

**SENATE . . . . . No. 2492**

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**The Commonwealth of Massachusetts**

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**In the Year Two Thousand Ten**  
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An Act relative to substance abuse education and prevention.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1           SECTION 1. Chapter 15 of the General Laws is hereby amended by adding the  
2 following section:-

3           Section 67. Each school district shall adopt a substance abuse education and prevention  
4 policy, pursuant to guidelines established by the commissioner, in consultation with the  
5 commissioner of public health. Each school district shall involve students, parents, guardians,  
6 teachers, administrators, school staff, community representatives, and local law enforcement  
7 agencies in the development of the policy. The policy shall be in writing and formally adopted  
8 by the school committee as a school district policy. The written policy shall include the phone  
9 number of the helpline established under section 18 chapter 17 of the General Laws, and contact  
10 information for other substance abuse resources as determined by the school district. A copy of  
11 the policy shall be distributed to each student and their parents or legal guardian by October 1st  
12 of each year, and shall be provided to any person upon request by the principal of every school  
13 within the district. A copy of each school district’s policy as adopted shall be sent to the

14 commissioner who shall periodically review each policy for compliance with established  
15 guidelines.

16 As part of any substance abuse educational programming resulting from the policy, there  
17 shall be presentations to students by recovering addicts.

18 SECTION 2. Chapter 17 of the General Laws is hereby amended by adding the  
19 following 2 sections:-

20 Section 18. (a) There shall be a bureau of substance abuse services within the  
21 department.

22 (b) The bureau shall establish and advertise a free, anonymous, and confidential toll-free  
23 telephone helpline that shall provide comprehensive, accurate, and current information and  
24 referrals related to addiction treatment and prevention services. The administration of the  
25 helpline shall be coordinated with the other departments and agencies of the commonwealth in  
26 order to prevent the duplication of similar services. The operation of the helpline may be  
27 contracted to third parties; provided that any such contracts shall be performance-based and  
28 subject to approval by the commissioner.

29 Section 19. The department shall promulgate regulations relative to discharge plans for  
30 substance abuse treatment programs subject to licensure or approval under sections 24 and 24D  
31 of chapter 90, sections 6 and 6A of chapter 111B, and section 7 of chapter 111E. A discharge  
32 plan shall be issued for each client leaving a licensed substance abuse treatment program, and  
33 shall include follow-up treatment, contact information for shelters in the area, additional  
34 resources for substance abuse treatment and workforce options.

35 SECTION 3. Section 22 of chapter 32A of the General Laws, as appearing in the 2008  
36 Official Edition, is hereby amended by inserting after the word “setting”, in line 85, the  
37 following words: - and, for persons under the age of 19, shall include collateral services

38 SECTION 4. Subsection (i) of said section 22 of said chapter 32A, as so appearing, is  
39 hereby amended by striking out the last paragraph.

40 SECTION 5. Said section 22 of said chapter 32A, as so appearing, is hereby amended by  
41 adding the following subsection:-

42 Under this section, the following words shall have the following meanings unless the  
43 context requires otherwise:-

44 “Collateral services”, face-to-face or telephonic consultation, of at least 15 minutes in  
45 duration, by a licensed mental health professional with parties determined by the licensed mental  
46 health professional to be necessary to make a diagnosis, and develop and implement a treatment  
47 plan. A licensed mental health professional shall not seek or receive reimbursement for more  
48 than four episodes of collateral services per patient, per month.

49 “Licensed mental health professional”, a licensed physician who specializes in the  
50 practice of psychiatry, a licensed psychologist, a licensed independent clinical social worker, a  
51 licensed mental health counselor, or a licensed nurse mental health clinical specialist.

52 SECTION 6. The first sentence of subsection (b) of section 91 of chapter 71 of the  
53 General Laws, as inserted by section 65 of chapter 27 of the acts of 2009, is hereby amended by  
54 striking out the words “chapter 70” and inserting in place thereof the following words:-  
55 foundation budget.

