

First Regular Session  
Seventy-fourth General Assembly  
STATE OF COLORADO

INTRODUCED

LLS NO. 23-0853.01 Shelby Ross x4510

HOUSE BILL 23-1236

---

HOUSE SPONSORSHIP

Young and Amabile,

SENATE SPONSORSHIP

(None),

---

House Committees

Public & Behavioral Health & Human Services

Senate Committees

---

A BILL FOR AN ACT

101 CONCERNING IMPLEMENTATION UPDATES TO THE BEHAVIORAL  
102 HEALTH ADMINISTRATION.

---

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>.)*

**Sections 1, 5, 13, and 22** transfer administrative responsibilities from the behavioral health administration (BHA) to the department of human services (department).

**Section 2, 3, 11, and 12** transfer administrative responsibilities from the office of behavioral health (OBH) to the department.

**Sections 4, 10, 24, 26, and 27** transfer administrative

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
Capital letters or bold & italic numbers indicate new material to be added to existing law.  
Dashes through the words or numbers indicate deletions from existing law.

responsibilities from OBH to the BHA.

**Section 6** transfers administrative responsibilities from the department to the BHA.

**Section 7** repeals OBH as an office in the department.

**Section 8** requires the chief information officer of the office of information technology to invite the commissioner of the BHA to select a member to represent the BHA on the government data advisory board.

**Section 9** adds the commissioner of the BHA to the health equity commission.

**Section 15** states that the BHA is a health oversight agency charged with overseeing the behavioral health-care system in Colorado and discharging the BHA's duties.

**Section 16** authorizes the BHA to seek, accept, and expend gifts, grants, or donations for the purpose of administering any behavioral health program and service.

**Section 17** requires a behavioral health safety net provider to include services that address the necessary language and cultural barriers to serve communities of color and other underserved populations.

Current law requires the BHA to create one regional subcommittee of the advisory council for each behavioral health administrative services organization region. **Section 18** requires the BHA to create a regional subcommittee structure of the advisory council that is not limited by the behavioral health administrative services organization region.

To implement the care navigation program, **Section 19** requires the BHA to provide, directly or through contract, care navigation services and align the care navigation services with the care coordination infrastructure.

**Section 20** continuously appropriates money to the 988 crisis hotline cash fund.

Current law specifies the rights of a person detained by a certified peace officer or emergency medical services provider and transported to an outpatient mental health facility or facility designated by the commissioner of the BHA. **Section 21** expands the rights to any person detained whether or not the person is transported to an outpatient mental health facility or facility designated by the commissioner of the BHA.

---

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

2 **SECTION 1.** In Colorado Revised Statutes, 16-8.5-111, **amend**  
3 (2)(b)(II)(B) as follows:

4 **16-8.5-111. Procedure after determination of competency or**  
5 **incompetency.** (2) If the final determination made pursuant to section

1 16-8.5-103 is that the defendant is incompetent to proceed, the court has  
2 the following options:

3 (b) (II) (B) As a condition of bond, the court shall order that the  
4 restoration take place on an outpatient basis. Pursuant to section  
5 27-60-105, ~~the behavioral health administration~~ in the department is the  
6 entity responsible for the oversight of restoration education and  
7 coordination of all competency restoration services. As a condition of  
8 release for outpatient restoration services, the court may require pretrial  
9 services, if available, to work with the ~~behavioral health administration~~  
10 DEPARTMENT and the restoration services provider under contract with the  
11 ~~behavioral health administration~~ DEPARTMENT to assist in securing  
12 appropriate support and care management services, which may include  
13 housing resources. The individual agency responsible for providing  
14 outpatient restoration services for the defendant shall notify the court or  
15 other designated agency within twenty-one days if restoration services  
16 have not commenced.

17 **SECTION 2.** In Colorado Revised Statutes, 16-11.9-204, **amend**  
18 **as it exists until July 1, 2024,** (1)(f)(III) introductory portion as follows:

19 **16-11.9-204. Behavioral health court liaisons - duties and**  
20 **responsibilities - consultation and collaboration.** (1) A court liaison  
21 hired pursuant to this part 2 has the following duties and responsibilities:

22 (f) Identifying existing programs and resources that are already  
23 available in the community, including, but not limited to:

24 (III) Community mental health centers and other local community  
25 behavioral health providers that receive state funding through the ~~office~~  
26 ~~of behavioral health~~ DEPARTMENT OF HUMAN SERVICES for services such  
27 as:

1           **SECTION 3.** In Colorado Revised Statutes, 16-11.9-204, **amend**  
2 **as it becomes effective July 1, 2024,** (1)(f)(III) introductory portion as  
3 follows:

4           **16-11.9-204. Behavioral health court liaisons - duties and**  
5 **responsibilities - consultation and collaboration.** (1) A court liaison  
6 hired pursuant to this part 2 has the following duties and responsibilities:

7           (f) Identifying existing programs and resources that are already  
8 available in the community, including but not limited to:

9           (III) Behavioral health safety net providers and other local  
10 community behavioral health providers that receive state funding through  
11 the ~~office of behavioral health~~ DEPARTMENT OF HUMAN SERVICES for  
12 services such as:

