

SECTION Section 25 of chapter 10 of the General Laws, as appearing in the 2024 Official Edition, is hereby amended by inserting after the word “appropriation”, in line 13, the following words:- ; provided, however, that the commission may enter into contracts or group agreements for lottery games not currently or previously authorized by the commission, resulting in a contractor or licensor to be paid a specified percentage of net or gross revenues of such game, and such payments shall not be subject to appropriation.

SECTION Section 10 of chapter 12A of the General Laws, as so appearing, is hereby amended by striking out, in lines 7 and 8, the words “When authorized by a majority vote of the inspector general council, the inspector general shall” and inserting in place thereof the following words:- The inspector general may.

SECTION Said section 10 of said chapter 12A, as so appearing, is hereby further amended by inserting after the word “Any”, in line 11, the following words:- reports or.

SECTION Section 17 of chapter 23N of the General Laws, as so appearing, is hereby amended by striking out, in line 7, the figure “17.5” and inserting in place thereof the following figure:- 10.

SECTION Said section 17 of said chapter 23N, as so appearing, is hereby further amended by striking out, in lines 11 to 14, inclusive, clauses (4) and (5) and inserting in place thereof the following 3 clauses:-

(4) 1 per cent to the Youth Development and Achievement Fund established in section 19;

(5) 9 per cent to the Public Health Trust Fund established in section 58 of chapter 23K;
and

(6) 7.5 per cent to the Sports and Entertainment Events Fund established in section 13W of chapter 23A.

SECTION Section 18 of said chapter 23N, as so appearing, is hereby amended by striking out, in line 5, the figure “16” and inserting in place thereof the following figure:- 17.

SECTION Said section 18 of said chapter 23N, as so appearing, is hereby further amended by striking out subsection (b) and inserting in place thereof the following subsection:-

(b) The fund shall be administered by the secretary of economic development, in consultation with the secretary of labor and workforce development. Money in the fund shall be expended for the following purposes to support:

(i) existing workforce development programs administered by state agencies or quasi-public agencies that develop and strengthen workforce opportunities for low-income communities, unemployed or underemployed individuals or vulnerable youth and young adults in the commonwealth;

(ii) internships, apprenticeships or other work-based learning programs or programs that provide vocational or professional training to address workforce skills gaps or workforce readiness in priority economic sectors; or

(iii) eligible recipients of competitive grants pursuant to subsection (c).

SECTION Said section 18 of said chapter 23N, as so appearing, is hereby further amended by striking out, in line 25, the word “and” and inserting in place thereof the following word:- or.

SECTION Said section 18 of said chapter 23N, as so appearing, is hereby further amended by inserting after the word “permits”, in line 31, the following word:- , apprenticeships.

SECTION Said section 18 of said chapter 23N, as so appearing, is hereby further amended by striking out, in line 50, the words “housing and”.

SECTION Section 5G of chapter 29 of the General Laws, as so appearing, is hereby amended by striking out, in lines 16 to 18, inclusive, the words “the average annual rate of growth in United States gross domestic product over the preceding 5 years based on the most recently available ” and inserting in place thereof the following words:- 95 per cent of the average of final certified capital gains tax revenues for the prior 10 fiscal years, including the most recently ended fiscal year, adjusted for inflation based on the most recently available national gross domestic product price index.

SECTION Said chapter 29 is hereby further amended by inserting after section 5I the following section:-

Section 5J. The executive office for administration and finance, in consultation with the department of revenue, shall annually conduct a multi-year budget forecast and evaluate the potential prospective stress impacts of economic scenarios, to be determined by the secretary of administration and finance, for at least the next 3 fiscal years, including, but not limited to: (i) notable causes of potential deficiencies and key risk factors impacting the state budget; (ii) potential effects of economic changes on tax revenue collections and spending pressures; and (iii) the sufficiency of the Commonwealth Stabilization Fund established pursuant to section 2H and other reserve balances, as identified by the secretary, in offsetting potential revenue declines and spending pressures. Annually, not later than October 31, the executive office shall submit a report to the house and senate committees on ways and means with the results of the multi-year budget forecast and stress impact evaluation.

SECTION Section 1 of chapter 32 of the General Laws, as most recently amended by section 21 of chapter 73 of the acts of 2025, is hereby further amended by inserting after the definition of “Constitutional officers” the following definition:-

“Cost of Living Reserve Fund”, a fund established in subdivision (6B) of section 22 to provide for the reservation of money for future cost of living liabilities and benefit payments of the retirement system; provided, that there shall be 1 fund for the state employees’ and teachers’ retirement systems and 1 fund each for any retirement system that opts in pursuant to said subdivision (6B) of said section 22.

SECTION Said section 1 of said chapter 32, as so amended, is hereby further amended by inserting after the definition of “Employer” the following definition:-

“Excess investment income”, the amount in any calendar year where all realized gains from invested funds of a retirement system results in earnings in excess of the investment return assumption set in the system’s most recent actuarial valuation. Such amount, in excess of said investment return assumption, shall be based on the market rate of return during a calendar year on the balance of total assets of the system at the close of business on December 31 of the prior calendar year, less the amount required to be derived by the investment return assumption set in said valuation. Not later than 90 days after the end of said calendar year, the relevant actuary of a system shall certify the total excess investment income of the system.

SECTION Section 22 of said chapter 32, as appearing in the 2024 Official Edition, is hereby amended by striking out, in line 6, the word “seven”.

SECTION Said section 22 of said chapter 32, as so appearing, is hereby further amended by striking out, in lines 9 and 10, the words “and the Commonwealth’s Pension Liability Fund” and inserting in place thereof the following words:- the Commonwealth’s Pension Liability Fund and the Cost of Living Reserve Fund.

SECTION Paragraph (a) of subdivision (6) of said section 22 of said chapter 32, as so appearing, is hereby amended by adding the following clause:-

(vi) In any calendar year prior to making the transfers required by clause (iii), an amount equal to 10 per cent of the excess investment income shall be transferred to the Cost of Living Reserve Fund for the state employees’ and teachers’ retirement systems. For a system other than the state employees’ and teachers’ retirement systems that has accepted subdivision (6B), an amount equal to 10 per cent of the excess investment income shall be transferred to said system’s Cost of Living Reserve Fund.

SECTION Said section 22 of said chapter 32, as so appearing, is hereby further amended by inserting after subdivision (6A) the following subdivision:-

(6B) Cost of Living Reserve Fund. – (a) There shall be: (i) a Cost of Living Reserve Fund for the state employees’ and teachers’ retirement system; and (ii) a Cost of Living Reserve Fund for each retirement system other than the state employees’ and teachers’ retirement systems that accepts this section pursuant to paragraph (b). The Cost of Living Reserve Funds shall be credited all amounts set aside by a system for the purpose of establishing a reserve to meet future cost of living liabilities and benefit payments as contained in sections 102 and 103, including

such amounts as may be set aside pursuant to a funding schedule established in accordance with section 22C or 22D. Such amounts shall include without limitation the amount determined to be excess investment income as provided for in clause (vi) of paragraph (a) of subdivision (6).

(b) For the purposes of this subdivision, “legislative body” shall mean: (i) in the case of a city, the city council in accordance with its charter; (ii) in the case of a town, the town meeting; (iii) in the case of a district, the district members; and (iv) in the case of an authority, the governing body. In the case of a city, town, district or authority retirement system, this subdivision shall take effect upon its acceptance by a majority vote of the board of such system, subject to the approval of the legislative body. In the case of a county or regional retirement system, this subdivision shall take effect upon its acceptance by the county or regional retirement board advisory council at a meeting called for that purpose by the county or regional retirement board. Acceptance of this subdivision shall be deemed to have occurred upon the filing of the certification of such vote with the commission. A decision to accept this subdivision shall not be revoked.

(c) This subdivision shall take effect automatically for the state employees’ and teachers’ retirement systems.

