

First Regular Session  
Seventy-first General Assembly  
STATE OF COLORADO

INTRODUCED

LLS NO. 17-0216.01 Christy Chase x2008

SENATE BILL 17-074

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SENATE SPONSORSHIP

Garcia, Jahn, Todd

HOUSE SPONSORSHIP

Esgar,

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Senate Committees  
Health & Human Services

House Committees

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A BILL FOR AN ACT

101 CONCERNING THE CREATION OF A PILOT PROGRAM IN CERTAIN AREAS  
102 OF THE STATE EXPERIENCING HIGH LEVELS OF OPIOID  
103 ADDICTION TO AWARD GRANTS TO INCREASE ACCESS TO  
104 ADDICTION TREATMENT.

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Bill Summary

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)*

The bill creates the medication-assisted treatment (MAT) expansion pilot program, administered by the university of Colorado college of nursing, to expand access to medication-assisted treatment to

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
*Capital letters indicate new material to be added to existing statute.*  
*Dashes through the words indicate deletions from existing statute.*

opioid-dependent patients in Pueblo and Routt counties. The pilot program will provide grants to community- and office-based practices, behavioral health organizations, and substance abuse treatment organizations to:

- ! Assist nurse practitioners and physician assistants working in those settings to obtain training and support required under the federal "Comprehensive Addiction and Recovery Act of 2016" (CARA) to enable them to prescribe buprenorphine as part of providing MAT to opioid-dependent patients; and
- ! Provide behavioral therapies in conjunction with medication as part of the provision of MAT to opioid-dependent patients.

The general assembly is directed to appropriate \$500,000 per year for the 2017-18 and 2018-19 fiscal years from the marijuana tax cash fund to the university of Colorado board of regents, for allocation to the college of nursing to implement the pilot program.

Each grant recipient must submit a report to the college of nursing regarding the use of the grant, and the college of nursing must submit a summarized report to the governor and the health committees of the senate and house of representatives regarding the pilot program.

The pilot program is established and funded for 2 years and repeals on June 30, 2020.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1.** In Colorado Revised Statutes, **add** part 8 to article  
3 21 of title 23 as follows:

4 PART 8

5 MEDICATION-ASSISTED TREATMENT (MAT)

6 EXPANSION PILOT PROGRAM

7 **23-21-801. Short title.** THE SHORT TITLE OF THIS PART 8 IS THE  
8 "MEDICATION-ASSISTED TREATMENT EXPANSION PILOT PROGRAM ACT".

9 **23-21-802. Legislative declaration.** (1) THE GENERAL ASSEMBLY  
10 FINDS THAT:

11 (a) IN AN EFFORT TO ADDRESS THE GROWING OPIOID ADDICTION  
12 PROBLEM THROUGHOUT THE NATION, ON JULY 22, 2016, PRESIDENT

1 OBAMA SIGNED INTO LAW THE FEDERAL "COMPREHENSIVE ADDICTION  
2 AND RECOVERY ACT OF 2016", ALSO REFERRED TO AS "CARA";

3 (b) CARA AUTHORIZES QUALIFIED NURSE PRACTITIONERS AND  
4 PHYSICIAN ASSISTANTS IN COMMUNITY- AND OFFICE-BASED PRACTICE  
5 SETTINGS TO PRESCRIBE CERTAIN MEDICATIONS USED IN THE TREATMENT  
6 OF OPIOID ADDICTION AS A MEANS OF INCREASING ACCESS TO TREATMENT  
7 FOR OPIOID-DEPENDENT PATIENTS;

8 (c) OPIOID ADDICTION HAS EMERGED AS A SIGNIFICANT PUBLIC  
9 HEALTH CONCERN IN COLORADO, WITH OVER TEN THOUSAND DEATHS  
10 ATTRIBUTED TO DRUG OVERDOSE SINCE 2000 AND THE ANNUAL RATE OF  
11 DRUG OVERDOSE DEATHS DOUBLING FROM 7.8 DEATHS PER ONE HUNDRED  
12 THOUSAND PEOPLE IN 2000 TO 15.7 DEATHS PER ONE HUNDRED THOUSAND  
13 PEOPLE IN 2015, A RATE SIGNIFICANTLY HIGHER THAN THE NATIONAL  
14 RATE;

