



Office of
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Commonwealth of Massachusetts

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**Representative Kane supports creation of licensure process for
recovery coaches, drug and alcohol counselors**
Bill also requires insurance coverage for opioid antagonists

BOSTON – The Department of Public Health (DPH) would license alcohol and drug counselors and recovery coaches, while health insurers would be required to offer policies covering prescribed opioid antagonists, under proposed legislation that recently passed the House of Representatives with the support of State Representative Hannah Kane (R-Shrewsbury).

House Bill 4743, *An Act relative to treatments and coverage for substance use disorder and recovery coach licensure*, was engrossed by the House on a vote of 153-0 on June 13. The bill now moves to the Senate for its consideration.

Representative Kane noted that the House bill establishes a process for DPH to confer the title of a “licensed recovery coach” to individuals who have lived experience dealing personally with addiction and recovery from substance use disorder. DPH licensure would allow these individuals to practice recovery coaching to help others become and stay engaged in the process of recovery from a substance use disorder.

To obtain a license, a recovery coach must demonstrate at least two years of sustained recovery. Individuals who practice as a recovery coach or a drug and alcohol counselor without a license would be subject to a \$500 penalty. However, the bill exempts certain individuals from the licensing requirement such as educational psychologists, therapists, physicians, and employees of a treatment program.

According to Representative Kane, House Bill 4743 contains a provision allowing DPH to accept a current certificate issued by a recognized certifying body in lieu of a licensing exam if the certificate was conferred for passing an exam comparable to the one administered by the department. It also allows DPH to issue a license to an applicant who meets the requirements for licensure and has met comparable requirements in another state.

House Bill 4743 also establishes a recovery coach advisory council within DPH to assist and support the department in carrying out the new licensing requirements. The council will be chaired by the Director of the Bureau of Substance Addiction Services, with seven members appointed by the Secretary of Health & Human Services, four of whom must have experience as recovery coaches, one from the Massachusetts Board of Substance Abuse Counselor Certification, one representing a health plan, and one who has lived experience who has received or is receiving recovery coaching services.

Representative Kane said House Bil 4743 requires health insurance carriers offering policies in Massachusetts to provide coverage for prescribed or dispensed opioid antagonists by designating such prescriptions as medically necessary and prohibiting insurers from requiring prior authorization to obtain them. It also stipulates that a prescription from a health care practitioner is not required to obtain coverage, and that the medication may not be subject to deductibles, co-pays, or out of pocket costs.

The bill also mandates that health plans provide coverage for recovery coach services offered by a licensed coach, regardless of the setting where these services are provided. It requires the contractual rate for these services to be no less than the prevailing MassHealth rate, and prohibits these services from being subject to deductibles, co-pays, or out of pocket costs.

Representative Kane said House Bill 4743 contains additional provisions governing harm reduction and drug testing services. Specifically, the bill allows individuals acting in good faith and within the scope of their role providing or assisting in the provision of harm reduction services to provide or assist in drug testing services to an individual to ensure that a controlled substance in their possession and exclusively for their personal use does not contain dangerous chemicals, toxic substances or hazardous compounds likely to cause an accidental overdose.

It also establishes protections for those who are helping to provide such drug testing services by establishing that they will not be charged or prosecuted under state laws pertaining to drug paraphernalia, unlawful possession of controlled substances, or conspiracy. Furthermore, it protects them from being held civilly liable for drug testing services except in cases involving gross negligence or willful misconduct.

During floor debate, Representative Kane supported an amendment, filed by House Republican Leadership, establishing a special commission that will study and make recommendations for addressing the public health and public safety threat posed by contamination of the Commonwealth's illicit drug supply, with a report due by December 31, 2025. The commission will consider ways to better regulate and oversee the production and distribution of drugs not intended or approved by the federal Food and Drug Administration for human consumption, including xylazine, an animal tranquilizer which can cause skin abscesses and ulcers that can lead to amputation.

Other amendments adopted include provisions to:

- require insurance companies to develop a plan to ensure adequate coverage and access to a broad spectrum of pain management services, including, but not limited to, non-medication, non-surgical treatment modalities and non-opioid medication treatment options that serve as alternatives to opioid prescribing, without requiring prior authorization for these services in connection to pain management;
- allow the Board of Registration in Dentistry to offer a remediation program for dentists and hygienists as a voluntary alternative to traditional disciplinary actions, with the program reporting non-compliance to the board, and the possibility of sealing the record of participation in the program after 5 years; and
- amend various sections of the bill to specify that insurance companies provide coverage for prescribed or dispensed opioid antagonists used in the reversal of overdoses caused by opioids.

Representative Kane said House Bill 4743 also:

- requires DPH to collect and provide data to the Department of Children and Families (DCF) and the Office of the Child Advocate on all births of infants affected by prenatal substance exposure;
- directs DPH to file an annual report with the legislature examining the prevalence of births of infants identified as affected by prenatal substance exposure or fetal alcohol spectrum disorder;
- requires DCF, in consultation with DPH and the Office of the Child Advocate, to promulgate regulations or issue further guidance for the requirements of health care providers involved in the delivery or care of infants identified as being affected by prenatal substance exposure or fetal alcohol spectrum disorder; and
- eliminates language requiring that a mandated reporter file a report with the department if they suspect the child is suffering from a physical or emotional injury resulting from physical dependence upon an addictive drug at birth.

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