

First Regular Session
Seventy-third General Assembly
STATE OF COLORADO

INTRODUCED

LLS NO. 21-0586.01 Shelby Ross x4510

SENATE BILL 21-137

SENATE SPONSORSHIP

Pettersen,

HOUSE SPONSORSHIP

Michaelson Jenet and Kennedy,

Senate Committees
Health & Human Services

House Committees

A BILL FOR AN ACT

101 CONCERNING THE "BEHAVIORAL HEALTH RECOVERY ACT OF 2021",
102 AND, IN CONNECTION THEREWITH, 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>.)

Section 1 of the bill titles the bill the "Behavioral Health Recovery Act of 2021".

Section 2 of the bill continues the requirement that a podiatrist must adhere to the limitations on prescribing opioids.

Sections 3 and 4 of the bill continue the funding for the medication-assisted treatment expansion pilot program (pilot program) for

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.

the 2020-21 through 2022-23 state fiscal years and repeal the pilot program on June 30, 2023.

Section 5 of the bill expands the Colorado state university AgrAbility project (project) by providing funding for the project's rural rehabilitation specialists to provide information, services, and research-based, stress-assistance information, education, suicide prevention training, and referrals to behavioral health-care services to farmers, ranchers, agricultural workers, and their families to mitigate incidences of harmful responses to stress experienced by these individuals.

Section 6 of the bill appropriates money to the department of public health and environment to address behavioral health disorders through public health prevention and intervention and to work with community partners to address behavioral health, mental health, and substance use priorities throughout the state.

Section 7 of the bill continuously appropriates money to the harm reduction grant program.

Section 8 of the bill requires a managed care organization (MCO) to notify a person's provider of approval of authorization of services no later than 24 hours after the submission of the request for services. The initial authorization for intensive residential treatment must be no less than 7 days, and the initial authorization for transitional residential treatment must be no less than 14 days. The initial authorization period may be longer if the MCO does not have sufficient information from the person's provider. MCOs shall continually authorize services in accordance with the person's provider if the MCO's determination conflicts with the provider's recommendation. MCOs shall provide specific justification for each denial of continued authorization for all 6 dimensions in the most recent edition of "The ASAM Criteria for Addictive, Substance-related, and Co-occurring Conditions".

Section 9 of the bill requires the state medical assistance program (medicaid) to include screening for perinatal mood and anxiety disorders for each child enrolled in medicaid in accordance with the health resources and services administration guidelines. The screening must be made available to any person, regardless of whether the person is enrolled in medicaid, so long as the person's child is enrolled in medicaid.

Section 10 of the bill requires the department of human services to develop a statewide data collection and information system to analyze implementation data and selected outcomes to identify areas for improvement, promote accountability, and provide insights to continually improve child and program outcomes.

Section 11 of the bill requires the department of human services, in collaboration with the department of agriculture, to contract with a nonprofit organization primarily focused on serving agricultural and rural communities in Colorado to provide vouchers to individuals living in

rural and frontier communities in need of behavioral health-care services.

Section 12 of the bill requires the center for research into substance use disorder prevention, treatment, and recovery support strategies to engage in community engagement activities to address substance use prevention, harm reduction, criminal justice response, treatment, and recovery.

Section 13 of the bill continues the building substance use disorder treatment capacity in underserved communities grant program.

Section 14 of the bill requires the perinatal substance use data linkage project to utilize data from multiple state-administered data sources when examining certain issues related to pregnant and postpartum women with substance use disorders and their infants.

Section 15 of the bill requires the office of behavioral health to use a competitive selection process to select a recovery residence certifying body to certify recovery residences and educate and train recovery residence owners and staff on industry best practices.

Section 16 of the bill requires the office of behavioral health to establish a program to provide temporary financial housing assistance to individuals with a substance use disorder who have no supportive housing options when the individual is transitioning out of a residential treatment setting and into recovery or receiving treatment for the individual's substance use disorder.

Section 16 of the bill also creates the recovery support services grant program for the purpose of providing recovery-oriented services to individuals with a substance use and co-occurring mental health disorder.

Section 17 of the bill continues the appropriation to the maternal and child health pilot program.

Section 18 of the bill continues the program to increase public awareness concerning the safe use, storage, and disposal of opioids and the availability of nalaxone and other drugs used to block the effects of an opioid overdose.

Section 19 of the bill continues the harm reduction grant program and the maternal and child health pilot program.

Section 20 of the bill appropriates money to various state departments for certain programs.

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

2 **SECTION 1. Short title.** The short title of this act is the
3 "Behavioral Health Recovery Act of 2021".

4 **SECTION 2.** In Colorado Revised Statutes, 12-290-111, **repeal**
5 (3)(b) as follows:

1 **12-290-111. Prescriptions - requirement to advise patients -**
2 **limit on opioid prescriptions.** (3) (b) ~~This subsection (3) is repealed,~~
3 ~~effective September 1, 2021.~~

4 **SECTION 3.** In Colorado Revised Statutes, 23-21-808, **amend**
5 (1) as follows:

6 **23-21-808. Funding for pilot program.** (1) (a) For the ~~2019-20~~
7 ~~and~~ 2020-21 THROUGH 2022-23 state fiscal years, the general assembly
8 shall annually appropriate two million ~~five hundred thousand~~ dollars per
9 fiscal year from the marijuana tax cash fund created in section
10 39-28.8-501 to the board of regents of the university of Colorado, for
11 allocation to the center to implement and administer the MAT expansion
12 pilot program. The center may use a portion of the money annually
13 appropriated for the pilot program to pay the direct and indirect costs that
14 the center incurs to administer the pilot program, as well as to provide
15 consulting services to and oversight of grant recipients, for data collection
16 and analysis, evaluation of the pilot program, and program reporting.

17 (b) If any unexpended or uncommitted money appropriated for a
18 fiscal year remains at the end of that fiscal year, the center may expend
19 the money in accordance with this section in the succeeding fiscal year.
20 Any unexpended or uncommitted money remaining at the end of the
21 ~~2020-21~~ 2022-23 fiscal year reverts to the marijuana tax cash fund.

