

First Regular Session
Seventy-second General Assembly
STATE OF COLORADO

REENGROSSED

*This Version Includes All Amendments
Adopted in the House of Introduction*

LLS NO. 19-1084.01 Kristen Forrestal x4217

SENATE BILL 19-228

SENATE SPONSORSHIP

Winter and Moreno,

HOUSE SPONSORSHIP

Buentello and Singer,

Senate Committees

Health & Human Services
Appropriations

House Committees

A BILL FOR AN ACT

101 **CONCERNING MEASURES TO PREVENT SUBSTANCE ABUSE, AND, IN**
102 **CONNECTION THEREWITH, REQUIRING CERTAIN PRESCRIBERS TO**
103 **COMPLETE SUBSTANCE USE DISORDER TRAINING; PROHIBITING**
104 **PHYSICIANS AND PHYSICIAN ASSISTANTS FROM ACCEPTING**
105 **BENEFITS FOR PRESCRIBING SPECIFIC MEDICATIONS; REQUIRING**
106 **OPIOID PRESCRIPTIONS TO BEAR WARNING LABELS; ALLOWING**
107 **MEDICAL EXAMINERS ACCESS TO THE PRESCRIPTION DRUG**
108 **MONITORING PROGRAM; PROVIDING FUNDING TO ADDRESS**
109 **OPIOID AND SUBSTANCE USE DISORDERS THROUGH PUBLIC**
110 **HEALTH INTERVENTIONS IN LOCAL COMMUNITIES; REQUIRING**
111 **STATE DEPARTMENTS TO REPORT RECEIPT AND ELIGIBILITY FOR**
112 **FEDERAL FUNDS FOR HIV AND HEPATITIS TESTING; REQUIRING**
113 **THE OFFICE OF BEHAVIORAL HEALTH IN THE DEPARTMENT OF**

*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.*

SENATE
Amended 3rd Reading
April 25, 2019

SENATE
Amended 2nd Reading
April 24, 2019

101 HUMAN SERVICES TO ADMINISTER GRANT PROGRAMS;
102 REQUIRING THE CENTER FOR RESEARCH INTO SUBSTANCE USE
103 DISORDER PREVENTION, TREATMENT, AND RECOVERY SUPPORT
104 STRATEGIES TO DEVELOP AND IMPLEMENT A PROGRAM TO
105 INCREASE PUBLIC AWARENESS CONCERNING THE SAFE USE,
106 STORAGE, AND DISPOSAL OF ANTAGONIST DRUGS, TO CONDUCT
107 A NEEDS ASSESSMENT AMONG MOTHERS AND PREGNANT WOMEN,
108 AND TO IMPLEMENT A GRANT PROGRAM; REQUIRING THE
109 OFFICE OF BEHAVIORAL HEALTH IN THE DEPARTMENT OF
110 HUMAN SERVICES TO ADMINISTER A CHILD AND MATERNAL
111 HEALTH PILOT PROGRAM; AND MAKING AN APPROPRIATION.

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:

- ! Requires certain health care providers who have prescriptive authority to complete substance use disorder training as part of continuing education required to renew the provider's license. Specifically, the requirement applies to podiatrists (**section 1** of the bill), dentists (**section 2**), advanced practice nurses (**section 3**), optometrists (**section 4**), and veterinarians (**section 5**).
- ! Prohibits a physician or physician assistant from accepting any direct or indirect benefits for prescribing a specific medication (**section 6**);
- ! Requires a prescription for an opioid for outpatient use to bear a warning label (**section 7**);
- ! Allows medical examiners access to the prescription drug monitoring program under specified circumstances (**section 8**);
- ! For the 2019-20 fiscal year, appropriates \$5 million from the general fund to the department of public health and environment for the purpose of working at state and local levels to address opioid and other substance use disorder priorities (**section 9**);

- ! Requires specified state departments to report to the health committees of the general assembly by December 31, 2019, the amount of federal funds that each is receiving or is eligible to receive for use in testing for hepatitis and HIV and the number of individuals currently and anticipated to be tested. The departments are also required to share eligibility standards for treatment with primary care providers (**section 10**).
- ! Creates 2 grant programs in the office of behavioral health in the department of human services to address opioid and other substance use disorder prevention and recovery. The grant programs focus on at-risk youth and their families affected by substance use disorders and who have not been successful in seeking aid through existing resources. The general assembly is required to appropriate \$3 million to the youth opioid and substance use prevention fund from the marijuana tax cash fund and \$3 million to the local substance use disorder prevention and recovery pilot program fund from the general fund to administer the programs (**section 11**).
- ! Requires the center for research into substance use disorder prevention, treatment, and recovery support strategies (center) to develop and implement a program to increase public awareness about the safe use, storage, and disposal of opioids, and about the availability of antagonist drugs. The general assembly is required to annually appropriate \$750,000 to the center from the marijuana tax cash fund to implement the program (**section 12**).
- ! Requires the center to hire additional staff to assist local communities in applying for grants, and requires the general assembly to appropriate general funds for the 2019-20 fiscal year to enable the center to hire staff for this purpose (section 12);
- ! Requires the center to conduct a statewide maternal and perinatal population-based needs assessment to gather information regarding substance use disorders among mothers and pregnant women and other mental health issues. For the 2019-20 and 2020-21 fiscal years, the general assembly is directed to appropriate \$100,000 per year from the general fund for allocation to the center to conduct the needs assessment (**section 14**).
- ! Requires the center to establish a pilot program to test the implementation of screening, brief intervention, and referral to treatment (SBIRT) for women's health and prenatal and postpartum care in 5 counties. The general

assembly is directed to appropriate \$228,000 from the marijuana tax cash fund to implement SBIRT in the 2019-20 fiscal year (section 14).

! Requires the college of nursing to implement and provide a training and technical assistance program for health care and mental health care providers in specified counties regarding SBIRT online training and tools to teach women of the risks of alcohol and substance use during pregnancy. For the 2019-20 and 2020-21 fiscal years, the general assembly is directed to appropriate \$172,000 per year from the marijuana tax cash fund to implement the program (section 14).

