

CHAPTER 373

HEALTH CARE POLICY AND FINANCING

HOUSE BILL 18-1136

BY REPRESENTATIVE(S) Pettersen, Buck, Kennedy, Singer, Arndt, Becker K., Beckman, Bridges, Buckner, Carver, Coleman, Danielson, Esgar, Exum, Foote, Garnett, Gray, Hamner, Hansen, Herod, Hooton, Jackson, Kraft-Tharp, Landgraf, Lee, Lontine, McKean, McLachlan, Melton, Michaelson Jenet, Pabon, Reyher, Roberts, Rosenthal, Sias, Valdez, Weissman, Wilson, Winter, Young, Duran, Covarrubias, Salazar;
also SENATOR(S) Priola and Jahn, Aguilar, Lambert, Tate, Cooke, Coram, Court, Crowder, Donovan, Fenberg, Fields, Garcia, Gardner, Guzman, Hill, Holbert, Jones, Kagan, Kefalas, Kerr, Lundberg, Marble, Martinez Humenik, Merrifield, Moreno, Neville T., Scott, Smallwood, Sonnenberg, Todd, Williams A., Zenzinger, Grantham.

AN ACT

CONCERNING TREATMENT FOR INDIVIDUALS WITH SUBSTANCE USE DISORDERS, AND, IN CONNECTION THEREWITH, ADDING RESIDENTIAL AND INPATIENT TREATMENT TO THE COLORADO MEDICAL ASSISTANCE PROGRAM AND MAKING AN APPROPRIATION.

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

SECTION 1. In Colorado Revised Statutes, 25.5-5-202, **add** (1)(x) as follows:

25.5-5-202. Basic services for the categorically needy - optional services.

(1) Subject to the provisions of subsection (2) of this section, the following are services for which federal financial participation is available and that Colorado has selected to provide as optional services under the medical assistance program:

(x) (I) RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES PURSUANT TO SECTION 25.5-5-325.

(II) NOTWITHSTANDING THE PROVISIONS OF SUBSECTION (1)(x)(I) OF THIS SECTION, RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT SHALL NOT TAKE EFFECT UNLESS ALL NECESSARY APPROVALS UNDER FEDERAL LAW AND REGULATION HAVE BEEN OBTAINED TO RECEIVE FEDERAL FINANCIAL PARTICIPATION FOR THE COSTS OF SUCH SERVICES.

SECTION 2. In Colorado Revised Statutes, **add** 25.5-5-325 as follows:

Capital letters or bold & italic numbers indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

25.5-5-325. Residential and inpatient substance use disorder treatment - medical detoxification services - federal approval - performance review report.

(1) SUBJECT TO AVAILABLE APPROPRIATIONS AND TO THE EXTENT PERMITTED UNDER FEDERAL LAW, THE MEDICAL ASSISTANCE PROGRAM PURSUANT TO THIS ARTICLE 5 AND ARTICLES 4 AND 6 OF THIS TITLE 25.5 INCLUDES RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES. PARTICIPATION IN THE RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES BENEFIT IS LIMITED TO PERSONS WHO MEET NATIONALLY RECOGNIZED, EVIDENCE-BASED, LEVEL OF CARE CRITERIA FOR RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES. THE BENEFIT SHALL SERVE PERSONS WITH SUBSTANCE USE DISORDERS, INCLUDING THOSE WITH CO-OCCURRING MENTAL HEALTH DISORDERS. ALL LEVELS OF NATIONALLY RECOGNIZED, EVIDENCE-BASED LEVELS OF CARE FOR RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES MUST BE INCLUDED IN THE BENEFIT.

(2) (a) NO LATER THAN OCTOBER 1, 2018, THE STATE DEPARTMENT SHALL SEEK FEDERAL AUTHORIZATION TO PROVIDE RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES WITH FULL FEDERAL FINANCIAL PARTICIPATION. RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES SHALL NOT TAKE EFFECT UNTIL FEDERAL APPROVAL HAS BEEN OBTAINED.

(b) PRIOR TO SEEKING FEDERAL APPROVAL PURSUANT TO SUBSECTION (2)(a) OF THIS SECTION, THE STATE DEPARTMENT SHALL SEEK INPUT FROM RELEVANT STAKEHOLDERS, INCLUDING EXISTING PROVIDERS OF SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES AND MANAGED SERVICE ORGANIZATIONS. THE STATE DEPARTMENT SHALL SEEK INPUT AND INVOLVE STAKEHOLDERS IN DECISIONS REGARDING:

(I) THE COORDINATION OF BENEFITS WITH MANAGED SERVICE ORGANIZATIONS AND THE OFFICE OF BEHAVIORAL HEALTH IN THE DEPARTMENT OF HUMAN SERVICES;

(II) THE MOST APPROPRIATE ENTITY FOR ADMINISTRATION OF THE BENEFIT;

(III) THE PROVISION OF WRAPAROUND SERVICES NEEDED DURING TREATMENT AND THE PROVISION OF REQUIRED SERVICES FOLLOWING TREATMENT THAT MAY NOT BE COVERED THROUGH THE MEDICAL ASSISTANCE PROGRAM;

(IV) THE AUTHORIZATION PROCESS FOR APPROVAL OF SERVICES; AND

(V) THE DEVELOPMENT OF A REIMBURSEMENT RATE METHODOLOGY TO ENSURE SUSTAINABILITY THAT CONSIDERS A PROVIDER'S COST OF PROVIDING CARE INCLUDING LOWER-VOLUME PROVIDERS IN RURAL AREAS.