22 **SECTION 4.** In Colorado Revised Statutes, **amend** 23-21-809 as
23 follows:

24 **23-21-809. Repeal of part.** This part 8 is repealed, effective June
25 30, ~~2022~~ 2023.

26 **SECTION 5.** In Colorado Revised Statutes, **add** 23-31-707 as
27 follows:

1 **23-31-707. Colorado AgrAbility project - extension program**

2 **- creation - appropriation - legislative declaration.** (1) THE GENERAL
3 ASSEMBLY FINDS THAT COLORADO SHOULD EXPAND THE COLORADO
4 AGRABILITY PROJECT BY PROVIDING FUNDING FOR THE PROJECT'S RURAL
5 REHABILITATION SPECIALISTS WITH THE GOAL OF INFORMING, EDUCATING,
6 AND ASSISTING FARMERS, RANCHERS, AND FARM WORKERS WITH
7 DISABILITIES AND THEIR FAMILIES SO THEY CAN CONTINUE TO HAVE
8 SUCCESSFUL CAREERS IN AGRICULTURE.

9 (2) COLORADO STATE UNIVERSITY SHALL IMPLEMENT AND
10 ADMINISTER THE COLORADO AGRABILITY PROJECT, REFERRED TO IN THIS
11 SECTION AS THE "AGRABILITY PROJECT", IN COOPERATION WITH THE
12 FEDERAL GOVERNMENT PURSUANT TO THE "FOOD, AGRICULTURE,
13 CONSERVATION, AND TRADE ACT OF 1990", AS AMENDED. COLORADO
14 STATE UNIVERSITY SHALL EXPAND THE AGRABILITY PROJECT BY
15 PROVIDING RURAL REHABILITATION SPECIALISTS WITH FUNDING TO
16 PROVIDE INFORMATION, SERVICES, AND RESEARCH-BASED,
17 STRESS-ASSISTANCE INFORMATION, EDUCATION, SUICIDE PREVENTION
18 TRAINING, AND REFERRALS TO BEHAVIORAL HEALTH-CARE SERVICES TO
19 FARMERS, RANCHERS, AGRICULTURAL WORKERS, AND THEIR FAMILIES TO
20 MITIGATE INCIDENCES OF HARMFUL RESPONSES TO STRESS EXPERIENCED
21 BY THESE INDIVIDUALS.

22 (3) FOR THE 2021-22 FISCAL YEAR, AND EACH FISCAL YEAR
23 THEREAFTER, THE GENERAL ASSEMBLY SHALL ANNUALLY APPROPRIATE
24 NINE HUNDRED THOUSAND DOLLARS TO COLORADO STATE UNIVERSITY
25 FOR THE AGRABILITY PROJECT TO EXPAND BEHAVIORAL HEALTH
26 EDUCATION AND SERVICES PURSUANT TO SUBSECTION (2) OF THIS SECTION.

27 (4) NOTHING IN THIS SECTION PREVENTS COLORADO STATE

1 UNIVERSITY FROM COMPLYING WITH FEDERAL REQUIREMENTS FOR THE
2 AGRABILITY PROJECT IN ORDER FOR COLORADO STATE UNIVERSITY TO
3 QUALIFY FOR FEDERAL FUNDS UNDER THE FEDERAL "FOOD, AGRICULTURE,
4 CONSERVATION, AND TRADE ACT OF 1990", AS AMENDED.

5 **SECTION 6.** In Colorado Revised Statutes, **recreate and**
6 **reenact, with amendments, 25-1-521** as follows:

7 **25-1-521. State department - local public health agencies -**
8 **address behavioral health disorders - appropriation.** FOR THE 2021-22
9 FISCAL YEAR, AND EACH FISCAL YEAR THEREAFTER, THE GENERAL
10 ASSEMBLY SHALL APPROPRIATE TWO MILLION DOLLARS TO THE STATE
11 DEPARTMENT TO ADDRESS BEHAVIORAL HEALTH DISORDERS THROUGH
12 PUBLIC HEALTH PREVENTION AND INTERVENTION AND TO WORK WITH
13 COMMUNITY PARTNERS, INCLUDING COUNTY AND DISTRICT PUBLIC HEALTH
14 AGENCIES, TO ADDRESS BEHAVIORAL HEALTH, MENTAL HEALTH, AND
15 SUBSTANCE USE PRIORITIES THROUGHOUT THE STATE. THE STATE
16 DEPARTMENT MAY USE THE MONEY FOR DATA COLLECTION, ANALYSIS,
17 AND DISSEMINATION ACTIVITIES RELATED TO BEHAVIORAL HEALTH
18 DISORDERS AT THE STATE AND LOCAL LEVELS, INCLUDING COMMUNITY
19 HEALTH ASSESSMENTS AND IMPROVEMENT PLANNING. THE STATE
20 DEPARTMENT MAY USE UP TO FIVE HUNDRED THOUSAND DOLLARS OF THE
21 MONEY FOR ADMINISTRATIVE COSTS AND OTHER ACTIVITIES RELATED TO
22 THE PURPOSES OF THIS SECTION.

23 **SECTION 7.** In Colorado Revised Statutes, 25-20.5-1102,
24 **amend (3); and repeal (4)** as follows:

25 **25-20.5-1102. Harm reduction grant program cash fund -**
26 **creation.** (3) ~~Subject to annual appropriation by the general assembly,~~
27 ~~the department may expend money from the fund for the purposes of this~~

1 ~~part 11~~ MONEY IN THE FUND IS CONTINUOUSLY APPROPRIATED TO THE
2 DEPARTMENT FOR THE IMPLEMENTATION OF THIS PART 11.

3 (4) ~~The state treasurer shall transfer all unexpended and~~
4 ~~unencumbered money in the fund on September 1, 2024, to the general~~
5 ~~fund.~~

6 **SECTION 8.** In Colorado Revised Statutes, 25.5-5-325, **add** (4)
7 as follows:

8 **25.5-5-325. Residential and inpatient substance use disorder**
9 **treatment - medical detoxification services - federal approval -**
10 **performance review report.** (4) (a) A MANAGED CARE ORGANIZATION
11 SHALL NOTIFY A PERSON'S PROVIDER OF APPROVAL OF AUTHORIZATION OF
12 SERVICES NO LATER THAN TWENTY-FOUR HOURS AFTER THE SUBMISSION
13 OF THE REQUEST FOR SERVICES.