SECTION Subdivision (1) of section 22C of said chapter 32, as so appearing, is hereby amended by striking out the third paragraph and inserting in place thereof the following paragraph:-

Notwithstanding any general or special law to the contrary, appropriations or transfers made to the Commonwealth’s Pension Liability Fund in fiscal years 2027 to 2029, inclusive, shall be made in accordance with the following funding schedule: (i) \$5,130,518,640 in fiscal year 2027; (ii) \$5,335,739,386 in fiscal year 2028; and (iii) \$5,549,168,961 in fiscal year 2029. Notwithstanding any provision of this subdivision to the contrary, any adjustments to these amounts shall be limited to increases in the schedule amounts for each of the specified years.

SECTION Said chapter 32 is hereby further amended by inserting after section 65J the following section:-

Section 65K. Notwithstanding sections 65A to 65J, inclusive, or any other general or special law, rule or regulation to the contrary, a judge or justice who is eligible for retirement benefits pursuant to sections 65A to 65J, inclusive, shall be provided written notice by the retirement board upon entry into service that if they qualify as a veteran who served in the armed forces of the United States, they shall be entitled to credit for active service in the armed services of the United States; provided, however, that such active service shall not be credited until such member, prior to or within 1 year of vesting pursuant to this chapter, has paid into the annuity savings fund of such system, in 1 sum or in installments, upon such terms and conditions as the board may prescribe, makeup payments, for each year of creditable service sought, of an amount equal to 10 per cent of the regular annual compensation of the member when said member entered the retirement system; provided further, that such creditable service shall not be construed to include service for more than 4 years; and provided further, that such creditable service shall not be allowed for any period of active service for which said veteran has received

credit pursuant to this section. This section shall apply to national guard and active reserve personnel, both former and present. Creditable service time, both enlisted and commissioned, may be applied toward retirement on a ratio of 5 years of national guard service or 5 years of active reserve service substitutable for each year of active service. National guard and active reserve personnel shall not be precluded from making said purchase if they qualify as a veteran after vesting or if they reach the maximum of 4 years of eligible service purchase after vesting and qualifying as a veteran; provided, however, that they enter into a purchase agreement within 5 years of the last occurring event.

SECTION Section 102 of said chapter 32, as appearing in the 2024 Official Edition, is hereby amended by inserting after the word “years”, in line 48, the following words:- and any additional benefit paid in accordance with paragraph (h).

SECTION Said section 102 of said chapter 32, as so appearing, is hereby further amended by adding the following 2 paragraphs:-

(h)(1) Every member of the state employees’ retirement system and the teachers’ retirement system who has attained at least 10 full years of retirement as of June 30 of the prior fiscal year and receives a cost of living increase shall receive annually an additional \$100 benefit to said increase. Said \$100 benefit shall be granted only to members of the state employees’ retirement system and the teachers’ retirement system who retired before July 1, 2020 with 20 or more years of creditable service and whose total annual retirement benefit is less than 80 per cent of the average annual salary as determined by the retirement system’s most recent actuarial valuation; provided, however, that those members who retired with a disability benefit under section 6, 7 or 26 shall be eligible with less than 20 years of creditable service. Any surviving beneficiary of a deceased member who would otherwise be eligible for the aforesaid additional benefit under this paragraph, including those beneficiaries receiving a benefit under section 9, 12 or 101, shall receive said additional benefit if it is determined that they are eligible by the retirement board in which they are a participant.

(2) Every member of the state employees’ retirement system and the teachers’ retirement system who has attained at least 15 full years of retirement as of June 30 of the prior fiscal year and receives a cost of living increase shall receive annually an additional \$200 benefit to said increase. Said \$200 benefit shall be granted only to members of the state employees’ retirement system and the teachers’ retirement system who retired before July 1, 2020 with 20 or more years of creditable service and whose total annual retirement benefit is less than 80 per cent of the average annual salary as determined by the retirement system’s most recent actuarial valuation; provided, however, that those members who retired with a disability benefit under section 6, 7 or 26 shall be eligible with less than 20 years of creditable service. Any surviving beneficiary of a deceased member who would otherwise be eligible for the aforesaid additional benefit under this paragraph, including those beneficiaries receiving a benefit under section 9, 12 or 101, shall receive said additional benefit if it is determined that they are eligible by the retirement board in which they are a participant.

(3) Every member of the state employees’ retirement system and the teachers’ retirement system who has attained at least 20 full years of retirement as of June 30 of the prior fiscal year

and receives a cost of living increase shall receive annually an additional \$300 benefit to said increase. Said \$300 benefit shall be granted only to members of the state employees' retirement system and the teachers' retirement system who retired before July 1, 2020 with 20 or more years of creditable service and whose total annual retirement benefit is less than 80 per cent of the average annual salary as determined by the retirement system's most recent actuarial valuation; provided, however, that those members who retired with a disability benefit under section 6, 7 or 26 shall be eligible with less than 20 years of creditable service. Any surviving beneficiary of a deceased member who would otherwise be eligible for the aforesaid additional benefit under this paragraph, including those beneficiaries receiving a benefit under section 9, 12 or 101, shall receive said additional benefit if it is determined that they are eligible by the retirement board in which they are a participant.

(i) In any calendar year, if the actuary determines that there is excess investment income where all realized gains from invested funds of the retirement systems results in earnings in excess of the investment return assumption set in the retirement system's most recent actuarial valuation and if it is further determined that 10 per cent of such amount when added to the Cost of Living Reserve Fund existing balance is in excess of the amount necessary to fund the total liabilities of a \$1,000 base increase, then the base used to determine the cost of living increase shall be increased for the retirement systems by an amount of not less than \$1,000 in the next fiscal year following the determination of excess earnings; provided, however, that the amounts credited to the Cost of Living Reserve Fund under subdivision (6B) of section 22 shall be in excess of the amounts necessary to meet future cost of living liabilities and benefit payments attributable to said increase and in excess of the amount necessary to fund the total liabilities of the additional benefit under paragraph (h).

SECTION Section 103 of said chapter 32, as so appearing, is hereby amended by inserting after the word "applied", in line 51, the following words:- , including any additional benefit paid in accordance with paragraphs (k), (l) and (m).

SECTION Said section 103 of said chapter 32, as so appearing, is hereby further amended by adding the following 4 paragraphs:-

(k) Upon acceptance of this paragraph as provided in paragraph (n), every member of a retirement system other than the state employees' retirement system and the teachers' retirement system, who has attained at least 10 full years of retirement as of June 30 of the prior fiscal year and receives a cost of living increase pursuant to this section, shall receive annually an additional \$100 benefit to said increase. Said \$100 benefit shall be granted only to members of a retirement system, other than the state employees' retirement system and the teachers' retirement system, who retired before July 1, 2020 with 20 or more years of creditable service and whose total annual retirement benefit is less than 80 per cent of the average annual salary as determined by their retirement system's most recent actuarial valuation; provided, however, that those members who retired with a disability benefit under section 6, 7 or 26 shall be eligible with less than 20 years of creditable service. Any surviving beneficiary of a deceased member who would otherwise be eligible for the aforesaid additional benefit under this paragraph, including those beneficiaries receiving a benefit under section 9, 12 or 101, shall receive said additional benefit if it is determined that they are eligible by the retirement board in which they are a participant.

(l) Upon acceptance of this paragraph as provided in paragraph (n), every member of a retirement system other than the state employees' retirement system and the teachers' retirement system, who has attained at least 15 full years of retirement as of June 30 of the prior fiscal year and receives a cost of living increase pursuant to this section, shall receive annually an additional \$200 benefit to said increase. Said \$200 benefit shall be granted only to members of a retirement system, other than the state employees' retirement system and the teachers' retirement system, who retired before July 1, 2020 with 20 or more years of creditable service and whose total annual retirement benefit is less than 80 per cent of the average annual salary as determined by their retirement system's most recent actuarial valuation; provided, however, that those members who retired with a disability benefit under section 6, 7 or 26 shall be eligible with less than 20 years of creditable service. Any surviving beneficiary of a deceased member who would otherwise be eligible for the aforesaid additional benefit under this paragraph, including those beneficiaries receiving a benefit under section 9, 12 or 101, shall receive said additional benefit if it is determined that they are eligible by the retirement board in which they are a participant.

