

SENATE No.

The Commonwealth of Massachusetts

PRESENTED BY:

Diana DiZoglio

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 substance use accountable care organizations.

PETITION OF:

NAME:

Diana DiZoglio

DISTRICT/ADDRESS:

First Essex

SENATE No.

[Pin Slip]

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. 1140 OF 2019-2020.]

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Second General Court
(2021-2022)**

An Act relative to substance use accountable care organizations.

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 6D of the General Laws is hereby amended by adding the
2 following section:-

3 Section 19. (a) For the purposes of this section the following terms, shall unless the
4 context clearly appears otherwise, have the following meanings:-

5 “Substance use disorder accountable care organization”, a provider organization certified
6 under section 15 or other organization engaged in the treatment or management of substance use
7 disorder.

8 “Recovery center”, a halfway house, treatment unit, detoxification facility, facility
9 licensed pursuant to section 7 of chapter 111E or a residence that provides or advertises as

10 providing, an alcohol and drug free environment for people recovering from substance use
11 disorders.

12 “Recovery program”, any program or services delivered by or through a substance use
13 disorder accountable care organization at a recovery center.

14 “Substance use disorder”, the range of conditions associated with alcohol, tobacco and
15 other drug use, including substance dependence, use and withdrawal as defined by the American
16 Psychiatric Association.

17 (b) The commission shall facilitate and coordinate the creation of recovery programs
18 provided by a substance use disorder accountable care organization, for the purpose of ensuring
19 and improving access to appropriate mental health and substance use disorder services
20 throughout the commonwealth by providing a platform for the organization of all relevant health,
21 mental health, substance use, and other community entities, and by providing a mechanism to
22 use and channel financial and other resources efficiently and effectively.

23 (c) The commission shall identify unmet community needs that may be coordinated
24 or provided by a substance use disorder accountable care organization through a recovery
25 program, including, but not limited to, the following:

26 (1) waiting lists in community mental health and substance use services;

27 (2) hospital emergency department use by persons with mental and substance use
28 illnesses; including volume, length of stay, and challenges associated with obtaining psychiatric
29 assessment;

30 (3) difficulty obtaining admission to inpatient facilities, and reasons therefore;

- 31 (4) availability of primary care providers in the community;
- 32 (5) availability of psychiatrists and mental health professionals; and
- 33 (6) transportation issues.

34 (d) The commission shall develop a plan to address community needs through substance
35 use disorder accountable care organizations, including a specific timeline for implementation of
36 specific objectives and establishment of evaluation measures. The comprehensive plan shall
37 include the complete continuum of behavioral health services, including, but not limited to, the
38 following:

- 39 (1) prevention;
- 40 (2) client assessment and diagnosis;
- 41 (3) an array of outpatient behavioral health services;
- 42 (4) case coordination;
- 43 (5) crisis and emergency services; and
- 44 (6) treatment, including inpatient psychiatric services in public and private hospitals.

45 (e) A substance use disorder accountable care organization shall manage all the high risk
46 prescribed medicines that are in use within alcohol and drug free housing. Prescribed
47 medications shall only be accessible and administered by licensed clinical personnel. The
48 commission shall establish rules and regulations for the classification of high risk prescribed
49 medications and the use of individualized locked boxes for such medications to be stored in a
50 locked closet or office in a recovery center.