

HOUSE No. 1721

The Commonwealth of Massachusetts

PRESENTED BY:

Natalie M. Higgins

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 to expand access to medically assisted treatment providers.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Natalie M. Higgins</i>	<i>4th Worcester</i>	<i>1/16/2019</i>
<i>Mary S. Keefe</i>	<i>15th Worcester</i>	<i>1/23/2019</i>
<i>Mindy Domb</i>	<i>3rd Hampshire</i>	<i>1/31/2019</i>
<i>Jack Patrick Lewis</i>	<i>7th Middlesex</i>	<i>2/1/2019</i>
<i>Tami L. Gouveia</i>	<i>14th Middlesex</i>	<i>2/1/2019</i>
<i>James K. Hawkins</i>	<i>2nd Bristol</i>	<i>2/1/2019</i>

HOUSE No. 1721

By Ms. Higgins of Leominster, a petition (accompanied by bill, House, No. 1721) of Natalie M. Higgins and others for legislation to expand access to medically assisted treatment providers. Mental Health, Substance Use and Recovery.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 1096 OF 2017-2018.]

The Commonwealth of Massachusetts

In the One Hundred and Ninety-First General Court
(2019-2020)

An Act to expand access to medically assisted treatment providers.

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. The Department of Public Health and the Massachusetts Board of Registration
2 in Medicine shall develop or provide for, and make available for voluntary participation by any
3 physician, a professional training module on the prescribing and administration of naltrexone,
4 both pill and injectable form, for the treatment of opioid use disorders and alcohol use disorders.

5 The training module shall include, but not be limited to guidelines and best practices for:

6 A.Assessment;

7 B.Care Coordination;

8 C.Treatment Plans, including counseling frequency and type;

9 D.Toxicology Screens;

10 E.Appropriate Length of Treatment; and

11 F.Relapse Prevention

12 The training module developed shall be accepted by the board as up to 2 continuing
13 professional development credits.

14 Section 2. Notwithstanding any special or general law to the contrary, the Department of
15 Public Health and the Bureau of Substance Abuse Services shall establish an extended release
16 naltrexone training and technical assistance program for providers licensed or certified by the
17 Department of Public Health. The Department shall prioritize training and ongoing technical
18 assistance for providers serving cities and towns of the Commonwealth with greater than ten
19 opioid related fatalities per ten thousand as documented in the study authorized by Chapter 55 of
20 the Acts of 2015. The Department shall also evaluate and direct training to expand the number
21 of providers serving individuals released from Department of Correction facilities and Houses of
22 Correction. Provided further, that said training program shall include, but not be limited to the
23 following criteria: patient eligibility, optimal selection criteria, placement matching, patient
24 engagement, team coaching and coordination, withdrawal management and induction, dosing
25 and administration, clinical evaluation and laboratory monitoring, side effect management, co-
26 occurring disorders management, drug interactions, persistence management, managed care
27 interactions, and termination of medication.

28 Section 3. The department of public health shall submit a report to the house and senate
29 committees on ways and means and the joint committee on mental health and substance abuse on
30 the number of providers trained and any identified obstacles to expanding the number of
31 providers trained in extended release naltrexone by January 1, 2020.