

**HOUSE . . . . . No. 1141**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

*Jon Santiago*

*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 dual diagnosis treatment coverage.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Jon Santiago</i>	<i>9th Suffolk</i>	<i>1/19/2023</i>
<i>Peter Capano</i>	<i>11th Essex</i>	<i>2/16/2023</i>

# HOUSE . . . . . No. 1141

By Representative Santiago of Boston, a petition (accompanied by bill, House, No. 1141) of Jon Santiago and Peter Capano relative to dual diagnosis treatment healthcare coverage. Financial Services.

## The Commonwealth of Massachusetts

In the One Hundred and Ninety-Third General Court  
(2023-2024)

An Act relative to dual diagnosis treatment coverage.

*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 appearing in the 2020 Official  
2 Edition, is hereby amended by striking out section 17N and inserting in place thereof the  
3 following section:-

4 Section 17N. "Acute treatment services", 24-hour medically supervised addiction  
5 treatment for adults or adolescents provided in a medically managed or medically monitored  
6 inpatient facility, as defined by the department of public health, which provides evaluation and  
7 withdrawal management and that may include biopsychosocial assessment, individual and group  
8 counseling, psychoeducational groups and discharge planning.

9 "Clinical stabilization services", 24-hour clinically managed post detoxification treatment  
10 for adults or adolescents, as defined by the department of public health, usually following acute  
11 treatment services for substance use, which may include intensive education and counseling  
12 regarding the nature of addiction and its consequences, relapse prevention, outreach to families

13 and significant others and aftercare planning, for individuals beginning to engage in recovery  
14 from addiction.

15 “Co-occurring treatment services”, inpatient medically monitored detoxification  
16 treatment for adults or adolescents provided in an inpatient psychiatric facility or an inpatient  
17 psychiatric unit within a general hospital, licensed by the department of mental health.

18 The commission shall provide to any active or retired employee of the commonwealth  
19 who is insured under the group insurance commission coverage for medically necessary acute  
20 treatment services, medically necessary clinical stabilization services, and medically necessary  
21 co-occurring treatment services for up to a total of 14 days and shall not require preauthorization  
22 prior to obtaining such acute treatment services, clinical stabilization services, or co-occurring  
23 treatment services; provided, that the facility shall notify the carrier of both admission and the  
24 initial treatment plan within 48 hours of admission; provided further, that utilization review  
25 procedures may be initiated on day 7; and provided further, that the commission shall provide  
26 to any active or retired employee of the commonwealth who is insured under the group insurance  
27 commission coverage for, without preauthorization, substance use disorder evaluations ordered  
28 pursuant to section 51 1/2 of chapter 111.

29 Medical necessity shall be determined by the treating clinician in consultation with the  
30 patient and noted in the patient's medical record.

31 SECTION 2. Chapter 118E of the General Laws is hereby amended by striking out  
32 section 10H and inserting in place thereof the following section:-

33 Section 10H. "Acute treatment services", 24-hour medically supervised addiction  
34 treatment for adults or adolescents provided in a medically managed or medically monitored

35 inpatient facility, as defined by the department of public health, which provides evaluation and  
36 withdrawal management and that may include biopsychosocial assessment, individual and group  
37 counseling, psychoeducational groups and discharge planning.

38 "Clinical stabilization services", 24-hour clinically managed post detoxification treatment  
39 for adults or adolescents, as defined by the department of public health, usually following acute  
40 treatment services for substance use, which may include intensive education and counseling  
41 regarding the nature of addiction and its consequences, relapse prevention, outreach to families  
42 and significant others and aftercare planning, for individuals beginning to engage in recovery  
43 from addiction.

44 "Co-occurring treatment services", inpatient medically monitored detoxification  
45 treatment for adults or adolescents provided in an inpatient psychiatric facility or an inpatient  
46 psychiatric unit within a general hospital, licensed by the department of mental health.

47 The division and its contracted health insurers, health plans, health maintenance  
48 organizations, behavioral health management firms and third party administrators under contract  
49 to a Medicaid managed care organization or primary care clinician plan shall cover the cost of  
50 medically necessary acute treatment services and shall not require a preauthorization prior to  
51 obtaining treatment.

