

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

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**The Commonwealth of Massachusetts**

PRESENTED BY:

*James J. O'Day*

*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>James J. O'Day</i>	<i>14th Worcester</i>	<i>1/13/2025</i>

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

[Pin Slip]

**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

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

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

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

33

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

36

37 Section 10H. "Acute treatment services", 24-hour medically supervised addiction  
38 treatment for adults or adolescents provided in a medically managed or medically monitored  
39 inpatient facility, as defined by the department of public health, which provides evaluation and  
40 withdrawal management and that may include biopsychosocial assessment, individual and group  
41 counseling, psychoeducational groups and discharge planning.

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

48

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

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 acute treatment services and shall not require a preauthorization prior to  
56 obtaining treatment.

57           The division and its contracted health insurers, health plans, health maintenance  
58 organizations, behavioral health management firms and third party administrators under contract  
59 to a Medicaid managed care organization or primary care clinician plan shall cover the cost of  
60 medically necessary clinical stabilization services and co-occurring treatment services for up to  
61 14 days and shall not require preauthorization prior to obtaining clinical stabilization services  
62 and co-occurring treatment services; provided, that the facility shall provide the carrier both  
63 notification of admission and the initial treatment plan within 48 hours of admission; provided  
64 further, that utilization review procedures may be initiated on day 7; and provided further, that  
65 the division and its contracted health insurers, health plans, health maintenance organizations,  
66 behavioral health management firms and third party administrators under contract to a Medicaid  
67 managed care organization or primary care clinician plan shall cover, without preauthorization,  
68 substance use disorder evaluations ordered pursuant to section 51 1/2 of chapter 111.

69

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

72

73           SECTION 3. Chapter 175 of the General Laws is hereby amended by striking out section  
74 47GG and inserting in place thereof the following section:-

75

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

81

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

88

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

92

93 Any policy, contract, agreement, plan or certificate of insurance issued, delivered or  
94 renewed within the commonwealth, which is considered creditable coverage under section 1 of  
95 chapter 111M, shall provide coverage for medically necessary acute treatment services,  
96 medically necessary clinical stabilization services and medically necessary co-occurring

97 treatment services for up to a total of 14 days and shall not require preauthorization prior to  
98 obtaining acute treatment services, clinical stabilization services, or co-occurring treatment  
99 services; provided, that the facility shall notify the carrier of both admission and the initial  
100 treatment plan within 48 hours of admission; provided further, that utilization review procedures  
101 may be initiated on day 7; provided further that any policy, contract, agreement, plan or  
102 certificate of insurance issued, delivered or renewed within the commonwealth, which is  
103 considered creditable coverage pursuant to section 1 of chapter 111M, shall cover, without  
104 preauthorization, a substance use disorder evaluation ordered pursuant to section 51 1/2 of  
105 chapter 111.

106

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

109

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

112

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

118

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

125

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

129

130 Any contract between a subscriber and the corporation under an individual or group  
131 hospital service plan that is delivered, issued or renewed within the commonwealth shall provide  
132 coverage for medically necessary acute treatment services, medically necessary clinical  
133 stabilization services, and medically necessary co-occurring treatment services for up to a total of  
134 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical  
135 stabilization services, or co-occurring treatment services; provided, that the facility shall notify  
136 the carrier of both admission and the initial treatment plan within 48 hours of admission;  
137 provided further, that utilization review procedures may be initiated on day 7; provided further,  
138 any contract between a subscriber and the corporation under an individual or group hospital  
139 service plan that is delivered, issued or renewed within the commonwealth, shall cover, without



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

142

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

145

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

148

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

154

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

161

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

165

166           Any subscription certificate under an individual or group medical service agreement  
167 delivered, issued or renewed within the commonwealth shall provide coverage for medically  
168 necessary acute treatment services, medically necessary clinical stabilization services, and  
169 medically necessary co-occurring treatment services for up to a total of 14 days and shall not  
170 require preauthorization prior to obtaining acute treatment services, clinical stabilization services  
171 or co-occurring treatment services; provided, that the facility shall provide the carrier both  
172 notification of admission and the initial treatment plan within 48 hours of admission; provided  
173 further, that utilization review procedures may be initiated on day 7; provided further, any  
174 subscription certificate under an individual or group medical service agreement delivered, issued  
175 or renewed within the commonwealth shall provide coverage for, without preauthorization, a  
176 substance use disorder evaluation ordered pursuant to section 51 1/2 of chapter 111.

177

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

180

181 SECTION 6. Chapter 176G as so appearing, is hereby amended by striking out section  
182 4AA and inserting in place thereof the following section:-

183

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

189

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

196

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

200

201           An individual or group health maintenance contract that is issued or renewed shall  
202 provide coverage for medically necessary acute treatment services, medically necessary clinical  
203 stabilization services, and medically necessary co-occurring treatment services for up to a total of  
204 14 days and shall not require preauthorization prior to obtaining acute treatment services, clinical  
205 stabilization services, or co-occurring treatment services; provided, that the facility shall provide  
206 the carrier both notification of admission and the initial treatment plan within 48 hours of  
207 admission; provided further, that utilization review procedures may be initiated on day 7;  
208 provided further, an individual or group health maintenance contract that is issued or renewed  
209 shall provide coverage for, without preauthorization, a substance use disorder evaluation ordered  
210 pursuant to section 51 1/2 of chapter 111.

211

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