



The Commonwealth of Massachusetts
MASSACHUSETTS SENATE

SENATOR CINDY F. FRIEDMAN

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Chair

JOINT COMMITTEE ON HEALTH CARE FINANCING

Chair

SENATE COMMITTEE ON STEERING AND POLICY

April 29, 2025

Senator Paul R. Feeney
Chair, Joint Committee on Financial Services
24 Beacon St., Room 112
Boston, MA 02133

Representative James M. Murphy
Chair, Joint Committee on Financial Services
24 Beacon St., Room 254
Boston, MA 02133

Dear Chairs Feeney and Murphy,

I write in support of a bill I filed that is before your committee, S.761, *An Act ensuring access to full spectrum pregnancy care*.

In the summer of 2022, in the wake of the Supreme Court's decision to ignore 50 years of judicial precedent and overturn *Roe v. Wade*, Massachusetts signed a law that requires that the Commonwealth do everything within its legal authority to protect our health care providers and patients, enhance access to abortion care, and ensure that these care decisions are made by a patient and their health care provider.¹

The 2022 state law requires the Group Insurance Commission (GIC) and commercial carriers to provide health insurance coverage for abortion and abortion-related care without any deductibles, co-insurance, co-pays or other cost-sharing for the patient. The law also requires MassHealth to provide coverage for a continuum of pregnancy-related medical care, including prenatal care, childbirth, postpartum care, abortion care, and abortion-related care, without any cost-sharing.

¹ *An Act Expanding Protections for Reproductive and Gender-Affirming Care*.
<https://malegislature.gov/Laws/SessionLaws/Acts/2022/Chapter127>.

S.761 builds on the work we began in 2022 by requiring the GIC and commercial carriers to cover the continuum of pregnancy-related medical care without any cost sharing, just as we have done for MassHealth. For the GIC, MassHealth, and commercial carriers, the bill also adds licensed certified professional midwives to the types of providers who can conduct a covered home visit after delivery. Finally, the bill adds these midwives to the types of providers who, in consultation with the mother, can decide that the mother does not need the full amount of post-delivery in-patient care that their insurance covers.

Ultimately, my intention in filing S.761 is to continue our work in providing equal access to high-quality pregnancy-related care by eliminating cost as a barrier. Currently, high deductibles and co-pays for pregnancy-related care can discourage women from seeking early medical care – or avoiding appropriate care altogether. This can have serious consequences for the health of both mother and child. It is well documented that there are longstanding disparities in health and health care for people of color, including stark disparities in maternal and infant health. Despite continued advancements in medical care, rates of maternal mortality and morbidity and pre-term birth continue to rise in the U.S. Maternal and infant mortality rates in the U.S. are far higher than those in similarly large and wealthy countries, and people of color are at increased risk for poor maternal and infant health outcomes.

S.761 is another extremely important strategy for reducing these disparities. The 2021 Center for Health Information and Analysis (CHIA) Mandated Benefit Review is a strong endorsement of this bill and its goals. The review of previous session's iteration of S.761 estimates the potential increase in premiums would be small – between 0.23 per cent and 0.32 per cent.² This increase will likely be mitigated by downstream savings when more women receive early pregnancy care, unhindered by the barrier of cost.

At a time when our federal government and states across the country are restricting access to essential health services, Massachusetts is serving as a national leader in protecting and providing access to these services. Reporting this bill favorably will continue that important work.

Therefore, I respectfully request the committee to report the bill favorably. Thank you in advance for your consideration, and please do not hesitate to contact me with any questions.

Sincerely,

A handwritten signature in dark ink, reading "Cindy F. Friedman". The signature is fluid and cursive, with the first name "Cindy" being more prominent than the last name "Friedman".

Cindy F. Friedman

² Mandated Benefit Review of House Bill 1196 and Senate Bill 673 Submitted to the 192nd General Court: *An Act Ensuring Access to Full Spectrum Pregnancy Care*, June 2021.
<https://www.chiamass.gov/assets/docs/r/pubs/mandates/MBR-Access-to-Full-Spectrum-Pregnancy-Care.pdf>.