15 (d) SOUTHEAST COLORADO COMPRISES SIX PERCENT OF THE  
16 STATE'S POPULATION AND ACCOUNTS FOR EIGHTEEN PERCENT OF  
17 ADMISSIONS FOR HEROIN TREATMENT, THE PUEBLO COUNTY JAIL SEES  
18 OVER ONE THOUSAND SEVEN HUNDRED OPIATE PROTOCOL PRISONERS  
19 EACH YEAR, AND THE PUEBLO FIRE DEPARTMENT USED AN OPIATE  
20 ANTAGONIST TO HALT AN OPIATE-RELATED DRUG OVERDOSE EVENT ONE  
21 HUNDRED FORTY TIMES IN 2015;

22 (e) IN ROUTT COUNTY, DRUG OVERDOSE DEATH RATES HAVE  
23 INCREASED NEARLY SIX-FOLD FROM 2014 TO 2016, AND OVER SIXTY-FIVE  
24 PERCENT OF THESE DEATHS WERE RELATED TO PRESCRIPTION OPIOIDS;

25 (f) DESPITE THE PREVALENCE OF OPIOID ADDICTION AND  
26 OPIATE-RELATED OVERDOSE EVENTS IN PUEBLO AND ROUTT COUNTIES,  
27 ONLY THREE DOCTORS IN PUEBLO COUNTY AND ONE DOCTOR IN ROUTT

1 COUNTY ARE ABLE TO PROVIDE MEDICATION-ASSISTED TREATMENT TO  
2 OPIOID-DEPENDENT PATIENTS IN THOSE COUNTIES;

3 (g) MEDICATION-ASSISTED TREATMENT, WHICH INCLUDES THE USE  
4 OF MEDICATION AND BEHAVIORAL THERAPIES TO TREAT INDIVIDUALS WITH  
5 OPIOID ADDICTIVE DISORDERS:

6 (I) HAS PROVEN TO BE CLINICALLY EFFECTIVE AND TO  
7 SIGNIFICANTLY REDUCE THE NEED FOR INPATIENT DETOXIFICATION  
8 SERVICES FOR INDIVIDUALS WITH OPIOID ADDICTIVE DISORDERS;

9 (II) PROVIDES A COMPREHENSIVE, INDIVIDUALLY TAILORED  
10 PROGRAM OF TREATMENT FOR OPIOID-DEPENDENT PATIENTS;

11 (III) IS INTENDED TO ACHIEVE FULL RECOVERY;

12 (IV) CAN CONTRIBUTE TO LOWERING A PERSON'S RISK OF  
13 CONTRACTING HIV OR HEPATITIS C BY REDUCING THE POTENTIAL FOR  
14 RELAPSE; AND

15 (V) HAS IMPROVED PATIENT SURVIVAL RATES, INCREASED  
16 RETENTION IN TREATMENT, DECREASED ILLICIT OPIATE USE AND OTHER  
17 CRIMINAL ACTIVITY AMONG INDIVIDUALS WITH SUBSTANCE ABUSE  
18 DISORDERS, INCREASED PATIENTS' ABILITY TO ATTAIN AND RETAIN  
19 EMPLOYMENT, AND IMPROVED BIRTH OUTCOMES AMONG PREGNANT  
20 WOMEN WHO HAVE SUBSTANCE USE DISORDERS;

21 (h) IN ORDER TO INCREASE ACCESS TO ADDICTION TREATMENT IN  
22 AREAS OF THE STATE WHERE OPIOID ADDICTION IS PREVALENT, IT IS  
23 NECESSARY TO ESTABLISH A PILOT PROGRAM TO AWARD GRANTS TO:

24 (I) ORGANIZATIONS OR PRACTICES WITH NURSE PRACTITIONERS  
25 AND PHYSICIAN ASSISTANTS TO ENABLE THEM TO OBTAIN THE TRAINING  
26 AND ONGOING SUPPORT REQUIRED TO PRESCRIBE MEDICATIONS, SUCH AS  
27 BUPRENORPHINE, TO TREAT OPIATE USE DISORDERS; AND

1 (II) COMMUNITY AGENCIES TO PROVIDE BEHAVIORAL THERAPIES,  
2 IN CONJUNCTION WITH MEDICATION TREATMENT, TO TREAT INDIVIDUALS  
3 WITH OPIATE USE DISORDERS; AND

4 (i) SINCE THE PILOT PROGRAM WILL PROVIDE ACCESS TO  
5 TREATMENT TO INDIVIDUALS WITH SUBSTANCE USE DISORDERS, THE USE  
6 OF RETAIL MARIJUANA TAX REVENUES TO FUND THE PILOT PROGRAM IS  
7 AUTHORIZED UNDER SECTION 39-28.8-501 (2)(b)(IV)(C).

8 **23-21-803. Definitions.** AS USED IN THIS PART 8, UNLESS THE  
9 CONTEXT OTHERWISE REQUIRES:

10 (1) "ADVISORY BOARD" MEANS THE MAT EXPANSION ADVISORY  
11 BOARD CREATED IN SECTION 23-21-805.

12 (2) "COLLEGE OF NURSING" MEANS THE COLLEGE OF NURSING AT  
13 THE UNIVERSITY OF COLORADO ANSCHUTZ MEDICAL CAMPUS, OPERATED  
14 BY THE BOARD OF REGENTS OF THE UNIVERSITY OF COLORADO.

15 (3) "FEDERAL ACT" MEANS SECTION 303 OF THE FEDERAL  
16 "COMPREHENSIVE ADDICTION AND RECOVERY ACT OF 2016", PUB.L.  
17 114-198.

18 (4) "MEDICATION-ASSISTED TREATMENT" OR "MAT" MEANS A  
19 COMBINATION OF BEHAVIORAL THERAPY AND MEDICATIONS,  
20 SPECIFICALLY, BUPRENORPHINE MEDICATIONS, APPROVED BY THE FEDERAL  
21 FOOD AND DRUG ADMINISTRATION TO TREAT OPIOID USE DISORDER.

22 (5) "NURSE PRACTITIONER" MEANS AN ADVANCED PRACTICE  
23 NURSE, AS DEFINED IN SECTION 12-38-103 (1.5), WHO IS LISTED ON THE  
24 ADVANCED PRACTICE REGISTRY IN ACCORDANCE WITH SECTION  
25 12-38-111.5 AND IS AUTHORIZED BY THE STATE BOARD OF NURSING IN  
26 ACCORDANCE WITH SECTION 12-38-111.6 TO PRESCRIBE CONTROLLED  
27 SUBSTANCES AND PRESCRIPTION DRUGS.

1 (6) "PHYSICIAN ASSISTANT" MEANS A PERSON LICENSED AS A  
2 PHYSICIAN ASSISTANT BY THE COLORADO MEDICAL BOARD IN  
3 ACCORDANCE WITH SECTION 12-36-107.4 AND TO WHOM A LICENSED  
4 PHYSICIAN DELEGATES ACTS CONSTITUTING THE PRACTICE OF MEDICINE,  
5 INCLUDING THE AUTHORITY TO PRESCRIBE CONTROLLED SUBSTANCES, IN  
6 ACCORDANCE WITH SECTION 12-36-106 (5).

7 (7) "PILOT PROGRAM" OR "MAT EXPANSION PILOT PROGRAM"  
8 MEANS THE MEDICATION-ASSISTED TREATMENT EXPANSION PILOT  
9 PROGRAM CREATED IN SECTION 23-21-804.

10 (8) "PILOT PROGRAM AREA" MEANS THE AREAS OF THE STATE IN  
11 WHICH THE PILOT PROGRAM IS AVAILABLE, AS SPECIFIED IN SECTION  
12 23-21-804 (1)(b).

