

An Act

HOUSE BILL 21-1021

BY REPRESENTATIVE(S) Pelton and Caraveo, Cutter, Kennedy, Larson, Michaelson Jenet, Young, Amabile, Bacon, Bernett, Bird, Duran, Exum, Froelich, Gonzales-Gutierrez, Gray, Herod, Hooton, Jackson, Lontine, McCluskie, McCormick, Mullica, Ortiz, Ricks, Snyder, Titone, Valdez A., Will;
also SENATOR(S) Zenzinger and Hisey, Coram, Ginal, Hansen, Kolker, Lee, Moreno, Pettersen, Story, Winter, Garcia.

CONCERNING SUPPORTING THE PEER SUPPORT PROFESSIONAL WORKFORCE,
AND, IN CONNECTION THEREWITH, MAKING AN APPROPRIATION.

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

SECTION 1. In Colorado Revised Statutes, **add 27-60-108** as follows:

27-60-108. Peer support professionals - cash fund - fees - requirements - rules - legislative declaration - definitions. (1) (a) THE GENERAL ASSEMBLY HEREBY FINDS AND DECLARES THAT:

(I) PEER SUPPORT PROFESSIONALS HELP PEOPLE ACHIEVE THEIR RECOVERY GOALS THROUGH SHARED UNDERSTANDING, RESPECT, AND

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

EMPOWERMENT. PEER SUPPORT OFFERS A FORM OF ACCEPTANCE, UNDERSTANDING, AND VALIDATION NOT OFTEN FOUND IN OTHER PROFESSIONAL RELATIONSHIPS.

(II) THE FEDERAL CENTERS FOR MEDICARE AND MEDICAID SERVICES RECOGNIZE THAT PEER SUPPORT PROFESSIONALS CAN BE AN IMPORTANT COMPONENT IN A STATE'S DELIVERY OF EFFECTIVE MENTAL HEALTH AND SUBSTANCE USE DISORDER TREATMENT;

(III) PEER SUPPORT SERVICES CAN CUT HOSPITALIZATIONS, INCREASE A PERSON'S ENGAGEMENT IN SELF-CARE AND WELLNESS, AND HELP TO DECREASE A PERSON'S PSYCHOTIC SYMPTOMS;

(IV) THE COVID-19 PANDEMIC HAS EXACERBATED COLORADO'S EXISTING BEHAVIORAL HEALTH WORKFORCE SHORTAGE, PARTICULARLY IN RURAL AREAS AND COMMUNITIES OF COLOR;

(V) COLORADO LACKS A BEHAVIORAL HEALTH WORKFORCE THAT REFLECTS THE CULTURE, ETHNICITY, SEXUAL ORIENTATION, GENDER IDENTITY, MENTAL HEALTH SERVICE EXPERIENCES, AND SUBSTANCE USE DISORDER EXPERIENCES OF INDIVIDUALS IN THE STATE;

(VI) IN THE PAST TWO YEARS, THE NUMBER OF PEOPLE WHO HAVE NEEDED BUT HAVE NOT RECEIVED BEHAVIORAL HEALTH SERVICES HAS NEARLY DOUBLED. CHALLENGES TO THE WORKFORCE IS CONSIDERED THE LEADING CAUSE FOR THE DECREASED AVAILABILITY OF BEHAVIORAL HEALTH SERVICES. PEER SUPPORT PROFESSIONALS CAN HELP FILL COLORADO'S WORKFORCE NEED.

(VII) THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION HAS IDENTIFIED PEER-RUN ORGANIZATIONS AS AN EVIDENCE-BASED PRACTICE. PEER-RUN ORGANIZATIONS MAY OFFER A VARIETY OF SERVICES, INCLUDING BUT NOT LIMITED TO:

- (A) PEER-RUN DROP-IN CENTERS;
- (B) RECOVERY AND WELLNESS CENTERS;
- (C) EMPLOYMENT SERVICES;

(D) PREVENTION AND EARLY INTERVENTION ACTIVITIES;

(E) PEER MENTORING FOR CHILDREN AND ADOLESCENTS;

(F) WARM LINES; OR

(G) ADVOCACY SERVICES.