! Requires the office of behavioral health in the department of human services to administer a pilot program to integrate substance use disorder and medication-assisted treatment with obstetric and gynecological health care and requires the general assembly to appropriate money from the general fund in the 2019-20, 2020-21, and 2021-22 fiscal years to fund the pilot program (section 15).

Sections 16 through 23 make conforming amendments to harmonize the bill with the title 12 recodification bill, House Bill 19-1172.

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

2 **SECTION 1.** In Colorado Revised Statutes, **amend 10-16-143.5**
3 as follows:

4 **10-16-143.5. Pharmacy reimbursement - substance use**
5 **disorders - injections - patient counseling.** (1) If a pharmacy has
6 entered into a collaborative pharmacy practice agreement with one or
7 more physicians pursuant to section 12-42.5-602 to administer injectable
8 antagonist medication for medication-assisted treatment for substance use
9 disorders, the pharmacy administering the drug shall receive an enhanced
10 dispensing fee.

11 (2) IF A PHARMACY DISPENSES AN OPIOID THAT IS A SCHEDULE II
12 OR SCHEDULE III DRUG PURSUANT TO SECTION 18-18-204 OR 18-18-205 TO
13 A PATIENT WHO HAS NOT PREVIOUSLY RECEIVED AN OPIOID PRESCRIPTION

1 AND THE PHARMACY PROVIDES COUNSELING CONCERNING THE RISK OF
2 OPIOIDS TO THE PATIENT, THE DISPENSING PHARMACY SHALL RECEIVE AN
3 ENHANCED DISPENSING FEE.

4 =====

5 **SECTION 2.** In Colorado Revised Statutes, **add** 12-36-117.8 as
6 follows:

7 **12-36-117.8. Prescription medications - financial benefit for**
8 **prescribing prohibited.** A PHYSICIAN OR PHYSICIAN ASSISTANT SHALL
9 NOT ACCEPT ANY DIRECT OR INDIRECT BENEFIT FROM A PHARMACEUTICAL
10 MANUFACTURER OR PHARMACEUTICAL REPRESENTATIVE FOR PRESCRIBING
11 A SPECIFIC MEDICATION TO A PATIENT. FOR THE PURPOSES OF THIS
12 SECTION, A DIRECT OR INDIRECT BENEFIT DOES NOT INCLUDE A BENEFIT
13 OFFERED TO A PHYSICIAN OR PHYSICIAN ASSISTANT REGARDLESS OF
14 WHETHER THE SPECIFIC MEDICATION IS BEING PRESCRIBED.

15 **SECTION 3.** In Colorado Revised Statutes, 12-42.5-121, **add** (3)
16 as follows:

17 **12-42.5-121. Labeling - rules. (3) THE BOARD SHALL**
18 **PROMULGATE RULES CONCERNING THE LABELING REQUIREMENTS FOR A**
19 **PRESCRIPTION DRUG THAT IS DISPENSED TO A PATIENT FOR OUTPATIENT**
20 **USE AND CONTAINS AN OPIOID, EXCEPT FOR AN OPIOID PRESCRIBED FOR**
21 **TREATMENT OF A SUBSTANCE USE DISORDER OR THAT IS A PARTIAL OPIOID**
22 **ANTAGONIST, WHICH RULES MUST INCLUDE A WARNING TO INDICATE RISKS**
23 **SUCH AS OVERDOSE AND ADDICTION.**

24 **SECTION 4.** In Colorado Revised Statutes, 12-42.5-404, **add**
25 (3)(j) as follows:

26 **12-42.5-404. Program operation - access - rules - definitions -**
27 **repeal.** (3) The program is available for query only to the following

1 persons or groups of persons:

2 (j) A MEDICAL EXAMINER WHO IS A PHYSICIAN LICENSED
3 PURSUANT TO ARTICLE 36 OF THIS TITLE 12 WHOSE LICENSE IS IN GOOD
4 STANDING, AND WHO IS LOCATED AND EMPLOYED IN THE STATE OF
5 COLORADO, OR A CORONER ELECTED PURSUANT TO SECTION 30-10-601,
6 IF:

7 (I) THE INFORMATION RELEASED IS SPECIFIC TO AN INDIVIDUAL
8 WHO IS THE SUBJECT OF AN AUTOPSY CONDUCTED BY THE MEDICAL
9 EXAMINER OR CORONER;

10 (II) THE MEDICAL EXAMINER OR THE CORONER HAS LEGITIMATE
11 ACCESS TO THE INDIVIDUAL'S MEDICAL RECORD; AND

12 (III) THE INDIVIDUAL'S DEATH OR INJURY OCCURRED UNDER
13 UNUSUAL, SUSPICIOUS, OR UNNATURAL CIRCUMSTANCES.

14 **SECTION 5.** In Colorado Revised Statutes, 23-18-308, **amend**
15 **(1)(b) and (1)(c); and add (1)(d) as follows:**

16 **23-18-308. Fee-for-service contracts - limited purpose.**

17 **(1) Subject to available appropriations, the department shall enter into**
18 **fee-for-service contracts for the following purposes:**

19 **(b) The inclusive higher education pilot program pursuant to**
20 **section 23-75-104; and**

21 **(c) Cybersecurity and distributed ledger technologies, such as**
22 **blockchains, as set forth in sections 24-33.5-1904 and 24-33.5-1905; AND**

23 **(d) A PROGRAM TO INCREASE PUBLIC AWARENESS CONCERNING**
24 **OPIOID USE THAT IS DEVELOPED AND IMPLEMENTED BY THE CENTER FOR**
25 **RESEARCH INTO SUBSTANCE USE DISORDER PREVENTION, TREATMENT, AND**
26 **RECOVERY SUPPORT STRATEGIES PURSUANT TO SECTION 27-80-118.**

27 **SECTION 6.** In Colorado Revised Statutes, **add** 25-1-521 as

1 follows:

2 **25-1-521. State department - local public health agencies -**
3 **address substance use disorders - appropriation - repeal.** (1) FOR THE
4 2019-20 FISCAL YEAR, THE GENERAL ASSEMBLY SHALL APPROPRIATE TWO
5 MILLION DOLLARS TO THE STATE DEPARTMENT TO ADDRESS OPIOID AND
6 SUBSTANCE USE DISORDERS THROUGH PUBLIC HEALTH INTERVENTIONS
7 AND TO WORK WITH COMMUNITY PARTNERS, INCLUDING COUNTY AND
8 DISTRICT PUBLIC HEALTH AGENCIES, TO ADDRESS OPIOID AND OTHER
9 SUBSTANCE USE PRIORITIES THROUGHOUT THE STATE. THE STATE
10 DEPARTMENT MAY USE THE MONEY FOR DATA COLLECTION, ANALYSIS,
11 AND DISSEMINATION ACTIVITIES RELATED TO OPIOID AND OTHER
12 SUBSTANCE USE DISORDERS AT THE STATE AND LOCAL LEVELS, INCLUDING
13 COMMUNITY HEALTH ASSESSMENTS AND IMPROVEMENT PLANNING. THE
14 STATE DEPARTMENT MAY USE UP TO FIVE HUNDRED THOUSAND DOLLARS
15 OF THE MONEY FOR ADMINISTRATIVE COSTS AND OTHER ACTIVITIES
16 RELATED TO THE PURPOSES OF THIS SECTION.

17 (2) THIS SECTION IS REPEALED, EFFECTIVE JULY 1, 2020.

18 **SECTION 7.** In Colorado Revised Statutes, **add 26-1-141** as
19 follows:

20 **26-1-141. Departments - report required - hepatitis and HIV**
21 **tests - definitions.** (1) ON OR BEFORE DECEMBER 31, 2019, THE
22 EXECUTIVE DIRECTORS OF THE DEPARTMENT OF HUMAN SERVICES, THE
23 DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, AND THE
24 DEPARTMENT OF CORRECTIONS SHALL SUBMIT A REPORT TO THE PUBLIC
25 HEALTH CARE AND HUMAN SERVICES COMMITTEE AND THE HEALTH AND
26 INSURANCE COMMITTEE OF THE HOUSE OF REPRESENTATIVES AND THE
27 HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE CONCERNING:

1 (a) THE AMOUNT OF FEDERAL FUNDS THAT EACH DEPARTMENT IS
2 ELIGIBLE TO RECEIVE OR IS CURRENTLY RECEIVING THAT MAY BE USED FOR
3 TESTING FOR HEPATITIS B, HEPATITIS C, OR HIV;

4 (b) THE NUMBER OF INDIVIDUALS CURRENTLY BEING TESTED FOR
5 EACH DISEASE LISTED IN SUBSECTION (1)(a) OF THIS SECTION; AND

6 (c) WHETHER EACH DEPARTMENT IS PLANNING TO INCREASE THE
7 NUMBER OF PEOPLE BEING TESTED FOR EACH DISEASE LISTED IN
8 SUBSECTION (1)(a) OF THIS SECTION.

9 (2) THE DEPARTMENTS SPECIFIED IN SUBSECTION (1) OF THIS
10 SECTION SHALL PREPARE MATERIALS DESCRIBING THE ELIGIBILITY
11 STANDARDS CURRENTLY IN USE FOR TREATMENT OF HEPATITIS B,
12 HEPATITIS C, AND HIV AND DISTRIBUTE MATERIALS TO PRIMARY CARE
13 PROVIDERS IN THE STATE. THE DEPARTMENTS MAY DISTRIBUTE THE
14 MATERIALS BY PROVIDING THE MATERIALS TO THE RELEVANT
15 PROFESSIONAL ASSOCIATION FOR THE PROVIDERS, AT PROFESSIONAL
16 ASSOCIATION MEETINGS AND CONFERENCES, OR BY OTHER APPROPRIATE
17 MEANS AS DETERMINED BY EACH DEPARTMENT.

18 (3) AS USED IN THIS SECTION:

19 (a) "ARRANGING FOR THE PROVISION" MEANS DEMONSTRATING
20 ESTABLISHED REFERRAL RELATIONSHIPS WITH HEALTH CARE PROVIDERS
21 FOR ANY OF THE COMPREHENSIVE PRIMARY CARE SERVICES NOT DIRECTLY
22 PROVIDED BY AN ENTITY.

23 (b) (I) "PRIMARY CARE" MEANS THE BASIC ENTRY-LEVEL HEALTH
24 CARE PROVIDED BY PHYSICIAN OR NONPHYSICIAN HEALTH CARE
25 PRACTITIONERS THAT IS GENERALLY PROVIDED IN AN OUTPATIENT
26 SETTING.

27 (II) "PRIMARY CARE" INCLUDES:

- 1 (A) PROVIDING OR ARRANGING FOR THE PROVISION OF PRIMARY
2 HEALTH CARE;
- 3 (B) MATERNITY CARE, INCLUDING PRENATAL CARE;
- 4 (C) PREVENTIVE, DEVELOPMENTAL, AND DIAGNOSTIC SERVICES
5 FOR INFANTS AND CHILDREN;
- 6 (D) ADULT PREVENTIVE SERVICES;
- 7 (E) DIAGNOSTIC LABORATORY AND RADIOLOGY SERVICES;
- 8 (F) EMERGENCY CARE FOR MINOR TRAUMA;
- 9 (G) PHARMACEUTICAL SERVICES; AND
- 10 (H) COORDINATION AND FOLLOW-UP FOR HOSPITAL CARE.
- 11 (III) "PRIMARY CARE" MAY ALSO INCLUDE OPTIONAL SERVICES
12 BASED ON A PATIENT'S NEEDS.