13           **SECTION 4.** In Colorado Revised Statutes, 16-13-311, **amend**  
14 (3)(a)(VII)(B) as follows:

15           **16-13-311. Disposition of seized personal property.** (3) (a) If  
16 the prosecution prevails in the forfeiture action, the court shall order the  
17 property forfeited. Such order perfects the state's right and interest in and  
18 title to such property and relates back to the date when title to the property  
19 vested in the state pursuant to section 16-13-316. Except as otherwise  
20 provided in subsection (3)(c) of this section, the court shall also order  
21 such property to be sold at a public sale by the law enforcement agency  
22 in possession of the property in the manner provided for sales on  
23 execution, or in another commercially reasonable manner. Property  
24 forfeited pursuant to this section or proceeds therefrom must be  
25 distributed or applied in the following order:

26           (VII) The balance must be delivered, upon order of the court, as  
27 follows:

1 (B) Twenty-five percent to the behavioral health administrative  
2 services organization contracting with the ~~office of behavioral health~~  
3 ADMINISTRATION in the department of human services serving the judicial  
4 district where the forfeiture proceeding was prosecuted to fund  
5 detoxification and substance use disorder treatment. Money appropriated  
6 to the behavioral health administrative services organization must be in  
7 addition to, and not be used to supplant, other funding appropriated to the  
8 ~~office of behavioral health~~ ADMINISTRATION; and

9 **SECTION 5.** In Colorado Revised Statutes, 19-2.5-704, **amend**  
10 (2)(b) as follows:

11 **19-2.5-704. Procedure after determination of competency or**  
12 **incompetency.** (2) (b) Pursuant to section 27-60-105, ~~the behavioral~~  
13 ~~health administration~~ in the department of human services is the entity  
14 responsible for the oversight of restoration education and coordination of  
15 services necessary to competency restoration.

16 **SECTION 6.** In Colorado Revised Statutes, 19-3-304.4, **amend**  
17 (1)(d)(I)(J) as follows:

18 **19-3-304.4. Pre-adolescent services task force - duties - report**  
19 **- repeal.** (1) (d) (I) The task force shall convene on or before August 1,  
20 2022. The appointing authorities shall appoint persons from throughout  
21 the state, persons with a disability, and persons who reflect the racial and  
22 ethnic diversity of the state. The task force consists of:

23 (J) A representative of the behavioral health administration with  
24 expertise concerning the development and operation of rapid crisis  
25 response teams, appointed by the ~~executive director of the department of~~  
26 ~~human services~~ COMMISSIONER OF THE BEHAVIORAL HEALTH  
27 ADMINISTRATION;

1           **SECTION 7.** In Colorado Revised Statutes, 24-1-120, **repeal**  
2 (6)(d) as follows:

3           **24-1-120. Department of human services - creation.** (6) The  
4 department consists of the following divisions, units, offices, and boards:

5           (d) ~~The office of behavioral health in the department of human~~  
6 ~~services created pursuant to article 80 of title 27. The office of behavioral~~  
7 ~~health is a **type 2** entity, as defined in section 24-1-105.~~

8           **SECTION 8.** In Colorado Revised Statutes, 24-37.5-702, **amend**  
9 (1)(c) as follows:

10           **24-37.5-702. Government data advisory board - created -**  
11 **duties - definitions.** (1) (c) (I) The remaining membership of the  
12 advisory board consists of persons from state agencies who are either  
13 experts in data or responsible for diverse aspects of data management  
14 within the member's respective department and who are selected by the  
15 head of the member's respective department to participate on the advisory  
16 board at the invitation of the chief information officer.

17           (II) THE CHIEF INFORMATION OFFICER SHALL INVITE THE  
18 COMMISSIONER OF THE BEHAVIORAL HEALTH ADMINISTRATION TO SELECT  
19 A MEMBER TO REPRESENT THE BEHAVIORAL HEALTH ADMINISTRATION ON  
20 THE ADVISORY BOARD.

21           **SECTION 9.** In Colorado Revised Statutes, 25-4-2206, **amend**  
22 (2)(a)(XII) and (2)(a)(XIII); and **add** (2)(a)(XIV) as follows:

23           **25-4-2206. Health equity commission - creation - repeal.**  
24 (2) (a) The commission consists of the following ~~twenty-two~~  
25 TWENTY-THREE members, who are as follows:

26           (XII) The executive director of the department of corrections, or  
27 the executive director's designee; and

1 (XIII) The executive director of the department of higher  
2 education, or the executive director's designee; AND

3 (XIV) THE COMMISSIONER OF THE BEHAVIORAL HEALTH  
4 ADMINISTRATION IN THE DEPARTMENT OF HUMAN SERVICES, OR THE  
5 COMMISSIONER'S DESIGNEE.

