

# HOUSE . . . . . No. 4898

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## The Commonwealth of Massachusetts

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HOUSE OF REPRESENTATIVES, January 8, 2026.

The committee on Financial Services, to whom was referred the petition (accompanied by bill, House, No. 1277) of James J. O'Day and James B. Eldridge relative to dual diagnosis treatment healthcare coverage, reports recommending that the accompanying bill (House, No. 4898) ought to pass.

For the committee,

JAMES M. MURPHY.

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## The Commonwealth of Massachusetts

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In the One Hundred and Ninety-Fourth General Court  
(2025-2026)  
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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 2022 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

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

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

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

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

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

Section 10H. "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 treatment services for substance use, which may include intensive education and counseling regarding the nature of addiction and its consequences, relapse prevention, outreach to families and significant others and aftercare planning, for individuals beginning to engage in recovery from addiction.

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

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

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

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

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

SECTION 3. Chapter 175 of the General Laws, as appearing in the 2022 Official Edition, is hereby amended by striking out section 47GG and inserting in place thereof the following section:-

Section 47GG. "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 treatment services for substance use, which may include intensive education and counseling regarding the nature of addiction and its consequences, relapse prevention, outreach

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

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

Any blanket or general policy of insurance described in subdivision (A), (C), or (D) of section one hundred and ten which is issued or subsequently renewed by agreement between the insurer and the policyholder, within or without the commonwealth, during the period within which this premium is effective, or any policy of accident or sickness insurance as described in section one hundred and eight which provides hospital expense and surgical expense insurance and which is delivered or issued for delivery or subsequently renewed by agreement between the insurer and the policyholder in the commonwealth, during the period within which this provision is effective, or any employers' health and welfare fund which provides hospital expense and surgical expense benefits and which is issued or renewed to any person or group of persons in the commonwealth, during the period within which this provision is effective, shall provide coverage for medically necessary acute treatment services, medically necessary clinical stabilization services and medically necessary co-occurring treatment services for up to a total of 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical stabilization services, or co-occurring treatment services; provided, that the facility shall notify the carrier of both admission and the initial treatment plan within 48 hours of admission; provided further, that utilization review procedures may be initiated on day 7; provided further that any policy, contract, agreement, plan or certificate of insurance issued, delivered or renewed within the commonwealth, which is considered creditable coverage pursuant to section 1 of

101 chapter 111M, shall cover, without preauthorization, a substance use disorder evaluation ordered  
102 pursuant to section 51 1/2 of chapter 111.

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

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

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

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

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

Any contract between a subscriber and the corporation under an individual or group hospital service plan that is delivered, issued or renewed within the commonwealth shall provide coverage for medically necessary acute treatment services, medically necessary clinical stabilization services, and medically necessary co-occurring treatment services for up to a total of 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical stabilization services, or co-occurring treatment services; provided, that the facility shall notify the carrier of both admission and the initial treatment plan within 48 hours of admission; provided further, that utilization review procedures may be initiated on day 7; provided further, any contract between a subscriber and the corporation under an individual or group hospital service plan that is delivered, issued or renewed within the commonwealth, shall cover, without preauthorization, a substance use disorder evaluation ordered pursuant to section 51 1/2 of chapter 111.

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

SECTION 5. Chapter 176B of the General Laws, as appearing in the 2022 Official Edition, is hereby amended by striking out section 4II and inserting in place thereof the following section:-

Section 4II. "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.



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

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

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

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

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

Section 4AA. "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, that provides evaluation and withdrawal management and which 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 treatment services for substance use, which may include intensive education and counseling regarding the nature of addiction and its consequences, relapse prevention, outreach to families and significant others and aftercare planning, for individuals beginning to engage in recovery from addiction.

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

An individual or group health maintenance contract that is issued or renewed shall provide coverage for medically necessary acute treatment services, medically necessary clinical stabilization services, and medically necessary co-occurring treatment services for up to a total of 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical stabilization services, or co-occurring treatment services; provided, that the facility shall provide the carrier both notification of admission and the initial treatment plan within 48 hours of

187 admission; provided further, that utilization review procedures may be initiated on day 7;  
188 provided further, an individual or group health maintenance contract that is issued or renewed  
189 shall provide coverage for, without preauthorization, a substance use disorder evaluation ordered  
190 pursuant to section 51 1/2 of chapter 111.

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