(VIII) PEER-RUN ORGANIZATIONS, INCLUDING RECOVERY COMMUNITY ORGANIZATIONS, ARE IMPORTANT COMPONENTS IN COLORADO'S BEHAVIORAL HEALTH SYSTEM. THESE ORGANIZATIONS HELP INDIVIDUALS DEFINE THEIR LIFE GOALS AND FIND A UNIQUE PATH TOWARD RECOVERY IN A HOLISTIC MANNER.

(b) THE GENERAL ASSEMBLY FINDS, THEREFORE, THAT IT IS IN THE BEST INTEREST OF THE STATE TO SUPPORT THE PEER SUPPORT PROFESSIONAL WORKFORCE THROUGH THE CREATION OF PEER-RUN RECOVERY SUPPORT SERVICES ORGANIZATIONS. PEER-RUN AND PEER-LED ORGANIZATIONS WILL HELP EXPAND PEER SUPPORT SERVICES THROUGHOUT THE STATE, EXPAND THE BEHAVIORAL HEALTH WORKFORCE, AND SAVE THE STATE MONEY BY REDUCING THE NEED FOR CRISIS SERVICES.

(2) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(a) "LICENSED MENTAL HEALTH PROVIDER" MEANS A:

(I) MENTAL HEALTH PROFESSIONAL LICENSED OR CERTIFIED PURSUANT TO ARTICLE 245 OF TITLE 12, EXCEPT FOR UNLICENSED PSYCHOTHERAPISTS PURSUANT TO ARTICLE 245 OF TITLE 12;

(II) ADVANCED PRACTICE REGISTERED NURSE REGISTERED PURSUANT TO SECTION 12-255-111 WITH TRAINING IN SUBSTANCE USE DISORDERS OR MENTAL HEALTH;

(III) PHYSICIAN ASSISTANT LICENSED PURSUANT TO SECTION 12-240-113 WITH SPECIFIC TRAINING IN SUBSTANCE USE DISORDERS OR MENTAL HEALTH;

(IV) PSYCHIATRIC TECHNICIAN LICENSED PURSUANT TO ARTICLE 295

OF TITLE 12; AND

(V) MEDICAL DOCTOR OR DOCTOR OF OSTEOPATHY LICENSED PURSUANT TO ARTICLE 240 OF TITLE 12;

(b) "PEER SUPPORT PROFESSIONAL" MEANS A PEER SUPPORT SPECIALIST, RECOVERY COACH, PEER AND FAMILY RECOVERY SUPPORT SPECIALIST, PEER MENTOR, FAMILY ADVOCATE, OR FAMILY SYSTEMS NAVIGATOR WHO MEETS THE QUALIFICATIONS DESCRIBED IN SUBSECTION (3)(a)(III) OF THIS SECTION.

(c) "RECOVERY SUPPORT SERVICES ORGANIZATION" MEANS AN INDEPENDENT ENTITY LED AND GOVERNED BY REPRESENTATIVES OF LOCAL COMMUNITIES OF RECOVERY AND APPROVED BY THE EXECUTIVE DIRECTOR OF THE STATE DEPARTMENT PURSUANT TO SUBSECTION (3)(a) OF THIS SECTION.

(3) (a) ON OR BEFORE JULY 1, 2022, THE STATE DEPARTMENT SHALL DEVELOP A PROCEDURE FOR RECOVERY SUPPORT SERVICES ORGANIZATIONS TO BE APPROVED BY THE EXECUTIVE DIRECTOR OF THE STATE DEPARTMENT FOR REIMBURSEMENT PURSUANT TO THIS SECTION. THE PROCEDURES MUST ENSURE THAT THE RECOVERY SUPPORT SERVICES ORGANIZATION:

(I) PROVIDES RECOVERY-FOCUSED SERVICES AND SUPPORTS;