6 **SECTION 10.** In Colorado Revised Statutes, 25-4-2209, **amend**  
7 (1)(a) as follows:

8 **25-4-2209. Culturally relevant and affirming health-care**  
9 **training - health-care providers - grants - definitions.** (1) As used in  
10 this section:

11 (a) "Priority populations" means people experiencing  
12 homelessness; people involved with the criminal justice system; Black  
13 people, indigenous people, and people of color; American Indians and  
14 Alaska natives; veterans; people who are lesbian, gay, bisexual,  
15 transgender, queer, or questioning; people of disproportionately affected  
16 sexual orientations and gender identities; people who have AIDS or HIV;  
17 older adults; children and families; and people with disabilities, including  
18 people who are deaf and hard of hearing, people who are blind and  
19 deafblind, people with brain injuries, people with intellectual and  
20 developmental disabilities, people with other co-occurring disabilities;  
21 and other populations as deemed appropriate by the ~~office of~~ behavioral  
22 health ADMINISTRATION.

23 **SECTION 11.** In Colorado Revised Statutes, 25.5-5-325, **amend**  
24 (2)(b)(I) as follows:

25 **25.5-5-325. Residential and inpatient substance use disorder**  
26 **treatment - medical detoxification services - federal approval -**  
27 **performance review report.** (2) (b) Prior to seeking federal approval

1 pursuant to subsection (2)(a) of this section, the state department shall  
2 seek input from relevant stakeholders, including existing providers of  
3 substance use disorder treatment and medical detoxification services and  
4 behavioral health administrative services organizations. The state  
5 department shall seek input and involve stakeholders in decisions  
6 regarding:

7 (I) The coordination of benefits with behavioral health  
8 administrative services organizations and ~~the office of behavioral health~~  
9 ~~in~~ the department of human services;

10 **SECTION 12.** In Colorado Revised Statutes, 25.5-5-803, **amend**  
11 (1) as follows:

12 **25.5-5-803. High-fidelity wraparound services for children**  
13 **and youth - federal approval - reporting.** (1) Subject to available  
14 appropriations, the state department shall seek federal authorization from  
15 the federal centers for medicare and medicaid services to provide  
16 wraparound services for eligible children and youth who are at risk of  
17 out-of-home placement or in an out-of-home placement. Prior to seeking  
18 federal authorization, the state department shall seek input from relevant  
19 stakeholders including counties, managed care entities participating in the  
20 statewide managed care system, families of children and youth with  
21 behavioral health disorders, communities that have previously  
22 implemented wraparound services, mental health professionals, the  
23 behavioral health administration and ~~the office of behavioral health~~  
24 in the department of human services, and other relevant departments. The state  
25 department shall consider tiered care coordination as an approach when  
26 developing the wraparound model.

27 **SECTION 13.** In Colorado Revised Statutes, 26-5-117, **amend**



1 (2)(a), (2)(b)(I), (2)(c), (4)(a) introductory portion, (4)(a)(II), (4)(b),  
2 (4)(c), (4)(d), (5), and (8); and **repeal** (2)(b)(II) as follows:

3 **26-5-117. Out-of-home placement for children and youth with**  
4 **mental or behavioral needs - funding - report - rules - legislative**  
5 **declaration - definitions - repeal.** (2) (a) The ~~BHA~~ STATE DEPARTMENT  
6 shall develop a program to provide emergency resources to licensed  
7 providers to help remove barriers such providers face in serving children  
8 and youth whose behavioral or mental health needs require services and  
9 treatment in a residential child care facility. Any such licensed provider  
10 shall meet the requirements of a qualified residential treatment program,  
11 as defined in section 26-5.4-102; a psychiatric residential treatment  
12 facility, as defined in section 25.5-4-103 (19.5); treatment foster care; or  
13 therapeutic foster care.

14 (b) (I) Beginning July 1, 2022, the ~~BHA~~ STATE DEPARTMENT shall  
15 provide ongoing operational support for psychiatric residential treatment  
16 facilities, therapeutic foster care, treatment foster care, and qualified  
17 residential treatment programs as described in subsection (2)(a) of this  
18 section.

19 ~~(II) For the 2022-23 budget year, the general assembly shall~~  
20 ~~appropriate money from the behavioral and mental health cash fund~~  
21 ~~created in section 24-75-230 to the BHA to fund operational support for~~  
22 ~~psychiatric residential treatment facilities for youth, qualified residential~~  
23 ~~treatment programs, therapeutic foster care, and treatment foster care for~~  
24 ~~youth across the state as described in this subsection (2).~~

25 (c) The ~~BHA~~ STATE DEPARTMENT and any person who receives  
26 money from the ~~BHA~~ STATE DEPARTMENT shall comply with the  
27 compliance, reporting, record-keeping, and program evaluation

1 requirements established by the office of state planning and budgeting  
2 and the state controller in accordance with section 24-75-226 (5).

3 (4) (a) The ~~BHA~~ STATE DEPARTMENT shall contract with licensed  
4 providers for the delivery of services to children and youth who are  
5 determined eligible for and placed in the program. A provider that  
6 contracts with the ~~BHA~~ STATE DEPARTMENT shall not:

7 (II) Discharge a child or youth based on the severity or complexity  
8 of the child's or youth's physical, behavioral, or mental health needs;  
9 except that the ~~BHA~~ STATE DEPARTMENT may arrange for the placement  
10 of a child or youth with an alternate contracted provider if the placement  
11 with the alternate provider is better suited to deliver services that meet the  
12 needs of the child or youth.