(m) Upon acceptance of this paragraph as provided in paragraph (n), every member of a retirement system other than the state employees' retirement system and the teachers' retirement system, who has attained at least 20 full years of retirement as of June 30 of the prior fiscal year and receives a cost of living increase pursuant to this section, shall receive annually an additional \$300 benefit to said increase. Said \$300 benefit shall be granted only to members of a retirement system, other than the state employees' retirement system and the teachers' retirement system, who retired before July 1, 2020 with 20 or more years of creditable service and whose total annual retirement benefit is less than 80 per cent of the average annual salary as determined by their retirement system's most recent actuarial valuation; provided, however, that those members who retired with a disability benefit under section 6, 7 or 26 shall be eligible with less than 20 years of creditable service. Any surviving beneficiary of a deceased member who would otherwise be eligible for the aforesaid additional benefit under this paragraph, including those beneficiaries receiving a benefit under section 9, 12 or 101, shall receive said additional benefit if it is determined that they are eligible by the retirement board in which they are a participant.

(n) For the purpose of this paragraph, "legislative body" shall mean: (i) in the case of a city, the city council in accordance with its charter; (ii) in the case of a town, the town meeting; (iii) in the case of a district, the district members; and (iv) in the case of an authority, the governing body. In the case of city, town, district or authority system, acceptance of paragraphs (k), (l) or (m) shall be by a majority vote of the board of such system, subject to the approval of the legislative body. In the case of a county or regional system, acceptance of paragraphs (k), (l) or (m) shall be by the county or regional retirement board advisory council at a meeting called for that purpose by the county or regional retirement board. Acceptance of this paragraph shall be deemed to have occurred upon the filing of the certification of such vote with the commission. A decision to accept this paragraph shall not be revoked.

SECTION Chapter 32A of the General Laws is hereby amended by inserting after section 17Z the following section:-

Section 17AA. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Cost sharing”, a deductible, coinsurance, copayments and any maximum limitation on the application of such a deductible, coinsurance, copayment or similar out-of-pocket expense.

“Health care provider”, as defined in section 1 of chapter 111.

“HIV”, human immunodeficiency virus.

“HIV prevention drug”, any pre-exposure prophylaxis drug approved for the prevention of HIV by the federal Food and Drug Administration, including any ancillary or support health service determined by the secretary of health and human services to be necessary to: (i) ensure that a drug is prescribed or administered to a person who is not infected with HIV and has no medical contraindications to the use of a drug; and (ii) monitor a person to ensure the safe and effective ongoing use of a drug through: (A) office visits; (B) laboratory testing; (C) testing for a sexually transmitted infection; (D) medication self-management and adherence counseling; or (E) any other health service specified as part of comprehensive HIV prevention drug services by the U.S. Department of Health and Human Services, the federal Centers for Disease Control and Prevention, the United States Preventive Services Task Force or an equivalent state-authorized body with responsibility to identify health services that are components of comprehensive HIV prevention drug services.

(b) The commission shall provide any active or retired employee of the commonwealth, insured under the commission, coverage for an HIV prevention drug. There shall be no: (i) patient cost sharing; or (ii) prior authorization, step therapy or any other protocol that could restrict or delay the dispensing of any HIV prevention drug.

(c) The commission shall not refuse, reject or deny a prescription for any covered HIV prevention drug on the basis of the type of health care provider issuing the prescription for an HIV prevention drug or the venue or practice setting of the health care provider issuing the prescription; provided, that the health care provider shall be licensed to prescribe medications.

SECTION Section 97B1/2 of chapter 41 of the General Laws, as appearing in the 2024 Official Edition, is hereby amended by inserting after the word “cases”, in line 20, the following words:- ; provided, however, that all kits shall be retained for not less than 15 years.

SECTION Said section 97B1/2 of said chapter 41, as so appearing, is hereby further amended by inserting after the word “enforcement”, in line 26, the following words:- , notwithstanding the statute of limitations of the underlying offense.

SECTION Section 5A of chapter 71B of the General Laws, as so appearing, is hereby amended by inserting after the definition of “Approved costs threshold” the following definition:-

“Detailed cost components”, a breakdown of costs on either a per-trip or per-invoice basis that shall include, but shall not be limited to: (i) labor; (ii) capital or fleet and vehicle

acquisition; (iii) fuel and vehicle maintenance; (iv) insurance; (v) overhead; (vi) profit; and (vii) other costs that make up the total amount being charged to the school districts.

SECTION Said section 5A of said chapter 71B, as so appearing, is hereby further amended by inserting after subsection (b) the following subsection:-

(b^{1/2})(1) Each school district providing required out-of-district transportation pursuant to subsection (b) shall include, in each district's solicitation documents, a breakdown of detailed cost components.

(2) Each vendor shall include detailed cost components in their submissions to each school district for bids or quotes in the competitive procurement process. The detailed cost components shall be included in: (i) the contract between the school district and the vendor; and (ii) all future invoices.

(3) Annually, each school district shall submit the detailed cost components to the department in its annual report. The department shall analyze the detailed cost components and report to the chairs of the joint committee on education cost trends for out-of-district transportation.

SECTION Said chapter 71B is hereby further amended by inserting after section 5A the following section:-

Section 5A 1/2. (a)(1) The department shall establish and maintain an electronic centralized database of procurement and contract documents for all out-of-district transportation pursuant to subsection (b) of section 5A and a list of licensed special education out-of-district school transportation providers under contract with districts pursuant to section 5A. The database shall be searchable and accessible to all districts. The database shall include, but shall not be limited to: (i) copies of each procurement document and signed contract provided pursuant to paragraph (2); and (ii) transportation vendor information, including, but not limited to, compliance history, the areas where service is provided, ownership structure and contract history with any district.

(2) Each district shall submit a copy of each procurement document and signed contract to the department not later than 30 days after the contract is signed. Not later than 30 days after receipt, the department shall add each document to the database established in paragraph (1).

(b)(1) The department shall establish and annually update guidelines for districts on best practices for school transportation procurement, including, but not limited to, out-of-district transportation. The guidelines shall include, but shall not be limited to: (i) information on laws and regulations impacting transportation requirements; (ii) best practices for managing costs; (iii) transportation planning and operations; and (iv) managing reimbursement requests. In establishing and updating the guidelines, the department shall consult with the districts with the highest utilization rates and highest costs of out-of-district transportation.

(2) The guidelines established in paragraph (1) shall be available to all districts on the department's website; provided, however, that the department shall annually identify and provide the guidelines and additional assistance, as determined by the department, to: (i) the 20 districts with the highest out-of-district transportation costs; and (ii) any district where transportation is contributing to underperformance and inequity.

SECTION Chapter 111 of the General Laws is hereby amended by inserting after section 110E the following section:-

Section 110F. (a) Not later than 30 days after a family's entry into a temporary emergency assistance shelter pursuant to section 30 of chapter 23B, domestic violence shelter, substance use disorder and recovery shelter or non-emergency assistance shelter, any child under the age of 3 years old shall be referred to a certified early intervention professional for an early intervention evaluation and assessment, pursuant to the department's early intervention operational standards. The referral shall be made by shelter staff, case managers, medical providers or others. If applicable, early intervention services shall be rendered once an evaluation and determination of need have been established by a certified early intervention professional.

(b) The department, in consultation with the executive office of housing and livable communities, shall promulgate regulations pursuant to chapter 30A to implement this section.