13 **SECTION 8.** In Colorado Revised Statutes, **add 27-80-103.5 as**
14 **follows:**

15 **27-80-103.5. Opioid prevention grant program - fund -**
16 **appropriation - report - repeal.** (1) (a) THERE IS CREATED IN THE
17 OFFICE OF BEHAVIORAL HEALTH, REFERRED TO IN THIS SECTION AS THE
18 "OFFICE", THE CHARLIE HUGHES AND NATHAN GAUNA OPIOID
19 PREVENTION GRANT PROGRAM TO IMPROVE YOUNG LIVES, WHICH IS A
20 FIVE-YEAR GRANT PROGRAM, REFERRED TO IN THIS SECTION AS THE
21 "PROGRAM", FOR PREVENTING OPIOID USE AMONG THE STATE'S YOUTH
22 POPULATION AND SUPPORTING YOUTH WHOSE FAMILY MEMBERS
23 EXPERIENCE ADDICTION. AN ENTITY THAT RECEIVES A GRANT PURSUANT
24 TO THIS SECTION SHALL APPLY THE GRANT TO ADMINISTER AN
25 EVIDENCE-BASED PROGRAM WITH CLEAR METRICS AND BENCHMARKS TO
26 DEVELOP, IMPLEMENT, AND IDENTIFY PROOF POINTS AND BEST PRACTICES
27 FOR PREVENTING OPIOID USE AMONG THE STATE'S YOUTH POPULATION.

1 (b) (I) THE OFFICE SHALL ADMINISTER THE PROGRAM, INCLUDING
2 PUBLISHING THE REQUIREMENTS TO RECEIVE A GRANT, REVIEWING
3 APPLICANTS, AND SELECTING GRANT RECIPIENTS.

4 (II) IN CHOOSING THE GRANT RECIPIENTS, THE OFFICE SHALL
5 CONSIDER THE NUMBER OF YOUTH TO BE SERVED BY THE APPLICANT, THE
6 GEOGRAPHIC LOCATION OF THE APPLICANT, AND THE DEMONSTRATION OF
7 NEED IN THE GEOGRAPHIC AREA TO BE SERVED. THE OFFICE MAY AWARD
8 A GRANT TO ONE OR MORE, BUT NOT MORE THAN FIVE, GEOGRAPHICALLY
9 DIVERSE APPLICANTS.

10 (III) THE OFFICE SHALL PRIORITIZE FUNDING REQUESTED AMOUNTS
11 IN THEIR ENTIRETY OR IN AMOUNTS SUBSTANTIALLY SUFFICIENT TO
12 ENSURE GRANT RECIPIENTS CAN FULLY OR SUBSTANTIALLY IMPLEMENT
13 PROGRAMS TO FIDELITY.

14 (IV) THE OFFICE SHALL PRIORITIZE AWARDS TO ENTITIES THAT
15 SERVE COMMUNITIES WITH HIGH RISK FACTORS FOR SUBSTANCE USE
16 COMBINED WITH LIMITED ACCESS TO TREATMENT SERVICES ACCORDING TO
17 STATE NEEDS ASSESSMENTS, COLORADO HEALTH INDICATOR DATA, AND
18 NATIONAL BEST PRACTICE TRENDS.

19 (2) AN APPLICANT FOR A GRANT THROUGH THE PROGRAM MUST:

20 (a) SERVE YOUTH FIVE YEARS OF AGE AND OLDER BUT YOUNGER
21 THAN NINETEEN YEARS OF AGE;

22 (b) BE A COMMUNITY-BASED YOUTH DEVELOPMENT
23 ORGANIZATION PROVIDING DIRECT SERVICES TO YOUTH;

24 (c) SERVE YOUTH LIVING IN COMMUNITIES EXPERIENCING AN
25 OPIOID CRISIS;

26 (d) DEMONSTRATE THAT IT WILL ADMINISTER AN EVIDENCE-BASED
27 SUBSTANCE USE PREVENTION PROGRAM LISTED AS A MODEL OR PROMISING

1 PROGRAM IN THE BLUEPRINTS FOR HEALTHY YOUTH DEVELOPMENT
2 PROGRAM REGISTRY;

3 (e) HAVE A HISTORY OF DELIVERING YOUTH PREVENTION
4 PROGRAMS; AND

5 (f) AGREE THAT DURING EACH GRANT YEAR, THE APPLICANT WILL:

6 (I) MEASURE THE YOUTH PARTICIPANTS' ATTITUDES ON OPIOID USE
7 AND OTHER SUBSTANCE USE; AND

8 (II) TRACK DEMOGRAPHICS, ATTENDANCE, AND PARTICIPATION IN
9 THE PROGRAM AND COMPILE AGGREGATED FEEDBACK ON THIS
10 INFORMATION FOR THE REPORT REQUIRED PURSUANT TO SUBSECTION (5)
11 OF THIS SECTION.

12 (3) THE OFFICE SHALL AWARD THE GRANTS TO THE SELECTED
13 RECIPIENTS ON OR BEFORE OCTOBER 1, 2019, AND CONTRACT WITH THE
14 GRANT RECIPIENTS NO LATER THAN NOVEMBER 1, 2019.

15 (4) THERE IS CREATED IN THE STATE TREASURY THE YOUTH OPIOID
16 AND SUBSTANCE USE PREVENTION FUND, WHICH CONSISTS OF MONEY
17 APPROPRIATED TO THE FUND BY THE GENERAL ASSEMBLY. FOR THE
18 2019-20 FISCAL YEAR, AND EACH FISCAL YEAR THEREAFTER THROUGH THE
19 2023-24 FISCAL YEAR, THE GENERAL ASSEMBLY SHALL APPROPRIATE A
20 TOTAL OF TWO MILLION DOLLARS TO THE FUND FROM THE MARIJUANA TAX
21 CASH FUND CREATED IN SECTION 39-28.8-501 (1). THE MONEY IN THE
22 FUND IS CONTINUOUSLY APPROPRIATED TO THE DEPARTMENT FOR USE BY
23 THE OFFICE FOR THE DIRECT AND INDIRECT COSTS OF THE PROGRAM. THE
24 OFFICE MAY USE UP TO TWO PERCENT OF THE MONEY IN THE FUND FOR THE
25 ADMINISTRATION AND EVALUATION OF THE PROGRAM. ANY UNEXPENDED
26 AND UNENCUMBERED MONEY REMAINING IN THE FUND AT THE END OF
27 EACH FISCAL YEAR OF THE PROGRAM REMAINS IN THE FUND AND SHALL

1 NOT BE CREDITED OR TRANSFERRED TO THE GENERAL FUND OR ANY OTHER
2 FUND. ANY UNEXPENDED AND UNENCUMBERED MONEY REMAINING IN THE
3 FUND ON JULY 1, 2024, REVERTS TO THE MARIJUANA TAX CASH FUND.

