

HOUSE No. 4536

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, March 9, 2020.

The committee on Mental Health, Substance Use and Recovery, to whom was referred the petition (accompanied by bill, House, No. 1743) of James J. O'Day and Elizabeth A. Malia relative to discharges of certain patients from substance use disorder treatment programs, reports recommending that the accompanying bill (House, No. 4536) ought to pass.

For the committee,

MARJORIE C. DECKER.

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**In the One Hundred and Ninety-First General Court
(2019-2020)**

An Act relative to discharge from substance use disorder treatment.

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 17 of the General Laws, as appearing in the 2018 Official Edition,
2 is hereby amended by inserting after section 19 the following section:-

3 Section 19A.(a) As used in this section, the following words shall have the following
4 meanings unless the context clearly requires otherwise:

5 “Relapse discharge”, termination of treatment of a patient for substance use disorder as
6 determined by treatment provider staff, despite a lack of maximal clinical improvement in the
7 patient, due to the use of alcohol or drugs, not including the distribution of alcohol or drugs.

8 “Department”, the department of public health.

9 “Bureau”, the bureau of substance addiction services.

10 (b) The bureau, in consultation with the department, shall establish standard criteria and
11 methodology for use in making relapse discharge decisions regarding the appropriate level of
12 treatment based on severity of symptoms.

13 (c) The department shall promulgate regulations relative to relapse discharge decisions
14 for substance use disorder treatment programs subject to licensure or approval under sections 24
15 and 24D of chapter 90, sections 6 and 6A of chapter 111B and section 7 of chapter 111E. The
16 regulations shall include, but not be limited to, a requirement that such substance use disorder
17 treatment providers shall:

18 (1) make all decisions involving the relapse discharge of patients from a licensed
19 substance use disorder treatment program pursuant to said methodology established in subsection
20 (b) of section 19.

21 (2) prior to the relapse discharge of any patient from a licensed substance use disorder
22 treatment program, connect the patient to the appropriate level of treatment based on the clinical
23 needs of the patient as determined by the treating clinician.

24 SECTION 2. Section 18 of chapter 111E of the General Laws, as appearing in the 2018
25 Official Edition, is hereby amended by inserting the following subsections after subsection (e):

26 (f) no patient may be discharged from care as the result of a relapse discharge decision
27 without the connection to clinically appropriate level of care as determined by the treating
28 clinician.

29 SECTION 3. Section 16 of chapter 6D of the General Laws, as appearing in the 2018
30 Official Edition, is hereby amended by inserting the following subsection after subsection (b) :

31 (c) The office shall: -- (1) have the authority to administer and enforce the standards and
32 procedures established by section 19A of chapter 17. The commission shall promulgate such
33 regulations to enforce this section. The regulations authorized by this section shall be consistent

34 with, and not duplicate or overlap with, regulations promulgated by the bureau of substance
35 abuse services established in the department of public health pursuant to said chapter 17.

36 (2) assist patients with questions or concerns relating to substance use disorder treatment
37 and care;

38 (3) establish, by regulation, procedures and rules relating to appeals by patients aggrieved
39 by denials of service or disenrollment resulting from any final action of a substance use disorder
40 treatment program, and to conduct hearings and issue rulings on appeals brought by substance
41 use disorder treatment program patients that are not otherwise properly heard by the patient's
42 treatment program or care provider.