(3) (a) NO LATER THAN JANUARY 15, 2022, THE STATE DEPARTMENT SHALL PREPARE AND SUBMIT A PERFORMANCE REVIEW REPORT TO THE JOINT BUDGET COMMITTEE AND TO THE JOINT HEALTH AND HUMAN SERVICES COMMITTEE, OR ANY SUCCESSOR COMMITTEES, CONCERNING THE RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT PURSUANT TO THIS SECTION, INCLUDING, AT

A MINIMUM:

(I) THE NUMBER OF PERSONS WHO RECEIVED SERVICES PURSUANT TO THIS SECTION AND THE SERVICE PROVIDED;

(II) THE LENGTH OF TIME THAT SERVICES WERE PROVIDED;

(III) THE LOCATION WHERE SERVICES WERE PROVIDED;

(IV) THE EFFECTIVENESS OF THE SERVICES PROVIDED, INCLUDING THE RATE OF RELAPSE TO SUBSTANCE USE DISORDER FOLLOWING TREATMENT; AND

(V) ANY OTHER INFORMATION AS DETERMINED BY THE STATE DEPARTMENT THAT IS RELEVANT TO THE BENEFIT.

(b) AFTER CONSIDERING THE STATE DEPARTMENT'S PERFORMANCE REVIEW REPORT, THE GENERAL ASSEMBLY MAY ENACT LEGISLATION MODIFYING OR REPEALING THE BENEFIT.

SECTION 3. In Colorado Revised Statutes, 27-80-107.5, **amend** (4)(c) as follows:

27-80-107.5. Increasing access to effective substance use disorder services act - managed service organizations - substance use disorder services - assessment - community action plan - allocations - reporting requirements - evaluation.

(4) (c) It is the intent of the general assembly that each designated managed service organization use money allocated to it from the marijuana tax cash fund to cover expenditures for substance use disorder services that are not otherwise covered by public or private insurance. Except as provided in ~~paragraph (a) of this subsection~~ ~~(4) SUBSECTION (4)(a) OF THIS SECTION~~, each managed service organization may use its allocation from the marijuana tax cash fund to implement its community action plan and increase access to substance use disorder services for populations in need of such services that are within its geographic region. IF AN ENHANCED RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES BENEFIT BECOMES AVAILABLE UNDER THE COLORADO MEDICAL ASSISTANCE PROGRAM, MANAGED SERVICE ORGANIZATIONS SHALL DETERMINE TO WHAT EXTENT MONEY ALLOCATED FROM THE MARIJUANA TAX CASH FUND MAY BE USED TO ASSIST IN PROVIDING SUBSTANCE USE DISORDER TREATMENT, INCLUDING RESIDENTIAL AND INPATIENT SUBSTANCE USE DISORDER TREATMENT AND MEDICAL DETOXIFICATION SERVICES, IF THOSE SERVICES ARE NOT OTHERWISE COVERED BY PUBLIC OR PRIVATE INSURANCE.

SECTION 4. Appropriation. (1) For the 2018-19 state fiscal year, \$236,827 is appropriated to the department of health care policy and financing for use by the executive director's office. Of this appropriation, \$155,193 is from the general fund and \$81,634 is from the healthcare affordability and sustainability fee cash fund created in section 25.5-4-402.4 (5)(a), C.R.S. To implement this act, the office may use this appropriation as follows:

(a) \$51,375, which consists of \$33,666 from the general fund and \$17,709 from the healthcare affordability and sustainability fee cash fund, for personal services,

which amount is based on an assumption that the office will require an additional 1.5 FTE;

(b) \$72,952, which consists of \$47,806 from the general fund and \$25,146 from the healthcare affordability and sustainability fee cash fund, for operating expenses; and

(c) \$112,500, which consists of \$73,721 from the general fund and \$38,779 from the healthcare affordability and sustainability fee cash fund, for general professional services and special projects.

(2) For the 2018-19 state fiscal year, the general assembly anticipates that the department of health care policy and financing will receive \$236,828 in federal funds to implement this act, which amount is included for informational purposes only. The appropriation in subsection (1) of this section is based on the assumption that the department will receive this amount of federal funds to be used by the executive director's office as follows:

(a) \$51,375 for personal services;

(b) \$72,953 for operating expenses; and

(c) \$112,500 for general professional services and special projects.

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

Approved: June 5, 2018