56 SECTION 7. Section 18 of chapter 94C of the General Laws, as appearing in the 2008  
57 Official Edition, is hereby amended by adding the following subsection:-

58 (e) Practitioners who prescribe controlled substances, except veterinarians, shall be  
59 required, as a prerequisite to obtaining or renewing their professional license, to complete  
60 appropriate training relative to: (i) effective pain management; (ii) identification of patients at  
61 high risk for substance abuse, and (iii) counseling patients about the side effects, addictive  
62 nature, and proper storage and disposal of their prescription medications. The boards of  
63 registration for each professional license that requires such training shall develop the standards  
64 for appropriate training programs.

65 SECTION 8. Said chapter 94C is hereby amended by striking out section 24, as so  
66 appearing, and inserting in place thereof the following section:-

67 Section 24. (a) Within the department, there shall be an electronic reporting and  
68 prescription monitoring program for all prescriptions for controlled substances under schedule II,  
69 schedule III, schedule IV, and schedule V.

70 (b) If the commissioner determines that a research subject or patient is receiving a  
71 controlled substance from more than 1 source and in quantities which he determines to be  
72 harmful to the health of such research subject or patient, the commissioner shall so notify the  
73 practitioners who have dispensed the controlled substance.

74 (c) In order to prevent the dispensing of controlled substances to the same individual  
75 from multiple sources or the unlawful diversion of controlled substances, the commissioner shall,  
76 pursuant to chapter 30A, adopt rules and regulations for carrying out the provisions of this  
77 section.

78 SECTION 9. Said chapter 94C hereby further amended by inserting after section 44 the  
79 following section:-

80 Section 44A. (a) Any person, who in good faith, seeks medical assistance for someone  
81 who is or there is reason to believe is experiencing a drug related overdose shall not be charged  
82 or prosecuted for possession of a controlled substance, pursuant to this chapter, if the evidence  
83 for the charge of or prosecution for possession of a controlled substance was obtained as a result  
84 of the seeking of medical assistance.

85 (b) Any person who experiences or has reason to believe he or she is experiencing a drug-  
86 related overdose and is in need of medical assistance shall not be charged or prosecuted for  
87 possession of a controlled substance, pursuant to this chapter, if the evidence for the charge of or  
88 prosecution for possession of a controlled substance was obtained as a result of the seeking of  
89 medical assistance.

90 (c) Nothing in this section shall prohibit a charge or prosecution for possession with  
91 intent to manufacture, distribute or dispense a controlled substance or the entry of a plea or  
92 verdict of guilty for possession of a controlled substance as a lesser included offense of a  
93 complaint or indictment charging possession of a controlled substance with intent to  
94 manufacture, distribute, or dispense.

95 (d) The act of seeking medical assistance for someone who is or there is reason to  
96 believe is experiencing a drug-related overdose shall be admissible as evidence if proffered by a  
97 defendant in a criminal prosecution pursuant to this chapter, if the evidence for the charge or  
98 prosecution was obtained as a result of the seeking of medical assistance.

99 SECTION 10. Section 12F of chapter 112 of the General Laws, as so appearing, is  
100 hereby amended by striking out, in lines 37 and 38, the words “upon the written consent of the  
101 minor or a proper judicial order” and inserting in place thereof the following words: - : (i) the  
102 written consent of the minor, (ii) a proper judicial order or (iii) if the information or records  
103 relate to a minor’s treatment for a drug or alcohol overdose, as defined by department of public  
104 health in its regulations, and are being provided to the minor’s parents or legal guardian.

105 SECTION 11. Said chapter 112 is hereby further amended by inserting after section 12F  
106 the following section:-

107 Section 12F ½. The department of public health shall produce a pamphlet with contact  
108 information for its bureau of substance abuse services and its substance abuse helpline and with  
109 information on the benefits and availability of treatment and on the prevention of future  
110 overdoses.

111 Any physician or hospital that treats a person under the age of 18 for a drug or alcohol  
112 overdose, as defined by department of public health in its regulations, shall notify the minor’s  
113 parents or legal guardian of the overdose as part of the discharge planning process and provide  
114 them with the pamphlet.

