

COMMONWEALTH OF MASSACHUSETTS
MASSACHUSETTS SENATE
STATE HOUSE, BOSTON 02133-1053

Anne M. Gobi
STATE SENATOR

Worcester, Hampden,
Hampshire & Middlesex

Tel. (617) 722-1540

Fax (617) 722-1078

E-Mail: Anne.Gobi@masenate.gov

PRESS RELEASE

FOR IMMEDIATE RELEASE:

Thursday, March 10, 2016

CONTACT: Brian Ferrarese

PHONE: 617-722-1540

Legislature Passes Substance Addiction Legislation to Enhance Continuum of Care and Prevention Efforts

Builds off 2014 landmark law and unprecedented budget investments

(BOSTON) - The Massachusetts Legislature passed substance addiction legislation that enhances intervention, prevention and education efforts, including the creation of a framework to evaluate and treat patients who present in emergency rooms with an apparent overdose.

This new practice, which will be covered by insurance, is designed to ensure the proper assessment and discharge of patients who seek voluntary treatment. If a patient refuses treatment, information on health and community resources will be provided. This framework reflects the 2012 University of Miami Medical School findings that voluntary treatment is more effective and affordable than involuntary commitment.

“Every single person has been affected by the opioid crisis,” said **Senator Anne M. Gobi**. “This bill is a very positive first step, but is by no means the last actions that we must take as a Commonwealth in order to completely eradicate this epidemic. I want to congratulate everyone who had a key role in crafting this comprehensive legislation; it was no easy task.”

“The opioid crisis has ripped apart our communities and families. Over the past few years, the Legislature has focused on access to treatment, funding for substance abuse programs, and continuity of care. This bill focuses on preventing addiction, enhancing public education, and removing pills from circulation,” said **Senate President Stan Rosenberg (D-Amherst)**. “Twelve recommendations of the Special Senate Committee on Substance Abuse are included in this legislation and they will make a real difference in fighting the opioid scourge in our communities. I thank my colleagues for their hard work on this bill and dedication to bringing an end to the opioid epidemic in our state.”

“The abuse and proliferation of opiates in our society poses a serious and continuing threat to the health and safety of our communities and that threat demands comprehensive and effective responses; this bill will directly oppose the spread of opioid abuse and support those who need access to treatment,” said **Senate Minority Leader Bruce Tarr (R-Gloucester)**. “The unanimous support in the House and Senate demonstrates our united efforts to move forward with the best bill possible.”

“This bill has the ability to make a profound impact on people’s lives. We’re engaging the entire healthcare ecosystem – from patients to prescribers to providers to pharmaceutical companies and insurance companies - to aid in education and prevention,” said **Senator Karen E. Spilka (D-Ashland) Chair of the Senate Committee on Ways and Means**. “Thank you to my colleagues and all of the individuals, families and advocates who came forward to share their stories for working together on a holistic approach to reverse the course of the opioid epidemic that affects all of our communities.”

“Substance use disorder continues to affect every corner of our Commonwealth and this next piece of legislation gives our schools and health care partners additional tools in the fight against this disease,” said **Senator Jennifer L. Flanagan (D-Leominster) Senate Chair of the Committee on Mental Health and Substance Abuse**. “This bi-partisan bill asks treatment and health care providers, educators, insurers, drug manufacturers, and public safety to come together to engage in these new prevention programs and to all do our part to combat substance abuse throughout the state.”

“I am proud to have joined my colleagues in the Legislature and the Administration to work on this important bill,” said **Senator Vinny deMacedo (R-Plymouth)** and member of the conference committee. “I believe we have passed legislation that will dramatically improve the lives of those affected by substance use issues and educate people about the dangers of addiction in order to prevent this scourge from affecting future generations.”

“With opioid related deaths at an all-time high in the Commonwealth, this legislation will put measures into effect immediately to address a crisis that touches nearly every family in Massachusetts,” said **Senator James T. Welch (D- West Springfield), Chair of the Joint Committee on Health Care Financing**. “The comprehensive prevention and treatment efforts included in the bill passed today are critical steps toward ending this devastating epidemic.”

The bill limits first-time opiate prescriptions to seven days for adults and all opiate prescriptions for minors to seven days, with exceptions for chronic pain management, cancer, and palliative care. Practitioners must now check the prescription monitoring program (PMP) each time they prescribe any opiate and correspondingly note that in the patient’s medical records.

From its discussions with numerous stakeholders and recovery groups, the Legislature recognizes the importance of empowering individuals as they grapple with addiction. As a result, this bill establishes a non-opiate directive form, allowing patients to include a notation in their records that they shall not be offered opiates. It also provides the option of a “partial fill” which allows patients, in consultation with their doctor, to request a lesser amount than indicated on the script; however, this language is permissive and pharmacists may use their discretion.

In an effort to build upon current prevention efforts, the legislation updates current law - which requires all public schools to have a policy regarding substance abuse education - by directing schools to report their plans to the Department of Elementary and Secondary Education (DESE). DESE will then consult with the

Department of Public Health (DPH) to provide recommendations that will assist schools and ensure they are providing effective and up-to-date education. Additional education materials will be provided to all student-athletes.

Schools will annually be required to conduct a verbal substance abuse screening in two grade levels. These screenings are subject to appropriate ages and include an opt-out provision for students and parents. Additionally, school districts implementing alternative substance use screening policies may opt out of the verbal screening tool requirement.

To ensure that unused medications are safely collected and disposed of, this legislation requires manufacturers of controlled substances in Massachusetts to participate in either a drug stewardship program or an alternative plan as determined by DPH.

Over the past few years, the Legislature's efforts related to substance addiction have focused on behavioral health and the prevalence of co-occurring disorders. This legislation requires the Health Policy Commission to conduct a study on access to dual-diagnosis treatment in the Commonwealth for children, adolescents and adults. To help ensure parity between behavioral and physical health care, the legislation also requires insurance companies to report annually on their denied claims.

This bill also:

- Requires that contact information for all insurers be posted on the bed-finder tool website and updates the law to ensure the site is available 24 hours a day;
- Requires that patients being discharged from substance addiction receive information on all FDA-approved medication-assisted therapies;
- Ensures civil-liability protection for individuals who administer Narcan;
- Updates the training guidelines for all practitioners who prescribe controlled substances;

This legislation follows a 65.2% increase in substance addiction funding since FY12 and the landmark substance addiction law passed in 2014 which, for the first time, mandated detox and stabilization coverage. The two bills are intended to complement each other and reflect a consensus-driven approach.

###