14 (b) (I) THE INITIAL AUTHORIZATION FOR INTENSIVE RESIDENTIAL
15 TREATMENT MUST BE NO LESS THAN SEVEN DAYS, AND THE INITIAL
16 AUTHORIZATION FOR TRANSITIONAL RESIDENTIAL TREATMENT MUST BE NO
17 LESS THAN FOURTEEN DAYS.

18 (II) IF A MANAGED CARE ORGANIZATION DOES NOT HAVE
19 SUFFICIENT DOCUMENTATION FROM THE PERSON'S PROVIDER, THE INITIAL
20 AUTHORIZATION MAY BE LESS THAN REQUIRED PURSUANT TO SUBSECTION
21 (4)(b)(I) OF THIS SECTION.

22 (c) A MANAGED CARE ORGANIZATION SHALL CONTINUALLY
23 AUTHORIZE SERVICES IN ACCORDANCE WITH THE PERSON'S PROVIDER IF
24 THE MANAGED CARE ORGANIZATION'S DETERMINATION CONFLICTS WITH
25 THE PROVIDER'S RECOMMENDATION. THE MANAGED CARE ORGANIZATION
26 MAY REQUEST ADDITIONAL INFORMATION ON THE RATIONALE FOR
27 CONTINUED TREATMENT.

1 (d) A MANAGED CARE ORGANIZATION SHALL PROVIDE SPECIFIC
2 JUSTIFICATION FOR EACH DENIAL OF CONTINUED AUTHORIZATION FOR ALL
3 SIX DIMENSIONS IN THE MOST RECENT EDITION OF "THE ASAM CRITERIA
4 FOR ADDICTIVE, SUBSTANCE-RELATED, AND CO-OCCURRING
5 CONDITIONS".

6 **SECTION 9.** In Colorado Revised Statutes, **add 25.5-5-327** as
7 follows:

8 **25.5-5-327. Screening for perinatal mood and anxiety**
9 **disorder.** (1) FOR EACH CHILD ENROLLED IN THE MEDICAL ASSISTANCE
10 PROGRAM IN THE STATE, THE PROGRAM MUST INCLUDE SCREENING FOR
11 PERINATAL MOOD AND ANXIETY DISORDERS IN ACCORDANCE WITH THE
12 HEALTH RESOURCES AND SERVICES ADMINISTRATION GUIDELINES.

13 (2) THE SCREENING MUST BE MADE AVAILABLE TO ANY PERSON,
14 REGARDLESS OF WHETHER THE PERSON IS ENROLLED IN THE MEDICAL
15 ASSISTANCE PROGRAM, SO LONG AS THE PERSON'S CHILD IS ENROLLED IN
16 THE MEDICAL ASSISTANCE PROGRAM.

17 **SECTION 10.** In Colorado Revised Statutes, **add 26-6.5-406** and
18 **26-6.5-407** as follows:

19 **26-6.5-406. Data collection - reporting.** (1) ON OR BEFORE JULY
20 1, 2023, THE DEPARTMENT SHALL DEVELOP A STATEWIDE DATA
21 COLLECTION AND INFORMATION SYSTEM TO ANALYZE IMPLEMENTATION
22 DATA AND SELECTED OUTCOMES TO IDENTIFY AREAS FOR IMPROVEMENT,
23 PROMOTE ACCOUNTABILITY, AND PROVIDE INSIGHTS TO CONTINUALLY
24 IMPROVE CHILD AND PROGRAM OUTCOMES. THE DATA COLLECTION AND
25 INFORMATION SYSTEM, AND ANY RELATED PROCESSES, MUST PLACE THE
26 LEAST BURDEN POSSIBLE ON THE MENTAL HEALTH CONSULTANTS IN THE
27 PROGRAM. IN SELECTING THE IMPLEMENTATION DATA AND OUTCOMES,

1 THE DEPARTMENT SHALL INCORPORATE THE VARIABILITY ACROSS DIVERSE
2 SETTINGS AND POPULATIONS.

3 (2) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), THE
4 DEPARTMENT SHALL, BEGINNING IN 2023 AND CONTINUING EVERY TWO
5 YEARS THEREAFTER, IN ITS PRESENTATION TO THE JOINT BUDGET
6 COMMITTEE OF THE GENERAL ASSEMBLY, AS WELL AS ITS PRESENTATION
7 TO ITS COMMITTEE OF REFERENCE AT THE HEARING HELD PURSUANT TO
8 SECTION 2-7-203 (2)(a) OF THE "STATE MEASUREMENT FOR
9 ACCOUNTABLE, RESPONSIVE, AND TRANSPARENT (SMART)
10 GOVERNMENT ACT" IN JANUARY 2027, REPORT ON THE FOLLOWING
11 ISSUES:

12 (a) A GAP ANALYSIS OF THE AVAILABLE NUMBER OF MENTAL
13 HEALTH CONSULTANTS AND THE UNMET NEED IN THE TYPE OF SETTINGS IN
14 WHICH MENTAL HEALTH CONSULTANTS PRACTICE IN ACCORDANCE WITH
15 THE PROGRAM; AND

16 (b) IDENTIFIED ADJUSTMENTS TO BETTER MEET MENTAL HEALTH
17 CONSULTANT CASELOAD, WITH THE DEPARTMENT IDENTIFYING A TARGET
18 NUMBER OF NEEDED CONSULTANTS IN THE PROGRAM.

