JOINT COMMITTEE ON FINANCIAL SERVICES
2025-2026 (194th) BILL SUMMARY

Bill No: H1189

Title: AN ACT PROVIDING INSURANCE COVERAGE FOR ALFI'S SYNDROME

Sponsor: Rep. Natalie M. Higgins (*Leominster*)

Hearing Date: June 24, 2025

Reporting Deadline: August 23, 2025

Prior History:
2023-2044 (H1039): Ordered to a House Study
2021-22 (H1113): Ordered to a House Study
2019-20 (H999): Ordered to a House Study
2017-18 (H3969): Ordered to a House Study

Similar Matters: none

CURRENT LAW:
M.G.L. c. 32A Contributory Group General or Blanket Insurance for Persons in the Service of the Commonwealth (Group Insurance Commission)

M.G.L. c. 118E Division of Medical Assistance (MassHealth)

M.G.L. c. 175 Insurance

M.G.L. c. 176A Non-Profit Hospital Service Corporations (Blue Cross of Massachusetts)

M.G.L. c. 176B Medical Service Corporations (Blue Shield of Massachusetts)

M.G.L. c. 176G Health Maintenance Organizations (HMOs)

SUMMARY:

- Group Insurance Commission policies and commercial health insurance policies will provide benefits on a nondiscriminatory basis for the diagnosis and treatment of Alfi's syndrome.
    - Treatments identified in the bill include, those provided by a licensed physician or a licensed psychologist, habilitative or rehabilitative care, pharmacy care, psychiatric care, psychological care, and therapeutic care.

- This coverage will have no effect on an obligation to provide services to an individual under an individualized family service plan, an individualized education program or an individualized service plan. Services related to Alfi's syndrome provided by school personnel under an individualized education program will not be reimbursed.

- An insurer, corporation or health maintenance organization will be exempt for 3 years from the requirement to provide coverage for habilitative or rehabilitative care required under this section and not covered by the insurer, corporation or health maintenance organization as of December 31, 2025, if an actuary, affiliated with the insurer, corporation or health maintenance organization certifies in writing to the commissioner of insurance that:
    - Based on an analysis for the most recent experience period of at least 1 year, the annual costs associated with coverage of habilitative or rehabilitative care required and not covered as of December 31, 2025, exceeded 1 per cent of the premiums charged over the experience period by the insurer, corporation or health maintenance organization; that those costs solely would lead to an increase in average premiums charged of more than 1 per cent for all insurance policies, subscription contracts or health care plans commencing on inception or the next renewal date, based on the premium rating methodology and practices employed, and that the commissioner of insurance approves the actuarial certification.