

SENATE No. 2918

Senate, July 30, 2024 -- Text of amendment (14) (offered by Senator Keenan) to the Ways and Means amendment (Senate, No. 2898) to the Senate Bill relative to accessing harm reduction initiatives

The Commonwealth of Massachusetts

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

1 by inserting after section __ the following sections:-

2 "SECTION __. Chapter 32A of the General Laws, as appearing in the 2022 Official
3 Edition, is hereby amended by striking out section 17N and inserting in place thereof the
4 following section:-

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

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

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

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

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

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

34 Section 10H. "Acute treatment services", 24-hour medically supervised addiction
35 treatment for adults or adolescents provided in a medically managed or medically monitored
36 inpatient facility, as defined by the department of public health, which provides evaluation and

37 withdrawal management and that may include biopsychosocial assessment, individual and group
38 counseling, psychoeducational groups and discharge planning.

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

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

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

53 The division and its contracted health insurers, health plans, health maintenance
54 organizations, behavioral health management firms and third party administrators under contract
55 to a Medicaid managed care organization or primary care clinician plan shall cover the cost of
56 medically necessary clinical stabilization services and co-occurring treatment services for up to
57 14 days and shall not require preauthorization prior to obtaining clinical stabilization services
58 and co-occurring treatment services; provided, that the facility shall provide the carrier both

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

157 SECTION __. Chapter 176G as so appearing, is hereby amended by striking out section
158 4AA and inserting in place thereof the following section:-

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

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

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

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

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

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