licensed medical
177 providers acting within the scope of practice for their profession, including physicians, nurse
178 practitioners, certified nurse-midwives and licensed certified professional midwives.

179 (c) A policy that provides coverage for services required under this section shall cover: (i)
180 no fewer than four completed oocyte retrievals; (ii) unlimited embryo transfers from retrievals
181 covered under this section or from any other completed oocyte retrieval; (iii) unlimited cycles of
182 intrauterine insemination; and (iv) unlimited intracervical insemination. No policy shall be
183 required to provide coverage for any nonmedical costs relating to the procurement of gametes,
184 donor embryos, or surrogacy services.

185 (d) Said coverage may not include any of the following: (i) any exclusion, limitation or
186 other restriction on coverage of fertility medications that are different from those imposed on
187 other prescription medications; (ii) any exclusion or denial of coverage of any fertility treatment
188 based on a covered individual’s participation in fertility services provided by a third party,
189 including gestational carriers, surrogates and the donation or use of said third party’s genetic
190 material; and (iii) any deductible, copayment, coinsurance, benefit maximum or other limitation
191 on coverage for services rendered pursuant to this section that are different from those imposed
192 upon services not relating to infertility or fertility treatment.

193 SECTION 8. Section 8WW of said chapter 176A, as appearing in section 148 of chapter
194 140 of the acts of 2024, is hereby amended by inserting after the word “tissue”, in subsection (b),
195 the following words:- , provided that coverage for such storage shall extend until the individual
196 reaches the age of 35, or for a period of 5 years, whichever is later

197 SECTION 9. Chapter 176B of the General Laws is hereby amended by striking out
198 section 4J, as appearing in the 2022 Official Edition, and inserting in place thereof the following
199 new section:-

200 Section 4J. (a) For purposes of this section, the following terms shall have the following
201 meanings unless the context clearly requires otherwise:

202 “Fertility diagnostic care”, procedures, products, genetic testing, medications and
203 services intended to provide information and counseling about an individual’s fertility, including
204 laboratory assessments and imaging studies.

205 “Fertility treatment”, procedures, products, genetic testing, medications and services,
206 including but not limited to in vitro fertilization, intended to achieve a pregnancy that results in a

207 live birth and that are provided in a manner consistent with established medical practice and
208 professional guidelines published by the American Society for Reproductive Medicine, its
209 successor organization, or a comparable organization, including preconception care,
210 procurement, cryopreservation and storage of gametes, embryos or other reproductive tissue.

211 “Infertility”, any of the following: (i) a licensed physician’s findings, based on a patient’s
212 medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any
213 combination of these factors; (ii) the need for medical intervention, including, but not limited to,
214 the use of donor gametes or donor embryos in order to achieve a successful pregnancy either as
215 an individual or with a partner; or (iii) the inability to establish a pregnancy after regular,
216 unprotected sexual intercourse for a period of no more than twelve months for an intended
217 gestational parent under the age of 35 and of no more than 6 months for an intended gestational
218 parent who is 35 years of age or older, provided that pregnancy resulting in miscarriage or
219 stillbirth does not restart said 12-month or 6-month time period, (iv) an individual’s increased
220 risk, independently or with the individual’s partner, of transmitting a serious, inheritable genetic
221 or chromosomal abnormality to a child; or (v) as otherwise defined by the American Society of
222 Reproductive Medicine or its successor organization.

223 (b) Any subscription certificate under an individual or group medical service agreement,
224 except certificates which provide supplemental coverage to medicare or other governmental
225 programs, which is delivered, issued for delivery or renewed in the commonwealth while this
226 section is effective shall provide as a benefit for all individual subscribers or members within the
227 commonwealth and all group members having a principal place of employment within the
228 commonwealth, to the same extent that benefits are provided for other pregnancy-related
229 procedures and subject to the other terms and conditions of the subscription certificate, coverage

230 for fertility diagnostic care and fertility treatment for individuals residing within the
231 commonwealth diagnosed with infertility as defined in subsection (a), performed by any licensed
232 medical providers acting within the scope of practice for their profession, including physicians,
233 nurse practitioners, certified nurse-midwives and licensed certified professional midwives.