115 SECTION 12. Chapter 118E of the General Laws, as so appearing, is amended by  
116 inserting after section 10F the following section:-

117 Section 10G. (a) The division shall provide coverage for collateral services performed by  
118 a licensed mental health professional for persons under 19 years of age. Nothing contained in this  
119 section shall be construed to abrogate any obligation to provide coverage for mental health  
120 services pursuant to any law or regulation of the commonwealth or the United States or under the

121 terms or provisions of any policy, contract, or certificate. (b) Under this section, the  
122 following words shall have the following meanings unless the context requires otherwise:-

123 “Collateral services”, face-to-face or telephonic consultation, of at least 15 minutes in  
124 duration, by a licensed mental health professional with parties determined by the licensed mental  
125 health professional to be necessary to make a diagnosis, and develop and implement a treatment  
126 plan. A licensed mental health professional shall not seek or receive reimbursement for more  
127 than four episodes of collateral services per patient, per month. “Licensed mental health  
128 professional”, a licensed physician who specializes in the practice of psychiatry, a licensed  
129 psychologist, a licensed independent clinical social worker, a licensed mental health counselor,  
130 or a licensed nurse mental health clinical specialist.

131 SECTION 13. Section 47B of chapter 175 of the General Laws, as so appearing, is  
132 hereby amended by inserting after the word “setting”, in lines 98 and 99, the following words: -  
133 and, for persons under the age of 19, shall include collateral services.

134 SECTION 14. Subsection (i) of said chapter 47B of said chapter 175, as so appearing, is  
135 hereby amended by striking out the second and third paragraphs.

136 SECTION 15. Said section 47B of said chapter 175, as so appearing, is hereby further  
137 amended by adding the following 2 subsections:—

138 (k) Under this section, the following words shall have the following meanings unless the  
139 context requires otherwise:-

140 “Collateral services”, face-to-face or telephonic consultation, of at least 15 minutes in  
141 duration, by a licensed mental health professional with parties determined by the licensed mental

142 health professional to be necessary to make a diagnosis, and develop and implement a treatment  
143 plan. A licensed mental health professional shall not seek or receive reimbursement for more  
144 than four episodes of collateral services per patient, per month.

145 “Licensed mental health professional”, a licensed physician who specializes in the  
146 practice of psychiatry, a licensed psychologist, a licensed independent clinical social worker, a  
147 licensed mental health counselor, or a licensed nurse mental health clinical specialist.

148 (l) For the purposes of this section, psychopharmacological services and  
149 neuropsychological assessment services shall be treated as a medical benefit and shall be covered  
150 in a manner identical to all other medical services.

151 SECTION 16. Section 8A of chapter 176A of the General Laws, as so appearing, is  
152 hereby amended by inserting after the word “setting”, in lines 92 and 93, the following words: -  
153 and, for persons under the age of 19, shall include collateral services.

154 SECTION 17. Subsection (i) of said section 8A of said chapter 176A, as so appearing, is  
155 hereby amended by striking out the second and third paragraphs.

156 SECTION 18. Said section 8A of said chapter 176A, as so appearing, is hereby further  
157 amended by adding the following 2 subsections:—

158 (j) Under this section, the following words shall have the following meaning unless the  
159 context requires otherwise:-

160 “Collateral services”, face-to-face or telephonic consultation, of at least 15 minutes in  
161 duration, by a licensed mental health professional with parties determined by the licensed mental  
162 health professional to be necessary to make a diagnosis, and develop and implement a treatment



163 plan. A licensed mental health professional shall not seek or receive reimbursement for more  
164 than four episodes of collateral services per patient, per month.

165 “Licensed mental health professional”, a licensed physician who specializes in the  
166 practice of psychiatry, a licensed psychologist, a licensed independent clinical social worker, a  
167 licensed mental health counselor, or a licensed nurse mental health clinical specialist.

168 (k) For the purposes of this section, psychopharmacological services and  
169 neuropsychological assessment services shall be treated as a medical benefit and shall be covered  
170 in a manner identical to all other medical services.

171 SECTION 19. Section 4A of chapter 176B of the General Laws, as so appearing, is  
172 hereby amended by inserting after the word “setting”, in lines 95 and 96, the following words: -  
173 and, for persons under the age of 19, shall include collateral services.

174 SECTION 20. Subsection (i) of said section 4A of said chapter 176B, as so appearing, is  
175 hereby amended by striking out the second and third paragraphs.

