

HOUSE No. 4898

The Commonwealth of Massachusetts

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.

The Commonwealth of Massachusetts

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

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

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, as so appearing, is hereby
32 amended by striking out 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
65 with the patient and noted in the patient's medical record.

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

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

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

78 to families and significant others and aftercare planning, for individuals beginning to engage in
79 recovery 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 blanket or general policy of insurance described in subdivision (A), (C), or
84 (D) of section one hundred and ten which is issued or subsequently renewed by agreement
85 between the insurer and the policyholder, within or without the commonwealth, during the
86 period within which this premium is effective, or any policy of accident or sickness insurance as
87 described in section one hundred and eight which provides hospital expense and surgical expense
88 insurance and which is delivered or issued for delivery or subsequently renewed by agreement
89 between the insurer and the policyholder in the commonwealth, during the period within which
90 this provision is effective, or any employers' health and welfare fund which provides hospital
91 expense and surgical expense benefits and which is issued or renewed to any person or group of
92 persons in the commonwealth, during the period within which this provision is effective, shall
93 provide coverage for medically necessary acute treatment services, medically necessary clinical
94 stabilization services and medically necessary co-occurring treatment services for up to a total of
95 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical
96 stabilization services, or co-occurring treatment services; provided, that the facility shall notify
97 the carrier of both admission and the initial treatment plan within 48 hours of admission;
98 provided further, that utilization review procedures may be initiated on day 7; provided further
99 that any policy, contract, agreement, plan or certificate of insurance issued, delivered or renewed
100 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.

121 Any contract between a subscriber and the corporation under an individual or
122 group hospital service plan that is delivered, issued or renewed within the commonwealth shall
123 provide coverage for medically necessary acute treatment services, medically necessary clinical
124 stabilization services, and medically necessary co-occurring treatment services for up to a total of
125 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical
126 stabilization services, or co-occurring treatment services; provided, that the facility shall notify
127 the carrier of both admission and the initial treatment plan within 48 hours of admission;
128 provided further, that utilization review procedures may be initiated on day 7; provided further,
129 any contract between a subscriber and the corporation under an individual or group hospital
130 service plan that is delivered, issued or renewed within the commonwealth, shall cover, without
131 preauthorization, a substance use disorder evaluation ordered pursuant to section 51 1/2 of
132 chapter 111.

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

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

138 Section 4II. "Acute treatment services", 24-hour medically supervised addiction
139 treatment for adults or adolescents provided in a medically managed or medically monitored
140 inpatient facility, as defined by the department of public health, which provides evaluation and
141 withdrawal management and that may include biopsychosocial assessment, individual and group
142 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.

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

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

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

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

181 An individual or group health maintenance contract that is issued or renewed shall
182 provide coverage for medically necessary acute treatment services, medically necessary clinical
183 stabilization services, and medically necessary co-occurring treatment services for up to a total of
184 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical
185 stabilization services, or co-occurring treatment services; provided, that the facility shall provide
186 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.