CHAPTER 142

## **HUMAN SERVICES - BEHAVIORAL HEALTH**

HOUSE BILL 22-1214

BY REPRESENTATIVE(S) Young and Pelton, Bacon, Benavidez, Bernett, Bird, Bockenfeld, Caraveo, Cutter, Duran, Esgar, Exum, Froelich, Gonzales-Gutierrez, Herod, Hooton, Kipp, Lindsay, Lontine, McCluskie, McCormick, Ricks, Snyder, Sullivan, Titone, Valdez A., Valdez D., Will, Amabile, Boesenecker, Kennedy, McLachlan, Michaelson Jenet; also SENATOR(S) Kolker and Priola, Bridges, Buckner, Danielson, Ginal, Gonzales, Lee, Moreno, Pettersen, Simpson, Story, Winter, Zenzinger, Fenberg.

## AN ACT

CONCERNING CHANGES TO THE BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM.

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

**SECTION 1.** In Colorado Revised Statutes, 27-60-104, **amend as it will become effective July 1, 2022,** (1); **amend** (3)(b); and **add** (3)(a.5) and (3.5) as follows:

- **27-60-104.** Behavioral health crisis response system crisis service facilities walk-in centers mobile response units report. (1) All behavioral health entities, crisis walk-in centers, acute treatment units, MOBILE CRISIS PROGRAMS, RESPITE SERVICES, and crisis stabilization units within the crisis response system, regardless of facility PROGRAM licensure, must be able to SHALL MEET STANDARDS FOR APPROVAL PURSUANT TO SECTION 27-66-105. FACILITY-BASED CRISIS SERVICE PROVIDERS MUST BE APPROVED OR DESIGNATED TO adequately care for an individual brought to the facility through the emergency mental health procedure described in section 27-65-105 or a voluntary application for mental health services pursuant to section 27-65-103 AND BE AN APPROVED TREATMENT FACILITY PURSUANT TO SECTION 27-81-106. The arrangements for care must be completed through the crisis response system or prearranged partnerships with other crisis intervention services.
- (3) (a.5) ALL CRISIS WALK-IN CENTERS THROUGHOUT THE STATE'S CRISIS RESPONSE SYSTEM SHALL BE APPROPRIATELY LICENSED, ADEQUATELY PREPARED, AND PROPERLY STAFFED TO PROVIDE CRISIS SERVICES TO AN INDIVIDUAL WITH A SUBSTANCE USE DISORDER, AS THAT TERM IS DEFINED IN SECTION 27-81-102, OR AN INDIVIDUAL WITH A DISABILITY, AS DEFINED IN THE FEDERAL "AMERICANS WITH

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Disabilities Act of 1990", 42 U.S.C. sec. 12101 et seq., as amended, regardless of primary diagnosis, co-occurring conditions, or if the individual requires assistance with activities of daily living, as defined in section 12-270-104. A crisis walk-in center shall prioritize treating high-acuity individuals in the least restrictive environment without the use of law enforcement.

- (b) Increasing The ability of CRISIS walk-in centers to accept individuals through the emergency mental health procedure outlined in section 27-65-105, A VOLUNTARY APPLICATION FOR SUBSTANCE USE DISORDER SERVICES PURSUANT TO SECTION 27-81-109, or a voluntary application for mental health services pursuant to section 27-65-103 may include, but is not limited to, purchasing, installing, and using telehealth operations for mobile crisis evaluations in partnership with hospitals, clinics, law enforcement agencies, and other appropriate service providers.
- (3.5) Mobile crisis programs and crisis walk-in centers shall provide crisis response screening services to any individual seeking such services, including youth of any age and an individual with a disability, as defined in the federal "Americans with Disabilities Act of 1990", 42 U.S.C. sec. 12101 et seq., as amended, regardless of primary diagnosis, co-occurring conditions, or if the individual requires assistance with activities of daily living, as defined in section 12-270-104. All additional or corresponding behavioral health services beyond the crisis response screening must be provided in accordance with all applicable state laws, including, but not limited to, sections 12-245-203.5, 13-22-102, and 27-65-103.

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

Approved: April 27, 2022