13 (b) The ~~BHA~~ STATE DEPARTMENT shall reimburse a provider  
14 directly for the costs associated with the placement of a child or youth in  
15 the program for the duration of the treatment, including the costs the  
16 provider demonstrates are necessary in order for the provider to operate  
17 continuously during this period.

18 (c) The ~~BHA~~ STATE DEPARTMENT shall coordinate with the  
19 department of health care policy and financing to support continuity of  
20 care and payment for services for any children or youth placed in the  
21 program.

22 (d) The ~~BHA~~ STATE DEPARTMENT shall reimburse the provider  
23 one hundred percent of the cost of unutilized beds in the program to  
24 ensure available space for emergency residential out-of-home placements.

25 (5) (a) A hospital, health-care provider, provider of case  
26 management services, school district, managed care entity, or state or  
27 county department of human or social services may refer a family for the

1 placement of a child or youth in the program. The entity referring a child  
2 or youth for placement in the program shall submit or assist the family  
3 with submitting an application to the ~~BHA~~ STATE DEPARTMENT for  
4 review. The ~~BHA~~ STATE DEPARTMENT shall consider each application as  
5 space becomes available. The ~~BHA~~ STATE DEPARTMENT shall approve  
6 admissions into the program and determine admission and discharge  
7 criteria for placement.

8 (b) The ~~BHA~~ STATE DEPARTMENT shall develop a discharge plan  
9 for each child or youth placed in the program. The plan must include the  
10 eligible period of placement of the child or youth and ~~shall~~ MUST identify  
11 the entity that will be responsible for the placement costs if the child or  
12 youth remains with the provider beyond the date of eligibility identified  
13 in the plan.

14 (c) The entity or family that places the child or youth in the  
15 program retains the right to remove the child or youth from the program  
16 any time prior to the discharge date specified by the ~~BHA~~ STATE  
17 DEPARTMENT.

18 (8) This section is intended to provide enhanced emergency  
19 services resulting from the increased need for services due to the  
20 COVID-19 pandemic. No later than September 30, 2024, the ~~BHA~~ STATE  
21 DEPARTMENT shall submit recommendations to the house of  
22 representatives public and behavioral health and human services  
23 committee, the senate health and human services committee, or their  
24 successor committees, and the joint budget committee about how to  
25 provide necessary services for children and youth in need of residential  
26 care, including hospital step-down services on an ongoing basis.

27 **SECTION 14.** In Colorado Revised Statutes, 27-50-101, **amend**

1 (7) and (13) as follows:

2 **27-50-101. Definitions.** As used in this article 50, unless the  
3 context otherwise requires:

4 (7) "Behavioral health safety net provider" means any and all  
5 behavioral health ~~safety net~~ providers APPROVED PURSUANT TO SECTION  
6 27-50-301 (5), including comprehensive community behavioral health  
7 providers and essential behavioral health safety net providers. A  
8 community mental health center pursuant to 42 U.S.C. sec. 300x-2(c) and  
9 that is licensed as a behavioral health entity may apply to be approved as  
10 a comprehensive community behavioral health provider, an essential  
11 behavioral health safety net provider, or both.

12 (13) "Essential behavioral health safety net provider" means a  
13 licensed behavioral health entity or behavioral health provider approved  
14 by the behavioral health administration to provide at least one of the  
15 FOLLOWING behavioral health safety net services: ~~described in subsection~~  
16 ~~(11) of this section~~

- 17 (a) EMERGENCY OR CRISIS BEHAVIORAL HEALTH SERVICES;
- 18 (b) MENTAL HEALTH AND SUBSTANCE USE OUTPATIENT SERVICES;
- 19 (c) BEHAVIORAL HEALTH HIGH-INTENSITY OUTPATIENT SERVICES;
- 20 (d) BEHAVIORAL HEALTH RESIDENTIAL SERVICES;
- 21 (e) WITHDRAWAL MANAGEMENT SERVICES;
- 22 (f) BEHAVIORAL HEALTH INPATIENT SERVICES;
- 23 (g) INTEGRATED CARE SERVICES;
- 24 (h) CARE MANAGEMENT;
- 25 (i) CARE COORDINATION;
- 26 (j) HOSPITAL ALTERNATIVES; OR
- 27 (k) ADDITIONAL SERVICES THAT THE BEHAVIORAL HEALTH

1 ADMINISTRATION DETERMINES ARE NECESSARY IN A REGION OR  
2 THROUGHOUT THE STATE.

3 **SECTION 15.** In Colorado Revised Statutes, 27-50-102, **add** (3)  
4 as follows:

5 **27-50-102. Behavioral health administration - creation -**  
6 **coordination - health oversight agency.** (3) FOR THE PURPOSE OF  
7 OVERSEEING THE BEHAVIORAL HEALTH CARE SYSTEM IN COLORADO AND  
8 DISCHARGING THE BHA'S DUTIES AS DESCRIBED IN THIS ARTICLE 50, THE  
9 BHA IS A HEALTH OVERSIGHT AGENCY, AS DEFINED IN 45 CFR 164.501.

