A BILL FOR AN ACT

Concerning measures to prevent opioid misuse in Colorado.

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/.)

Opioid and Other Substance Use Disorders Interim Study Committee. Section 1 of the bill establishes in statute the opioid and other substance use disorders study committee, consisting of 5 senators and 5 representatives from the general assembly, to:

- Study data and statistics on the scope of the substance use disorder problem in Colorado;
- Study current prevention, intervention, harm reduction, treatment, and recovery resources available to Coloradans,
as well as public and private insurance coverage and other sources of support for treatment and recovery resources;

! Review the availability of medication-assisted treatment and the ability of pharmacists to prescribe those medications;

! Examine measures that other states and countries use to address substance use disorders;

! Identify the gaps in prevention, intervention, harm reduction, treatment, and recovery resources available to Coloradans and hurdles to accessing those resources; and

! Identify possible legislative options to address gaps and hurdles to accessing prevention, intervention, harm reduction, treatment, and recovery resources.

The committee is authorized to meet 6 times in a calendar year and may report up to 6 legislative measures to the legislative council, which bills are exempt from bill limitations and introduction deadlines. The committee is repealed on July 1, 2020.

Section 2 specifies school-based health care centers may apply for grants from the school-based health center grant program to expand behavioral health services to include treatment for opioid and other substance use disorders.

Section 3 directs the department of health care policy and financing, starting July 1, 2018, to award grants to organizations to operate a substance abuse screening, brief intervention, and referral program.

Section 4 directs the center for research into substance use disorder prevention, treatment, and recovery to develop and implement continuing medical education activities to help prescribers of pain medication to safely and effectively manage patients with chronic pain, and when appropriate, prescribe opioids. Sections 2 through 4 also direct the general assembly to appropriate money to implement those sections.
SECTION 2-3-303.3, THERE IS HEREBY CREATED THE OPIOID AND OTHER
SUBSTANCE USE DISORDERS STUDY COMMITTEE. THE COMMITTEE
CONSISTS OF TEN MEMBERS OF THE GENERAL ASSEMBLY APPOINTED ON OR
BEFORE JUNE 1, 2018, AS FOLLOWS:

(I) FIVE MEMBERS OF THE SENATE, WITH THREE MEMBERS
APPOINTED BY THE PRESIDENT OF THE SENATE AND TWO MEMBERS
APPOINTED BY THE MINORITY LEADER OF THE SENATE; AND

(II) FIVE MEMBERS OF THE HOUSE OF REPRESENTATIVES, WITH
THREE MEMBERS APPOINTED BY THE SPEAKER OF THE HOUSE OF
REPRESENTATIVES AND TWO MEMBERS APPOINTED BY THE MINORITY
LEADER OF THE HOUSE OF REPRESENTATIVES.

(b) THE SPEAKER OF THE HOUSE OF REPRESENTATIVES SHALL
APPOINT THE CHAIR OF THE COMMITTEE IN EVEN-NUMBERED YEARS AND
THE VICE-CHAIR IN ODD-NUMBERED YEARS, AND THE PRESIDENT OF THE
SENATE SHALL APPOINT THE CHAIR OF THE COMMITTEE IN ODD-NUMBERED
YEARS AND THE VICE-CHAIR IN EVEN-NUMBERED YEARS.

(2) THE COMMITTEE SHALL:

(a) STUDY DATA AND STATISTICS ON THE SCOPE OF THE
SUBSTANCE USE DISORDER PROBLEM IN COLORADO, INCLUDING TRENDS IN
RATES OF SUBSTANCE ABUSE, TREATMENT ADMISSIONS, AND DEATHS FROM
SUBSTANCE USE;