4 (5) THE OFFICE SHALL WORK WITH THE GRANT RECIPIENTS TO
5 OBTAIN THE AGGREGATED FEEDBACK REQUIRED BY SUBSECTION (2)(f)(II)
6 OF THIS SECTION. THE OFFICE SHALL SUBMIT A REPORT TO THE GENERAL
7 ASSEMBLY ON OR BEFORE JANUARY 1, 2024, REGARDING THE PROGRESS OF
8 EACH GRANT RECIPIENT BASED ON THE DATA OBTAINED PURSUANT TO
9 SUBSECTION (2)(f)(II) OF THIS SECTION AND THE PERFORMANCE METRICS
10 SPECIFIED IN THE RECIPIENT'S GRANT APPLICATION.

11 (6) THIS SECTION IS REPEALED, EFFECTIVE SEPTEMBER 1, 2024.
12 BEFORE ITS REPEAL, THE PROGRAM IS SCHEDULED FOR REVIEW PURSUANT
13 TO SECTION 24-34-104.

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15 **SECTION 9.** In Colorado Revised Statutes, 27-80-118, **add** (5)
16 and (6) as follows:

17 **27-80-118. Center for research into substance use disorder**
18 **prevention, treatment, and recovery support strategies - legislative**
19 **declaration - established - repeal.** (5) (a) THE CENTER SHALL DEVELOP
20 AND IMPLEMENT A PROGRAM TO INCREASE PUBLIC AWARENESS
21 CONCERNING THE SAFE USE, STORAGE, AND DISPOSAL OF OPIOIDS AND THE
22 AVAILABILITY OF NALOXONE AND OTHER DRUGS USED TO BLOCK THE
23 EFFECTS OF AN OPIOID OVERDOSE.

24 (b) (I) FOR THE 2019-20 FISCAL YEAR AND EACH FISCAL YEAR
25 THEREAFTER THROUGH THE 2023-24 FISCAL YEAR, THE GENERAL
26 ASSEMBLY SHALL APPROPRIATE SEVEN HUNDRED FIFTY THOUSAND
27 DOLLARS PER YEAR TO THE CENTER FROM THE MARIJUANA TAX CASH FUND

1 CREATED IN SECTION 39-28.8-501 (1) FOR THE PURPOSES OF THIS
2 SUBSECTION (5).

3 (II) THIS SUBSECTION (5) IS REPEALED, EFFECTIVE SEPTEMBER 1,
4 2024. BEFORE ITS REPEAL, THE PROGRAM CREATED IN THIS SUBSECTION
5 (5) IS SCHEDULED FOR REVIEW PURSUANT TO SECTION 24-34-104.

6 (6) (a) THE CENTER MAY EMPLOY UP TO FOUR ADDITIONAL
7 EMPLOYEES TO WORK AS GRANT WRITERS IN ORDER TO AID LOCAL
8 COMMUNITIES IN NEED OF ASSISTANCE IN APPLYING FOR GRANTS TO
9 ACCESS STATE AND FEDERAL MONEY TO ADDRESS OPIOID AND OTHER
10 SUBSTANCE USE DISORDERS IN THEIR COMMUNITIES. THE CENTER SHALL
11 DETERMINE THE COMMUNITIES IN WHICH TO PROVIDE THE GRANT WRITING
12 ASSISTANCE.

13 (b) FOR THE FISCAL YEAR 2019-20, THE GENERAL ASSEMBLY
14 SHALL APPROPRIATE MONEY FROM THE GENERAL FUND TO THE
15 DEPARTMENT FOR ALLOCATION TO THE CENTER FOR THE PURPOSES OF THIS
16 SUBSECTION (6). THE CENTER MAY USE THE MONEY TO HIRE NEW
17 EMPLOYEES AND FOR THE DIRECT AND INDIRECT COSTS ASSOCIATED WITH
18 THIS SUBSECTION (6).

19 **SECTION 10.** In Colorado Revised Statutes, 24-34-104, **add**
20 (25)(a)(XX) and (25)(a)(XXI) as follows:

21 **24-34-104. General assembly review of regulatory agencies**
22 **and functions for repeal, continuation, or reestablishment - legislative**
23 **declaration.** (25) (a) The following agencies, functions, or both, are
24 scheduled for repeal on September 1, 2024:

25
26 (XX) THE CHARLIE HUGHES AND NATHAN GAUNA OPIOID
27 PREVENTION GRANT PROGRAM TO IMPROVE YOUNG LIVES CREATED IN

1 SECTION 27-80-103.5;

2

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3 (XXI) THE PROGRAM TO INCREASE PUBLIC AWARENESS
4 CONCERNING THE SAFE USE, STORAGE, AND DISPOSAL OF OPIOIDS AND THE
5 AVAILABILITY OF NALOXONE AND OTHER DRUGS USED TO BLOCK THE
6 EFFECTS OF AN OPIOID OVERDOSE DEVELOPED PURSUANT TO SECTION
7 27-80-118 (5).