10 **SECTION 16.** In Colorado Revised Statutes, 27-50-105, **amend**  
11 (1)(dd); and **add** (4) as follows:

12 **27-50-105. Administration of behavioral health programs -**  
13 **state plan - sole mental health authority - gifts, grants, or donations.**

14 (1) The BHA shall administer and provide the following behavioral  
15 health programs and services:

16 (dd) The care navigation program pursuant to ~~section 27-80-119~~  
17 SECTION 27-60-204;

18 (4) THE BHA MAY SEEK, ACCEPT, AND EXPEND GIFTS, GRANTS, OR  
19 DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR THE PURPOSE OF  
20 ADMINISTERING ANY BEHAVIORAL HEALTH PROGRAM OR SERVICE  
21 DESCRIBED IN SUBSECTION (1) OF THIS SECTION. THE COMMISSIONER, WITH  
22 THE APPROVAL OF THE GOVERNOR, MAY DIRECT THE DISPOSITION OF ANY  
23 GIFT, GRANT, OR DONATION FOR ANY PURPOSE CONSISTENT WITH THE  
24 TERMS AND CONDITIONS FOR WHICH THE GIFT, GRANT, OR DONATION WAS  
25 GIVEN.

26 **SECTION 17.** In Colorado Revised Statutes, 27-50-302, **add**  
27 (4)(f) as follows:

1           **27-50-302. Requirement to serve priority populations -**  
2 **screening and triage for individuals in need of behavioral health**  
3 **services - referrals.** (4) (f) A BEHAVIORAL HEALTH SAFETY NET  
4 PROVIDER SHALL INCLUDE SERVICES THAT ADDRESS THE NECESSARY  
5 LANGUAGE AND CULTURAL BARRIERS TO SERVE COMMUNITIES OF COLOR  
6 AND OTHER UNDERSERVED POPULATIONS.

7           **SECTION 18.** In Colorado Revised Statutes, 27-50-703, **amend**  
8 (1) introductory portion and (3) as follows:

9           **27-50-703. Advisory council - regional subcommittees -**  
10 **subcommittees - working groups.** (1) The BHA shall create ~~one~~ A  
11 regional subcommittee STRUCTURE of the advisory council. ~~for each~~  
12 ~~behavioral health administrative services organization region established~~  
13 ~~pursuant to section 27-50-401.~~ Regional subcommittee members are  
14 appointed by the commissioner for three-year terms; except that initial  
15 terms may be for two years. ~~Each~~ THE regional subcommittee consists of  
16 NO FEWER THAN five BUT NOT MORE THAN NINE members. Membership  
17 of the regional subcommittees must include:

18           (3) ~~Each~~ UNLESS COMMITTEE MEMBERSHIP IS ESTABLISHED  
19 PURSUANT TO STATE OR FEDERAL LAW, THE REGIONAL SUBCOMMITTEE  
20 AND committee membership shall maintain a majority of members who  
21 represent individuals with lived behavioral health experience or families  
22 of individuals with lived behavioral health experience.

23           **SECTION 19.** In Colorado Revised Statutes, 27-60-204, **amend**  
24 (1)(a) introductory portion, (6)(c), and (6)(d); **add** (6)(e); and **add with**  
25 **amended and relocated provisions** (9) as follows:

26           **27-60-204. Care coordination infrastructure - implementation**  
27 **- care navigation program - creation - report - rules - definition -**

1 **repeal. (1) Care coordination infrastructure.** (a) No later than July 1,  
2 2024, the BHA, in collaboration with the department of health care policy  
3 and financing, shall develop a statewide care coordination infrastructure  
4 to drive accountability and more effective behavioral health navigation  
5 to care that builds upon and collaborates with existing care coordination  
6 services. The infrastructure must include:

7 (6) Beginning January 2025, and each January thereafter, the  
8 department of health care policy and financing shall assess the care  
9 coordination services provided by managed care entities and provide a  
10 report as part of its "State Measurement for Accountable, Responsive, and  
11 Transparent (SMART) Government Act" hearing required by section  
12 2-7-203. At a minimum, the report must include:

13 (c) Data on efforts made to reconnect with individuals ~~that~~ WHO  
14 did not initially follow through on care coordination services; ~~and~~

15 (d) Data on referrals to community-based services and follow-up  
16 services by each managed care entity for individuals served through care  
17 coordination services; AND

18 (e) DATA ON THE UTILIZATION OF CARE NAVIGATION SERVICES  
19 PURSUANT TO SUBSECTION (9) OF THIS SECTION IN ACCORDANCE WITH  
20 STATE AND FEDERAL HEALTH-CARE PRIVACY LAWS.

21 (9) **Care navigation program.** (a) [Formerly 27-80-119 (2)] As  
22 used in this section, "engaged client" means an individual who is  
23 interested in and willing to engage in substance use disorder treatment  
24 and recovery services or other treatment services either for the individual  
25 or an affected family member or friend.

