

SENATE No. 609

The Commonwealth of Massachusetts

PRESENTED BY:

Eric P. Lesser

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 provide equal access to medication assisted treatment.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>Eric P. Lesser</i>	<i>First Hampden and Hampshire</i>	
<i>José F. Tosado</i>	<i>9th Hampden</i>	<i>1/30/2019</i>
<i>Mindy Domb</i>	<i>3rd Hampshire</i>	<i>2/1/2019</i>
<i>Elizabeth A. Malia</i>	<i>11th Suffolk</i>	<i>2/1/2019</i>

SENATE No. 609

By Mr. Lesser, a petition (accompanied by bill, Senate, No. 609) of Eric P. Lesser, José F. Tosado, Mindy Domb and Elizabeth A. Malia for legislation to provide equal access to medication assisted treatment. Financial Services.

The Commonwealth of Massachusetts

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

An Act to provide equal access to medication assisted treatment.

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 32A of the General Laws, as so appearing in the 2016 official
2 edition, is hereby amended by inserting after Section 17O the following section:-

3 Section 17P. For the purposes of this section the following terms shall have the
4 following meanings:

5 “Methadone treatment program”, an opioid treatment program as defined in 105 CMR
6 164.006, a SAMHSA-certified program, licensed by the department of public health, usually
7 comprised of a facility, staff, administration, patients, and services, that engages in supervised
8 assessment and treatment using approved medications, of individuals who are addicted to
9 opioids.

10 “SAMHSA”, the Substance Abuse and Mental Health Services Administration.

Any coverage offered by the commission to an active or retired employee of the commonwealth insured under the group insurance commission shall provide coverage for buprenorphine, injectable naltrexone, and methadone treatment programs, provided that the total out-of-pocket cost charged to enrollees in the form of co-payments for methadone treatment programs shall not exceed 20 per cent of the total reimbursement paid to the methadone treatment program provider for such services.

Any coverage offered by the commission to an active or retired employee of the commonwealth insured under the group insurance commission shall provide reimbursement to methadone treatment programs for buprenorphine and injectable naltrexone provided to an enrollee.

SECTION 2. Chapter 118E of the general laws, as so appearing in the 2016 official edition, is hereby amended by inserting after section 10J the following section:-

Section 10K. For the purposes of this section the following terms shall have the following meanings:

“Methadone treatment program”, an opioid treatment program as defined in 105 CMR 164.006, a SAMHSA-certified program, licensed by the department of public health, usually comprised of a facility, staff, administration, patients, and services, that engages in supervised assessment and treatment using approved medications, of individuals who are addicted to opioids.

“SAMHSA”, the Substance Abuse and Mental Health Services Administration.

31 The division and its contracted health insurers, health plans, health maintenance
32 organizations, behavioral health management firms and third party administrators under contract
33 to a Medicaid managed care organization or primary care clinician plan shall cover the cost of
34 buprenorphine, injectable naltrexone, and methadone treatment programs, provided that the total
35 out-of-pocket cost charged to enrollees in the form of co-payments for methadone treatment
36 programs shall not exceed 20 per cent of the total reimbursement paid to the methadone
37 treatment program provider for such services.

38 The division and its contracted health insurers, health plans, health maintenance
39 organizations, behavioral health management firms and third party administrators under contract
40 to a Medicaid managed care organization or primary care clinician plan shall provide
41 reimbursement to methadone treatment programs for buprenorphine and injectable naltrexone
42 provided to an enrollee.”

43 SECTION 3. Chapter 175 of the general laws, as so appearing in the 2016 official
44 edition, is hereby amended by inserting after section 47II the following section:-

45 Section 47JJ. For the purposes of this section the following terms shall have the
46 following meanings:

47 “Methadone treatment program”, an opioid treatment program as defined in 105 CMR
48 164.006, a SAMHSA-certified program, licensed by the department of public health, usually
49 comprised of a facility, staff, administration, patients, and services, that engages in supervised
50 assessment and treatment using approved medications, of individuals who are addicted to
51 opioids.

52 “SAMHSA”, the Substance Abuse and Mental Health Services Administration.

53 Any policy, contract, agreement, plan or certificate of insurance issued, delivered or
54 renewed within the commonwealth, which is considered creditable coverage under section 1 of
55 chapter 111M, shall provide coverage for buprenorphine, injectable naltrexone, and methadone
56 treatment programs, provided that the total out-of-pocket cost charged to enrollees in the form of
57 co-payments for methadone treatment programs shall not exceed 20 per cent of the total
58 reimbursement paid to the methadone treatment program provider for such services.

59 Any policy, contract, agreement, plan or certificate of insurance issued, delivered or
60 renewed within the commonwealth, which is considered creditable coverage under section 1 of
61 chapter 111M, shall provide reimbursement to methadone treatment programs for buprenorphine
62 and injectable naltrexone provided to an enrollee.

63 SECTION 4. This act shall take effect one year from the effective date of this act.