(b) STUDY THE CURRENT PREVENTION, INTERVENTION, HARM
REDUCTION, TREATMENT, AND RECOVERY RESOURCES, INCLUDING
SUBSTANCE ABUSE PREVENTION OUTREACH AND EDUCATION, AVAILABLE
TO COLORADANS, AS WELL AS PUBLIC AND PRIVATE INSURANCE COVERAGE
AND OTHER SOURCES OF SUPPORT FOR TREATMENT AND RECOVERY
RESOURCES;
(c) Review the availability of medication-assisted treatment and whether pharmacists can prescribe those medications through the development of collaborative pharmacy practice agreements with physicians;

(d) Examine the measures that other states and countries use to address substance use disorders, including evidence-based best practices and the use of evidence in determining strategies to treat substance use disorders, and best practices on the use of prescription drug monitoring programs;

(e) Identify the gaps in prevention, intervention, harm reduction, treatment, and recovery resources available to Coloradans and hurdles to accessing those resources; and

(f) Identify possible legislative options to address gaps and hurdles to accessing prevention, intervention, harm reduction, treatment, and recovery resources.

(3) (a) The committee shall meet as necessary up to six times per calendar year during any legislative session or any interim between legislative sessions. The committee may introduce up to a total of six bills in each of the 2019 and 2020 legislative sessions. Bills that the committee introduces are exempt from the five-bill limitation specified in rule 24 (b)(1)(A) of the joint rules of the senate and the house of representatives.

(b) No later than November 1, 2018, and no later than each November 1 thereafter, the committee shall make a report to the legislative council created in section 2-3-301 that may include recommendations for legislation.
(4) (a) Members of the committee are entitled to receive the usual per diem and necessary travel and subsistence expenses as provided pursuant to section 2-2-307 for members of the General Assembly who attend interim committee meetings.

(b) The director of research of the legislative council and the director of the office of legislative legal services shall provide staff assistance to the committee.

10-22.3-102. Repeal of article. This article 22.3 is repealed, effective July 1, 2020.

SECTION 2. In Colorado Revised Statutes, add 10-16-124.8 as follows:

10-16-124.8. Colorado consortium for prescription drug abuse prevention - create process for recovery - report. (1) The governor shall direct the Colorado consortium for prescription drug abuse prevention within the University of Colorado to:

(a) Create a process with the substance abuse recovery community to develop a strategic plan that addresses the full continuum of recovery services, including detoxification services and reintegration into the community with peer support, for individuals who experience substance use disorder;

(b) Develop a definition for recovery residences and issue recommendations regarding whether recovery residences should be licensed; and

(c) Report the recommendations pursuant to this section to the general assembly on or before January 1, 2020.

(2) Money in the general fund may not be used for the implementation of this section.
SECTION 3. In Colorado Revised Statutes, 25-20.5-503, amend (2) as follows:

25-20.5-503. School-based health center grant program - creation - funding - grants - repeal. (2) (a) Operators of school-based health centers may apply for grants for the benefit of school-based health centers. The grant program shall provide grants for school-based health centers selected by the division. The division, in consultation with school-based health centers, shall develop criteria under which the grants are distributed and evaluated. In developing the criteria for grants, the division shall give priority to centers that serve a disproportionate number of uninsured children or a low-income population or both and may award grants to establish new school-based health centers; to expand primary health services, behavioral health services, INCLUDING EDUCATION, INTERVENTION, AND PREVENTION SERVICES FOR OPIOID, ALCOHOL, AND MARIJUANA, AND OTHER SUBSTANCE USE DISORDERS, or oral health services offered by existing school-based health centers; to expand enrollment in the children's basic health plan; or to provide support for ongoing operations of school-based health centers. None of the grants shall be awarded to provide abortion services in violation of section 50 of article V of the state constitution.

(b) (I) ON OR BEFORE JULY 1, 2018, THE GENERAL ASSEMBLY SHALL APPROPRIATE SEVEN HUNDRED SEVENTY-FIVE THOUSAND DOLLARS TO THE DEPARTMENT FROM THE MARIJUANA TAX CASH FUND CREATED IN SECTION 39-28.8-501 FOR THE PURPOSES OF EXPANDING BEHAVIORAL HEALTH THERAPY, INTERVENTION, AND PREVENTION SERVICES FOR OPIOID, ALCOHOL, AND MARIJUANA, AND OTHER SUBSTANCE USE DISORDERS PURSUANT TO THIS SUBSECTION (2).
(II) This subsection (2)(b) is repealed effective September 1, 2019.