176 SECTION 21. Said section 4A of said chapter 176B, as so appearing, is hereby further  
177 amended by adding the following 2 subsections:—

178 (j) Under this section, the following words shall have the following meanings unless the  
179 context requires otherwise:-

180 “Collateral services”, face-to-face or telephonic consultation, of at least 15 minutes in  
181 duration, by a licensed mental health professional with parties determined by the licensed mental  
182 health professional to be necessary to make a diagnosis, and develop and implement a treatment

183 plan. A licensed mental health professional shall not seek or receive reimbursement for more  
184 than four episodes of collateral services per patient, per month.

185 “Licensed mental health professional”, a licensed physician who specializes in the  
186 practice of psychiatry, a licensed psychologist, a licensed independent clinical social worker, a  
187 licensed mental health counselor, or a licensed nurse mental health clinical specialist.

188 (k) For the purposes of this section, psychopharmacological services and  
189 neuropsychological assessment services shall be treated as a medical benefit and shall be covered  
190 in a manner identical to all other medical services.

191 SECTION 22. Section 4M of chapter 176G of the General Laws, as so appearing, is  
192 hereby amended by inserting after the word “setting”, in lines 89 and 90, the following words: -  
193 and, for persons under the age of 19, shall include collateral services.

194 SECTION 23. Subsection (i) of said section 4M of said chapter 176G, as so appearing, is  
195 hereby amended by striking out the second and third paragraphs.

196 SECTION 24. Said section 4M of said chapter 176G of the General Laws, as so  
197 appearing, is hereby further amended by adding the following 2 subsections:-

198 (j) Under this section, the following words shall have the following meanings unless the  
199 context requires otherwise:-

200 “Collateral services”, face-to-face or telephonic consultation, of at least 15 minutes in  
201 duration, by a licensed mental health professional with parties determined by the licensed mental  
202 health professional to be necessary to make a diagnosis, and develop and implement a treatment

203 plan. A licensed mental health professional shall not seek or receive reimbursement for more  
204 than four episodes of collateral services per patient, per month.

205 “Licensed mental health professional”, a licensed physician who specializes in the  
206 practice of psychiatry, a licensed psychologist, a licensed independent clinical social worker, a  
207 licensed mental health counselor, or a licensed nurse mental health clinical specialist.

208 (k) For the purposes of this section, psychopharmacological services and  
209 neuropsychological assessment services shall be treated as a medical benefit and shall be covered  
210 in a manner identical to all other medical services.

211 SECTION 25. The department of probation, in consultation with the criminal history  
212 systems board shall conduct a study on rehabilitation. That study shall include an examination  
213 of:(a) enabling a person convicted of or adjudicated delinquent by reason of any felony or  
214 misdemeanor charges in the Commonwealth or a person who has been charged with a crime in  
215 the Commonwealth but which charges did not result in a conviction to petition the superior court  
216 of the trial court department in the county in which he then resides for a certificate of  
217 rehabilitation, or a certificate of recovery and rehabilitation if the charges were a consequence of  
218 substance abuse, for ascertainment and declaration of the fact of his rehabilitation or recovery  
219 and rehabilitation if certain conditions are met, for example if the person: (1) has not been  
220 sentenced to incarceration since being discharged from a felony or misdemeanor or since the  
221 termination of any ancillary proceedings related to such felony or misdemeanor including, but  
222 not limited to, any period of probation, parole or continuation; (2) is not the subject of a  
223 probationary or parole term for the commission of any other felony or misdemeanor; (3) presents  
224 satisfactory evidence of 2 years residence in the commonwealth prior to the filing of the petition;

225 (4) has demonstrated a period of rehabilitation, as defined by the department of probation, and  
226 (5) in the case of a person seeking a certificate of recovery and rehabilitation, has completed a  
227 substance abuse treatment program approved by the bureau of substance abuse treatment services  
228 within the department of public health;

229 (b) the standard the petitioner must demonstrate his rehabilitation or recovery;

230 (c) the duration of rehabilitation required to be eligible for a certificate of rehabilitation or  
231 recovery;

232 (d) any recommended provision of notice of the filing of a petition to the district attorney  
233 of the county in which a petition is filed, to the district attorney of the county in which the  
234 petitioner was convicted of an offense, to the attorney general and to the governor;

235 (e) whether a petitioner for a certification of rehabilitation or recovery may be  
236 represented by counsel and whether the court shall appoint counsel for certain petitioners;

237 (f) whether the court in which the petition is filed may require such testimony as it deems  
238 necessary, and who should be required to produce and pay for the cost of production of all  
239 records and reports relating to the petitioner and the offense for which he was charged;