(II) EMPLOYS OR CONTRACTS WITH A LICENSED MENTAL HEALTH PROVIDER TO ADMINISTER ON-GOING SUPERVISION OF PEER SUPPORT PROFESSIONALS EMPLOYED BY RECOVERY SUPPORT SERVICES ORGANIZATIONS. THE LICENSED MENTAL HEALTH PROVIDER MUST BE IN GOOD STANDING AND MUST DEMONSTRATE HAVING RECEIVED FORMAL TRAINING SPECIFIC TO THE PROVISION OF PEER SUPPORT SERVICES AND SUPERVISION OF PEER SUPPORT PROFESSIONALS;

(III) EMPLOYS OR CONTRACTS WITH PEER SUPPORT PROFESSIONALS WHO MUST:

(A) SELF-IDENTIFY AS HAVING EXPERIENCED THE PROCESS OF RECOVERY FROM A MENTAL HEALTH DISORDER, SUBSTANCE USE DISORDER, TRAUMA, OR ONE OR ALL OF SUCH CONDITIONS, EITHER AS A CONSUMER OF RECOVERY SERVICES OR AS THE PARENT OR A FAMILY MEMBER OF THE

CONSUMER;

(B) HAVE SUCCESSFULLY COMPLETED FORMAL TRAINING COVERING ALL CONTENT AREAS OUTLINED IN THE CORE COMPETENCIES FOR PEER SUPPORT PROFESSIONALS ESTABLISHED BY EITHER THE STATE DEPARTMENT OR THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES; AND

(C) PROVIDE NONCLINICAL SUPPORT SERVICES THAT ALIGN WITH RECOMMENDATIONS FROM THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION OF THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES, INCLUDING ENGAGING INDIVIDUALS IN PEER-TO-PEER RELATIONSHIPS THAT SUPPORT HEALING, PERSONAL GROWTH, LIFE SKILLS DEVELOPMENT, SELF-CARE, AND CRISIS-STRATEGY DEVELOPMENT TO HELP ACHIEVE RECOVERY, WELLNESS, AND LIFE GOALS;

(IV) HAS AN ESTABLISHED PROCESS BY WHICH THE ORGANIZATION COORDINATES ITS SERVICES WITH THOSE RENDERED BY OTHER AGENCIES TO ENSURE AN UNINTERRUPTED CONTINUUM OF CARE TO PERSONS WITH BEHAVIORAL HEALTH DISORDERS; AND

(V) MEETS ANY OTHER STANDARDS AS DETERMINED BY RULE OF THE EXECUTIVE DIRECTOR.

(b) A PEER SUPPORT PROFESSIONAL MAY PROVIDE SERVICES FOR A RECOVERY SUPPORT SERVICES ORGANIZATION IN VARIOUS CLINICAL AND NONCLINICAL SETTINGS, INCLUDING BUT NOT LIMITED TO:

(I) JUSTICE-INVOLVED SETTINGS;

(II) PHYSICAL HEALTH SETTINGS, SUCH AS PEDIATRICIAN OR OBSTETRIC AND GYNECOLOGICAL HEALTH CARE OFFICES;

(III) EMERGENCY DEPARTMENTS;

(IV) SERVICES DELIVERED VIA TELEHEALTH;

(V) AGENCIES SERVING HOMELESS COMMUNITIES;

(VI) PEER RESPITE HOMES;

(VII) SCHOOL-BASED HEALTH CENTERS; AND

(VIII) HOME- AND COMMUNITY-BASED SETTINGS.

(c) THE EXECUTIVE DIRECTOR OF THE STATE DEPARTMENT, IN COLLABORATION WITH THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, MAY PROMULGATE RULES ESTABLISHING MINIMUM STANDARDS THAT RECOVERY SUPPORT SERVICES ORGANIZATIONS MUST MEET.

