SENATE DOCKET, NO. 2003 FILED ON: 1/20/2023

SENATE . . . . . No. 658

The Commonwealth of Massachusetts

PRESENTED BY:

John F. Keenan

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:	
John F. Keenan	*Norfolk and Plymouth*	
James B. Eldridge	*Middlesex and Worcester*	*3/6/2023*
Rebecca L. Rausch	*Norfolk, Worcester and Middlesex*	*7/8/2023*

SENATE DOCKET, NO. 2003 FILED ON: 1/20/2023

SENATE . . . . . No. 658

By Mr. Keenan, a petition (accompanied by bill, Senate, No. 658) of John F. Keenan and James B. Eldridge for legislation relative to dual diagnosis treatment coverage. Financial Services.

[SIMILAR MATTER FILED IN PREVIOUS SESSION
SEE SENATE, NO. *685* OF 2021-2022.]

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:

SECTION 1. Chapter 32A of the General Laws, as appearing in the 2020 Official Edition, is hereby amended by striking out section 17N and inserting in place thereof the following section:-

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

“Clinical stabilization services”, 24-hour clinically managed post detoxification treatment 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 in 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.