19 (3) ON OR BEFORE AUGUST 1, 2026, THE DEPARTMENT SHALL
20 CONTRACT WITH AN INDEPENDENT THIRD PARTY TO CONDUCT AN
21 EVALUATION, USING STANDARD EVALUATION MEASURES, OF THE
22 PROGRAM AND ITS IMPACT ON EARLY CHILDHOOD AND PROGRAM
23 OUTCOMES ACROSS THE STATE. THE DEPARTMENT SHALL PRESENT THE
24 RESULTS OF THE EVALUATION AS PART OF ITS PRESENTATION TO ITS
25 COMMITTEE OF REFERENCE AT THE HEARING HELD PURSUANT TO SECTION
26 2-7-203 (2)(a) OF THE "STATE MEASUREMENT FOR ACCOUNTABLE,
27 RESPONSIVE, AND TRANSPARENT (SMART) GOVERNMENT ACT" IN

1 JANUARY 2027.

2 **26-6.5-407. Funding support.** THE DEPARTMENT AND THE
3 DEPARTMENT OF HEALTH CARE POLICY AND FINANCING SHALL EXPLORE
4 FUNDING OPTIONS FOR THE PROGRAM AND IMPROVING ACCESS TO MENTAL
5 HEALTH CONSULTANTS, INCLUDING ACCESS TO VARIOUS FUNDING
6 SOURCES, AS WELL AS THE CHILDREN'S BASIC HEALTH PLAN, ARTICLE 8 OF
7 TITLE 25.5, AND THE STATE MEDICAL ASSISTANCE PROGRAM, ARTICLES 4
8 TO 6 OF TITLE 25.5. ON OR BEFORE JANUARY 1, 2023, THE DEPARTMENTS
9 SHALL REPORT ON ANY IDENTIFIED FUNDING OPTIONS TO THE JOINT
10 BUDGET COMMITTEE OF THE GENERAL ASSEMBLY AS NECESSARY
11 THEREAFTER, IN ACCORDANCE WITH SECTION 24-1-136.

12 **SECTION 11.** In Colorado Revised Statutes, **add** 27-60-108 as
13 follows:

14 **27-60-108. Behavioral health-care services for rural and**
15 **agricultural communities - vouchers - contract - appropriation.**

16 (1) NO LATER THAN ONE HUNDRED EIGHTY DAYS AFTER THE EFFECTIVE
17 DATE OF THIS SECTION, THE STATE DEPARTMENT, IN COLLABORATION WITH
18 THE DEPARTMENT OF AGRICULTURE, SHALL CONTRACT WITH A NONPROFIT
19 ORGANIZATION PRIMARILY FOCUSED ON SERVING AGRICULTURAL AND
20 RURAL COMMUNITIES IN COLORADO, AS IDENTIFIED BY THE STATE
21 DEPARTMENT, TO PROVIDE VOUCHERS TO INDIVIDUALS LIVING IN RURAL
22 AND FRONTIER COMMUNITIES IN NEED OF BEHAVIORAL HEALTH-CARE
23 SERVICES.

24 (2) THE NONPROFIT ORGANIZATION AWARDED THE CONTRACT
25 PURSUANT TO SUBSECTION (1) OF THIS SECTION SHALL:

26 (a) CONTRACT WITH LICENSED BEHAVIORAL HEALTH-CARE
27 PROVIDERS THAT HAVE COMPLETED TRAINING ON CULTURAL

1 COMPETENCIES SPECIFIC TO THE COLORADO AGRICULTURAL AND RURAL
2 COMMUNITY LIFESTYLE TO PROVIDE DIRECT BEHAVIORAL HEALTH-CARE
3 SERVICES TO FARMERS, RANCHERS, FARM AND RANCH WORKERS AND
4 THEIR FAMILIES, AND OTHER UNDERSERVED POPULATIONS IN RURAL AND
5 AGRICULTURAL COMMUNITIES. AT LEAST SIXTY PERCENT OF THE MONEY
6 RECEIVED PURSUANT TO THE CONTRACT MUST BE USED FOR DIRECT
7 BEHAVIORAL HEALTH-CARE SERVICES DESCRIBED IN THIS SUBSECTION
8 (2)(a).

9 (b) DEVELOP TRAINING MATERIALS AND TRAIN BEHAVIORAL
10 HEALTH-CARE PROVIDERS ON CULTURAL COMPETENCIES SPECIFIC TO THE
11 COLORADO AGRICULTURAL AND RURAL COMMUNITY LIFESTYLE.

12 (3) FOR THE 2021-22 FISCAL YEAR, AND EACH FISCAL YEAR
13 THEREAFTER, THE GENERAL ASSEMBLY SHALL ANNUALLY APPROPRIATE
14 FIFTY THOUSAND DOLLARS FOR THE CONTRACT AWARDED PURSUANT TO
15 SUBSECTION (1) OF THIS SECTION.

16 **SECTION 12.** In Colorado Revised Statutes, 27-80-118, **recreate**
17 **and reenact, with amendments,** (4)(c); and **amend** (5) as follows:

18 **27-80-118. Center for research into substance use disorder**
19 **prevention, treatment, and recovery support strategies - established**
20 **- appropriation - legislative declaration.** (4) (c) FOR THE 2021-22
21 STATE FISCAL YEAR, AND EACH FISCAL YEAR THEREAFTER, THE GENERAL
22 ASSEMBLY SHALL APPROPRIATE SEVEN HUNDRED FIFTY THOUSAND
23 DOLLARS TO THE CENTER FROM THE MARIJUANA TAX CASH FUND CREATED
24 IN SECTION 39-28.8-501 FOR THE PURPOSES OF THIS SUBSECTION (4).

25 (5) (a) The center shall develop and implement a program to
26 increase public awareness concerning the safe use, storage, and disposal
27 of opioids and the availability of naloxone and other drugs used to block

1 the effects of an opioid overdose. THE CENTER SHALL ENGAGE IN
2 COMMUNITY ENGAGEMENT ACTIVITIES TO ADDRESS SUBSTANCE USE
3 PREVENTION, HARM REDUCTION, CRIMINAL JUSTICE SYSTEM RESPONSE,
4 TREATMENT, AND RECOVERY.