SECTION Said chapter 111 is hereby further amended by adding the following section:-

Section 250. (a) There shall be a commission on acupuncture and wellness within the department. The commission shall consist of: the commissioner or a designee, who shall serve as chair; the commissioner of insurance or a designee; the director of MassHealth or a designee; the executive director of the board of registration in medicine or a designee; the chairs of the joint committee on public health or their designees; a member representing a statewide organization of licensed acupuncturists; a member representing a statewide organization of medical acupuncturists; a member representing the Massachusetts Public Health Association; and 5 members to be appointed by the governor, at least 2 of whom shall be acupuncturists licensed and practicing in the commonwealth, 1 of whom shall represent 1 of the top 5 health insurance companies in the commonwealth according to market share, 1 of whom shall represent a health care consumer organization and 1 of whom shall be a licensed physician currently practicing in the commonwealth.

(b) The commission on acupuncture and wellness shall investigate and comprehensively study the potential for greater integrated use of acupuncture services in health care services, to expand access, reduce health care costs and provide improved quality of care to residents of the commonwealth.

(c) The commission shall consider strategies:

(i) to evaluate and implement effective integration of acupuncture services in health care delivery in the commonwealth with a specific focus on interventions in pain management, substance use disorder treatment and wellness promotion;

(ii) to effectively integrate acupuncture treatment modalities into alternative payment models, including, but not limited to, accountable care organizations, workplace wellness programs and provider organizations established under chapter 224 of the acts of 2012; and

(iii) regarding the reimbursement of licensed acupuncturists via third party payors or otherwise to facilitate a stable and sustainable integration of acupuncture services into the broader system of health care delivery.

(d) Annually, not later than January 1, the commission shall submit to the secretary of health and human services and the joint committee on public health a report of its findings, recommendations and any draft legislation to implement those recommendations.

SECTION Chapter 118E of the General Laws is hereby amended by inserting after section 10Z the following section:-

Section 10AA. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Health care provider”, as defined in section 1 of chapter 111.

“HIV”, human immunodeficiency virus.

“HIV prevention drug”, any pre-exposure prophylaxis drug approved for the prevention of HIV by the federal Food and Drug Administration, including any ancillary or support health service determined by the secretary of health and human services to be necessary to: (i) ensure that a drug is prescribed or administered to a person who is not infected with HIV and has no medical contraindications to the use of a drug; and (ii) monitor a person to ensure the safe and effective ongoing use of a drug through: (A) office visits; (B) laboratory testing; (C) testing for a sexually transmitted infection; (D) medication self-management and adherence counseling; or (E) any other health service specified as part of comprehensive HIV prevention drug services by the U.S. Department of Health and Human Services, the federal Centers for Disease Control and Prevention, the United States Preventive Services Task Force or an equivalent state-authorized body with responsibility to identify health services that are components of comprehensive HIV prevention drug services.

(b) The division and its contracted health insurers, health plans, health maintenance organizations, behavioral health management firms and third-party administrators under contract to a Medicaid managed care organization, accountable care organization or primary care clinician plan shall provide coverage for an HIV prevention drug. There shall be no: (i) patient cost sharing; or (ii) prior authorization, step therapy or any other protocol that could restrict or delay the dispensing of any HIV prevention drug.

(c) The division and its contracted health insurers, health plans, health maintenance organizations, behavioral health management firms and third party administrators under contract to a Medicaid managed care organization, accountable care organization or primary care

clinician plan shall not refuse, reject or deny a prescription for any covered HIV prevention drug on the basis of the type of health care provider issuing the prescription for an HIV prevention drug or the venue or practice setting of the health care provider issuing the prescription; provided, that the health care provider shall be licensed to prescribe medications.

SECTION The second paragraph of section 24 of chapter 119 of the General Laws, as appearing in the 2024 Official Edition, is hereby amended by striking out the fifth sentence and inserting in place thereof the following sentence:- If the identity or whereabouts of a parent is unknown, the petitioner shall, upon motion and with leave of the court, cause notice to be served upon such parent by: (i) publication once in each of 3 successive weeks in any newspaper as the court may order; (ii) publication on a website designed for such purpose for 3 successive weeks; or (iii) through electronic means reasonably calculated to reach the parent as found by the court.

SECTION Chapter 127 of the General Laws is hereby amended by inserting after section 17D the following section:-

Section 17E. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“County correctional facility”, as defined in paragraph (f) of section 1 of chapter 125.

“Health care provider”, as defined in section 1 of chapter 111.

“HIV”, human immunodeficiency virus.

“HIV prevention drug”, any pre-exposure prophylaxis drug approved for the prevention of HIV by the federal Food and Drug Administration.

(b) The superintendent of each state correctional facility and the administrator of each county correctional facility shall ensure that within a reasonable time prior to release each inmate of a state correctional facility and county correctional facility who has been committed to a term of 30 days or more, and who is negative for HIV infection, shall be:

(i) provided information and counseling about HIV prevention drugs to prevent HIV acquisition;

(ii) evaluated for the benefit of an HIV prevention drug, with the consent of the inmate;

(iii) provided with a supply of an HIV prevention drug prior to release, to an eligible inmate with their consent; provided, that the supply of an HIV prevention drug shall, at the inmate’s option, include administration immediately prior to release of the longest duration injectable form of an HIV prevention drug, a 90-day supply of an oral HIV prevention drug, any other clinically appropriate HIV prevention drug or a prescription for such supply to be filled post-release; and

(iv) provided with information about requirements for medical monitoring after release to ensure the safe and effective ongoing use of HIV prevention drugs; provided, that each state correctional facility and county correctional facility shall develop and implement a plan to connect each inmate receiving an HIV prevention drug to post-release medical and other services to ensure ongoing HIV prevention therapy upon release.

(c) Any pre-release supply of an HIV prevention drug shall be provided at no cost to the inmate.

(d) Each state correctional facility and county correctional facility evaluating an inmate for an HIV prevention drug pursuant to subsection (b) shall ensure that information obtained for such evaluation shall be kept confidential between the inmate and medical provider and shall not be shared with security or administrative staff.

(e) The department of correction, in consultation with the department of public health, shall promulgate regulations or issue guidance for the implementation of this section.

SECTION Chapter 138 of the General Laws is hereby amended by striking out section 19G, as appearing in the 2024 Official Edition, and inserting in place thereof the following section:-

Section 19G. (a) For the purposes of this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Brewery of origin”, any brewery at which a tenant brewer is duly licensed to manufacture malt beverages other than at the host brewer’s premises.

“Distillery of origin”, any distillery at which a tenant distiller is duly licensed to manufacture distilled spirits other than at the host distiller’s premises.

“Package”, a keg, cask, barrel, bottle, can or other container approved by the United States Department of the Treasury Alcohol and Tobacco Tax and Trade Bureau for malt beverages or distilled spirits.

(b)(1) The commission may issue tenant brewer or tenant distiller licenses that authorize the licensee to manufacture or package malt beverages or distilled spirits, respectively, on the premises of a host brewery or host distillery to any individual applicant who is a resident and citizen of the commonwealth or to a corporation, partnership or other entity which complies with the requirements of section 26 and is a holder of a certificate of compliance issued pursuant to section 18B. An applicant for a tenant brewer or tenant distiller license shall provide the commission and the department of revenue with a true copy of the applicable alcoholic beverage notice, permit or registration to manufacture, export and import as issued by the appropriate licensing authority.

(2) To be eligible for a tenant brewer or tenant distiller license, the applicant shall: (i) be licensed pursuant to section 18, section 19 or section 19C or a license holder outside the commonwealth that is authorized to manufacture, export and import malt beverages or distilled

spirits, respectively; (ii) comply with any federal law regulating the manufacture, export or import of malt beverages or distilled spirits, respectively, as identified by the commission in a written guidance that shall be issued to each host brewer, tenant brewer, host distiller, tenant distiller and wholesaler licensed pursuant to section 18; and (iii) shall have an approved alternating proprietorship arrangement that allows the applicant to use the facilities, equipment and employees of a host brewer or host distiller.