26 (b) [Formerly 27-80-119 (3)] Subject to available appropriations,  
27 the BHA shall implement a care navigation program to assist engaged

1 clients in obtaining access to treatment for substance use disorders. At a  
2 minimum, services available statewide must include independent  
3 screening of the treatment needs of the engaged client using nationally  
4 recognized screening criteria to determine the correct level of care; the  
5 identification of licensed or accredited substance use disorder treatment  
6 options, including social and medical detoxification services,  
7 medication-assisted treatment, and inpatient and outpatient treatment  
8 programs; and the availability of various treatment options for the  
9 engaged client.

10 (c) [Formerly 27-80-119 (4)] To implement the care navigation  
11 program, the BHA shall, ~~include~~ DIRECTLY OR THROUGH CONTRACT,  
12 PROVIDE care navigation services AND ALIGN THE CARE NAVIGATION  
13 SERVICES WITH THE CARE COORDINATION INFRASTRUCTURE ESTABLISHED  
14 PURSUANT TO THIS SECTION. ~~in the twenty-four-hour telephone crisis  
15 service created pursuant to section 27-60-103. The contractor selected by  
16 the BHA must provide care navigation services to engaged clients  
17 statewide. Care navigation services must be available twenty-four hours  
18 a day and must be accessible through various formats. The contractor  
19 shall coordinate services in conjunction with other state care navigation  
20 and coordination services and behavioral health response systems to  
21 ensure coordinated and integrated service delivery. The use of peer  
22 support specialists is encouraged in the coordination of services. The  
23 contractor shall assist the engaged client with accessing treatment  
24 facilities, treatment programs, or treatment providers and shall provide  
25 services to engaged clients regardless of the client's payer source or  
26 whether the client is uninsured. Once the engaged client has initiated  
27 treatment, the contractor is no longer responsible for care navigation for~~



1 ~~that engaged client for that episode. Engaged clients who are enrolled in~~  
2 ~~the medical assistance program pursuant to articles 4, 5, and 6 of title 25.5~~  
3 ~~shall be provided with contact information for their managed care entity.~~  
4 ~~The contractor shall conduct ongoing outreach to inform behavioral~~  
5 ~~health providers, counties, county departments of human or social~~  
6 ~~services, jails, law enforcement personnel, health-care professionals, and~~  
7 ~~other interested persons about care navigation services.~~

8 (d) [Formerly 27-80-119 (7)] The state board of human services  
9 may promulgate any rules necessary to implement the care navigation  
10 program.

11 **SECTION 20.** In Colorado Revised Statutes, 27-64-104, **amend**  
12 (3) as follows:

13 **27-64-104. 988 crisis hotline cash fund - creation.** (3) Subject  
14 ~~to annual appropriation by the general assembly~~ MONEY IN THE FUND IS  
15 CONTINUOUSLY APPROPRIATED. The enterprise may expend money from  
16 the fund for the purposes outlined in section 27-64-103 (4)(c) and (4)(d).

17 **SECTION 21.** In Colorado Revised Statutes, 27-65-107, **amend**  
18 (4)(a) introductory portion as follows:

19 **27-65-107. Emergency transportation - application - screening**  
20 **- respondent's rights.** (4) (a) A person detained pursuant to this section  
21 ~~at an outpatient mental health facility or facility designated by the~~  
22 ~~commissioner,~~ has the following rights while being detained, which must  
23 be explained to the person before being transported to a receiving facility:

24 **SECTION 22.** In Colorado Revised Statutes, 27-65-113, **amend**  
25 (5)(a) and (5)(b) as follows:

26 **27-65-113. Hearing procedures - jurisdiction.** (5) (a) In the  
27 event that a respondent or a person found not guilty by reason of impaired

1 mental condition pursuant to section 16-8-103.5 (5), or by reason of  
2 insanity pursuant to section 16-8-105 (4) or 16-8-105.5, refuses to accept  
3 medication, the court having jurisdiction of the action pursuant to  
4 subsection (4) of this section, the court committing the person or  
5 defendant to the custody of the ~~BHA~~ DEPARTMENT pursuant to section  
6 16-8-103.5 (5), 16-8-105 (4), or 16-8-105.5, or the court of the  
7 jurisdiction in which the designated facility treating the respondent or  
8 person is located has jurisdiction and venue to accept a petition by a  
9 treating physician and to enter an order requiring that the respondent or  
10 person accept such treatment or, in the alternative, that the medication be  
11 forcibly administered to the respondent or person. The court of the  
12 jurisdiction in which the designated facility is located shall not exercise  
13 its jurisdiction without the permission of the court that committed the  
14 person to the custody of the ~~BHA~~ DEPARTMENT. Upon the filing of such  
15 a petition, the court shall appoint an attorney, if one has not been  
16 appointed, to represent the respondent or person and hear the matter  
17 within ten days.