13 (9) "QUALIFIED NURSE PRACTITIONER OR PHYSICIAN ASSISTANT"  
14 MEANS A NURSE PRACTITIONER OR PHYSICIAN ASSISTANT WHO IS A  
15 QUALIFYING PRACTITIONER, AS DEFINED IN THE FEDERAL ACT AND  
16 REGULATIONS ADOPTED UNDER THE FEDERAL ACT, AND IS REGISTERED IN  
17 ACCORDANCE WITH 21 U.S.C. SEC. 823 (g).

18 **23-21-804. Medication-assisted treatment expansion pilot**  
19 **program - created - pilot program location - eligible grant recipients**  
20 **- rules.** (1) (a) THERE IS HEREBY CREATED THE MEDICATION-ASSISTED  
21 TREATMENT EXPANSION PILOT PROGRAM TO PROVIDE GRANTS TO  
22 COMMUNITY AGENCIES, OFFICE-BASED PRACTICES, BEHAVIORAL HEALTH  
23 ORGANIZATIONS, AND SUBSTANCE ABUSE TREATMENT ORGANIZATIONS TO  
24 ENABLE:

25 (I) NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS WORKING IN  
26 THOSE SETTINGS TO OBTAIN TRAINING AND ONGOING SUPPORT REQUIRED  
27 UNDER THE FEDERAL ACT IN ORDER TO PRESCRIBE BUPRENORPHINE AS

1 PART OF MEDICATION-ASSISTED TREATMENT PROVIDED TO INDIVIDUALS  
2 WITH AN OPIATE USE DISORDER; AND

3 (II) THOSE AGENCIES, PRACTICES, AND ORGANIZATIONS TO  
4 PROVIDE BEHAVIORAL THERAPIES AND SUPPORT IN CONJUNCTION WITH  
5 MEDICATION-ASSISTED TREATMENT FOR INDIVIDUALS WITH AN OPIATE USE  
6 DISORDER.

7 (b) THE MAT EXPANSION PILOT PROGRAM IS AVAILABLE TO  
8 PROVIDE GRANTS TO COMMUNITY AGENCIES, OFFICE-BASED PRACTICES,  
9 BEHAVIORAL HEALTH ORGANIZATIONS, AND SUBSTANCE ABUSE  
10 TREATMENT ORGANIZATIONS PRACTICING OR PROVIDING TREATMENT IN  
11 PUEBLO COUNTY OR ROUTT COUNTY.

12 (2) A GRANT RECIPIENT MAY USE THE MONEY RECEIVED THROUGH  
13 THE PILOT PROGRAM FOR THE FOLLOWING PURPOSES:

14 (a) TO ENABLE NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS  
15 PRACTICING OR WORKING IN THE GRANT RECIPIENT'S SETTING IN THE PILOT  
16 AREA TO OBTAIN THE TRAINING REQUIRED TO BE A QUALIFIED NURSE  
17 PRACTITIONER OR PHYSICIAN ASSISTANT IN ORDER TO PRESCRIBE  
18 BUPRENORPHINE MEDICATION AS PART OF MEDICATION-ASSISTED  
19 TREATMENT FOR INDIVIDUALS WITH OPIATE USE DISORDERS; AND

20 (b) TO INCREASE ACCESS TO MEDICATION-ASSISTED TREATMENT  
21 FOR INDIVIDUALS WITH OPIATE USE DISORDERS IN THE PILOT AREA.