(4) THE STATE DEPARTMENT MAY CHARGE A FEE FOR RECOVERY SUPPORT SERVICES ORGANIZATIONS SEEKING APPROVAL PURSUANT TO SUBSECTION (3)(a) OF THIS SECTION. IF THE EXECUTIVE DIRECTOR OF THE STATE DEPARTMENT CHARGES A FEE TO RECOVERY SUPPORT SERVICES ORGANIZATIONS, THE EXECUTIVE DIRECTOR SHALL PROMULGATE RULES TO ESTABLISH THE FEE AT AN AMOUNT NOT TO SUBSTANTIALLY EXCEED THE AMOUNT CHARGED TO OTHER BEHAVIORAL HEALTH PROVIDERS SEEKING APPROVAL FROM THE STATE DEPARTMENT. THE STATE DEPARTMENT SHALL DEPOSIT ANY FEES COLLECTED INTO THE PEER SUPPORT PROFESSIONAL WORKFORCE CASH FUND CREATED IN SUBSECTION (6) OF THIS SECTION.

(5) THE STATE DEPARTMENT MAY SEEK, ACCEPT, AND EXPEND GIFTS, GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR THE PURPOSES OF THIS SECTION. THE STATE DEPARTMENT SHALL TRANSFER EACH GIFT, GRANT, AND DONATION TO THE STATE TREASURER, WHO SHALL CREDIT THE SAME TO THE PEER SUPPORT PROFESSIONAL WORKFORCE CASH FUND CREATED IN SUBSECTION (6) OF THIS SECTION.

(6) (a) THERE IS CREATED IN THE STATE TREASURY THE PEER SUPPORT PROFESSIONAL WORKFORCE CASH FUND, REFERRED TO IN THIS SECTION AS THE "FUND", WHICH CONSISTS OF:

(I) FEES COLLECTED PURSUANT TO SUBSECTION (4) OF THIS SECTION;

(II) GIFTS, GRANTS, AND DONATIONS COLLECTED PURSUANT TO SUBSECTION (5) OF THIS SECTION; AND

(III) MONEY APPROPRIATED TO THE FUND BY THE GENERAL ASSEMBLY.

(b) THE STATE TREASURER SHALL CREDIT ALL INTEREST AND INCOME DERIVED FROM THE DEPOSIT AND INVESTMENT OF MONEY IN THE FUND TO THE FUND.

(c) ANY UNEXPENDED AND UNENCUMBERED MONEY REMAINING IN THE FUND AT THE END OF A FISCAL YEAR REMAINS IN THE FUND AND IS NOT TRANSFERRED TO THE GENERAL FUND OR ANY OTHER FUND.

(d) SUBJECT TO ANNUAL APPROPRIATION BY THE GENERAL ASSEMBLY, THE STATE DEPARTMENT MAY EXPEND STATE MONEY FROM THE FUND FOR THE PURPOSE OF IMPLEMENTING THIS SECTION.

(7) A PEER-RUN RECOVERY SERVICE PROVIDER SHALL NOT BE COMPELLED TO SEEK APPROVAL FROM THE STATE DEPARTMENT TO BECOME A RECOVERY SUPPORT SERVICES ORGANIZATION. EXPANDED SERVICE FUNDING AVAILABLE FOR RECOVERY SERVICES THROUGH RECOVERY SUPPORT SERVICES ORGANIZATIONS IS INTENDED TO SUPPLEMENT EXISTING STATE INVESTMENT IN THE RECOVERY SYSTEM INFRASTRUCTURE. THE STATE DEPARTMENT SHALL FUND RECOVERY SERVICES, WITHIN EXISTING APPROPRIATIONS, INCLUDING PEER-RUN ORGANIZATIONS THAT DO NOT SEEK TO BE RECOVERY SUPPORT SERVICES ORGANIZATIONS.

SECTION 2. In Colorado Revised Statutes, **add 25.5-5-327** as follows:

25.5-5-327. Eligible peer support services - reimbursement - definitions. (1) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(a) "PEER SUPPORT PROFESSIONAL" HAS THE SAME MEANING AS DEFINED IN SECTION 27-60-108 (2)(b).

(b) "RECOVERY SUPPORT SERVICES ORGANIZATION" HAS THE SAME MEANING AS DEFINED IN SECTION 27-60-108 (2)(c).

