

**SENATE . . . . . No. 1100**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

***John F. Keenan***

*To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:*

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act relative to opioid prescribing practices and access to pain management.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>John F. Keenan</i>	<i>Norfolk and Plymouth</i>	
<i>Smitty Pignatelli</i>	<i>4th Berkshire</i>	
<i>Elizabeth A. Malia</i>	<i>11th Suffolk</i>	<i>2/2/2017</i>
<i>Denise Provost</i>	<i>27th Middlesex</i>	<i>1/24/2017</i>
<i>James M. Cantwell</i>	<i>4th Plymouth</i>	<i>1/25/2017</i>
<i>Jason M. Lewis</i>	<i>Fifth Middlesex</i>	<i>1/25/2017</i>
<i>Susan Williams Gifford</i>	<i>2nd Plymouth</i>	<i>1/25/2017</i>
<i>Robert M. Koczera</i>	<i>11th Bristol</i>	<i>1/26/2017</i>
<i>Geoff Diehl</i>	<i>7th Plymouth</i>	<i>1/26/2017</i>
<i>David F. DeCoste</i>	<i>5th Plymouth</i>	<i>1/26/2017</i>
<i>Michael D. Brady</i>	<i>Second Plymouth and Bristol</i>	<i>1/27/2017</i>
<i>Michael F. Rush</i>	<i>Norfolk and Suffolk</i>	<i>1/30/2017</i>
<i>Julian Cyr</i>	<i>Cape and Islands</i>	<i>2/1/2017</i>
<i>Linda Dean Campbell</i>	<i>15th Essex</i>	<i>2/2/2017</i>
<i>Jennifer L. Flanagan</i>	<i>Worcester and Middlesex</i>	<i>2/2/2017</i>
<i>Bruce J. Ayers</i>	<i>1st Norfolk</i>	<i>2/2/2017</i>
<i>James M. Murphy</i>	<i>4th Norfolk</i>	<i>2/2/2017</i>
<i>Barbara A. L'Italien</i>	<i>Second Essex and Middlesex</i>	<i>2/2/2017</i>

<i>Juana B. Matias</i>	<i>16th Essex</i>	<i>2/2/2017</i>
<i>Jonathan D. Zlotnik</i>	<i>2nd Worcester</i>	<i>2/3/2017</i>
<i>Marjorie C. Decker</i>	<i>25th Middlesex</i>	<i>2/3/2017</i>
<i>Carlos González</i>	<i>10th Hampden</i>	<i>2/3/2017</i>
<i>Eric P. Lesser</i>	<i>First Hampden and Hampshire</i>	<i>2/3/2017</i>
<i>Joan B. Lovely</i>	<i>Second Essex</i>	<i>2/3/2017</i>

**SENATE . . . . . No. 1100**

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By Mr. Keenan, a petition (accompanied by bill, Senate, No. 1100) of John F. Keenan, William Smitty Pignatelli, Elizabeth A. Malia, Denise Provost and other members of the General Court for legislation relative to opioid prescribing practices and access to pain management. Mental Health, Substance Use and Recovery.

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**The Commonwealth of Massachusetts**

**In the One Hundred and Ninetieth General Court  
(2017-2018)**

An Act relative to opioid prescribing practices and access to pain management.

*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. Section 15 of chapter 6D of the General Laws, as appearing in the 2014  
2 Official Edition, is hereby amended by inserting after the words “abuse” in line 65 the  
3 following:-

4 “; non-opioid and non-pharmaceutical pain management”

5 SECTION 2. Said section 15 of said chapter 6D, as so appearing, is hereby further  
6 amended by inserting after the word “illnesses” in line 91 the following:- “or chronic pain,”

7 SECTION 3. Section 21A of chapter 12C of the General Laws, as appearing in the 2014  
8 Official Edition, is hereby amended by inserting at the end thereof the following sentence:-

9 “Said program shall include, but not be limited to, the development of reasonable  
10 standards and procedures by which to assess provider networks and utilization of services for  
11 mental health, substance use disorder, and pain management; the purpose of said standards and

12 procedures being to assist the division of insurance network adequacy review process pursuant to  
13 section 2A of chapter 176O.”

14 SECTION 4. Chapter 175 of the General Laws is hereby amended by inserting after  
15 section 47II the following section:-

16 Section 47JJ. (a) Any policy, contract, agreement, plan or certificate of insurance issued,  
17 delivered or renewed within the commonwealth, which is considered creditable coverage under  
18 section 1 of chapter 111M, shall develop a plan to provide adequate coverage and access to pain  
19 management services that serve as alternatives to opioid prescribing, in accordance with  
20 guidelines developed by the division of insurance.

21 (b) The plan described in subsection (a) shall be subject to approval and shall be a  
22 component of carrier accreditation by the division of insurance pursuant to section 2 of chapter  
23 176O. In its review, the division shall consider the adequacy of access to pain management  
24 services and any carrier policies which may create unduly preferential coverage to prescribing  
25 opiates over other pain management modalities.