22 (3) THE COLLEGE OF NURSING SHALL ADMINISTER THE MAT  
23 EXPANSION PILOT PROGRAM AND, SUBJECT TO AVAILABLE  
24 APPROPRIATIONS, SHALL AWARD GRANTS AS PROVIDED IN THIS PART 8  
25 STARTING AS SOON AS PRACTICABLE IN THE 2017-18 FISCAL YEAR, BUT NO  
26 LATER THAN JANUARY 2018. SUBJECT TO AVAILABLE APPROPRIATIONS,  
27 GRANTS SHALL BE PAID OUT OF MONEY ANNUALLY APPROPRIATED FOR THE

1 PILOT PROGRAM AS PROVIDED IN SECTION 23-21-808.

2 (4) THE COLLEGE OF NURSING SHALL IMPLEMENT THE MAT  
3 EXPANSION PILOT PROGRAM IN ACCORDANCE WITH THIS PART 8 AND SHALL  
4 DEVELOP, WITH ASSISTANCE FROM AND IN COORDINATION WITH THE  
5 ADVISORY BOARD, PILOT PROGRAM GUIDELINES AND PROCEDURES AS  
6 NECESSARY TO IMPLEMENT THE PILOT PROGRAM, INCLUDING GUIDELINES  
7 AND PROCEDURES SPECIFYING THE TIME FRAMES FOR APPLYING FOR  
8 GRANTS; THE FORM OF THE PILOT PROGRAM GRANT APPLICATION; THE  
9 TIME FRAMES FOR DISTRIBUTING GRANT MONEY, TECHNICAL ASSISTANCE,  
10 AND CONSULTATION TO GRANT RECIPIENTS; AND EVALUATION OF THE  
11 PILOT PROGRAM.

12 **23-21-805. MAT expansion advisory board - created - duties.**

13 (1) THERE IS HEREBY CREATED IN THE COLLEGE OF NURSING THE MAT  
14 EXPANSION ADVISORY BOARD, WHICH SHALL:

15 (a) REVIEW AND APPROVE PILOT PROGRAM GUIDELINES AND  
16 PROCEDURES;

17 (b) ADVISE AND PROVIDE ASSISTANCE TO THE COLLEGE OF  
18 NURSING ON THE IMPLEMENTATION OF THE PILOT PROGRAM;

19 (c) REVIEW AND MAKE RECOMMENDATIONS TO THE COLLEGE OF  
20 NURSING ON GRANT APPLICATIONS, INCLUDING RECOMMENDATIONS FOR  
21 GRANT AWARD AMOUNTS;

22 (d) ASSIST THE COLLEGE OF NURSING IN EVALUATING THE PILOT  
23 PROGRAM; AND

24 (e) PERFORM OTHER TASKS, AS REQUESTED BY THE COLLEGE OF  
25 NURSING, RELATED TO THE IMPLEMENTATION AND ADMINISTRATION OF  
26 THE PILOT PROGRAM.

27 (2) (a) THE ADVISORY BOARD CONSISTS OF REPRESENTATIVES OF



1 THE FOLLOWING ENTITIES OR ORGANIZATIONS WHO ARE DESIGNATED BY  
2 THE ENTITY OR ORGANIZATION:

3 (I) THE COLLEGE OF NURSING;

4 (II) THE STATE SUBSTANCE ABUSE TREND AND RESPONSE TASK  
5 FORCE CREATED IN SECTION 18-18.5-103;

6 (III) THE COLORADO CONSORTIUM FOR PRESCRIPTION DRUG ABUSE  
7 PREVENTION, ADMINISTERED UNDER THE SCHOOL OF PHARMACY AND  
8 PHARMACEUTICAL SCIENCES AT THE UNIVERSITY OF COLORADO  
9 ANSCHUTZ MEDICAL CAMPUS;

10 (IV) THE COLORADO NURSES ASSOCIATION; AND

11 (V) THE PHYSICIAN ASSISTANT PROGRAM AT THE UNIVERSITY OF  
12 COLORADO.