52 The division and its contracted health insurers, health plans, health maintenance  
53 organizations, behavioral health management firms and third party administrators under contract  
54 to a Medicaid managed care organization or primary care clinician plan shall cover the cost of  
55 medically necessary clinical stabilization services and co-occurring treatment services for up to  
56 14 days and shall not require preauthorization prior to obtaining clinical stabilization services

57 and co-occurring treatment services; provided, that the facility shall provide the carrier both  
58 notification of admission and the initial treatment plan within 48 hours of admission; provided  
59 further, that utilization review procedures may be initiated on day 7; and provided further, that  
60 the division and its contracted health insurers, health plans, health maintenance organizations,  
61 behavioral health management firms and third party administrators under contract to a Medicaid  
62 managed care organization or primary care clinician plan shall cover, without preauthorization,  
63 substance use disorder evaluations ordered pursuant to section 51 1/2 of chapter 111.

64 Medical necessity shall be determined by the treating clinician in consultation with the  
65 patient and noted in the patient's medical record.

66 SECTION 3. Chapter 175 of the General Laws is hereby amended by striking out section  
67 47GG and inserting in place thereof the following section:-

68 Section 47GG. "Acute treatment services", 24-hour medically supervised addiction  
69 treatment for adults or adolescents provided in a medically managed or medically monitored  
70 inpatient facility, as defined by the department of public health, which provides evaluation and  
71 withdrawal management and that may include biopsychosocial assessment, individual and group  
72 counseling, psychoeducational groups and discharge planning.

73 "Clinical stabilization services", 24-hour clinically managed post detoxification treatment  
74 for adults or adolescents, as defined by the department of public health, usually following acute  
75 treatment services for substance use, which may include intensive education and counseling  
76 regarding the nature of addiction and its consequences, relapse prevention, outreach to families  
77 and significant others and aftercare planning, for individuals beginning to engage in recovery  
78 from addiction.

79 “Co-occurring treatment services”, inpatient medically monitored detoxification  
80 treatment for adults or adolescents provided in an inpatient psychiatric facility or an inpatient  
81 psychiatric unit within a general hospital, licensed by the department of mental health.

82 Any policy, contract, agreement, plan or certificate of insurance issued, delivered or  
83 renewed within the commonwealth, which is considered creditable coverage under section 1 of  
84 chapter 111M, shall provide coverage for medically necessary acute treatment services,  
85 medically necessary clinical stabilization services and medically necessary co-occurring  
86 treatment services for up to a total of 14 days and shall not require preauthorization prior to  
87 obtaining acute treatment services, clinical stabilization services, or co-occurring treatment  
88 services; provided, that the facility shall notify the carrier of both admission and the initial  
89 treatment plan within 48 hours of admission; provided further, that utilization review procedures  
90 may be initiated on day 7; provided further that any policy, contract, agreement, plan or  
91 certificate of insurance issued, delivered or renewed within the commonwealth, which is  
92 considered creditable coverage pursuant to section 1 of chapter 111M, shall cover, without  
93 preauthorization, a substance use disorder evaluation ordered pursuant to section 51 1/2 of  
94 chapter 111.

95 Medical necessity shall be determined by the treating clinician in consultation with the  
96 patient and noted in the patient's medical record.

97 SECTION 4. Chapter 176A of the General Laws, as so appearing, is hereby amended by  
98 striking out section 8II and inserting in place thereof the following section:-

99 Section 8II. "Acute treatment services", 24-hour medically supervised addiction treatment  
100 for adults or adolescents provided in a medically managed or medically monitored inpatient

101 facility, as defined by the department of public health, which provides evaluation and withdrawal  
102 management and that may include biopsychosocial assessment, individual and group counseling,  
103 psychoeducational groups and discharge planning.

104 "Clinical stabilization services", 24-hour clinically managed post detoxification treatment  
105 for adults or adolescents, as defined by the department of public health, usually following acute  
106 treatment services for substance use, which may include intensive education and counseling  
107 regarding the nature of addiction and its consequences, relapse prevention, outreach to families  
108 and significant others and aftercare planning, for individuals beginning to engage in recovery  
109 from addiction.

110 "Co-occurring treatment services", inpatient medically monitored detoxification  
111 treatment for adults or adolescents provided in an inpatient psychiatric facility or an inpatient  
112 psychiatric unit within a general hospital, licensed by the department of mental health.

113 Any contract between a subscriber and the corporation under an individual or group  
114 hospital service plan that is delivered, issued or renewed within the commonwealth shall provide  
115 coverage for medically necessary acute treatment services, medically necessary clinical  
116 stabilization services, and medically necessary co-occurring treatment services for up to a total of  
117 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical  
118 stabilization services, or co-occurring treatment services; provided, that the facility shall notify  
119 the carrier of both admission and the initial treatment plan within 48 hours of admission;  
120 provided further, that utilization review procedures may be initiated on day 7; provided further,  
121 any contract between a subscriber and the corporation under an individual or group hospital  
122 service plan that is delivered, issued or renewed within the commonwealth, shall cover, without

123 preauthorization, a substance use disorder evaluation ordered pursuant to section 51 1/2 of  
124 chapter 111.