SECTION 4. In Colorado Revised Statutes, amend 25.5-5-208 as follows:

25.5-5-208. Additional services - training - grants - screening, brief intervention, and referral - repeal. (1) On or before June 30, 2016, the state department shall grant, through a competitive grant program, up to five hundred thousand dollars to one or more organizations to provide evidence-based training and outreach to health professionals statewide related to screening, brief intervention, and referral to treatment for individuals at risk of substance abuse for whom Colorado provides optional services in accordance with section 25.5-5-202 (1)(u). For any fiscal year beginning on or after July 1, 2016, until the fiscal year ending June 30, 2018, the state department shall award additional grants for this training and outreach, subject to available appropriations. Any moneys appropriated for grants pursuant to this section are not subject to federal financial participation.

(2) (a) On or after July 1, 2018, the state department shall grant, through a competitive grant program, one million two hundred fifty thousand dollars to one or more organizations to operate a substance abuse screening, brief intervention, and referral screening practice. The grant program must require:

(I) Training for health care professionals statewide that is evidence-based and that may be attended either in person or online. The training must include training for reimbursement and billing codes in the "Colorado Medical Assistance Act", articles 4 to 6 of this title 25.5.
(II) Consultation and technical assistance for health care providers, health care organizations, and stakeholders; (III) Outreach, communication, and education to providers and patients; (IV) Coordination with primary care, mental health care, integrated health care, and substance use prevention, treatment, and recovery efforts; and (V) Campaigning to increase public awareness of the risks related to alcohol, marijuana, tobacco, and drug use and to reduce any stigma associated with treatment.

(b) (I) The state department contractor shall develop a patient education tool for women of childbearing age to learn about the risks of substance-exposed pregnancies, to be deployed for public use in the state.

(II) (A) On or before July 1, 2018, the general assembly shall appropriate one hundred seventy-five thousand dollars to the state department from the marijuana tax cash fund created in section 39-28.8-501 for the purposes of this subsection (2)(b).

(B) This subsection (2)(b)(II) is repealed, effective September 1, 2019.

SECTION 5. In Colorado Revised Statutes, add 26-6.8-107 as follows:

26-6.8-107. Opioid prevention grant pilot program - fund - report. (1) (a) There is created, in the Tony Grampsas Youth Services program, the Charlie Hughes and Nathan Gauna opioid prevention program to improve young lives, which is a three-year grant pilot program, referred to in this section as
THE "PROGRAM", FOR PREVENTING OPIOID USE AMONG THE STATE'S YOUTH POPULATION AND SUPPORTING YOUTH WHOSE FAMILY MEMBERS EXPERIENCE ADDICTION. AN ENTITY THAT RECEIVES A GRANT PURSUANT TO THIS SECTION SHALL APPLY THE GRANT TO ADMINISTER AN EVIDENCE-BASED PROGRAM WITH CLEAR METRICS AND BENCHMARKS TO DEVELOP, IMPLEMENT, AND IDENTIFY PROOF POINTS AND BEST PRACTICES FOR PREVENTING OPIOID USE AMONG THE STATE'S YOUTH POPULATION.

(b) (I) THE STATE DEPARTMENT SHALL OVERSEE THE GRANT PROCESS, INCLUDING THE PUBLICATION OF THE REQUIREMENTS TO RECEIVE A GRANT, THE REVIEW OF APPLICANTS, AND THE SELECTION OF GRANT RECIPIENTS.