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9 **SECTION 11.** In Colorado Revised Statutes, **add** part 2 to article
10 82 of title 27 as follows:

11

PART 2

12

MATERNAL AND CHILD HEALTH PILOT PROGRAM

13

14 **27-82-201. Legislative declaration.** THE GENERAL ASSEMBLY
15 FINDS AND DECLARES THAT FACILITIES THAT PROVIDE TREATMENT TO
16 INDIVIDUALS WITH A SUBSTANCE USE DISORDER, INCLUDING
17 MEDICATION-ASSISTED TREATMENT, AND CLINICS THAT PROVIDE
18 OBSTETRIC AND GYNECOLOGICAL HEALTH CARE SERVICES WOULD BETTER
19 SERVE PREGNANT AND POSTPARTUM WOMEN IF THE SERVICES COULD BE
20 COORDINATED AND PROVIDED TO WOMEN AT THE SAME LOCATION. IT IS
21 THE INTENT OF THE GENERAL ASSEMBLY TO PROVIDE GENERAL FUND
22 MONEY TO FUND A PILOT PROGRAM TO INTEGRATE THESE HEALTH CARE
23 SERVICES AT SPECIFIED FACILITIES AND CLINICS AND REQUIRE THE OFFICE
24 OF BEHAVIORAL HEALTH TO EVALUATE THE PILOT PROGRAM AND REPORT
THE RESULTS OF THE PILOT PROGRAM TO THE GENERAL ASSEMBLY.

25

26 **27-82-202. Definitions.** AS USED IN THIS PART 2, UNLESS THE
CONTEXT OTHERWISE REQUIRES:

27

(1) "CLINIC" MEANS A SITE THAT PROVIDES OBSTETRIC AND

1 GYNECOLOGICAL HEALTH CARE.

2 (2) "LICENSED HEALTH CARE PROVIDER" MEANS A PHYSICIAN OR
3 PHYSICIAN ASSISTANT LICENSED PURSUANT TO ARTICLE 36 OF TITLE 12 OR
4 A NURSE LICENSED PURSUANT TO ARTICLE 38 OF TITLE 12.

5 (3) "PILOT PROGRAM" MEANS THE MATERNAL AND CHILD HEALTH
6 PILOT PROGRAM CREATED IN SECTION 27-82-203.

7 (4) "TREATMENT FACILITY" MEANS A HEALTH CARE FACILITY THAT
8 PROVIDES SUBSTANCE USE DISORDER OR MEDICATION-ASSISTED
9 TREATMENT AND THAT IS APPROVED BY THE OFFICE OF BEHAVIORAL
10 HEALTH PURSUANT TO SECTION 27-82-103.

11 **27-82-203. Maternal and child health pilot program - created**
12 **- eligibility of grant recipients - rules - report.** (1) THERE IS CREATED
13 IN THE DEPARTMENT THE MATERNAL AND CHILD HEALTH PILOT PROGRAM.
14 THE OFFICE OF BEHAVIORAL HEALTH SHALL ADMINISTER THE PILOT
15 PROGRAM. THE PURPOSE OF THE PILOT PROGRAM IS TO:

16 (a) PROVIDE GRANTS TO THREE TREATMENT FACILITIES TO
17 FACILITATE THE INTEGRATION OF OBSTETRIC AND GYNECOLOGICAL
18 HEALTH CARE; AND

19 (b) PROVIDE GRANTS TO SIX CLINICS TO FACILITATE THE
20 INTEGRATION OF BEHAVIORAL HEALTH, INCLUDING SUBSTANCE USE
21 DISORDER TREATMENT OR MEDICATION-ASSISTED TREATMENT, INTO
22 OBSTETRIC AND GYNECOLOGICAL HEALTH CARE AT THE CLINICS.

23 (2) THE OFFICE OF BEHAVIORAL HEALTH SHALL DETERMINE THE
24 CRITERIA FOR TREATMENT FACILITIES AND CLINICS TO BE ELIGIBLE TO
25 RECEIVE THE GRANTS.

26 (3) (a) (I) A TREATMENT FACILITY THAT IS AWARDED A GRANT
27 SHALL INTEGRATE PRENATAL, POSTPARTUM, AND OTHER HEALTH CARE

1 SERVICES DELIVERED BY LICENSED HEALTH CARE PROVIDERS INTO THE
2 SERVICES CURRENTLY PROVIDED AT THE TREATMENT FACILITY.

3 (II) A TREATMENT FACILITY THAT IS AWARDED A GRANT MAY USE
4 THE GRANT TO HIRE CLINICAL STAFF AND TO PROVIDE CLINICAL UPDATES,
5 INCLUDING TRAINING STAFF AND UPGRADING AND CHANGING
6 TECHNOLOGY PLATFORMS TO SUPPORT INTEGRATED CARE, IN ORDER TO
7 PERFORM OBSTETRIC AND GYNECOLOGICAL HEALTH CARE WITHIN THE
8 TREATMENT FACILITY. A TREATMENT FACILITY WITH LOW PATIENT
9 VOLUME MAY PARTNER WITH OTHER TREATMENT FACILITIES AND CLINICS
10 TO PROVIDE INTEGRATED CARE.

11 (b) (I) A CLINIC THAT IS AWARDED A GRANT SHALL INTEGRATE
12 BEHAVIORAL HEALTH CARE SERVICES PROVIDED BY SOCIAL WORKERS AND
13 OTHER BEHAVIORAL HEALTH CARE PROFESSIONALS LICENSED PURSUANT
14 TO ARTICLE 43 OF TITLE 12, INCLUDING MENTAL HEALTH SERVICES,
15 SUBSTANCE USE DISORDER TREATMENT, OR MEDICATION-ASSISTED
16 TREATMENT, INTO THE HEALTH CARE SERVICES CURRENTLY PROVIDED AT
17 THE CLINIC.

18 (II) A CLINIC MAY USE THE GRANT FOR SERVICES INCLUDING
19 TRAINING CLINICAL STAFF, UPGRADING AND CHANGING TECHNOLOGY
20 PLATFORMS TO SUPPORT INTEGRATED CARE, EMPLOYING BEHAVIORAL
21 HEALTH CARE PROVIDERS, AND COORDINATING AND REFERRING PATIENTS
22 TO BEHAVIORAL HEALTH CARE PROVIDERS OUTSIDE THE CLINIC.

