

[https://www.statehousenews.com/news/healthcare/rules-finalized-to-speed-access-to-some-health-services/article\\_b80c473f-1258-4489-8c1d-22e1501dc47a.html](https://www.statehousenews.com/news/healthcare/rules-finalized-to-speed-access-to-some-health-services/article_b80c473f-1258-4489-8c1d-22e1501dc47a.html)

# Rules finalized to speed access to some health services

Healey takes regulatory route to alter prior authorization requirements

Alison Kuznitz  
May 14, 2026



Patient Chuck Stravin speaks at a press conference at the Dana-Farber Cancer Institute in Boston on Thursday, May 14, 2026 as Gov. Maura Healey announced finalized prior authorization reforms.

Alison Kuznitz/SHNS

BOSTON, May 14, 2026.....Patients and providers in Massachusetts will soon face fewer insurance hassles as they navigate the healthcare system, with the state newly finalizing regulations to scrap prior authorization requirements on a bevy of routine services.

The regulations take effect on June 5, although patients might not see benefits until the end of the year. Insurance Commissioner Michael Caljouw said Thursday that guidance for implementing the changes is being distributed to insurance companies, doctors, patient advocacy organizations and consumer groups.

The Division of Insurance will also hold sessions about navigating the reforms through June and July, Caljouw said at a press conference at the Dana-Farber Cancer Institute that brought together oncologists and other medical providers, insurance leaders, Cabinet secretaries and healthcare advocates.

"Then we will ask our insurance companies that we license and regulate to file with us compliance or implementation plans on the rules themselves," Caljouw said. "We will review those plans. It will be, in some cases, a strenuous review in terms of the ticking and tying to the information that's needed to be shown in those plans."

By the end of the year, Caljouw predicted patients and clinicians will benefit from the insurance overhaul.

Gov. Maura Healey unveiled the proposed reforms in mid-January, with a focus on prohibiting prior authorization requirements for emergency and urgent care, primary care, chronic care, occupational and physical therapy, and certain prescription drugs. A federal health webpage says people should head "straight to the hospital" in an emergency, and that insurers cannot require patients to get prior approval before accessing emergency room services from a provider or hospital that's out of network.

Based on public comments, the final regulations also nix prior authorization for radiology imaging used after a cancer diagnosis and ensure that approval for chronic conditions like cancer continues for "the entire course of treatment," Healey's office said. Substance use disorder services and reproductive care, including abortions, will not be subject to prior authorization either, Healey said.

During a February hearing, some insurers cautioned the reforms could worsen already rising healthcare costs. Lora Pellegrini, CEO of the Massachusetts Association of Health Plans, said Thursday that prior authorization is still an "important tool" for managing costs.

"MAHP member plans are all in on finding solutions to the Commonwealth's affordability crisis and have invested heavily in automation, electronic prior authorization, and standardized processes that reduce burden and improve access to care," Pellegrini said in a statement. "But administrative reforms alone will not lower premiums or make health care more affordable. Those efforts must be paired with meaningful action to address the underlying drivers of cost growth — including rising hospital prices, outpatient facility costs, and prescription drug spending."

Chuck Stravin, a Dana-Farber patient, reflected on the insurance hurdles he encountered a few years ago when his oncologist recommended a treatment plan to slow his rapidly progressing kidney cancer.

"Instead of moving immediately to treatment, we entered a long process of paperwork, appeals and delays with my insurance company — ultimately to be denied and then desperately searching for a different path," Stravin said. "Ironically enough, studies show that patients like me with advanced disease experience greater prior authorization delays. That makes no sense."

The updated regulations also require insurers to respond to urgent requests within 24 hours and honor existing approvals for at least 90 days when patients switch health plans.

"Disease progression does not wait," Stravin said. "Patients in crisis cannot afford delays of days or weeks, and cannot afford to manage that uncertainty."

Healey said the prior authorization reforms will help manage cost pressures. But the regulatory relief comes as her administration and the Legislature have yet to produce solutions to tackle healthcare affordability woes.

The governor did not directly answer a question about expected cost savings from the revised regulations and the impact on people's premiums.

"Well let me offer this: Time is stress," Healey said. "Time is stress for patients, for their family members. Time is health because delays impact people's health. Time is sometimes life or death. And yes, time is money."

Earlier Thursday, as the Massachusetts Health Connector Board voted on affordability schedules tied to the individual mandate, Caljouw offered a sobering take on the insurance landscape.

"I just wanted to note that I think the work here is more important than ever," Caljouw said. "Insurance is increasingly out of reach and unsustainable for not just the individuals that benefit from the subsidies that are put forward through our work here and the state support, but increasingly across the market. And our work to reduce those costs systemically have taken on an urgency that we have never seen in Massachusetts."

***Alison Kuznitz is a reporter for State House News Service and State Affairs Pro Massachusetts. Reach her at [akuznitz@stateaffairs.com](mailto:akuznitz@stateaffairs.com).***

---

**Alison Kuznitz**