18 (b) In any case brought pursuant to subsection (5)(a) of this  
19 section in a court for the county in which the treating facility is located,  
20 the county where the proceeding was initiated pursuant to subsection (4)  
21 of this section or the court committing the person to the custody of the  
22 ~~BHA~~ DEPARTMENT pursuant to section 16-8-103.5 (5), 16-8-105 (4), or  
23 16-8-105.5, shall either reimburse the county in which the proceeding  
24 pursuant to this subsection (5) was filed and in which the proceeding was  
25 held for the reasonable costs incurred in conducting the proceeding or  
26 conduct the proceeding itself using its own personnel and resources,  
27 including its own district or county attorney, as the case may be.

1           **SECTION 23.** In Colorado Revised Statutes, 27-65-123, **amend**  
2 (1)(a) as follows:

3           **27-65-123. Records.** (1) Except as provided in subsection (2) of  
4 this section, all information obtained and records prepared in the course  
5 of providing any services to any person pursuant to any provision of this  
6 article 65 are confidential and privileged matter. The information and  
7 records may be disclosed only:

8           (a) In communications between ~~qualified professional~~ FACILITY  
9 personnel OR STATE AGENCIES in the provision of services or appropriate  
10 referrals;

11           **SECTION 24.** In Colorado Revised Statutes, 27-80-102, **amend**  
12 (1) introductory portion and (2) as follows:

13           **27-80-102. Duties of the behavioral health administration.**

14 (1) The ~~office of~~ behavioral health ADMINISTRATION is a **type 2** entity,  
15 as defined in section 24-1-105, and is responsible for the powers, duties,  
16 and functions relating to the alcohol and drug driving safety program  
17 specified in section 42-4-1301.3. The ~~office of~~ behavioral health  
18 ADMINISTRATION shall formulate a comprehensive state plan for  
19 substance use disorder treatment programs. The ~~office of~~ behavioral  
20 health ADMINISTRATION shall submit the state plan to the governor and,  
21 upon the governor's approval, submit it to the appropriate United States  
22 agency for review and approval. The state plan must include, but not be  
23 limited to:

24           (2) The department, acting by and through the ~~office of~~ behavioral  
25 health ADMINISTRATION, is designated as the sole state agency for the  
26 supervision of the administration of the state plan.

27           **SECTION 25.** In Colorado Revised Statutes, 27-80-107, **amend**

1 (1), (2) introductory portion, (2)(b), (2)(d), (2.5)(a) introductory portion,  
2 (2.5)(a)(II), (3), (4), (5), and (7) as follows:

3 **27-80-107. Designation of managed service organizations -**  
4 **purchase of services - revocation of designation.** (1) The ~~director of~~  
5 ~~the office of~~ behavioral health ADMINISTRATION shall establish designated  
6 service areas to provide substance use disorder treatment and recovery  
7 services in a particular geographical region of the state.

8 (2) To be selected as a designated managed service organization  
9 to provide services in a particular designated service area, a private  
10 corporation; for profit or not for profit; or a public agency, organization,  
11 or institution shall apply to the ~~office of~~ behavioral health  
12 ADMINISTRATION for a designation in the form and manner specified by  
13 the ~~executive director or the executive director's~~ COMMISSIONER OR THE  
14 COMMISSIONER'S designee. The designation process is in lieu of a  
15 competitive bid process pursuant to the "Procurement Code", articles 101  
16 to 112 of title 24. The ~~director of the office of behavioral health~~  
17 COMMISSIONER OR THE COMMISSIONER'S DESIGNEE shall make the  
18 designation based on factors established by the ~~executive director or the~~  
19 ~~executive director's~~ COMMISSIONER OR THE COMMISSIONER'S designee.  
20 The factors for designation established by the executive director or the  
21 executive director's designee include the following:

22 (b) Whether the managed service organization has experience  
23 working with publicly funded clients, including expertise in treating  
24 priority populations designated by the ~~office of~~ behavioral health  
25 ADMINISTRATION;

26 (d) Whether the managed service organization has experience  
27 using the cost-share principles used by the ~~office of~~ behavioral health

1 ADMINISTRATION in its contracts with providers and is willing to  
2 cost-share;

3 (2.5) (a) On or before January 1, 2023, in order to promote  
4 transparency and accountability, the ~~office of~~ behavioral health  
5 ADMINISTRATION shall require each managed service organization that has  
6 twenty-five percent or more ownership by providers of behavioral health  
7 services to comply with the following conflict of interest policies:

8 (II) The ~~office of~~ behavioral health ADMINISTRATION shall  
9 quarterly review a managed service organization's funding allocation to  
10 ensure that all providers are being equally considered for funding. The  
11 ~~office of~~ behavioral health ADMINISTRATION is authorized to review any  
12 other pertinent information to ensure the managed service organization  
13 is meeting state and federal rules and regulations and is not  
14 inappropriately giving preference to providers with ownership or board  
15 membership.

16 (3) The designation of a managed service organization by the  
17 ~~director of the office of behavioral health~~ COMMISSIONER, as described in  
18 subsection (2) of this section, is an initial decision of the department  
19 ~~which~~ THAT may be reviewed by the executive director in accordance  
20 with the provisions of section 24-4-105. Review by the executive director  
21 in accordance with section 24-4-105 constitutes final agency action for  
22 purposes of judicial review.