5 (b) ~~(I) (A) For the 2019-20 2021-22 state fiscal year, the general~~
6 ~~assembly shall appropriate seven hundred fifty thousand dollars to the~~
7 ~~center from the marijuana tax cash fund created in section 39-28.8-501~~
8 ~~(1) for the purposes of this subsection (5).~~

9 ~~(B) For the 2020-21 2021-22 state fiscal year, and each state fiscal~~
10 ~~year thereafter, through the 2023-24 state fiscal year, the general~~
11 ~~assembly shall appropriate two hundred fifty thousand dollars per year to~~
12 ~~the center from the marijuana tax cash fund created in section~~
13 ~~39-28.8-501 (1) for the purposes of this subsection (5).~~

14 ~~(H) This subsection (5) is repealed, effective September 1, 2024.~~
15 ~~Before its repeal, the program created in this subsection (5) is scheduled~~
16 ~~for review pursuant to section 24-34-104.~~

17 **SECTION 13.** In Colorado Revised Statutes, 27-80-120, **repeal**
18 **(7) as follows:**

19 **27-80-120. Building substance use disorder treatment capacity**
20 **in underserved communities - grant program. (7) This section is**
21 **repealed, effective July 1, 2024.**

22 **SECTION 14.** In Colorado Revised Statutes, **amend** 27-80-121
23 **as follows:**

24 **27-80-121. Perinatal substance use data linkage project -**
25 **center for research into substance use disorder prevention,**
26 **treatment, and recovery support strategies - report. (1) The center for**
27 **research into substance use disorder prevention, treatment, and recovery**

1 support strategies established in section 27-80-118, referred to in this
2 section as the "center", in partnership with an institution of higher
3 education and the state substance abuse trend and response task force
4 established in section 18-18.5-103, may conduct a statewide perinatal
5 substance use data linkage project that uses ongoing collection, analysis,
6 interpretation, and dissemination of data for the planning,
7 implementation, and evaluation of public health actions to improve
8 outcomes for families impacted by substance use during pregnancy. The
9 data linkage project ~~may consider state-administered data sources that~~
10 ~~include~~ SHALL UTILIZE DATA FROM THE MEDICAL ASSISTANCE PROGRAM,
11 ARTICLES 4 TO 6 OF TITLE 25.5; THE ELECTRONIC PRESCRIPTION DRUG
12 MONITORING PROGRAM CREATED IN PART 4 OF ARTICLE 280 OF TITLE 12;
13 THE COLORADO TRAILS SYSTEM, AS DEFINED IN SECTION 16-20.5-102
14 (10); THE COLORADO IMMUNIZATION INFORMATION SYSTEM, CREATED
15 PURSUANT TO SECTION 25-4-2401, ET SEQ.; THE COLORADO CHILD CARE
16 ASSISTANCE PROGRAM, CREATED IN PART 8 OF ARTICLE 2 OF TITLE 26; THE
17 OFFICE OF BEHAVIORAL HEALTH IN THE DEPARTMENT OF HUMAN SERVICES;
18 AND BIRTH AND DEATH RECORDS TO EXAMINE THE FOLLOWING:

19 (a) Health-care MORTALITY utilization by pregnant and postpartum
20 women with substance use disorders and their infants COMPARED TO THE
21 GENERAL POPULATION;

22 (b) Human service, ~~and~~ public health program utilization, AND
23 SUBSTANCE USE TREATMENT by pregnant and postpartum women with
24 substance use disorders and their infants;

25 (c) Health-care, human service, and public health program
26 outcomes among pregnant and postpartum women with substance use
27 disorders and their infants; and

1 (d) Costs associated with health-care, human service, and public
2 health program provisions for pregnant and postpartum women with
3 substance use disorders and their infants.

4 (2) The data linkage project shall use vital records to establish
5 maternal and infant dyads beginning at the birth hospitalization and
6 retrospectively link the prenatal period and prospectively link the first
7 year postpartum.

8 ~~(2.5)~~ (3) The ~~statewide perinatal substance use~~ data linkage
9 project may conduct ongoing research related to the incidence of perinatal
10 substance exposure or related infant and family health and human service
11 outcomes based on the standards specified in sections 19-1-103
12 (1)(a)(VII) and 19-3-102 (1)(g) for determining child abuse or neglect or
13 whether a child is neglected or dependent.

14 (4) THE DATA LINKAGE PROJECT MAY CONNECT ADDITIONAL STATE
15 AND NON-STATE DATA SOURCES FOR THE PURPOSE OF IMPROVING
16 POPULATION-LEVEL ESTIMATES OF PERINATAL SUBSTANCE EXPOSURE AND
17 EXAMINING SYSTEM UTILIZATION AND OUTCOMES.

18 ~~(3)~~ (5) The governor's office of information technology ~~will~~
19 SHALL obtain data and perform secure linkage and anonymization on
20 behalf of the state.

21 ~~(4)~~ (6) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), on or
22 before January 1, 2021, AND ANNUALLY THEREAFTER THROUGHOUT THE
23 DURATION OF THE DATA LINKAGE PROJECT, the center shall report progress
24 on the data linkage project and the results, if available, to the health and
25 insurance committee and the public health care and human services
26 committee of the house of representatives and the health and human
27 services committee of the senate or their successor committees.

1 **SECTION 15.** In Colorado Revised Statutes, **repeal and reenact,**
2 **with amendments,** 27-80-122 as follows:

3 **27-80-122. Recovery residence certifying body - competitive**
4 **selection process - appropriation.** (1) NO LATER THAN SEPTEMBER 1,
5 2021, THE OFFICE OF BEHAVIORAL HEALTH SHALL USE A COMPETITIVE
6 SELECTION PROCESS PURSUANT TO THE "PROCUREMENT CODE", ARTICLES
7 101 TO 112 OF TITLE 24, TO SELECT A RECOVERY RESIDENCE CERTIFYING
8 BODY TO:

9 (a) CERTIFY RECOVERY RESIDENCES PURSUANT TO SECTION
10 25-1.5-108.5; AND

11 (b) EDUCATE AND TRAIN RECOVERY RESIDENCE OWNERS AND
12 RECOVERY RESIDENCE STAFF ON INDUSTRY BEST PRACTICES.