(3) A tenant brewer or tenant distiller may import such raw materials as are required solely for the production and packaging of the malt beverages or distilled spirits, respectively, including, without limitation, bulk malt beverages or bulk distilled spirits produced by the tenant brewer or tenant distiller, respectively, at its brewery or distillery of origin. The bulk malt beverages imported by the tenant brewer and bulk distilled spirits imported by the tenant distiller shall be packaged and shipped back to the tenant brewer's brewery of origin or tenant distiller's distillery of origin, or to a wholesaler licensed pursuant to section 18 or to a license holder outside the commonwealth authorized to import malt beverages or distilled spirits designated by the tenant brewer or tenant distiller within 10 days after receipt by the host brewer or host distiller, or, in the case of a tenant distiller who is licensed as a wholesaler under section 18 and operates as a rectifier, to a retailer in the commonwealth licensed to sell distilled spirits at retail.

(4) Any product produced or packaged at the host brewer's or host distiller's premises shall be removed from such premises within 10 days after the production or packaging process is completed. The finished product shall be returned to the tenant brewer's brewery of origin or tenant distiller's distillery of origin, or to a wholesaler licensed pursuant to section 18 or to a license holder outside the commonwealth authorized to import malt beverages or distilled spirits designated by the tenant brewer or tenant distiller, or in the case of a tenant distiller who is licensed as a wholesaler under section 18 and operates as a rectifier, to a retailer in the commonwealth licensed to sell distilled spirits at retail.

(c)(1) The commission shall require a tenant brewer and tenant distiller and a host brewer and host distiller to maintain a record or log indicating which equipment is being used at any time by the tenant brewer or tenant distiller in the production or packaging of malt beverages or distilled spirits, respectively, and which employees are working on production or packaging of the tenant brewer's or tenant distiller's product. Tenant brewers and tenant distillers shall be subject to the same reporting requirements as host brewers and host distillers.

(2) A tenant brewer license and tenant distiller license issued pursuant to this section shall not authorize the licensee to sell malt beverages or distilled spirits, respectively, to any person or entity in the commonwealth other than a wholesaler licensed pursuant to section 18; provided, however, that a tenant distiller who is licensed as a wholesaler under section 18 and operates as a rectifier may sell to a retailer in the commonwealth licensed to sell distilled spirits at retail. A tenant brewer licensee and tenant distiller licensee shall only be authorized to manufacture or package malt beverages or distilled spirits, respectively, pursuant to this section.

(d) The annual fee for a license issued under this section shall be \$1,000.

SECTION Chapter 175 of the General Laws is hereby amended by inserting after section 47CCC the following section:-

Section 47DDD. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Cost sharing”, a deductible, coinsurance, copayment and any maximum limitation on the application of such a deductible, coinsurance, copayment or similar out-of-pocket expense.

“Health care provider”, as defined in section 1 of chapter 111.

“HIV”, human immunodeficiency virus.

“HIV prevention drug”, any pre-exposure prophylaxis drug approved for the prevention of HIV by the federal Food and Drug Administration, including any ancillary or support health service determined by the secretary of health and human services to be necessary to: (i) ensure that a drug is prescribed or administered to a person who is not infected with HIV and has no medical contraindications to the use of a drug; and (ii) monitor a person to ensure the safe and effective ongoing use of a drug through: (A) office visits; (B) laboratory testing; (C) testing for a sexually transmitted infection; (D) medication self-management and adherence counseling; or (E) any other health service specified as part of comprehensive HIV prevention drug services by the U.S. Department of Health and Human Services, the federal Centers for Disease Control and Prevention, the United States Preventive Services Task Force or an equivalent state-authorized body with responsibility to identify health services that are components of comprehensive HIV prevention drug services.

(b) Any policy of accident and sickness insurance, as described in section 108, that provides hospital expense and surgical expense insurance that is delivered, issued or subsequently renewed by agreement between the insurer and policyholder in the commonwealth and any group blanket or general policy of accident and sickness insurance, issued under section 110, that provides hospital expense and surgical expense insurance and that is delivered, issued or subsequently renewed by agreement between the insurer and the policyholder, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not require: (i) patient cost sharing; or (ii) prior authorization, step therapy or any other protocol that could restrict or delay the dispensing of any HIV prevention drug.

(c) Any policy of accident and sickness insurance, as described in section 108, that provides hospital expense and surgical expense insurance that is delivered, issued or subsequently renewed by agreement between the insurer and policyholder in the commonwealth and any group blanket or general policy of accident and sickness insurance, issued under section 110, that provides hospital expense and surgical expense insurance and that is delivered, issued or subsequently renewed by agreement between the insurer and the policyholder, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not refuse, reject or deny a prescription for any covered HIV prevention drug on the basis of the type of health care provider issuing the prescription for an HIV prevention drug or the venue or practice

setting of the health care provider issuing the prescription; provided, that the health care provider shall be licensed to prescribe medications.

SECTION Section 7 of chapter 175M of the General Laws, as appearing in the 2024 Official Edition, is hereby amended by striking out, in line 6, the words “and for the administration of the department” and inserting in place thereof the following words:- for the administration of the department and for expenditure by the Workforce Productivity Sub-Fund under section 12.

SECTION Said section 7 of said chapter 175M, as so appearing, is hereby further amended by striking out, in line 23, the words “and for the administration of the department” and inserting in place thereof the following words:- for the administration of the department and for expenditure by the Workforce Productivity Sub-Fund under section 12.

SECTION Said chapter 175M is hereby further amended by adding the following section:-

Section 12. (a) For the purposes of this section, the term “eligible applicant” shall mean an employer employing 50 or fewer employees in the commonwealth; provided, that “eligible applicant” shall not include an employer with a plan approved pursuant to section 11.

(b) There is hereby established a Workforce Productivity Sub-Fund within the Family and Employment Security Trust Fund established in section 7. Money in the Workforce Productivity Sub-Fund shall be expended by the director for the grant program established pursuant to subsection (c).

(c)(1) There is hereby established a grant program to support eligible applicants with costs associated with covering a temporary vacancy due to an employee being on an approved continuous leave.

(2) Eligible applicants may apply for a grant pursuant to this subsection in a form and manner prescribed by the department.

(3) The department shall competitively award grants to eligible applicants.

(d) The director shall promulgate regulations or other guidance necessary for the implementation of this section, including, but not limited to, grant eligibility criteria, how grants will be competitively awarded, amounts of the grants and other information necessary for the administration of the grant program pursuant to subsection (c).

SECTION Chapter 176A of the General Laws is hereby amended by inserting after section 8DDD the following section:-

Section 8EEE. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Cost sharing”, a deductible, coinsurance, copayment and any maximum limitation on the application of such a deductible, coinsurance, copayment or similar out-of-pocket expense.

“Health care provider”, as defined in section 1 of chapter 111.

“HIV”, human immunodeficiency virus.

“HIV prevention drug”, any pre-exposure prophylaxis drug approved for the prevention of HIV by the federal Food and Drug Administration, including any ancillary or support health service determined by the secretary of health and human services to be necessary to: (i) ensure that a drug is prescribed or administered to a person who is not infected with HIV and has no medical contraindications to the use of a drug; and (ii) monitor a person to ensure the safe and effective ongoing use of a drug through: (A) office visits; (B) laboratory testing; (C) testing for a sexually transmitted infection; (D) medication self-management and adherence counseling; or (E) any other health service specified as part of comprehensive HIV prevention drug services by the U.S. Department of Health and Human Services, the federal Centers for Disease Control and Prevention, the United States Preventive Services Task Force or an equivalent state-authorized body with responsibility to identify health services that are components of comprehensive HIV prevention drug services.

