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October 26, 2022

MA Executive Office of Health & Human Services
c/o D. Briggs
100 Hancock Street, 6th Floor
Quincy, MA 02171
masshealthpublicnotice@mass.gov

RE: Comments on 130 CMR 448.000: Community Behavioral Health Center Services (RELATED TO DEFINITIONS AND SERVICES FOR ADULTS)

To Whom it May Concern:

On behalf of the Massachusetts Association for Mental Health (MAMH), thank you for the opportunity to comment on the proposed regulation 130 CMR 448.000: Community Behavioral Health Center Services. We appreciate the leadership of the Executive Office of Health and Human Services (EOHHS) and MassHealth in developing a system of community behavioral health centers to help further access to timely, high quality care.

Formed over a century ago, MAMH is dedicated to promoting mental health and well being, while preventing behavioral health conditions and associated disability. We are committed to advancing prevention, early intervention, effective treatment, and research for people of all ages. We seek to eliminate stigma and discrimination and advance full inclusion in all aspects of community life. MAMH is also an Executive member of the Children's Mental Health Campaign (CMHC), a statewide network that advocates for policy, systems, and practice solutions and shared responsibility among government and institutions to ensure that all children in Massachusetts have access to resources to prevent, diagnose, and treat behavioral health issues in a timely, effective, and compassionate way.

MAMH collaborated with our CMHC colleagues on a separate submission with comments on the proposed regulation 130 CMR 448.000: Community Behavioral Health Center Services. This document includes feedback on a few definitions and services in 130 CMR 448.000 that are specific to adults, and therefore out of scope for the CMHC. MAMH is submitting this document in addition to the longer CMHC submission. As MAMH was engaged in crafting both sets of comments, please don't hesitate to contact us with any questions you may have or if you would like further information on either submission.

Thank you again for your continued leadership and hard work in reforming the community-based behavioral health system for the people of the Commonwealth.

Sincerely,

Danna Mauch, PhD
President and CEO

448.402: Definitions

MAMH suggests the following modifications to the definitions section of the proposed regulations. We also suggest that MassHealth ensure that the terms used in 130 CMR 429.000: Mental Health Centers and these regulations are aligned to help ensure consistency across programs and provider types.

Adult Community Crisis Stabilization – MAMH recommends that this definition be expanded by adding “and other substance use conditions” after the words “the capacity to provide induction onto and bridging for the medication for the treatment of opioid use disorders (MOUD).” Some medications for the treatment of opioid use disorders also can be used to treat other substance use conditions; for instance, naltrexone can be used to treat alcohol use conditions.

Adult Mobile Crisis intervention – MAMH notes that another purpose of mobile crisis intervention is to provide comfort and support to the person and others in attendance that the person agrees to be involved in their care. We additionally note that mobile crisis intervention services are not limited to situations which involve immediate risk of danger, and recommend language that states “and, when necessary, reduce the immediate risk of danger.” Finally, in the last sentence, MAMH recommends replacing the term “situation” with “person,” and adjusting the sentence accordingly.

MAMH recommends that MassHealth also work with the Group Insurance Commission (GIC) and the Division of Insurance (DOI) on the implementation of the new “Emergency Services Programs” benefits established under Chapter 177 of the Acts of 2022 (Sections 27, 49, 51, 55, 58, and 61). It’s important that state agencies, regulators, and health insurers use the same naming conventions and definitions for services whenever possible. This practice will reduce provider and consumer confusion, increase transparency, and help ensure that individuals can access - and receive coverage for - these behavioral health crisis services.

448.412: Scope of Services

(A)(7)(a) Adult Mobile Crisis Intervention (AMCI) - For AMCI, MAMH recommends the following:

- In (A)(7)(a)(1), requiring capacity to provide appropriate medication for addressing any urgent substance use condition, not only those involving opioids.
- In (A)(7)(a)(4), clarifying what the phrase “as clinically indicated” means in the requirement for follow up care, as it could be read to suggest that follow up care might not be appropriate in some circumstances, but provides no explanation.
- In (A)(7)(a)(6), allowing care coordination with existing social services providers in addition to medical and behavioral health providers, if central to resolving the crisis.

(A)(8)(a) Adult Community Crisis Stabilization (ACCS) – MAMH recommends changing (3) to read “inductions for FDA-approved medications for opioid use disorder and other substance use conditions.” We also suggest adding new services, including: (8) treatment planning with the individual and/or authorized representative that develops an individual-centered treatment plan that specifies the goals and actions to address the medical, social, therapeutic, educational, and other strengths and needs of the individual; (9) daily wellness and therapy services focused on skills building and stabilization; (10) development of crisis/safety plans; (11) a discharge plan that includes referrals to appropriate levels of care, facilitation of connections and/or admission to such levels of care; and follow-up instructions; and (12) care coordination with existing medical and behavioral health providers, as clinically indicated.