240 (g) which information the court may request upon the filing of the application for a  
241 certificate, from the district attorney in which the petition was filed including, but not limited to:  
242 the place of residence of the petitioner; the criminal record of the petitioner as shown by the  
243 records of the Department of Justice; any representation made to the court by the petitioner; the  
244 conduct of the petitioner during his period of rehabilitation; and any other information the court  
245 may deem necessary in making its determination;

246 (h) under what conditions a court should deny a petition for a certificate of rehabilitation  
247 or recovery;

248 (i) under what conditions a court should issue a certificate of rehabilitation or recovery  
249 and whether such a certificate should become a part of the petitioner's criminal offender record  
250 information;

251 (j) to whom the court should forward such a certificate and whether any  
252 recommendations should be included;(k) whether such a certificate should be provided to any  
253 person lawfully seeking information relative to the offense for which a petitioner has received a  
254 certificate;

255 (l) whether any forms would be required to effectuate such a process and who should  
256 develop them;

257 (m) any notice requirements that are recommended for defendants or individuals being  
258 released from custody, discharged from probation or parole, or concluding substance abuse  
259 treatment;

260 (n) any other factors that may or may not be included within the determination of whether  
261 to issue a benefit granted by the awarding of such a certificate;

262 (o) any rights that an individual who has been denied the benefits of attaining a certificate  
263 of rehabilitation or recovery should have, including the right to appeal such a decision;

264 (p) what the appropriate forum should be for such an appeal; and

265 (q) any punishments that should be levied against an individual who fraudulently uses  
266 such a certificate.

267           The department shall report its findings to the clerks of the house and senate by July 1,  
268 2011 who shall forward that report to the chairmen of the house committee on ways and means,  
269 the senate committee on ways and means and the joint committee on mental health and substance  
270 abuse.

271           SECTION 26. Chapter 138 of the General Laws, as appearing in the 2008 Official  
272 Edition, is hereby amended by inserting after section 34D, the following new section:-

273           Section 34E. Persons under 21 years of age; consumption of alcohol; department of  
274 public health youth alcohol education program. Whoever, being under 21 years of age and not  
275 accompanied by a parent or legal guardian, is visibly intoxicated or has a detectable blood  
276 alcohol content of .02 or is in violation of Section 34A or 34C of this chapter, may be issued a  
277 civil citation by a police officer imposing a fine of three hundred dollars; provided, however, that  
278 this section shall not apply to the possession or consumption of alcohol for religious purposes  
279 protected by the first amendment to the United States Constitution or for lawful medicinal  
280 purposes. This section shall not apply to any person with a prior criminal record or to any person  
281 who causes serious personal injury or death of another person. In lieu of said fine, such minor  
282 and parent or guardian of such person may consent to enroll in a youth alcohol education  
283 program as provided herein. Said youth alcohol education program shall be certified by the  
284 department of public health to prevent and significantly reduce alcohol and controlled substance  
285 use and shall be specifically designed for the individual education, assessment and treatment of  
286 youth at risk of alcohol and controlled substance use. Youth alcohol education program providers  
287 utilized under the provisions of this section shall be certified by the department of public health  
288 as in compliance with a standard assessment tool approved by the department for the initial  
289 assessment of youth, and include age specific standards and performance measures that the

290 department adopts. Any licensed professional, public or private out-patient clinic, hospital,  
291 employer or union sponsored program, or any other organization, facility, service or internet  
292 accessible program which the department has accepted as appropriate for the purposes of this  
293 section may be certified as a youth alcohol education program provider. The department of  
294 public health shall make a list of certified youth alcohol education program providers available to  
295 the public. Enrollment in said program and satisfactory completion of its conditions, including  
296 substance abuse screening if deemed appropriate, may be in lieu of any conviction, adjudication  
297 or motor vehicle license penalty ordinarily imposed by Section 34A or 34C of this chapter. The  
298 registrar of motor vehicles shall not consider citations issued under this section a violation of the  
299 motor vehicle laws.

