

# SENATE . . . . . No. 771

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## The Commonwealth of Massachusetts

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PRESENTED BY:

***John F. Keenan***

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*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.

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PETITION OF:

NAME:	DISTRICT/ADDRESS:	
<i>John F. Keenan</i>	<i>Norfolk and Plymouth</i>	
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>2/9/2025</i>
<i>James K. Hawkins</i>	<i>2nd Bristol</i>	<i>2/11/2025</i>
<i>Michael O. Moore</i>	<i>Second Worcester</i>	<i>3/6/2025</i>
<i>Rebecca L. Rausch</i>	<i>Norfolk, Worcester and Middlesex</i>	<i>4/5/2025</i>

# SENATE . . . . . No. 771

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By Mr. Keenan, a petition (accompanied by bill, Senate, No. 771) of John F. Keenan, James B. Eldridge, James K. Hawkins and Michael O. Moore for legislation relative to dual diagnosis treatment coverage. Financial Services.

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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 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 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 policy, contract, agreement, plan or certificate of insurance issued, delivered or renewed within the commonwealth, which is considered creditable coverage under section 1 of chapter 111M, 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 chapter 111M, 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 4. Chapter 176A of the General Laws, as so appearing, is hereby amended by striking out section 8II and inserting in place thereof the following section:-

Section 8II. "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 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 so appearing, 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.

"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 subscription certificate under an individual or group medical service agreement 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 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; provided further, any subscription certificate under an individual or group medical service agreement delivered, issued or renewed within the commonwealth shall provide coverage for, 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 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

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.