(2) 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 PEER SUPPORT PROFESSIONAL SERVICES PROVIDED TO RECIPIENTS THROUGH A RECOVERY SUPPORT SERVICES ORGANIZATION. PEER SUPPORT

PROFESSIONAL SERVICES MUST NOT BE PROVIDED TO RECIPIENTS UNTIL FEDERAL APPROVAL HAS BEEN OBTAINED.

SECTION 3. In Colorado Revised Statutes, 27-80-107, **amend** (1), (4), (6), and (7)(c) as follows:

27-80-107. Designation of managed service organizations - purchase of services - revocation of designation. (1) The director of the office of behavioral health shall establish designated service areas to provide substance use disorder treatment AND RECOVERY services in a particular geographical region of the state.

(4) (a) The terms and conditions for providing substance use disorder treatment AND RECOVERY services must be specified in the contract entered into between the office of behavioral health and the designated managed service organization. Contracts entered into between the office of behavioral health and the designated managed service organization must include terms and conditions prohibiting a designated managed service organization contracted treatment provider from denying or prohibiting access to medication-assisted treatment, as defined in section 23-21-803, for a substance use disorder.

(b) CONTRACTS ENTERED INTO BETWEEN THE OFFICE OF BEHAVIORAL HEALTH AND THE DESIGNATED MANAGED SERVICE ORGANIZATION MUST INCLUDE TERMS AND CONDITIONS THAT OUTLINE THE EXPECTATIONS FOR THE DESIGNATED MANAGED SERVICE ORGANIZATION TO INVEST IN THE STATE'S RECOVERY SERVICES INFRASTRUCTURE, WHICH INCLUDE PEER-RUN RECOVERY SUPPORT SERVICES AND SPECIALIZED SERVICES FOR UNDERSERVED POPULATIONS. INVESTMENTS ARE BASED ON AVAILABLE APPROPRIATIONS.

(6) A managed service organization that is designated to serve a designated service area may subcontract with a network of service providers to provide treatment AND RECOVERY services for alcohol and drug abuse and substance use disorders within the particular designated service area.

(7) (c) From time to time, the director of the office of behavioral health may solicit applications from applicants for managed service organization designation to provide substance use disorder treatment AND RECOVERY services for a specified planning area or areas.

SECTION 4. In Colorado Revised Statutes, 25-27.6-103, **amend** (2)(a)(II)(D) as follows:

25-27.6-103. Behavioral health entity implementation and advisory committee - creation - membership - duties - repeal.

(2) (a) The committee consists of:

(II) The following members to be appointed by the executive director of the department of public health and environment:

(D) One member that represents a provider of substance use disorder treatment AND RECOVERY services that is not a community health center;

SECTION 5. In Colorado Revised Statutes, 25.5-5-310, **amend** (2)(b) as follows:

25.5-5-310. Treatment program for high-risk pregnant and parenting women - cooperation with private entities - definition.

(2) (b) The department of human services is authorized to use state money to provide services to women, including women enrolled in the medical assistance program established pursuant to this article 5 and articles 4 and 6 of this title 25.5, who enroll, up to one year postpartum, in residential substance use disorder treatment AND RECOVERY services, until such time as those services are covered by the medical assistance program. The department of human services may continue to use state money to enroll parenting women in residential services who qualify as indigent but who are not eligible for services under the medical assistance program.

SECTION 6. In Colorado Revised Statutes, 25.5-5-312, **amend** (1) as follows:

25.5-5-312. Treatment program for high-risk pregnant and parenting women - extended coverage - federal approval. (1) The state department shall seek federal approval to continue providing substance use disorder treatment AND RECOVERY services for twelve months following a pregnancy to women who are eligible to receive services under the medical assistance program, who are receiving services pursuant to the treatment program for high-risk pregnant and parenting women, and who continue to participate in the treatment program. The state department shall implement the continued services to the extent allowed by the federal government.