13 (b) IN ADDITION TO THE MEMBERS SPECIFIED IN SUBSECTION (2)(a)  
14 OF THIS SECTION, AT LEAST ONE MEDICAL OR PUBLIC HEALTH  
15 PROFESSIONAL FROM EACH COUNTY IN THE PILOT AREA, APPOINTED AS  
16 FOLLOWS, SHALL SERVE ON THE ADVISORY BOARD:

17 (I) THE NORTHWEST COLORADO COMMUNITY HEALTH  
18 PARTNERSHIP IN ROUTT COUNTY SHALL APPOINT A MEDICAL OR PUBLIC  
19 HEALTH PROFESSIONAL FROM ROUTT COUNTY; AND

20 (II) THE PUEBLO COUNTY HEROIN TASK FORCE SHALL APPOINT A  
21 MEDICAL OR PUBLIC HEALTH PROFESSIONAL FROM PUEBLO COUNTY.

22 **23-21-806. Grant application - criteria - awards.** (1) TO  
23 RECEIVE A GRANT, AN ELIGIBLE ORGANIZATION OR PRACTICE MUST SUBMIT  
24 AN APPLICATION TO THE COLLEGE OF NURSING IN ACCORDANCE WITH  
25 PILOT PROGRAM GUIDELINES AND PROCEDURES ESTABLISHED BY THE  
26 COLLEGE OF NURSING. AT A MINIMUM, THE APPLICATION MUST INCLUDE  
27 THE FOLLOWING INFORMATION:

- 1 (a) THE PURPOSE FOR WHICH THE APPLICANT WILL USE THE GRANT;
- 2 (b) THE AMOUNT OF GRANT MONEY REQUESTED;
- 3 (c) THE NUMBER OF NURSE PRACTITIONERS OR PHYSICIAN
- 4 ASSISTANTS WILLING TO COMPLETE THE REQUIRED TRAINING;
- 5 (d) IDENTIFICATION OF ANY INCENTIVES TO ASSIST NURSE
- 6 PRACTITIONERS OR PHYSICIAN ASSISTANTS IN COMPLETING THE REQUIRED
- 7 TRAINING AND BECOMING CERTIFIED TO PRESCRIBE BUPRENORPHINE;
- 8 (e) AN AGREEMENT TO INSTITUTE POLICIES AND PROCEDURES FOR
- 9 IMPLEMENTING MEDICATION-ASSISTED TREATMENT;
- 10 (f) A DESCRIPTION OF HOW THE APPLICANT WILL ACHIEVE
- 11 IMPROVED ACCESS TO MEDICATION-ASSISTED TREATMENT IN THE PILOT
- 12 AREA;
- 13 (g) IDENTIFICATION OF EXPECTED OUTCOMES OF CARE FOR
- 14 OPIATE-DEPENDENT PATIENTS; AND
- 15 (h) AN EVALUATION PLAN.

16 (2) THE ADVISORY BOARD SHALL REVIEW THE APPLICATIONS  
17 RECEIVED PURSUANT TO THIS SECTION AND MAKE RECOMMENDATIONS TO  
18 THE COLLEGE OF NURSING REGARDING GRANT RECIPIENTS AND AWARDS.  
19 IN RECOMMENDING GRANT AWARDS AND IN AWARDING GRANTS, THE  
20 ADVISORY BOARD AND THE COLLEGE OF NURSING SHALL CONSIDER THE  
21 FOLLOWING CRITERIA:

- 22 (a) THE ELIGIBILITY OF THE APPLICANTS;
- 23 (b) THE NUMBER OF OPIOID-DEPENDENT PATIENTS THAT COULD BE
- 24 SERVED BY NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS WORKING IN
- 25 OR WITH A PRACTICE OR ORGANIZATION APPLYING FOR A GRANT;
- 26 (c) THE WRITTEN COMMITMENT OF THE APPLICANT TO IMPLEMENT
- 27 POLICIES AND PROCEDURES FOR PROVIDING MAT;

1 (d) THE WRITTEN COMMITMENT OF THE APPLICANT TO HAVE NURSE  
2 PRACTITIONERS OR PHYSICIAN ASSISTANTS PARTICIPATE IN PERIODIC  
3 CONSULTATIONS WITH COLLEGE OF NURSING STAFF; AND

4 (e) THE WRITTEN COMMITMENT OF THE APPLICANT TO PARTICIPATE  
5 IN THE EVALUATION OF THE PILOT PROGRAM.