125 Medical necessity shall be determined by the treating clinician in consultation with the  
126 patient and noted in the patient's medical record.

127 SECTION 5. Chapter 176B of the General Laws, as so appearing, is hereby amended by  
128 striking out section 4II and inserting in place thereof the following section:-

129 Section 4II. "Acute treatment services", 24-hour medically supervised addiction treatment  
130 for adults or adolescents provided in a medically managed or medically monitored inpatient  
131 facility, as defined by the department of public health, which provides evaluation and withdrawal  
132 management and that may include biopsychosocial assessment, individual and group counseling,  
133 psychoeducational groups and discharge planning.

134 "Clinical stabilization services", 24-hour clinically managed post detoxification treatment  
135 for adults or adolescents, as defined by the department of public health, usually following acute  
136 treatment services for substance use, which may include intensive education and counseling  
137 regarding the nature of addiction and its consequences, relapse prevention, outreach to families  
138 and significant others and aftercare planning, for individuals beginning to engage in recovery  
139 from addiction.

140 "Co-occurring treatment services", inpatient medically monitored detoxification  
141 treatment for adults or adolescents provided in an inpatient psychiatric facility or an inpatient  
142 psychiatric unit within a general hospital, licensed by the department of mental health.



143 Any subscription certificate under an individual or group medical service agreement  
144 delivered, issued or renewed within the commonwealth shall provide coverage for medically  
145 necessary acute treatment services, medically necessary clinical stabilization services, and  
146 medically necessary co-occurring treatment services for up to a total of 14 days and shall not  
147 require preauthorization prior to obtaining acute treatment services, clinical stabilization services  
148 or co-occurring treatment services; provided, that the facility shall provide the carrier both  
149 notification of admission and the initial treatment plan within 48 hours of admission; provided  
150 further, that utilization review procedures may be initiated on day 7; provided further, any  
151 subscription certificate under an individual or group medical service agreement delivered, issued  
152 or renewed within the commonwealth shall provide coverage for, without preauthorization, a  
153 substance use disorder evaluation ordered pursuant to section 51 1/2 of chapter 111.

154 Medical necessity shall be determined by the treating clinician in consultation with the  
155 patient and noted in the patient's medical record.

156 SECTION 6. Chapter 176G as so appearing, is hereby amended by striking out section  
157 4AA and inserting in place thereof the following section:-

158 Section 4AA. "Acute treatment services", 24-hour medically supervised addiction  
159 treatment for adults or adolescents provided in a medically managed or medically monitored  
160 inpatient facility, as defined by the department of public health, that provides evaluation and  
161 withdrawal management and which may include biopsychosocial assessment, individual and  
162 group counseling, psychoeducational groups and discharge planning.

163 "Clinical stabilization services", 24-hour clinically managed post detoxification treatment  
164 for adults or adolescents, as defined by the department of public health, usually following acute

165 treatment services for substance use, which may include intensive education and counseling  
166 regarding the nature of addiction and its consequences, relapse prevention, outreach to families  
167 and significant others and aftercare planning, for individuals beginning to engage in recovery  
168 from addiction.

169 “Co-occurring treatment services”, inpatient medically monitored detoxification  
170 treatment for adults or adolescents provided in an inpatient psychiatric facility or an inpatient  
171 psychiatric unit within a general hospital, licensed by the department of mental health.

172 An individual or group health maintenance contract that is issued or renewed shall  
173 provide coverage for medically necessary acute treatment services, medically necessary clinical  
174 stabilization services, and medically necessary co-occurring treatment services for up to a total of  
175 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical  
176 stabilization services, or co-occurring treatment services; provided, that the facility shall provide  
177 the carrier both notification of admission and the initial treatment plan within 48 hours of  
178 admission; provided further, that utilization review procedures may be initiated on day 7;  
179 provided further, an individual or group health maintenance contract that is issued or renewed  
180 shall provide coverage for, without preauthorization, a substance use disorder evaluation ordered  
181 pursuant to section 51 1/2 of chapter 111.

182 Medical necessity shall be determined by the treating clinician in consultation with the  
183 patient and noted in the patient's medical record.