23 (4) THE STATE BOARD OF HUMAN SERVICES WITHIN THE
24 DEPARTMENT, IN CONSULTATION WITH THE OFFICE OF BEHAVIORAL
25 HEALTH, MAY PROMULGATE RULES TO IMPLEMENT THE PILOT PROGRAM.
26 THE RULES MUST INCLUDE:

27 (a) THE PROCEDURES AND TIMELINES BY WHICH A TREATMENT

1 FACILITY OR CLINIC MAY APPLY FOR A GRANT;

2 (b) GRANT APPLICATION CONTENTS; AND

3 (c) CRITERIA FOR DETERMINING ELIGIBILITY FOR AND THE AMOUNT
4 OF EACH GRANT AWARDED TO A TREATMENT FACILITY OR CLINIC.

5 (5) THE EXECUTIVE DIRECTOR SHALL DETERMINE A PROCESS TO
6 EVALUATE THE GRANT RECIPIENTS AND THE INTEGRATION OF HEALTH
7 CARE RESULTING FROM THE PILOT PROGRAM. THE OFFICE OF BEHAVIORAL
8 HEALTH SHALL REPORT THE RESULTS OF THE PILOT PROGRAM TO THE
9 HEALTH CARE AND HUMAN SERVICES AND THE HEALTH AND INSURANCE
10 COMMITTEES OF THE HOUSE OF REPRESENTATIVES AND THE HEALTH AND
11 HUMAN SERVICES COMMITTEE OF THE SENATE, OR THEIR SUCCESSOR
12 COMMITTEES.

13 **27-82-204. Funding for pilot program.** (1) (a) FOR THE 2019-20
14 THROUGH 2021-22 FISCAL YEARS, THE GENERAL ASSEMBLY SHALL
15 APPROPRIATE MONEY EACH FISCAL YEAR FROM THE GENERAL FUND TO THE
16 DEPARTMENT, FOR ALLOCATION TO THE OFFICE OF BEHAVIORAL HEALTH
17 TO IMPLEMENT THE PILOT PROGRAM. THE OFFICE OF BEHAVIORAL HEALTH
18 MAY USE A PORTION OF THE MONEY ANNUALLY APPROPRIATED FOR THE
19 PILOT PROGRAM TO PAY THE DIRECT AND INDIRECT COSTS INCURRED TO
20 ADMINISTER THE PILOT PROGRAM.

21 (b) IF ANY UNEXPENDED OR UNCOMMITTED MONEY APPROPRIATED
22 FOR THE 2019-20 OR 2020-21 FISCAL YEAR REMAINS AT THE END OF
23 EITHER FISCAL YEAR, THE OFFICE OF BEHAVIORAL HEALTH MAY EXPEND
24 THE MONEY IN ACCORDANCE WITH THIS SECTION IN THE SUCCEEDING
25 FISCAL YEAR WITHOUT FURTHER APPROPRIATION. ANY UNEXPENDED OR
26 UNCOMMITTED MONEY REMAINING AT THE END OF THE 2021-22 FISCAL
27 YEAR REVERTS TO THE GENERAL FUND.

1 (2) THE DEPARTMENT MAY SOLICIT, ACCEPT, AND EXPEND ANY
2 GIFTS, GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES TO
3 IMPLEMENT OR ADMINISTER THE PILOT PROGRAM.

4 **27-82-205. Repeal of part.** THIS PART 2 IS REPEALED, EFFECTIVE
5 DECEMBER 31, 2022.

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7 =====

8 **SECTION 12.** In Colorado Revised Statutes, **add to article 30**
9 **as relocated by House Bill 19-1172 12-30-111** as follows:

10 **12-30-111. Demonstrated competency - opiate prescribers -**
11 **rules - definition - repeal.** (1) (a) THE APPLICABLE LICENSING BOARD
12 FOR EACH LICENSED HEALTH CARE PROVIDER SHALL PROMULGATE RULES
13 THAT REQUIRE EACH LICENSED HEALTH CARE PROVIDER, AS A CONDITION
14 OF RENEWING, REACTIVATING, OR REINSTATING A LICENSE ON OR AFTER
15 OCTOBER 1, 2019, TO COMPLETE UP TO FOUR CREDIT HOURS OF TRAINING
16 PER LICENSING CYCLE IN ORDER TO DEMONSTRATE COMPETENCY
17 REGARDING: BEST PRACTICES FOR OPIOID PRESCRIBING, ACCORDING TO
18 THE MOST RECENT VERSION OF THE DIVISION'S GUIDELINES FOR THE SAFE
19 PRESCRIBING AND DISPENSING OF OPIOIDS; RECOGNITION OF SUBSTANCE
20 USE DISORDERS; REFERRAL OF PATIENTS WITH SUBSTANCE USE DISORDERS
21 FOR TREATMENT; AND THE USE OF THE ELECTRONIC PRESCRIPTION DRUG
22 MONITORING PROGRAM CREATED IN PART 4 OF ARTICLE 280 OF THIS TITLE
23 12.

24 (b) THE RULES PROMULGATED BY EACH BOARD SHALL EXEMPT A
25 LICENSED HEALTH CARE PROVIDER WHO:

26 (I) MAINTAINS A NATIONAL BOARD CERTIFICATION THAT REQUIRES
27 EQUIVALENT SUBSTANCE USE PREVENTION TRAINING; OR

1 (II) ATTESTS TO THE APPROPRIATE BOARD THAT THE HEALTH CARE
2 PROVIDER DOES NOT PRESCRIBE OPIOIDS.

3 (2) FOR THE PURPOSES OF THIS SECTION, "LICENSED HEALTH CARE
4 PROVIDER" INCLUDES A PHYSICIAN, PHYSICIAN ASSISTANT, PODIATRIST,
5 DENTIST, ADVANCED PRACTICE NURSE WITH PRESCRIPTIVE AUTHORITY,
6 OPTOMETRIST, AND VETERINARIAN LICENSED PURSUANT TO THIS TITLE 12.