300 SECTION 27. Notwithstanding the provisions of any general or special law to the  
301 contrary, the bureau of substance abuse services, in consultation with the department of public  
302 health, shall conduct a study of alcohol and substance free housing, known as “sober homes”, to  
303 examine how best to provide oversight by exploring the feasibility of licensing, regulating,  
304 registering, or certifying sober homes and/or operators. Said study shall also document the  
305 number of sober homes operating in the state, the standards and requirements necessary to  
306 protect the health and safety of the home’s residents, and any problems created by the operation  
307 of sober homes, including impacts on neighborhoods and surrounding areas.

308 The bureau shall report to the general court the results of its study and its  
309 recommendations, if any, together with drafts of legislation necessary to carry its  
310 recommendations into effect by filing the same with the clerk of the senate, the joint committee  
311 on mental health and substance abuse and the senate and house committees on ways and means  
312 no later than December 31, 2010.

313 SECTION 28. The commissioner of elementary and secondary education, in consultation  
314 with the commissioner of public health, shall establish a pilot program for the purpose of  
315 providing substance abuse training in at least 1 middle school and at least 1 high school in each  
316 county of the commonwealth. All teachers, guidance counselors, and school nurses in each  
317 school selected for the pilot program shall be trained to recognize signs of substance abuse. In  
318 addition, parents and legal guardians of students shall be offered a training to recognize the signs  
319 of substance abuse. A teacher, guidance counselor, or school nurse in each school selected for  
320 the pilot program shall be trained to: (i) conduct an initial screening of those students identified  
321 as potential substance abusers, (ii) provide intervention services and (iii) provide referrals for  
322 subsequent comprehensive assessment and appropriate treatment.

323 SECTION 29. Section 16 of chapter 211B of the General Laws, as so appearing, is  
324 hereby amended by adding the following paragraph:

325 The institute, in consultation with the bureau of substance abuse services within the  
326 department of public health, shall provide substance abuse training that identifies substance  
327 abuse treatment resources for persons charged with or convicted of a crime or adjudicated  
328 delinquent who could benefit from such services.

329 SECTION 30. The department of public health shall promulgate regulations to include  
330 all prescriptions for controlled substances under schedule II, schedule III, schedule IV, and  
331 schedule V in the electronic reporting and prescription monitoring program, established under  
332 section 24 of chapter 94C, within 90 days of the passage of this act.

333 SECTION 31. The department of public health shall submit a report to the clerks of the  
334 house of representatives and senate, the chairs of the joint committee on public health, the chairs



335 of the joint committee on health care financing, and the chairs of the joint committee on public  
336 safety and homeland security relative to the department's efforts to update the electronic  
337 reporting and prescription monitoring program, established under section 24 of chapter 94C, by  
338 streamlining case reporting, expanding proactive reporting, increasing the flow of information to  
339 prescribing physicians and law enforcement personnel, including additional prescription  
340 schedules, increasing reporting frequency, implementing an online system accessible to  
341 prescribers, pharmacies and law enforcement personnel, reducing Medicaid fraud, and improving  
342 interstate operability. The report shall include specific timelines to achieve the goals stated in  
343 the report. The report shall be issued within 90 days of the passage of this act.

344 SECTION 32. The department of labor and workforce development, in consultation with  
345 the department of public health, shall conduct an investigation and study on the feasibility of a  
346 post treatment job skills training program and/or re-entry program for individuals recovering  
347 from substance use disorders. The study shall include information on best practices for similar  
348 job training programs, guidelines by which the commonwealth can use to establish an effective  
349 job skills training program, projected costs of such a program, and types of job skills that can be  
350 utilized by a program. Results of the study shall be filed with the clerk of the house of  
351 representatives and the clerk of the senate and, the joint committee on mental health and  
352 substance abuse, and the joint committee on labor and workforce development by July 15, 2011.

353 SECTION 33. The department of public health shall submit a report on the status of this  
354 act to the general court by filing it with the clerk of the house of representatives and the clerk of  
355 the senate on or before July 15, 2011.

356 SECTION 34. The bureau of substance abuse services within the department of public  
357 health shall establish a means for measuring the potential effects of this act either through rates  
358 of substance abuse, drug related overdoses, drug related crime or some other measure or  
359 measures as determined by the bureau within one year of the effective date of this act.

360 SECTION 35. Revenue generated by section 55 of chapter 27 of the acts of 2009 shall be  
361 allocated in part towards the costs incurred by the commonwealth under this act.