



**COMMONWEALTH OF MASSACHUSETTS**  
**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

1000 Washington Street, Suite 810 • Boston, MA 02118-6200  
(617) 521-7794 • Toll-free (877) 563-4467  
<http://www.mass.gov/doi>

**CHARLES D. BAKER**  
GOVERNOR

**KARYN E. POLITO**  
LIEUTENANT GOVERNOR


**MIKE KENNEALY**  
SECRETARY OF HOUSING AND  
ECONOMIC DEVELOPMENT

**EDWARD A. PALLESCHI**  
UNDERSECRETARY OF CONSUMER AFFAIRS  
AND BUSINESS REGULATION

**GARY D. ANDERSON**  
COMMISSIONER OF INSURANCE

**BULLETIN 2021-09**

**To:** Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc.,  
and Health Maintenance Organizations

**From:** Gary Anderson, Commissioner of Insurance 

**Date:** September 7, 2021

**Re:** HIV PrEP Preventive Health Service Coverage

---

The Division of Insurance (“Division”) issues this Bulletin to provide information to Commercial Health Insurers, Blue Cross and Blue Shield of Massachusetts, Inc., and Health Maintenance Organizations (“Carriers”) offering insured health coverage in the Commonwealth of Massachusetts about the Division’s expectations regarding newly released federal guidance with respect to section 2713 of the federal Public Health Service Act, requiring coverage of specified preventive health services without cost sharing, including “A” and “B” grade recommendations of the U.S. Preventive Services Task Force (USPSTF).

On July 19, 2021, the USPSTF issued clarifying guidance<sup>1</sup> regarding the “A” grade recommendation for preexposure prophylaxis (PrEP) with effective antiretroviral therapy for persons who are at high risk of human immunodeficiency virus (HIV) acquisition. The clarifying guidance explains that health plans subject to section 2713 of the PHS Act must cover without cost sharing the recommended preventive services under the requirements of the applicable implementing regulations.

The Division expects that Carriers are in compliance with federal guidance regarding preventive health services and bring health plans into compliance with the required coverage and cost-sharing requirements as set forth in the federal clarifying guidance by no later than 60 days from the date of the July 19, 2021 clarifying federal guidance.

If you have any questions about this Bulletin, please contact the Division’s Kevin Beagan, Deputy Commissioner for Health Care Access, at 617-521-7323 or Niels Puetthoff, Director of Bureau Managed Care, at 617-521-7326.

---

<sup>1</sup> See <https://www.dol.gov/sites/dolgov/files/EBSA/about-ebsa/our-activities/resource-center/faqs/aca-part-47.pdf>