7
8 **SECTION 13.** In Colorado Revised Statutes, **add to article 240**
9 **as relocated by House Bill 19-1172 12-240-145** as follows:

10 **12-240-145. Prescription medications - financial benefit for**
11 **prescribing prohibited.** A PHYSICIAN OR PHYSICIAN ASSISTANT SHALL
12 NOT ACCEPT ANY DIRECT OR INDIRECT BENEFIT FROM A PHARMACEUTICAL
13 MANUFACTURER OR PHARMACEUTICAL REPRESENTATIVE FOR PRESCRIBING
14 A SPECIFIC MEDICATION TO A PATIENT. FOR THE PURPOSES OF THIS
15 SECTION, A DIRECT OR INDIRECT BENEFIT DOES NOT INCLUDE A BENEFIT
16 OFFERED TO A PHYSICIAN OR PHYSICIAN ASSISTANT REGARDLESS OF
17 WHETHER THE SPECIFIC MEDICATION IS BEING PRESCRIBED.

18 **SECTION 14.** In Colorado Revised Statutes, **12-280-124, add as**
19 **relocated by House Bill 19-1172 (3)** as follows:

20 **12-280-124. Labeling - rules. (3)** THE BOARD SHALL
21 PROMULGATE RULES CONCERNING THE LABELING REQUIREMENTS FOR A
22 PRESCRIPTION DRUG THAT IS DISPENSED TO A PATIENT FOR OUTPATIENT
23 USE AND CONTAINS AN OPIOID, EXCEPT FOR AN OPIOID PRESCRIBED FOR
24 TREATMENT OF A SUBSTANCE USE DISORDER OR THAT IS A PARTIAL OPIOID
25 ANTAGONIST, WHICH RULES MUST INCLUDE A WARNING TO INDICATE RISKS
26 SUCH AS OVERDOSE AND ADDICTION.

27 **SECTION 15.** In Colorado Revised Statutes, **12-280-404, add as**

1 **relocated by House Bill 19-1172 (3)(l)** as follows:

2 **12-280-404. Program operation - access - rules - definitions -**
3 **repeal.** (3) The program is available for query only to the following
4 persons or groups of persons:

5 (I) A MEDICAL EXAMINER WHO IS A PHYSICIAN LICENSED
6 PURSUANT TO ARTICLE 240 OF THIS TITLE 12, WHOSE LICENSE IS IN GOOD
7 STANDING, AND WHO IS LOCATED AND EMPLOYED IN THE STATE OF
8 COLORADO, OR A CORONER ELECTED PURSUANT TO SECTION 30-10-601,
9 IF:

10 (I) THE INFORMATION RELEASED IS SPECIFIC TO AN INDIVIDUAL
11 WHO IS THE SUBJECT OF AN AUTOPSY CONDUCTED BY THE MEDICAL
12 EXAMINER OR CORONER;

13 (II) THE MEDICAL EXAMINER OR THE CORONER HAS LEGITIMATE
14 ACCESS TO THE INDIVIDUAL'S MEDICAL RECORD; AND

15 (III) THE INDIVIDUAL'S DEATH OR INJURY OCCURRED UNDER
16 UNUSUAL, SUSPICIOUS, OR UNNATURAL CIRCUMSTANCES.

17 **SECTION 16. Appropriation.** (1) For the 2019-20 state fiscal
18 year, \$157,754 is appropriated to the department of human services for
19 use by the office of behavioral health. This appropriation is from the
20 general fund and is based on an assumption that the office will require an
21 additional 1.5 FTE. To implement this act, the office may use this
22 appropriation for the administration and evaluation expenses related to
23 the Charlie Hughes and Nathan Gauna opioid prevention grant program.

24 (2) For the 2019-20 state fiscal year, \$2,000,000 is appropriated
25 to the youth opioid and substance use prevention fund created in section
26 27-80-103.5 (4), C.R.S. This appropriation is from the marijuana tax cash
27 fund created in section 39-28.8-501 (1), C.R.S. The department of human

1 services is responsible for the accounting related to this appropriation.

2 (3) For the 2019-20 state fiscal year, \$997,754 is appropriated to
3 the department of human services for use by the office of behavioral
4 health. This appropriation is from the general fund and is based on an
5 assumption that the office will require an additional 1.5 FTE. To
6 implement this act, the office may use this appropriation for the maternal
7 and child health pilot program.

8 (4) For the 2019-20 state fiscal year, \$750,000 is appropriated to
9 the department of higher education for use by the regents of the university
10 of Colorado. This appropriation is from the marijuana tax cash fund
11 created in section 39-28.8-501 (1), C.R.S. To implement this act, the
12 regents may use this appropriation for allocation to the center for research
13 into substance use disorder prevention, treatment, and recovery support
14 strategies and the college of nursing.

15 (5) For the 2019-20 state fiscal year, \$50,000 is appropriated to
16 the department of higher education. This appropriation is from the general
17 fund. To implement this act, the department may use this appropriation
18 for the college opportunity fund program to be used for limited purpose
19 fee-for-service contracts with state institutions.

20 (6) For the 2019-20 state fiscal year, \$50,000 is appropriated to
21 the department of higher education. This appropriation is from
22 reappropriated funds received from the limited purpose fee-for-service
23 contracts with state institutions under subsection (6) of this section. To
24 implement this act, the department may use this appropriation for the
25 regents of the university of Colorado for allocation to the center for
26 research into substance use disorder prevention, treatment, and recovery
27 support strategies.

1 (7) For the 2019-20 state fiscal year, \$2,000,000 is appropriated
2 to the department of public health and environment. This appropriation
3 is from the general fund. To implement this act, the office may use this
4 appropriation as follows:

5 (a) \$71,852 for use by the prevention services division for
6 administration, which amount is based on an assumption that the division
7 will require an additional 0.9 FTE;

8 (b) \$1,564,148 for distributions to local public health agencies;
9 and

10 (c) \$364,000 for personal services related to health statistics and
11 vital records.

12 **SECTION 17. Effective date - applicability.** (1) This act takes
13 effect upon passage; except that sections 12 to 14 of this act take effect
14 only if House Bill 19-1172 becomes law, in which case sections 12 to 14
15 take effect October 1, 2019.

16 (2) This act applies to conduct occurring on or after the effective
17 date of this act.

18 **SECTION 18. Safety clause.** The general assembly hereby finds,
19 determines, and declares that this act is necessary for the immediate
20 preservation of the public peace, health, and safety.