(b) Any contract between a subscriber and the corporation under an individual or group hospital service plan that provides hospital expense and surgical expense insurance, except contracts providing supplemental coverage to Medicare or other governmental programs, that is delivered, issued or renewed by agreement between the insurer and the policyholder, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not require: (i) patient cost sharing; or (ii) prior authorization, step therapy or any other protocol that could restrict or delay the dispensing of any HIV prevention drug.

(c) Any contract between a subscriber and the corporation under an individual or group hospital service plan that provides hospital expense and surgical expense insurance, except contracts providing supplemental coverage to Medicare or other governmental programs, that is delivered, issued or renewed by agreement between the insurer and the policyholder, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not refuse, reject or deny a prescription for any covered HIV prevention drug on the basis of the type of health care provider issuing the prescription for an HIV prevention drug or the venue or practice setting of the health care provider issuing the prescription; provided, that the health care provider shall be licensed to prescribe medications.

SECTION Chapter 176B of the General Laws is hereby amended by inserting after section 4DDD the following section:-

Section 4EEE. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Cost sharing”, a deductible, coinsurance, copayment and any maximum limitation on the application of such a deductible, coinsurance, copayment or similar out-of-pocket expense.

“Health care provider”, as defined in section 1 of chapter 111.

“HIV”, human immunodeficiency virus.

“HIV prevention drug”, any pre-exposure prophylaxis drug approved for the prevention of HIV by the federal Food and Drug Administration, including any ancillary or support health service determined by the secretary of health and human services to be necessary to: (i) ensure that a drug is prescribed or administered to a person who is not infected with HIV and has no medical contraindications to the use of a drug; and (ii) monitor a person to ensure the safe and effective ongoing use of a drug through: (A) office visits; (B) laboratory testing; (C) testing for a sexually transmitted infection; (D) medication self-management and adherence counseling; or (E) any other health service specified as part of comprehensive HIV prevention drug services by the U.S. Department of Health and Human Services, the federal Centers for Disease Control and Prevention, the United States Preventive Services Task Force or an equivalent state-authorized body with responsibility to identify health services that are components of comprehensive HIV prevention drug services.

(b) Any subscription certificate under an individual or group medical service agreement, except certificates that provide supplemental coverage to Medicare or other governmental programs, issued, delivered or renewed, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not require: (i) patient cost sharing; or (ii) prior authorization, step therapy or any other protocol that could restrict or delay the dispensing of any HIV prevention drug.

(c) Any subscription certificate under an individual or group medical service agreement, except certificates that provide supplemental coverage to Medicare or other governmental programs, issued, delivered or renewed, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not refuse, reject or deny a prescription for any covered HIV prevention drug on the basis of the type of health care provider issuing the prescription for an HIV prevention drug or the venue or practice setting of the health care provider issuing the prescription; provided, that the health care provider shall be licensed to prescribe medications.

SECTION Chapter 176G of the General Laws is hereby amended by inserting after section 4VV the following section:-

Section 4WW. (a) As used in this section, the following words shall, unless the context clearly requires otherwise, have the following meanings:

“Cost sharing”, a deductible, coinsurance, copayment and any maximum limitation on the application of such a deductible, coinsurance, copayment or similar out-of-pocket expense.

“Health care provider”, as defined in section 1 of chapter 111.

“HIV”, human immunodeficiency virus.

“HIV prevention drug”, any pre-exposure prophylaxis drug approved for the prevention of HIV by the federal Food and Drug Administration, including any ancillary or support health service determined by the secretary of health and human services to be necessary to: (i) ensure that a drug is prescribed or administered to a person who is not infected with HIV and has no medical contraindications to the use of a drug; and (ii) monitor a person to ensure the safe and effective ongoing use of a drug through: (A) office visits; (B) laboratory testing; (C) testing for a sexually transmitted infection; (D) medication self-management and adherence counseling; or (E) any other health service specified as part of comprehensive HIV prevention drug services by the U.S. Department of Health and Human Services, the federal Centers for Disease Control and Prevention, the United States Preventive Services Task Force or an equivalent state-authorized body with responsibility to identify health services that are components of comprehensive HIV prevention drug services.

(b) An individual or group health maintenance contract that is issued, delivered or renewed, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not require: (i) patient cost sharing; or (ii) prior authorization, step therapy or any other protocol that could restrict or delay the dispensing of any HIV prevention drug; provided, however, that cost sharing shall be required if the applicable plan is governed by the federal Internal Revenue Code and would lose its tax-exempt status as a result of the prohibition on cost sharing for these services.

(c) An individual or group health maintenance contract that is issued, delivered or renewed, within or without the commonwealth, that provides coverage for any HIV prevention drug shall not refuse, reject or deny a prescription for any covered HIV prevention drug on the basis of the type of health care provider issuing the prescription for an HIV prevention drug or the venue or practice setting of the health care provider issuing the prescription; provided, that the health care provider shall be licensed to prescribe medications.

SECTION Section 63 of chapter 277 of the General Laws, as appearing in the 2024 Official Edition, is hereby amended by inserting after the first paragraph the following paragraph:-

Notwithstanding the first paragraph, an indictment or complaint for an offense set forth in section 22, 22A, 22B, 22C, 22D, 23, 23A or 23B of chapter 265 may be found and filed at any time after the date of the commission of such offense if the identity of the person who allegedly committed the offense: (i) was identified after the limitation period set forth in this section; and (ii) has been established through a DNA analysis, as defined in section 1 of chapter 22E, using evidence collected at the time of the commission of the offense.

SECTION Section 81 of chapter 28 of the acts of 2023, as amended by section 96 of chapter 9 of the acts of 2025, is hereby further amended by striking out the word “3-year”, each time it appears, and inserting in place thereof, in each instance, the following word:- 4-year.

SECTION Section 114 of said chapter 28, as amended by section 98 of said chapter 9, is hereby further amended by striking out the figure “2027” and inserting in place thereof the following figure:- 2028.

SECTION Chapter 9 of the acts of 2025 is hereby amended by striking out section 129 and inserting in place thereof the following section:-

Section 129. Notwithstanding section 189 of chapter 149 of the General Laws, the comptroller, at the direction of the secretary of administration and finance, may transfer up to \$15,000,000 of employer medical assistance contributions from the Commonwealth Care Trust Fund established in section 2000 of chapter 29 of the General Laws to the Health Safety Net Trust Fund established in section 66 of chapter 118E of the General Laws; provided, however, that this transfer may be in addition to any other transfers from said Commonwealth Care Trust Fund to said Health Safety Net Trust Fund required in fiscal year 2026.

SECTION (a) The department of elementary and secondary education, in consultation with the operational services division, the department of public utilities and the registry of motor vehicles, shall study the special education school transportation marketplace to identify areas to improve the vendor marketplace for special education transportation to ensure open and free competition.

(b) The study shall include, but shall not be limited to: (i) an analysis of pricing data from school districts; (ii) an analysis of vendor financial information; (iii) other states' models for out-of-district special education school transportation; (iv) the feasibility and efficacy of establishing a rate structure for special education transportation providers; and (v) any other information necessary to identify solutions to address the lack of competition in the marketplace.

(c) Not later than July 1, 2027, the department of elementary and secondary education, in consultation with the operational services division, the department of public utilities and the registry of motor vehicles, shall submit a report of its findings to the chairs of the joint committee on education.

SECTION Notwithstanding section 2000 of chapter 29 of the General Laws or any other general or special law to the contrary, in fiscal year 2027, the comptroller, at the direction of the secretary of administration and finance, may transfer to the Commonwealth Care Trust Fund, established in said section 2000 of said chapter 29, an amount not to exceed the amount equal to the cost of the fourth year of the pilot program established in section 81 of chapter 28 of the acts of 2023 from funds attributable to the federal financial participation received by the commonwealth for designated state health program expenditure.