234 (c) A policy that provides coverage for services required under this section shall cover: (i)
235 no fewer than four completed oocyte retrievals; (ii) unlimited embryo transfers from retrievals
236 covered under this section or from any other completed oocyte retrieval; (iii) unlimited cycles of
237 intrauterine insemination; and (iv) unlimited intracervical insemination. No policy shall be
238 required to provide coverage for any nonmedical costs relating to the procurement of gametes,
239 donor embryos, or surrogacy services.

240 (d) Said coverage may not include any of the following: (i) any exclusion, limitation or
241 other restriction on coverage of fertility medications that are different from those imposed on
242 other prescription medications; (ii) any exclusion or denial of coverage of any fertility treatment
243 based on a covered individual's participation in fertility services provided by a third party,
244 including gestational carriers, surrogates and the donation or use of said third party's genetic
245 material; and (iii) any deductible, copayment, coinsurance, benefit maximum or other limitation
246 on coverage for services rendered pursuant to this section that are different from those imposed
247 upon services not relating to infertility or fertility treatment.

248 SECTION 10. Section 4WW of said chapter 176B, as appearing in section 149 of chapter
249 140 of the acts of 2024, is hereby amended by inserting after the word "tissue", in subsection (b),
250 the following words:- , provided that coverage for such storage shall extend until the individual
251 reaches the age of 35, or for a period of 5 years, whichever is later

252 SECTION 11. (a) The office of health equity shall investigate, analyze and study the
253 affordability, accessibility and practicality of the resources and services available to lesbian, gay,
254 bisexual, transgender and queer, hereinafter LGBTQ, individuals and couples seeking to expand
255 their families and to make recommendations to improve access to benefits and services where
256 necessary. The office shall: (i) examine availability of assisted reproduction providers in rural
257 and geographically isolated areas; (ii) assess the funding and programming needed to enhance
258 services to the growing population LGBTQ parents; (iii) examine the feasibility of developing
259 statewide training curricula to improve provider competency in the delivery of health and social
260 support services to LGBTQ parents; (iv) examine the extent to which out-of-pocket cost
261 associated with becoming a parent is impacted by sexual orientation and gender identity; (v)
262 examine policies and practices used by cryobanks related to known donors for non-traditional
263 families and LGBTQ donors; (vi) recommend best practices for increasing access to services and
264 eliminating disparities; (vii) make recommendations to improve resources available to LGBTQ
265 individuals relative to parentage, including but not limited to adoption, surrogacy and assistive
266 reproductive technology; and (viii) make recommendations relative to education for providers of
267 care and services to increase cultural competency and referrals to relevant resources.

268 (b) The office, in formulating its recommendations, shall take into account the best
269 policies and practices in other states and jurisdictions. The office may consult experts, hold
270 regular public meetings, fact-finding hearings and other public forums as it considers necessary.

271 (c) The study may be conducted by an entity with a demonstrated capacity to deliver
272 research results passing an academic peer-review process in analyzing both quantitative and
273 qualitative data and to communicate study results in an accessible manner.

274 (d) The office shall receive data to complete the charge of this study under memorandums
275 of understanding with the center for health information and analysis established under chapter
276 12C of the General Laws, the group insurance commission established under chapter 32A of the
277 General Laws and MassHealth established under chapter 118E of the General Laws,
278 respectively.

279 (e) The office shall submit the findings of the study to clerks of the senate and house of
280 representatives, the joint committee on public health, the joint committee on health care
281 financing, the joint committee on children, youth, and families and the house and senate
282 committees on ways and means not later than December 31, 2026.