26 (c) Each carrier shall distribute educational materials to providers within their networks  
27 about the pain management access plan described in subsection (a) and shall post information  
28 about said plan on its public website.

29 SECTION 5. Chapter 176A of the General Laws is hereby amended by inserting after  
30 section 8KK the following section:-

31 Section 8LL. (a) Any contract between a subscriber and the corporation under an  
32 individual or group hospital service plan which is delivered, issued or renewed within the

33 commonwealth shall develop a plan to provide adequate coverage and access to pain  
34 management services that serve as alternatives to opioid prescribing, in accordance with  
35 guidelines developed by the division of insurance.

36 (b) The plan described in subsection (a) shall be subject to approval and shall be a  
37 component of carrier accreditation by the division of insurance pursuant to section 2 of chapter  
38 176O. In its review, the division shall consider the adequacy of access to pain management  
39 services and any carrier policies which may create unduly preferential coverage to prescribing  
40 opiates over other pain management modalities.

41 (c) Each carrier shall distribute educational materials to providers within their networks  
42 about the pain management access plan described in subsection (a) and shall post information  
43 about said plan on its public website.

44 SECTION 6. Chapter 176B of the General Laws is hereby amended by inserting after  
45 section 4KK the following section:-

46 Section 4LL. (a) Any subscription certificate under an individual or group medical  
47 service agreement delivered, issued or renewed within the commonwealth shall develop a plan to  
48 provide adequate coverage and access to pain management services that serve as alternatives to  
49 opioid prescribing, in accordance with guidelines developed by the division of insurance.

50 (b) The plan described in subsection (a) shall be subject to approval and shall be a  
51 component of carrier accreditation by the division of insurance pursuant to section 2 of chapter  
52 176O. In its review, the division shall consider the adequacy of access to pain management  
53 services and any carrier policies which may create unduly preferential coverage to prescribing  
54 opiates over other pain management modalities.

55 (c) Each carrier shall distribute educational materials to providers within their networks  
56 about the pain management access plan described in subsection (a) and shall post information  
57 about said plan on its public website.

58 SECTION 7. Chapter 176G of the General Laws is hereby amended by inserting after  
59 section 4CC the following section:-

60 Section 4DD. (a) Any individual or group health maintenance contract that is issued or  
61 renewed shall develop a plan to provide adequate coverage and access to pain management  
62 services that serve as alternatives to opioid prescribing, in accordance with guidelines developed  
63 by the division of insurance.

64 (b) The plan described in subsection (a) shall be subject to approval and shall be a  
65 component of carrier accreditation by the division of insurance pursuant to section 2 of chapter  
66 176O. In its review, the division shall consider the adequacy of access to pain management  
67 services and any carrier policies which may create unduly preferential coverage to prescribing  
68 opiates over other pain management modalities.

69 (c) Each carrier shall distribute educational materials to providers within their networks  
70 about the pain management access plan described in subsection (a) and shall post information  
71 about said plan on its public website.

72 SECTION 8. Subsection (a) of section 2 of chapter 176O of the General Laws, as  
73 appearing in the 2014 Official Edition, is hereby amended by striking out, in lines 8 and 9, the  
74 words “and (5)” and inserting in place thereof the following words:-

75 “(5) access to pain management services, including non-opioid and non-pharmaceutical  
76 service options as described in guidelines published by the division; and (6)”

77 SECTION 9. Subsection (b) of said section 2 of said chapter 176O, as so appearing, is  
78 hereby amended by striking the words “center of health care finance and policy” and inserting in  
79 place thereof the words:- “center for health information and analysis”

80 SECTION 10. Said section 2 of said chapter 176O, as so appearing, is hereby further  
81 amended by inserting after subsection (b) the following new subsection:-

82 (b½) For the purposes of accreditation review in the area of pain management, the  
83 division shall consult with the health policy commission, established under chapter 6D, for  
84 assistance in determining appropriate standards for evidence-based non-opioid pain management  
85 products and services, and shall publish guidelines to assist and evaluate carriers’ development  
86 and submission of pain management access plans as required under paragraph (5) of subsection  
87 (a).

88 SECTION 11. Chapter 176O, as so appearing, is hereby amended by inserting after  
89 section 2 the following new section:-

90 Section 2A. To the extent that the division requires a submission of plan provider  
91 network documents by carriers to assess network adequacy, the division shall forward to the  
92 center for health information and analysis, established under chapter 12C, any such documents  
93 received that are related to mental health, substance use disorder, or pain management services.  
94 The center for health information and analysis may compare said documents to actual claims  
95 paid by the carrier, and shall work in conjunction with the division to establish reasonable

- 96 standards for determining whether a carrier's provider network documents accurately reflect
- 97 actual service access and utilization by the carrier's covered members.