

Second Regular Session
Seventy-second General Assembly
STATE OF COLORADO

INTRODUCED

LLS NO. 20-0825.01 Jane Ritter x4342

HOUSE BILL 20-1314

HOUSE SPONSORSHIP

Young,

SENATE SPONSORSHIP

(None),

House Committees

Public Health Care & Human Services

Senate Committees

A BILL FOR AN ACT

101 CONCERNING TRAINING PROVIDERS ACROSS THE STATE IN
102 CROSS-SYSTEM BEHAVIORAL HEALTH CRISIS RESPONSE AS IT
103 RELATES TO PERSONS WITH INTELLECTUAL AND
104 DEVELOPMENTAL DISABILITIES.

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 directs the state department of health care policy and financing (department) to issue a request for proposals to contract with a vendor to provide a comprehensive care coordination and treatment

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

training model (model) for persons with intellectual and developmental disabilities and co-occurring behavioral health needs. The selected vendor must be able to provide the model using teleconferencing formats to better reach rural areas of the state. Community-centered boards, mental health centers, and program-approved service agencies shall nominate up to 20 providers to receive the training. The department may select an additional 10 providers from underserved areas of the state to receive the training.

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

2 **SECTION 1.** In Colorado Revised Statutes, **add** 25.5-10-209.3
3 as follows:

4 **25.5-10-209.3. Cross system behavioral health crisis response**
5 **- comprehensive care coordination and treatment model - training -**
6 **legislative declaration.** (1) (a) THE GENERAL ASSEMBLY DECLARES THAT

7 PERSONS WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AND
8 CO-OCCURRING BEHAVIORAL HEALTH DIAGNOSES AND NEEDS:

9 (I) EXPERIENCE LIMITED ACCESS TO APPROPRIATE TREATMENT,
10 INCLUDING CRISIS INTERVENTION, STABILIZATION, AND PREVENTION, AND
11 SUCH INDIVIDUALS WHO LIVE IN RURAL AREAS OF COLORADO ARE
12 PARTICULARLY IMPACTED BY THIS LIMITED ACCESS TO APPROPRIATE
13 TREATMENT;

14 (II) DESERVE TO LIVE, WORK, PLAY, AND THRIVE IN THEIR
15 COMMUNITIES;

16 (III) REQUIRE A HEIGHTENED LEVEL OF CARE;

17 (IV) REQUIRE EVIDENCE-BASED TREATMENT TO HELP LEAD FULL
18 LIVES WITHIN THEIR COMMUNITIES; AND

19 (V) EXPERIENCE SIGNIFICANT GAPS IN CARE, INCLUDING A LACK OF
20 ACCESS TO APPROPRIATE TREATMENT.

21 (b) THEREFORE, AS A PRELIMINARY MEASURE TO CLOSE THESE

1 GAPS IN CARE, THE GENERAL ASSEMBLY FINDS THAT THE STATE MUST
2 INVEST IN EXTENSIVE, EXPANDED TRAINING, USING A COMPREHENSIVE
3 MODEL OF CARE THAT IS AVAILABLE VIA TELECONFERENCE. THE TRAINING
4 MUST BE AVAILABLE FOR UP TO THIRTY INDIVIDUALS ACROSS THE STATE
5 IN ORDER TO ADEQUATELY ADDRESS THE LIMITED ACCESS TO TREATMENT
6 IN RURAL AREAS.

7 (2) (a) ON OR BEFORE JULY 1, 2020, THE STATE DEPARTMENT
8 SHALL PREPARE AND ISSUE A REQUEST FOR PROPOSALS TO OBTAIN A
9 VENDOR TO PROVIDE EXTENSIVE STATEWIDE TRAINING TO PROFESSIONAL
10 PERSONS WHO WORK WITH PERSONS WITH INTELLECTUAL AND
11 DEVELOPMENTAL DISABILITIES AND CO-OCCURRING BEHAVIORAL HEALTH
12 NEEDS.