13 (2) FOR THE 2021-22 STATE FISCAL YEAR AND EACH STATE FISCAL
14 YEAR THEREAFTER, THE GENERAL ASSEMBLY SHALL APPROPRIATE TWO
15 HUNDRED THOUSAND DOLLARS TO THE OFFICE OF BEHAVIORAL HEALTH
16 FOR THE PURPOSE OF IMPLEMENTING THIS SECTION.

17 **SECTION 16.** In Colorado Revised Statutes, **add** 27-80-124 and
18 27-80-125 as follows:

19 **27-80-124. Housing assistance for individuals with a substance**
20 **use disorder - rules - report - appropriation.** (1) THE OFFICE OF
21 BEHAVIORAL HEALTH SHALL ESTABLISH A PROGRAM TO PROVIDE
22 TEMPORARY FINANCIAL HOUSING ASSISTANCE TO INDIVIDUALS WITH A
23 SUBSTANCE USE DISORDER WHO HAVE NO SUPPORTIVE HOUSING OPTIONS
24 WHEN THE INDIVIDUAL IS:

25 (a) TRANSITIONING OUT OF A RESIDENTIAL TREATMENT SETTING
26 AND INTO RECOVERY; OR

27 (b) RECEIVING TREATMENT FOR THE INDIVIDUAL'S SUBSTANCE USE

1 DISORDER.

2 (2) THE OFFICE OF BEHAVIORAL HEALTH SHALL PROMULGATE
3 RULES ESTABLISHING THE MAXIMUM AMOUNT OF TEMPORARY FINANCIAL
4 ASSISTANCE THAT AN INDIVIDUAL CAN RECEIVE AND THE MAXIMUM
5 AMOUNT OF TIME FOR WHICH AN INDIVIDUAL MAY RECEIVE ASSISTANCE.
6 RULES PROMULGATED PURSUANT TO THIS SUBSECTION (2) RELATED TO
7 THE TIME FOR WHICH AN INDIVIDUAL MAY RECEIVE ASSISTANCE MUST BE
8 CLINICALLY BASED.

9 (3) IN AWARDING TEMPORARY FINANCIAL HOUSING ASSISTANCE IN
10 ACCORDANCE WITH THIS SECTION, THE OFFICE OF BEHAVIORAL HEALTH
11 SHALL PRIORITIZE FUNDING FOR INDIVIDUALS ENTERING INTO A RECOVERY
12 RESIDENCE, AS DEFINED IN SECTION 25-1.5-108.5 (1)(a).

13 (4) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), BY
14 FEBRUARY 1, 2022, AND BY FEBRUARY 1 EACH YEAR THEREAFTER, THE
15 OFFICE OF BEHAVIORAL HEALTH SHALL SUBMIT A REPORT DETAILING THE
16 AMOUNT OF HOUSING ASSISTANCE PROVIDED IN THE PRIOR YEAR, THE
17 NUMBER OF INDIVIDUALS AND THE ENTITIES THAT RECEIVED THE HOUSING
18 ASSISTANCE, AND THE DURATION OF HOUSING ASSISTANCE EACH
19 INDIVIDUAL OR ENTITY RECEIVED TO THE HEALTH AND HUMAN SERVICES
20 COMMITTEE OF THE SENATE, THE HEALTH AND INSURANCE AND THE
21 PUBLIC AND BEHAVIORAL HEALTH AND HUMAN SERVICES COMMITTEES OF
22 THE HOUSE OF REPRESENTATIVES, AND THE OPIOID AND OTHER SUBSTANCE
23 USE DISORDERS STUDY COMMITTEE CREATED IN SECTION 10-22.3-101, OR
24 ANY SUCCESSOR COMMITTEES.

25 (5) FOR THE 2021-22 STATE FISCAL YEAR AND EACH STATE FISCAL
26 YEAR THEREAFTER, THE GENERAL ASSEMBLY SHALL APPROPRIATE FOUR
27 MILLION DOLLARS TO THE OFFICE OF BEHAVIORAL HEALTH FOR THE

1 PURPOSE OF THE HOUSING PROGRAM DESCRIBED IN THIS SECTION.

2 **27-80-125. Recovery support services grant program -**
3 **creation - eligibility - reporting requirements - appropriation - rules**
4 **- definitions.** (1) AS USED IN THIS SECTION, UNLESS THE CONTEXT

5 OTHERWISE REQUIRES:

6 (a) "GRANT PROGRAM" MEANS THE RECOVERY SUPPORT SERVICES
7 GRANT PROGRAM CREATED IN THIS SECTION.

8 (b) "RECOVERY COMMUNITY ORGANIZATION" MEANS AN
9 INDEPENDENT, NONPROFIT ORGANIZATION LED AND GOVERNED BY
10 REPRESENTATIVES OF LOCAL COMMUNITIES OF RECOVERY THAT ORGANIZE
11 RECOVERY-FOCUSED POLICY ADVOCACY ACTIVITIES, CARRY OUT
12 RECOVERY-FOCUSED COMMUNITY EDUCATION AND OUTREACH PROGRAMS,
13 OR PROVIDE PEER-RUN RECOVERY SUPPORT SERVICES.

14 (2) THERE IS CREATED IN THE OFFICE OF BEHAVIORAL HEALTH THE
15 RECOVERY SUPPORT SERVICES GRANT PROGRAM, REFERRED TO IN THIS
16 SECTION AS THE "GRANT PROGRAM", TO PROVIDE GRANTS TO RECOVERY
17 COMMUNITY ORGANIZATIONS FOR THE PURPOSE OF PROVIDING
18 RECOVERY-ORIENTED SERVICES TO INDIVIDUALS WITH A SUBSTANCE USE
19 AND CO-OCCURRING MENTAL HEALTH DISORDER.