283 SECTION 12. Section 400 of chapter 176G, as appearing in section 150 of chapter 140
284 of the acts of 2024, is hereby amended by inserting after the word “tissue”, in subsection (b), the
285 following words:- , provided that coverage for such storage shall extend until the individual
286 reaches the age of 35, or for a period of 5 years, whichever is later

287 SECTION 13. Chapter 176G of the General Laws is hereby amended by inserting after
288 section 400 the following section:-

289 Section 4PP. (a) For purposes of this section, the following terms shall have the following
290 meanings unless the context clearly requires otherwise:

291 “Fertility diagnostic care”, procedures, products, genetic testing, medications and
292 services intended to provide information and counseling about an individual’s fertility, including
293 laboratory assessments and imaging studies.

294 “Fertility treatment”, procedures, products, genetic testing, medications and services,
295 including but not limited to in vitro fertilization, intended to achieve a pregnancy that results in a
296 live birth and that are provided in a manner consistent with established medical practice and
297 professional guidelines published by the American Society for Reproductive Medicine, its
298 successor organization, or a comparable organization, including preconception care,
299 procurement, cryopreservation and storage of gametes, embryos or other reproductive tissue.

300 “Infertility”, any of the following: (i) a licensed physician’s findings, based on a patient’s
301 medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any
302 combination of these factors; (ii) the need for medical intervention, including, but not limited to,
303 the use of donor gametes or donor embryos in order to achieve a successful pregnancy either as
304 an individual or with a partner; or (iii) the inability to establish a pregnancy after regular,
305 unprotected sexual intercourse for a period of no more than twelve months for an intended
306 gestational parent under the age of 35 and of no more than 6 months for an intended gestational
307 parent who is 35 years of age or older, provided that pregnancy resulting in miscarriage or
308 stillbirth does not restart said 12-month or 6-month time period, (iv) an individual’s increased
309 risk, independently or with the individual’s partner, of transmitting a serious, inheritable genetic
310 or chromosomal abnormality to a child; or (v) as otherwise defined by the American Society of
311 Reproductive Medicine or its successor organization.

312 (b) Any health maintenance contract shall provide, to the same extent that benefits are
313 provided for other pregnancy-related procedures and subject to the other terms and conditions of
314 the subscription certificate, coverage for fertility diagnostic care and fertility treatment for
315 individuals residing within the commonwealth diagnosed with infertility as defined in subsection
316 (a), performed by any licensed medical providers acting within the scope of practice for their

317 profession, including physicians, nurse practitioners, certified nurse-midwives and licensed
318 certified professional midwives.

319 (c) A policy that provides coverage for services required under this section shall cover: (i)
320 no fewer than four completed oocyte retrievals; (ii) unlimited embryo transfers from retrievals
321 covered under this section or from any other completed oocyte retrieval; (iii) unlimited cycles of
322 intrauterine insemination; and (iv) unlimited intracervical insemination. No policy shall be
323 required to provide coverage for any nonmedical costs relating to the procurement of gametes,
324 donor embryos, or surrogacy services.

325 (d) Said coverage may not include any of the following: (i) any exclusion, limitation or
326 other restriction on coverage of fertility medications that are different from those imposed on
327 other prescription medications; (ii) any exclusion or denial of coverage of any fertility treatment
328 based on a covered individual's participation in fertility services provided by a third party,
329 including gestational carriers, surrogates and the donation or use of said third party's genetic
330 material; and (iii) any deductible, copayment, coinsurance, benefit maximum or other limitation
331 on coverage for services rendered pursuant to this section that are different from those imposed
332 upon services not relating to infertility or fertility treatment.

333 SECTION 14. Section 17U of chapter 32A shall take effect one year following enactment
334 of the legislation.

335 SECTION 15. The training curriculum established pursuant to section 5P of chapter 112
336 of the General Laws shall be completed within 9 months of enactment of the legislation.

337 SECTION 16. Section 10AA of chapter 118E shall take effect one year following
338 enactment of the legislation.

339 SECTION 16. Section 47H of chapter 175 shall take effect one year following enactment
340 of the legislation.

341 SECTION 17. Section 8K of chapter 176A shall take effect one year following enactment
342 of the legislation.

343 SECTION 18. Section 4J of chapter 176B shall take effect one year following enactment
344 of the legislation.

345 SECTION 18. Section 4PP of chapter 176G shall take effect one year following
346 enactment of the legislation.