SENATE DOCKET, NO. 1122 FILED ON: 1/17/2019

SENATE . . . . . No. 1160

The Commonwealth of Massachusetts

PRESENTED BY:

Michael O. Moore

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 expanding access to patient centered care for opioid use disorder.

PETITION OF:

NAME:	DISTRICT/ADDRESS:
Michael O. Moore	*Second Worcester*

SENATE DOCKET, NO. 1122 FILED ON: 1/17/2019

SENATE . . . . . No. 1160

By Mr. Moore, a petition (accompanied by bill, Senate, No. 1160) of Michael O. Moore for legislation to expand access to patient centered care for opioid use disorder. Mental Health, Substance Use and Recovery.

The Commonwealth of Massachusetts

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

An Act expanding access to patient centered care for opioid use disorder.

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

SECTION 1. Notwithstanding any special or general law to the contrary, the department of public health and the board of registration in medicine shall develop, or provide for, a healthcare provider education campaign that encourages the adoption of all Food and Drug Administration, FDA, approved medications for the treatment of opioid use disorder. The goal of the campaign is to increase the number of providers offering all FDA-approved medications, directly or by referral, along with counseling and other appropriate support services. The training shall include, but not be limited to guidelines and best practices for: assessment; toxicology screens; treatment plans, including counseling frequency and type; detoxification/withdrawal management and induction care coordination; appropriate length of treatment; and relapse prevention. The training developed or provided shall be accepted by the board as up to 2 continuing professional development credits.

SECTION 2. Notwithstanding any special or general law to the contrary, the department of public health and the bureau of substance abuse services shall establish a peer mentoring program that supplements the healthcare provider educational campaign by providing a network for peer-to-peer trainings, materials, and prescriber and clinical team support. Peer mentors should have strong credentials, expertise and clinical experience with all FDA-approved medications for the treatment of opioid use disorder. Mentors shall provide coaching for providers licensed or certified by the department of public health. The department shall prioritize the efforts of the peer mentor program for providers serving geographic areas of the commonwealth identified by the department where access to medication assisted treatment is limited. The training program shall include, but not be limited to the following criteria: patient eligibility, optimal selection criteria, placement matching, patient engagement, team coaching and coordination, withdrawal management and induction, dosing and administration, clinical evaluation and laboratory monitoring, side effect management, co-occurring disorders management, drug-drug interactions, treatment retention, managed care interactions, and termination of medication.

SECTION 3. There shall be a grant program established to support providers who demonstrate the ability to offer all FDA-approved medications, along with counseling and other supports, directly or by referral. Providers who complete the waiver process and the educational programming on all FDA approved medications will be eligible to apply for funding to add a staff person(s) to support the expanded services.

SECTION 4. The department of public health shall create an inventory of health care providers treating patients with medications to measure adoption of offering all FDA-approved treatment options across the commonwealth. They shall also submit a report to the house and

senate committees on ways and means and the joint committee on mental health and substance use, and recovery on the number of providers trained and any identified obstacles to expanding the number of providers offering all FDA-approved medications by January 1, 2020.