SECTION (a) Notwithstanding section 53 of chapter 118E of the General Laws or any other general or special law to the contrary, beginning in fiscal year 2027, the executive office of health and human services may determine the extent to which to include within its covered services for adults the federally-optional dental services that were included in its state plan or demonstration program in effect on January 1, 2002 and the dental services that were covered for adults in the MassHealth basic program as of January 1, 2002.

(b) Notwithstanding any general or special law to the contrary, beginning in fiscal year 2027, the executive office of health and human services may impose coverage caps, changes, exclusions or limitations on its coverage of dental services for adults on a per patient basis or in

aggregate; provided, that no coverage cap, change, exclusion or limitation shall result in any cap of less than \$1,750 on covered services for adults.

(c) Notwithstanding any general or special law to the contrary, beginning in fiscal year 2027, the health safety net office established in section 65 of chapter 118E of the General Laws may impose caps, changes, exclusions or limitations on its total payments for dental services for adults on a per patient basis or in aggregate; provided, that no coverage cap, change, exclusion or limitation shall result in any cap of less than \$1,750 on covered services for adults.

SECTION (a) For the purposes of this section, “HDAP” shall mean the HIV Drug Assistance Program, established under the department of public health and funded in line item 4512-0106 of section 2 of chapter 9 of the acts of 2025.

(b) Notwithstanding section 66 of chapter 118E of the General Laws or any other general or special law to the contrary, in Health Safety Net fiscal year 2026, the comptroller, at the direction of the secretary of administration and finance, and in consultation with the secretary of health and human services, may transfer to the department of public health or expend an amount not more than the amount required from the Health Safety Net Trust Fund, established in said section 66 of said chapter 118E, for services rendered to Health Safety Net patients participating in HDAP and any reasonable administrative costs associated with paying for services to such patients. The secretary of health and human services shall take into consideration supplemental rebates received by the commonwealth from drug manufacturers for drugs provided through HDAP.

(c) Notwithstanding any general or special law to the contrary, the department of public health shall use any funds transferred or expended for HDAP from the Health Safety Net Trust Fund in Health Safety Net fiscal year 2026 exclusively for services rendered to Health Safety Net patients participating in HDAP and any reasonable administrative costs associated with paying for services to such patients.

SECTION (a) For the purposes of this section, “HDAP” shall mean the HIV Drug Assistance Program, established under the department of public health and funded in line item 4512-0106 of section 2.

(b) Notwithstanding section 66 of chapter 118E of the General Laws or any other general or special law to the contrary, in Health Safety Net fiscal year 2027, the comptroller, at the direction of the secretary of administration and finance, and in consultation with the secretary of health and human services, may transfer to the department of public health or expend an amount not more than the amount required from the Health Safety Net Trust Fund, established in said section 66 of said chapter 118E, for services rendered to Health Safety Net patients participating in HDAP and any reasonable administrative costs associated with paying for services to such patients. The secretary of health and human services shall take into consideration supplemental rebates received by the commonwealth from drug manufacturers for drugs provided through HDAP.

(c) Notwithstanding any general or special law to the contrary, the department of public health shall use all funds transferred or expended from the Health Safety Net Trust Fund in Health Safety Net fiscal year 2027 exclusively for services rendered to Health Safety Net patients participating in HDAP and any reasonable administrative costs associated with paying for services to such patients.

SECTION Notwithstanding section 189 of chapter 149 of the General Laws, the comptroller, at the direction of the secretary of administration and finance, may transfer not more than \$15,000,000 of employer medical assistance contributions from the Commonwealth Care Trust Fund established in section 2000 of chapter 29 of the General Laws to the Health Safety Net Trust Fund established in section 66 of chapter 118E of the General Laws; provided, that this transfer may be in addition to any other transfers from said Commonwealth Care Trust Fund to said Health Safety Net Trust Fund required in fiscal year 2027.

SECTION Notwithstanding any general or special law to the contrary, the comptroller, at the direction of the secretary of administration and finance, in consultation with the secretary of health and human services, may transfer not more than \$15,000,000 from the prescription advantage program in line item 9110-1455 of section 2 and the Health Safety Net Trust Fund established in section 66 of chapter 118E of the General Laws in fiscal year 2027 to support the Medicare Saving or Medicare Buy-In programs established in section 25A of said chapter 118E; provided, however, that the secretary of health and human services shall certify to the house and senate committees on ways and means, not less than 45 days in advance of the transfer, in writing, the amount to be transferred and an explanation of the amount of expected savings to those programs resulting from the transfer.

SECTION Notwithstanding any general or special law to the contrary, payments from the Health Safety Net Trust Fund established in section 66 of chapter 118E of the General Laws may be made either as safety net care payments under the commonwealth's waiver pursuant to section 1115 of the federal Social Security Act, 42 U.S.C. 1315, or as an adjustment to service rate payments under Titles XIX and XXI of the federal Social Security Act or a combination of both. Other federally permissible funding mechanisms available for certain hospitals, as defined by regulations of the executive office of health and human services, may be used to reimburse up to \$70,000,000 of uncompensated care pursuant to said section 66 and section 69 of said chapter 118E using sources distinct from the funding made available to the Health Safety Net Trust Fund.

SECTION Notwithstanding any general or special law to the contrary, not later than October 1, 2026, and without further appropriation, the comptroller shall transfer from the General Fund to the Health Safety Net Trust Fund established in section 66 of chapter 118E of the General Laws the greater of \$45,000,000 or 1/12 of the total expenditures to hospitals and community health centers required pursuant to this act, for the purposes of making initial gross payments to qualifying acute care hospitals for the hospital fiscal year beginning October 1, 2026. These payments shall be made to hospitals before, and in anticipation of, the payment by hospitals of their gross liability to the Health Safety Net Trust Fund. Not later than June 30, 2027, the comptroller shall transfer from the Health Safety Net Trust Fund to the General Fund the amount

of the transfer authorized by this section and any allocation of that amount as certified by the director of the health safety net office established in section 65 of said chapter 118E.

SECTION Notwithstanding any general or special law to the contrary, in hospital fiscal year 2027, the office of the inspector general may expend not more than \$1,000,000 from the Health Safety Net Trust Fund established in section 66 of chapter 118E of the General Laws for costs associated with maintaining a health safety net audit unit within the office of the inspector general. The unit shall continue to oversee and examine the practices in hospitals, including, but not limited to, the care of the uninsured and the resulting free charges. The unit shall also study and review the Medicaid program pursuant to said chapter 118E, including, but not limited to, a review of the program's eligibility requirements, utilization, claims administration and compliance with federal mandates. The inspector general shall submit a report to the chairs of the house and senate committees on ways and means on the results of the audits and any other completed analyses not later than March 1, 2027.

SECTION Notwithstanding any general or special law to the contrary, nursing facility rates effective on October 1, 2026, pursuant to section 13D of chapter 118E of the General Laws, may be developed using the costs of calendar year 2023.

SECTION Notwithstanding any general or special law to the contrary, for fiscal year 2027, \$123,500,000 shall be considered operating assistance and distributed to regional transit authorities from line item 1595-6370 of section 2E. For fiscal year 2027, \$94,000,000 of the amount transferred in said line item 1595-6370 of said section 2E shall be distributed based on fiscal year 2026 distributions in accordance with the updated fiscal year 2026 bilateral memorandum of understanding between each regional transit authority and the Massachusetts Department of Transportation; provided, however, that each regional transit authority shall receive operating assistance from said line item 1595-6370 of said section 2E of not less than the amount received in fiscal year 2026. The Massachusetts Department of Transportation may require each regional transit authority to provide data on ridership, customer service and satisfaction, asset management and financial performance, including farebox recovery, and shall compile any such collected data into a report on the performance of regional transit authorities and detail each authority's progress towards meeting the performance metrics established in each memorandum of understanding.