13 (b) TO BE ELIGIBLE FOR SELECTION, A VENDOR MUST:

14 (I) UTILIZE A COMPREHENSIVE CARE COORDINATION AND
15 TREATMENT MODEL THAT IS EVIDENCE-BASED;

16 (II) BE ABLE TO SHOW DEMONSTRATED SUCCESS IN MULTIPLE
17 STATES;

18 (III) HAVE EXPERIENCE WITH RURAL ISSUES;

19 (IV) HAVE AT LEAST TEN YEARS OF EXPERIENCE WORKING WITH
20 PROFESSIONALS WHO WORK WITH INDIVIDUALS WITH INTELLECTUAL AND
21 DEVELOPMENTAL DISABILITIES;

22 (V) MAINTAIN A NATIONAL DATABASE THAT INVOLVES THE
23 STANDARDIZED COLLECTION, ANALYSIS, AND REPORTING OF OUTCOMES
24 ASSOCIATED WITH THE IMPACT OF THE TRAINING ON THE INDIVIDUALS
25 BEING SERVED; AND

26 (VI) BE ABLE TO PROVIDE THE TRAINING STATEWIDE USING
27 TELECONFERENCE TECHNOLOGY.

1 (c) ON OR BEFORE JULY 30, 2020, THE STATE DEPARTMENT SHALL
2 SELECT A VENDOR FROM THE APPLICATIONS MADE IN RESPONSE TO THE
3 REQUEST FOR PROPOSALS ISSUED IN SUBSECTION (2)(a) OF THIS SECTION.

4 (3) (a) ON OR BEFORE AUGUST 30, 2020, COMMUNITY-CENTERED
5 BOARDS, MENTAL HEALTH CENTERS, AND OTHER PROGRAM-APPROVED
6 SERVICE AGENCIES IN THE STATE SHALL NOMINATE ONE PROVIDER IN
7 THEIR GEOGRAPHIC SERVICE AREA TO BE TRAINED IN THE COMPREHENSIVE
8 CARE COORDINATION AND TREATMENT MODEL DESIGNED AND PROVIDED
9 BY THE VENDOR SELECTED PURSUANT TO SUBSECTION (2) OF THIS SECTION.
10 UP TO TWENTY PROVIDERS MAY BE SELECTED FOR TRAINING PURSUANT TO
11 THIS SUBSECTION (3)(a). SELECTED PROVIDERS MUST HAVE A CLINICAL
12 BACKGROUND AND PRIOR EXPERIENCE WORKING WITH THE INTELLECTUAL
13 AND DEVELOPMENTAL DISABILITIES POPULATION. IF MORE THAN TWENTY
14 PROVIDERS ARE NOMINATED THROUGH THIS PROCESS, THE STATE
15 DEPARTMENT SHALL MAKE FINAL SELECTIONS, GIVING PREFERENCE TO
16 PROVIDERS IN UNDERSERVED AREAS.

17 (b) THE STATE DEPARTMENT SHALL COORDINATE WITH
18 COMMUNITY-CENTERED BOARDS IN UNDERSERVED AREAS OF THE STATE
19 TO SELECT AN ADDITIONAL TEN PROVIDERS TO BE TRAINED IN THE
20 COMPREHENSIVE CARE COORDINATION AND TREATMENT MODEL.

21 (4) PARTICIPATING PROVIDERS SHALL COMPLETE THE TRAINING
22 PROVIDED PURSUANT TO THIS SECTION AND BEGIN CRISIS COORDINATION
23 IN THEIR COMMUNITIES NO LATER THAN JANUARY 1, 2021.

24 (5) THE STATE DEPARTMENT SHALL REIMBURSE PARTICIPATING
25 PROVIDERS AT THE PROVIDER'S CURRENT PAY RATE FOR TIME SPENT IN
26 TRAINING.

27 **SECTION 2. Safety clause.** The general assembly hereby finds,

- 1 determines, and declares that this act is necessary for the immediate
- 2 preservation of the public peace, health, or safety.