(II) IN CHOOSING THE GRANT RECIPIENTS, THE STATE DEPARTMENT SHALL CONSIDER THE NUMBER OF YOUTH TO BE SERVED BY THE APPLICANT, THE GEOGRAPHIC LOCATION OF THE APPLICANT, AND THE DEMONSTRATION OF NEED IN THE GEOGRAPHIC AREA TO BE SERVED. THE STATE DEPARTMENT MAY AWARD A GRANT TO ONE OR MORE, BUT NOT TO EXCEED FIVE, GEOGRAPHICALLY DIVERSE APPLICANTS.

(2) THE STATE DEPARTMENT SHALL REQUIRE THAT AN APPLICANT FOR A GRANT THROUGH THE PROGRAM MEET THE FOLLOWING CRITERIA:

(a) THE APPLICANT SERVES YOUTH FIVE YEARS OF AGE AND OLDER BUT YOUNGER THAN NINETEEN YEARS OF AGE;

(b) THE APPLICANT SERVES YOUTH LIVING IN COMMUNITIES EXPERIENCING AN OPIOID CRISIS;

(c) THE APPLICANT DEMONSTRATES THAT IT WILL ADMINISTER AN EVIDENCE-BASED PROGRAM WITH CLEAR METRICS AND BENCHMARKS;

(d) THE APPLICANT HAS CONDUCTED NATIONAL RESEARCH THAT SHOWS THAT THE APPLICANT HAS THE CAPACITY TO DELIVER PARTICIPANT
OUTCOMES ASSOCIATED WITH DECREASED LEVELS OF OPIOID OR OTHER SUBSTANCE USE;

(e) The applicant has a history of delivering youth prevention programs; and

(f) The applicant has agreed that during each grant year:

(I) The applicant will measure the youth participants’ attitudes on opioid use and other substance use; and

(II) The applicant will track demographics, attendance, and participation in the individual grantee program and compile aggregated feedback on this information for the report required pursuant to subsection (4) of this section.

(3) The Tony Grampsas Youth Services Program shall award the grants to the selected recipients on or before October 1, 2018, and contract with the grant recipients no later than November 1, 2018.

(4) (a) There is created in the state treasury the youth opioid and substance use prevention fund, which consists of money appropriated to the fund by the General Assembly beginning in fiscal year 2018, for the direct and indirect costs associated with the program. The state department may use up to two percent of the money appropriated by the General Assembly for the administration and evaluation of the program. Any money in the fund not expended for the purpose of this section at the end of the three-year program may be invested by the State Treasurer as provided by law unless the pilot program is extended by the General Assembly. Any unexpended and unencumbered money remaining in the fund at the end of each
FISCAL YEAR OF THE PROGRAM SHALL REMAIN IN THE FUND AND SHALL NOT BE CREDITED OR TRANSFERRED TO THE GENERAL FUND OR ANY OTHER FUND UNTIL THE PROGRAM HAS EXPIRED.

(b) The state department shall work with the grant recipients at the conclusion of the program. The state department shall submit a report to the general assembly on or before January 1, 2021, regarding the progress of the grant recipient based on the data and performance metrics specified in the grant application.

SECTION 6. In Colorado Revised Statutes, 27-80-118, add (4) as follows:

27-80-118. Center for research into substance use disorder prevention, treatment, and recovery support strategies - legislative declaration - established - repeal. (4) (a) The center shall develop and implement a series of continuing education activities designed to help a prescriber of pain medication to safely and effectively manage patients with pain and, when appropriate, prescribe opioids or medication assisted treatment. The educational activities must apply to physicians, physician assistants, nurses, and dentists.

(b) The center shall also develop education and training for law enforcement officers and first responders concerning the use of opioid antagonists for opioid overdose and community-based training for persons at risk of opioid overdose.

(c) (I) On or before July 1, 2018, the general assembly shall appropriate seven hundred fifty thousand dollars to the center from the marijuana tax cash fund created in section

(II) THIS SUBSECTION (4)(c) IS REPEALED, EFFECTIVE SEPTEMBER 1, 2019.

SECTION 7. 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.