SECTION 7. In Colorado Revised Statutes, 25.5-5-315, **amend** (1) as follows:

25.5-5-315. Acceptance of gifts, grants, and donations - Native American substance abuse treatment cash fund. (1) The executive director may accept and expend money from gifts, grants, and donations for purposes of providing for the administrative costs of preparing and submitting the request for federal approval to provide substance use disorder treatment AND RECOVERY services to Native Americans as provided for in section 25.5-5-314. All such gifts, grants, and donations shall MUST be transmitted to the state treasurer who shall credit the same to the Native American substance abuse treatment cash fund, which fund is created and referred to in this section as the "fund". The money in the fund is subject to annual appropriation by the general assembly. All investment earnings derived from the deposit and investment of money in the fund remains in the fund and shall not be transferred or revert to the general fund of the state at the end of any fiscal year.

SECTION 8. In Colorado Revised Statutes, 26-1-132, **amend** (1)(b) as follows:

26-1-132. Department of human services - rate setting - residential treatment service providers - monitoring and auditing - report. (1) In conjunction with the group of representatives convened by the state department pursuant to section 26-5-104 (6)(e) to review the rate-setting process for child welfare services, the state department shall develop a rate-setting process consistent with medicaid requirements for providers of residential treatment services in Colorado. The department of health care policy and financing shall approve the rate-setting process for rates funded by medicaid. The rate-setting process developed pursuant to this section may include:

(b) A request for proposal to contract for specialized service needs of a child, including but not limited to: Substance use disorder treatment AND RECOVERY services, sex offender services, and services for the intellectually and developmentally disabled; and

SECTION 9. In Colorado Revised Statutes, 27-80-119, **amend** (2) as follows:

27-80-119. Care navigation program - creation - reporting - rules - legislative declaration - definition. (2) As used in this section, "engaged client" means an individual who is interested in and willing to engage in substance use disorder treatment AND RECOVERY services or other treatment services either for the individual or an affected family member or friend.

SECTION 10. In Colorado Revised Statutes, 27-80-120, **amend** (4) as follows:

27-80-120. Building substance use disorder treatment capacity in underserved communities - grant program - repeal. (4) Local grants must be used to ensure that local communities increase access to a continuum of substance use disorder treatment AND RECOVERY services, including medical or clinical detoxification, residential treatment, recovery support services, and intensive outpatient treatment.

SECTION 11. Appropriation. (1) For the 2021-22 state fiscal year, \$28,654 is appropriated to the department of human services for use by the office of behavioral health. This appropriation consists of \$26,254 from the general fund and \$2,400 from the peer support professional workforce cash fund created in section 27-60-108 (6)(a), C.R.S. To implement this act, the office may use this appropriation as follows:

(a) \$22,454, which consists of \$20,054 from the general fund and \$2,400 from the peer support professional workforce cash fund, for community behavioral health administration personal services, which amount is based on an assumption that the office will require an additional 0.3 FTE; and

(b) \$6,200 from the general fund for community behavioral health administration operating expenses.

SECTION 12. Act subject to petition - effective date. This act takes effect at 12:01 a.m. on the day following the expiration of the ninety-day period after final adjournment of the general assembly; except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within such period, then the act, item, section, or part will not take effect unless approved by the people at the general election to be held in

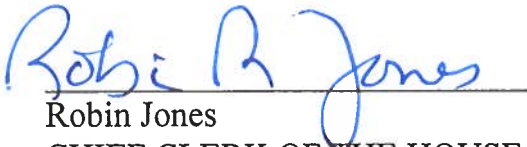
November 2022 and, in such case, will take effect on the date of the official declaration of the vote thereon by the governor.



Alec Garnett
SPEAKER OF THE HOUSE
OF REPRESENTATIVES



Leroy M. Garcia
PRESIDENT OF
THE SENATE



Robin Jones
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES



Cindi L. Markwell
SECRETARY OF
THE SENATE

APPROVED June 18, 2021 at 11:00 am
(Date and Time)



Jared S. Polis
GOVERNOR OF THE STATE OF COLORADO