SECTION Notwithstanding section 59 of chapter 23K of the General Laws or any other general or special law to the contrary, 100 per cent of the revenue received from a category 1 license, as defined in section 2 of said chapter 23K, pursuant to subsection (a) of section 55 of said chapter 23K, in fiscal year 2027 shall be transferred as follows:

(i) 31.5 per cent to the Gaming Local Aid Fund established in section 63 of said chapter 23K;

(ii) 20 per cent to the Commonwealth Transportation Fund established in section 2ZZZ of chapter 29 of the General Laws;

(iii) 20 per cent to the Education Fund established in section 64 of said chapter 23K;

(iv) 13 per cent to the Gaming Economic Development Fund established in section 2DDDD of said chapter 29;

(v) 5 per cent to the Public Health Trust Fund established in section 58 of said chapter 23K;

(vi) 4 per cent to the Community Mitigation Fund established in section 61 of said chapter 23K;

(vii) 2.5 per cent to the Race Horse Development Fund established in section 60 of said chapter 23K;

(viii) 2 per cent to the Massachusetts Cultural and Performing Arts Mitigation Trust Fund established in section 2HHHHH of said chapter 29; and

(ix) 2 per cent to the Massachusetts Tourism Trust Fund to fund tourist promotion agencies under subsection (b) of section 13T of chapter 23A of the General Laws.

SECTION 64. (a) Notwithstanding section 5G of chapter 29 of the General Laws, the excess capital gains threshold for fiscal year 2027 shall be \$2,250,000,000.

(b) Notwithstanding any general or special law to the contrary, for fiscal year 2027, the comptroller shall transfer capital gains collected in excess of the threshold pursuant to section 5G of chapter 29 of the General Laws, as provided in subsection (a), for fiscal year 2027, on a quarterly basis as follows: (i) 15 per cent to the Commonwealth's Pension Liability Fund established in subsection (e) of subdivision (8) of section 22 of chapter 32 of the General Laws, which shall satisfy the fiscal year 2027 requirements set forth in subdivision (1) of section 22C of said chapter 32; (ii) 20 per cent to the Commonwealth Stabilization Fund established in section 2H of said chapter 29; and (iii) 65 per cent to the State Retiree Benefits Trust Fund established in section 24 of chapter 32A of the General Laws.

SECTION 65. (a) Notwithstanding any general or special law to the contrary, for fiscal years 2027 through 2031, inclusive, annually all sheriff's offices shall submit full-time employee caps to the executive office for administration and finance. The submission shall be in a form to be determined by the executive office.

(b) Notwithstanding any general or special law to the contrary, for fiscal year 2027 and consistent with current law, including, but not limited to, sections 26 and 27 of chapter 29 of the General Laws, no sheriff's office shall spend into deficiency; provided, that if a sheriff's office requires supplemental funding, said sheriff's office shall submit sufficient documentation of the need to the executive office for administration and finance and the comptroller's office prior to any supplemental budget being filed by the governor. The general court will not act on any supplemental budget spending until the sheriff's office has submitted documentation to the executive office.

SECTION 66. Notwithstanding any general or special law to the contrary, prior to transferring the consolidated net surplus in the budgetary funds for fiscal year 2027 to the Commonwealth Stabilization Fund pursuant to section 5C of chapter 29 of the General Laws, the comptroller shall transfer \$14,000,000 from the General Fund to the Disaster Relief and Resiliency Fund established in section 2HHHHHH of said chapter 29.

SECTION 67. Notwithstanding any general or special law to the contrary, the amounts transferred pursuant to subdivision (1) of section 22C of chapter 32 of the General Laws shall be made available for the Commonwealth's Pension Liability Fund established in section 22 of said chapter 32. The amounts transferred pursuant to said subdivision (1) of said section 22C of said chapter 32 shall meet the commonwealth's obligations pursuant to said section 22C of said chapter 32, including retirement benefits payable by the state employees' retirement system and the state teachers' retirement system, for the costs associated with a 3 per cent cost-of-living adjustment pursuant to section 102 of said chapter 32, for the reimbursement of local retirement systems for previously authorized cost-of-living adjustments pursuant to said section 102 of said chapter 32 and for the costs of increased survivor benefits pursuant to chapter 389 of the acts of 1984. The state board of retirement and each city, town, county and district shall verify these costs, subject to rules that shall be adopted by the state treasurer. The state treasurer may make payments upon a transfer of funds to reimburse certain cities and towns for pensions of retired teachers, including any other obligation that the commonwealth has assumed on behalf of a retirement system other than the state employees' retirement system or state teachers' retirement system, including the commonwealth's share of the amounts to be transferred pursuant to section 22B of said chapter 32. The payments under this section shall be made only pursuant to distribution of money from the Commonwealth's Pension Liability Fund and any distribution, and the payments for which distributions are required, shall be detailed in a written report prepared quarterly by the secretary of administration and finance and submitted to the house and senate committees on ways and means and the joint committee on public service in advance of the distribution. Distributions shall not be made in advance of the date on which a payment is actually to be made. If the amount transferred pursuant to said subdivision (1) of said section 22C of said chapter 32 exceeds the amount necessary to adequately fund the annual pension obligations, the excess amount shall be credited to the Pension Reserves Investment Trust Fund established in subdivision (8) of said section 22 of said chapter 32 to reduce the unfunded pension liability of the commonwealth.

SECTION 68. Notwithstanding any general or special law to the contrary, for fiscal year 2027, the secretary of administration and finance shall direct the comptroller to take any measures necessary to retain within the General Fund interest earnings that would otherwise be deposited into or otherwise be attributed to a fund, trust fund or other separate account, whether established administratively or by law, including a separate account established under section 6 of chapter 6A of the General Laws. The secretary and comptroller shall report to the house and senate committees on ways and means 45 days before any such action taken pursuant to this section. The request shall certify that the secretary, in consultation with the comptroller, has determined that the balance, or a specified part of the balance, is not necessary for the purposes for which it was made available.

SECTION 69. Notwithstanding section 5H of chapter 29 of the General Laws or any other general or special law to the contrary, for fiscal year 2027, all abandoned property net revenue, as defined in said section 5H of said chapter 29, shall remain in the General Fund.

SECTION 70. Notwithstanding any general or special law to the contrary, not later than December 31, 2026, the comptroller shall transfer \$1,000,000 into the Workforce Productivity Sub-Fund established in section 12 of chapter 175M of the General Laws from the Family and Employment Security Trust Fund established in section 7 of said chapter 175M.

SECTION 71. The working group established pursuant to line item 4000-0601 of section 2 of chapter 140 of the acts of 2024 shall continue to develop recommendations, in addition to those filed in the personal care attendant working group reports finalized on February 28, 2025 and November 14, 2025. The working group shall submit updated recommendations consistent with requirements in line item 4000-0601 in section 2 of this act to convene and consult with the executive office of health and human services to identify savings in addition to those identified in the November 14, 2025 report to effectuate the long-term viability of the personal care attendant program. Not later than January 1, 2027, the working group shall file said recommendations with the secretary of administration and finance and the house and senate committees on ways and means.

SECTION 72. Not later than November 9, 2026, the department of public health, in consultation with the executive office of housing and livable communities, shall adopt rules or regulations necessary to implement section 34.

SECTION 73. Not later than January 1, 2027, the department of elementary and secondary education, in consultation with the operational services division, shall create a model procurement template and a model contract for use by school districts for procurement of out-of-district transportation pursuant to subsection (b) of section 5A of chapter 71B of the General Laws. The department shall maintain the model documents in the database established in section 5A 1/2 of chapter 71B of the General Laws, inserted by section 33.

SECTION 74. The first report required pursuant to subsection (d) of section 250 of chapter 111 of the General Laws, inserted by section 35, shall be submitted not later than January 1, 2027.

SECTION 75. Sections 20 and 24 to 27, inclusive, shall take effect on January 1, 2027.

SECTION 76. Except as otherwise specified, this act shall take effect on July 1, 2026.