6 (3) SUBJECT TO AVAILABLE APPROPRIATIONS, IN THE 2017-18 AND  
7 2018-19 FISCAL YEARS, THE COLLEGE OF NURSING SHALL AWARD GRANTS  
8 TO APPLICANTS APPROVED IN ACCORDANCE WITH THIS SECTION AND SHALL  
9 DISTRIBUTE THE GRANT MONEY TO GRANT RECIPIENTS WITHIN NINETY  
10 DAYS AFTER ISSUING THE GRANT AWARDS.

11 **23-21-807. Reporting requirements.** (1) EACH ORGANIZATION  
12 OR PRACTICE THAT RECEIVES A GRANT THROUGH THE PILOT PROGRAM  
13 SHALL SUBMIT AN ANNUAL REPORT TO THE COLLEGE OF NURSING BY A  
14 DATE SET BY THE COLLEGE OF NURSING. AT A MINIMUM, THE REPORT MUST  
15 INCLUDE THE FOLLOWING INFORMATION:

16 (a) THE AMOUNT OF THE GRANT AND THE DATE ON WHICH THE  
17 GRANT WAS RECEIVED;

18 (b) AN ACCOUNTING OF HOW THE GRANT MONEY WAS SPENT AND  
19 WHETHER ANY GRANT MONEY WAS NOT EXPENDED;

20 (c) THE NUMBER OF NURSE PRACTITIONERS OR PHYSICIAN  
21 ASSISTANTS WHO WERE TRAINED AND WHO RECEIVED CERTIFICATION TO  
22 PRESCRIBE BUPRENORPHINE; AND

23 (d) A DETAILED DESCRIPTION OF THE TRAINING RECEIVED BY  
24 NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS; WHETHER THE NURSE  
25 PRACTITIONERS OR PHYSICIAN ASSISTANTS COMPLETED THE TRAINING AND  
26 ATTAINED STATUS AS A QUALIFIED NURSE PRACTITIONER OR PHYSICIAN  
27 ASSISTANT; WHETHER THE NURSE PRACTITIONERS OR PHYSICIAN

1 ASSISTANTS THAT ATTAINED QUALIFIED NURSE PRACTITIONER OR  
2 PHYSICIAN ASSISTANT STATUS ARE CURRENTLY ABLE TO PROVIDE AND ARE  
3 PROVIDING MEDICATION-ASSISTED TREATMENT TO OPIOID-DEPENDENT  
4 PATIENTS; THE NUMBER OF INDIVIDUALS WITH OPIATE USE DISORDERS  
5 TREATED IN THE PREVIOUS TWO YEARS BEFORE THE PILOT PROGRAM; AND  
6 THE NUMBER OF OPIOID-DEPENDENT PATIENTS TREATED DURING THE PILOT  
7 PROGRAM PERIOD BY EACH QUALIFIED NURSE PRACTITIONER OR PHYSICIAN  
8 ASSISTANT.

9 (2) ON OR BEFORE JUNE 30, 2018, AND ON OR BEFORE JUNE 30,  
10 2019, THE COLLEGE OF NURSING SHALL SUBMIT A SUMMARIZED REPORT ON  
11 THE PILOT PROGRAM TO THE HEALTH AND HUMAN SERVICES COMMITTEE  
12 OF THE SENATE AND THE HEALTH, INSURANCE, AND ENVIRONMENT AND  
13 PUBLIC HEALTH CARE AND HUMAN SERVICES COMMITTEES OF THE HOUSE  
14 OF REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, AND TO THE  
15 GOVERNOR. AT A MINIMUM, THE REPORT MUST INCLUDE:

- 16 (a) A DESCRIPTION OF THE PILOT PROGRAM;
- 17 (b) A LIST IDENTIFYING THE GRANT RECIPIENTS, INCLUDING THE  
18 AMOUNT AWARDED TO EACH GRANT RECIPIENT AND A DETAILED  
19 DESCRIPTION OF HOW EACH GRANT RECIPIENT USED THE GRANT AWARD;
- 20 (c) THE TOTAL NUMBER OF NURSE PRACTITIONERS AND PHYSICIAN  
21 ASSISTANTS WHO COMPLETED THE REQUIRED TRAINING AND BECAME  
22 CERTIFIED TO PRESCRIBE BUPRENORPHINE, LISTED BY COUNTY  
23 PARTICIPATING IN THE PILOT PROGRAM;
- 24 (d) THE TOTAL NUMBER OF PATIENTS SERVED DURING THE COURSE  
25 OF THE PILOT PROGRAM, LISTED BY COUNTY PARTICIPATING IN THE PILOT  
26 PROGRAM;
- 27 (e) A SUMMARY OF POLICIES AND PROCEDURES INSTITUTED BY

1 GRANT RECIPIENTS RELATED TO THE PROVISION OF MAT BY QUALIFIED  
2 NURSE PRACTITIONERS AND PHYSICIAN ASSISTANTS;

3 (f) A SUMMARY OF EVALUATION RESULTS OF THE PILOT PROGRAM;  
4 AND

5 (g) A SUMMARY OF LESSONS LEARNED AND RECOMMENDATIONS  
6 FOR IMPLEMENTING MAT AS PROVIDED BY NURSE PRACTITIONERS AND  
7 PHYSICIAN ASSISTANTS IN OTHER COMMUNITIES IN THE STATE.

8 **23-21-808. Funding for pilot program.** (1) (a) FOR THE 2017-18  
9 AND 2018-19 STATE FISCAL YEARS, THE GENERAL ASSEMBLY SHALL  
10 ANNUALLY APPROPRIATE FIVE HUNDRED THOUSAND DOLLARS PER FISCAL  
11 YEAR FROM THE MARIJUANA TAX CASH FUND CREATED IN SECTION  
12 39-28.8-501 TO THE BOARD OF REGENTS OF THE UNIVERSITY OF  
13 COLORADO, FOR ALLOCATION TO THE COLLEGE OF NURSING TO IMPLEMENT  
14 THE MAT EXPANSION PILOT PROGRAM. THE COLLEGE OF NURSING MAY  
15 USE A PORTION OF THE MONEY ANNUALLY APPROPRIATED FOR THE PILOT  
16 PROGRAM TO PAY THE DIRECT AND INDIRECT COSTS THAT THE COLLEGE OF  
17 NURSING INCURS TO ADMINISTER THE PILOT PROGRAM, AS WELL AS TO  
18 PROVIDE CONSULTING SERVICES TO AND OVERSIGHT OF GRANT RECIPIENTS,  
19 FOR DATA COLLECTION AND ANALYSIS, EVALUATION OF THE PILOT  
20 PROGRAM, AND PROGRAM REPORTING.

21 (b) IF ANY UNEXPENDED OR UNCOMMITTED MONEY APPROPRIATED  
22 FOR THE 2017-18 FISCAL YEAR REMAINS AT THE END OF THAT FISCAL  
23 YEAR, THE SCHOOL OF NURSING MAY EXPEND THE MONEY IN ACCORDANCE  
24 WITH THIS SECTION IN THE 2018-19 FISCAL YEAR. ANY UNEXPENDED OR  
25 UNCOMMITTED MONEY REMAINING AT THE END OF THE 2018-19 FISCAL  
26 YEAR REVERTS TO THE MARIJUANA TAX CASH FUND.

27 (2) THE COLLEGE OF NURSING MAY ACCEPT AND EXPEND ANY

1 GIFTS, GRANTS, OR DONATIONS IT RECEIVES TO IMPLEMENT OR ADMINISTER  
2 THE PILOT PROGRAM.

3 **23-21-809. Repeal of part.** THIS PART 8 IS REPEALED, EFFECTIVE  
4 JUNE 30, 2020.

5 **SECTION 2. Safety clause.** The general assembly hereby finds,  
6 determines, and declares that this act is necessary for the immediate  
7 preservation of the public peace, health, and safety.