20 (3) A RECOVERY COMMUNITY ORGANIZATION THAT RECEIVES A
21 GRANT FROM THE GRANT PROGRAM MAY USE THE MONEY TO:

22 (a) OFFER OPPORTUNITIES FOR INDIVIDUALS WITH A SUBSTANCE
23 USE AND CO-OCCURRING MENTAL HEALTH DISORDER IN RECOVERY TO
24 ENGAGE IN ACTIVITIES FOCUSED ON MENTAL OR PHYSICAL WELLNESS OR
25 COMMUNITY SERVICE;

26 (b) PROVIDE GUIDANCE TO INDIVIDUALS WITH A SUBSTANCE USE
27 AND CO-OCCURRING MENTAL HEALTH DISORDER AND THEIR FAMILY

1 MEMBERS ON NAVIGATING TREATMENT, SOCIAL SERVICE, AND RECOVERY
2 SUPPORT SYSTEMS;

3 (c) HELP INDIVIDUALS WITH A SUBSTANCE USE AND CO-OCCURRING
4 MENTAL HEALTH DISORDER TO CONNECT WITH RESOURCES NEEDED TO
5 INITIATE AND MAINTAIN RECOVERY AS OUTLINED BY THE FEDERAL
6 SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION'S
7 FOUR DIMENSIONS OF RECOVERY: HEALTH, HOME, COMMUNITY, AND
8 PURPOSE;

9 (d) ASSIST IN ESTABLISHING AND SUSTAINING A SOCIAL AND
10 PHYSICAL ENVIRONMENT SUPPORTIVE OF RECOVERY;

11 (e) PROVIDE LOCAL AND STATE RECOVERY RESOURCES TO
12 RECOVERY COMMUNITY ORGANIZATION PARTICIPANTS AND COMMUNITY
13 MEMBERS; AND

14 (f) PROVIDE RECOVERY SUPPORT SERVICES FOR CAREGIVERS AND
15 FAMILIES OF INDIVIDUALS RECOVERING FROM A SUBSTANCE USE AND
16 CO-OCCURRING MENTAL HEALTH DISORDER.

17 (4) THE OFFICE OF BEHAVIORAL HEALTH SHALL ADMINISTER THE
18 GRANT PROGRAM. SUBJECT TO AVAILABLE APPROPRIATIONS, THE OFFICE
19 SHALL DISBURSE GRANT MONEY APPROPRIATED PURSUANT TO SUBSECTION
20 (8) OF THIS SECTION TO EACH MANAGED SERVICE ORGANIZATION
21 DESIGNATED PURSUANT TO SECTION 27-80-107.

22 (5) THE OFFICE OF BEHAVIORAL HEALTH SHALL IMPLEMENT THE
23 GRANT PROGRAM IN ACCORDANCE WITH THIS SECTION. PURSUANT TO
24 ARTICLE 4 OF TITLE 24, THE OFFICE SHALL PROMULGATE RULES AS
25 NECESSARY TO IMPLEMENT THE GRANT PROGRAM.

26 (6) (a) TO RECEIVE A GRANT, A RECOVERY COMMUNITY
27 ORGANIZATION MUST SUBMIT AN APPLICATION TO THE APPLICABLE

1 MANAGED SERVICE ORGANIZATION IN ACCORDANCE WITH RULES
2 PROMULGATED BY THE OFFICE OF BEHAVIORAL HEALTH.

3 (b) EACH MANAGED SERVICE ORGANIZATION SHALL REVIEW THE
4 APPLICATIONS RECEIVED PURSUANT TO THIS SECTION. IN AWARDING
5 GRANTS, THE MANAGED SERVICE ORGANIZATION SHALL PRIORITIZE AN
6 APPLICANT WHOSE PROGRAM OUTLINES THE CAPACITY TO DELIVER
7 RECOVERY SUPPORT SERVICES TO MEET THE NEEDS OF DIVERSE RACIAL,
8 CULTURAL, INCOME, ABILITY, AND OTHER UNDERSERVED GROUPS.

9 (7) (a) ON OR BEFORE DECEMBER 1, 2022, AND ON OR BEFORE
10 DECEMBER 1 EACH YEAR THEREAFTER, EACH MANAGED SERVICE
11 ORGANIZATION THAT AWARDS GRANTS SHALL SUBMIT A REPORT TO THE
12 OFFICE OF BEHAVIORAL HEALTH. AT A MINIMUM, THE REPORT MUST
13 INCLUDE THE FOLLOWING INFORMATION:

14 (I) THE NUMBER OF COMMUNITY MEMBERS INVOLVED IN THE
15 RECOVERY COMMUNITY ORGANIZATION;

16 (II) A DETAILED DESCRIPTION OF THE ORGANIZATION'S ADVOCACY
17 EFFORTS;

18 (III) ANY COLLABORATIVE PROJECTS A RECOVERY COMMUNITY
19 ORGANIZATION HAS WITH OTHER RECOVERY COMMUNITY ORGANIZATIONS
20 ACROSS THE STATE; AND

21 (IV) ANY OTHER INFORMATION REQUIRED BY THE OFFICE OF
22 BEHAVIORAL HEALTH.

23 (b) ON OR BEFORE MARCH 1, 2022, AND ON OR BEFORE MARCH 1
24 EACH YEAR THEREAFTER FOR THE DURATION OF THE GRANT PROGRAM,
25 THE OFFICE OF BEHAVIORAL HEALTH SHALL SUBMIT A SUMMARIZED
26 REPORT ON THE GRANT PROGRAM TO THE HEALTH AND HUMAN SERVICES
27 COMMITTEE OF THE SENATE AND THE HEALTH AND INSURANCE AND THE

1 PUBLIC AND BEHAVIORAL HEALTH AND HUMAN SERVICES COMMITTEES OF
2 THE HOUSE OF REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, AND
3 TO THE OPIOID AND OTHER SUBSTANCE USE DISORDERS STUDY COMMITTEE
4 CREATED IN SECTION 10-22.3-101.

5 (c) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), THE
6 REPORTING REQUIREMENTS SET FORTH IN THIS SUBSECTION (7) CONTINUE
7 INDEFINITELY.

8 (8) FOR THE 2021-22 STATE FISCAL YEAR AND EACH STATE FISCAL
9 YEAR THEREAFTER, THE GENERAL ASSEMBLY SHALL APPROPRIATE ONE
10 MILLION SIX HUNDRED THOUSAND DOLLARS FROM THE GENERAL FUND TO
11 THE OFFICE OF BEHAVIORAL HEALTH TO IMPLEMENT THE GRANT PROGRAM.
12 THE OFFICE MAY USE A PORTION OF THE MONEY APPROPRIATED FOR THE
13 GRANT PROGRAM TO PAY THE DIRECT AND INDIRECT COSTS OF
14 ADMINISTERING THE GRANT PROGRAM.

15 **SECTION 17.** In Colorado Revised Statutes, 27-82-204, **amend**
16 (1) as follows:

17 **27-82-204. Funding for pilot program.** (1) (a) ~~For the 2019-20~~
18 ~~through 2021-22 fiscal years,~~ FOR THE 2021-22 FISCAL YEAR, AND EACH
19 FISCAL YEAR THEREAFTER, the general assembly shall appropriate money
20 ~~each fiscal year~~ from the marijuana tax cash fund created in section
21 39-28.8-501 (1) to the department for allocation to the office of
22 behavioral health to implement the pilot program. The office of
23 behavioral health may use a portion of the money annually appropriated
24 for the pilot program to pay the direct and indirect costs incurred to
25 administer the pilot program.

26 (b) If any unexpended or uncommitted money appropriated for ~~the~~
27 ~~2019-20 or 2020-21~~ A fiscal year remains at the end of ~~either~~ THAT fiscal

1 year, the office of behavioral health may expend the money in accordance
2 with this section in the succeeding fiscal year without further
3 appropriation. ~~Any unexpended or uncommitted money remaining at the~~
4 ~~end of the 2021-22 fiscal year reverts to the marijuana tax cash fund~~
5 ~~created in section 39-28.8-501 (1).~~

6 **SECTION 18.** In Colorado Revised Statutes, 24-34-104, **repeal**
7 (25)(a)(XX) as follows:

8 **24-34-104. General assembly review of regulatory agencies**
9 **and functions for repeal, continuation, or reestablishment - legislative**
10 **declaration - repeal.** (25) (a) The following agencies, functions, or both,
11 are scheduled for repeal on September 1, 2024:

12 (XX) ~~The program to increase public awareness concerning the~~
13 ~~safe use, storage, and disposal of opioids and the availability of naloxone~~
14 ~~and other drugs used to block the effects of an opioid overdose developed~~
15 ~~pursuant to section 27-80-118 (5);~~

16 **SECTION 19.** In Colorado Revised Statutes, **repeal**
17 25-20.5-1104 and 27-82-205.

18 **SECTION 20. Appropriation.** (1) For the 2021-22 state fiscal
19 year, \$500,000 is appropriated to the department of education. This
20 appropriation is from the general fund. The department may use this
21 appropriation for the behavioral health care professional matching grant
22 program created in section 22-96-103, C.R.S.

23 (2) For the 2021-22 state fiscal year, \$2,500,000 is appropriated
24 to the department of education. This appropriation is from the marijuana
25 tax cash fund created in section 39-28.8-501 (1), C.R.S. The department
26 may use this appropriation for the K-5 social and emotional health pilot
27 program created in section 22-102-104, C.R.S.

1 (3) For the 2021-22 state fiscal year, the following amounts are
2 appropriated to the department of human services for use by the office of
3 behavioral health. The appropriations are from the general fund. The
4 office may use the appropriations for the following purposes:

5 (a) \$3,530,000 directed to the managed service organizations for
6 substance use disorder treatment and recovery providers for unanticipated
7 expenses related to COVID-19;

8 (b) \$3,250,000 for community mental health centers for
9 unanticipated expenses related to COVID-19;

10 (c) \$500,000 directed to the managed service organizations for
11 substance use screening, brief intervention services, referral to treatment,
12 training, and supports;

13 (d) \$2,000,000 for services provided to school-aged children and
14 parents by community mental health center school-based clinicians and
15 prevention specialists;

16 (e) \$3,800,000 for co-responder programs; Colorado crisis system
17 services; housing assistance, including recovery residences and
18 momentum and transition specialist programs; and treatment for rural
19 communities;

20 (f) \$2,000,000 for behavioral health and substance use disorder
21 treatment for children, youth, and their families;

22 (g) \$250,000 for treatment and detoxification programs;

23 (h) \$500,000 directed to community transition services for
24 guardianship services for individuals transitioning out of mental health
25 institutes; and

26 (i) \$75,000 for the perinatal substance use data linkage project
27 created pursuant to section 27-80-121, C.R.S.

1 (4) For the 2021-22 state fiscal year, the following amounts are
2 appropriated to the department of public health and environment. The
3 appropriations are from the general fund. The department may use the
4 appropriations for the following purposes:

5 (a) \$250,000 for allocation to mental health first aid for in-person
6 and virtual trainings;

7 (b) \$1,150,000 for the opiate antagonist bulk purchase fund,
8 created in section 25-1.5-115, C.R.S., and school-based health centers, as
9 defined in section 25-20.5-502 (1), C.R.S.; and

10 (c) \$500,000 for the Colorado HIV and AIDS prevention grant
11 program created in section 25-4-1403, C.R.S.

12 (5) For the 2021-22 state fiscal year, \$500,000 is appropriated to
13 the department of human services. The appropriation is from the general
14 fund. The department may use this appropriation for the early childhood
15 mental health consultation program.

16 (6) For the 2021-22 state fiscal year, \$600,000 is appropriated to
17 the department of higher education for use by the regents of the university
18 of Colorado. The appropriation is from the general fund. The regents may
19 use this appropriation for allocation to the center for research into
20 substance use disorder prevention, treatment, and recovery support
21 strategies for education for health-care professionals, grant writing
22 assistance, and personal protective equipment and telehealth supplies for
23 the medication-assisted treatment expansion pilot program created in
24 section 23-21-804, C.R.S.

25 (7) For the 2021-22 state fiscal year, \$120,000 is appropriated to
26 the department of law. The appropriation is from the general fund. The
27 department may use this appropriation for the safe2tell program created

1 in section 24-31-606, C.R.S.

2 **SECTION 21. Safety clause.** The general assembly hereby finds,
3 determines, and declares that this act is necessary for the immediate
4 preservation of the public peace, health, or safety.