23 (4) (a) The terms and conditions for providing substance use  
24 disorder treatment and recovery services must be specified in the contract  
25 entered into between the ~~office of~~ behavioral health ADMINISTRATION and  
26 the designated managed service organization. Contracts entered into  
27 between the ~~office of~~ behavioral health ADMINISTRATION and the

1 designated managed service organization must include terms and  
2 conditions prohibiting a designated managed service organization  
3 contracted treatment provider from denying or prohibiting access to  
4 medication-assisted treatment, as defined in section 23-21-803, for a  
5 substance use disorder.

6 (b) Contracts entered into between the ~~office of behavioral health~~  
7 ADMINISTRATION and the designated managed service organization must  
8 include terms and conditions that outline the expectations for the  
9 designated managed service organization to invest in the state's recovery  
10 services infrastructure, which include peer-run recovery support services  
11 and specialized services for underserved populations. Investments are  
12 based on available appropriations.

13 (5) The contract may include a provisional designation for ninety  
14 days. At the conclusion of the ninety-day provisional period, the ~~director~~  
15 ~~of the office of behavioral health~~ COMMISSIONER may choose to revoke  
16 the contract or, subject to meeting the terms and conditions specified in  
17 the contract, may choose to extend the contract for a stated time period.

18 (7) (a) The ~~director of the office of behavioral health~~  
19 COMMISSIONER may revoke the designation of a designated managed  
20 service organization upon finding that the managed service organization  
21 is in violation of the performance of the provisions of or rules  
22 promulgated pursuant to this article 80. The revocation must conform to  
23 the provisions and procedures specified in article 4 of title 24, and occur  
24 only after notice and an opportunity for a hearing is provided as specified  
25 in article 4 of title 24. A hearing to revoke a designation as a designated  
26 managed service organization constitutes final agency action for purposes  
27 of judicial review.

1 (b) Once a designation has been revoked pursuant to subsection  
2 (7)(a) of this section, the ~~director of the office of behavioral health~~  
3 COMMISSIONER may designate one or more service providers to provide  
4 the treatment services pending designation of a new designated managed  
5 service organization or may enter into contracts with subcontractors to  
6 provide the treatment services.

7 (c) From time to time, the ~~director of the office of behavioral~~  
8 ~~health~~ COMMISSIONER may solicit applications from applicants for  
9 managed service organization designation to provide substance use  
10 disorder treatment and recovery services for a specified planning area or  
11 areas.

12 **SECTION 26.** In Colorado Revised Statutes, 27-80-108, **amend**  
13 (1)(c) and (1)(d) as follows:

14 **27-80-108. Rules.** (1) The state board of human services, created  
15 in section 26-1-107, has the power to promulgate rules governing the  
16 provisions of this article 80. The rules may include, but are not limited to:

17 (c) Requirements for public and private agencies, organizations,  
18 and institutions from which the ~~office of~~ behavioral health  
19 ADMINISTRATION may purchase services pursuant to section 27-80-106  
20 (1), which requirements must include prohibiting the purchase of services  
21 from entities that deny or prohibit access to medical services or substance  
22 use disorder treatment and services to persons who are participating in  
23 prescribed medication-assisted treatment, as defined in section 23-21-803,  
24 for a substance use disorder;

25 (d) Requirements for managed service organizations that are  
26 designated by the ~~director of the office of behavioral health~~  
27 COMMISSIONER to provide services in a designated service area pursuant

1 to section 27-80-106 (2);

2 **SECTION 27.** In Colorado Revised Statutes, 27-80-303, **amend**  
3 (1)(b) introductory portion and (5) as follows:

4 **27-80-303. Office of ombudsman for behavioral health access**  
5 **to care - creation - appointment of ombudsman - duties.** (1) (b) The  
6 ~~office of behavioral health in the~~ department and the BHA shall offer the  
7 office limited support with respect to:

8 (5) In the performance of the ombudsman's duties, the  
9 ombudsman shall act independently of ~~the office of behavioral health in~~  
10 the department and the BHA. Any recommendations made or positions  
11 taken by the ombudsman do not reflect those of the ~~department, the office~~  
12 ~~of behavioral health,~~ DEPARTMENT or the BHA.

13 **SECTION 28. Repeal of relocated and nonrelocated**  
14 **provisions in this act.** In Colorado Revised Statutes, **repeal** 27-80-119;  
15 except that (1), (5), (6), and (8) are not relocated.

16 **SECTION 29. Act subject to petition - effective date.** This act  
17 takes effect at 12:01 a.m. on the day following the expiration of the  
18 ninety-day period after final adjournment of the general assembly; except  
19 that, if a referendum petition is filed pursuant to section 1 (3) of article V  
20 of the state constitution against this act or an item, section, or part of this  
21 act within such period, then the act, item, section, or part will not take  
22 effect unless approved by the people at the general election to be held in  
23 November 2024 and, in such case, will take effect on the date of the  
24 official declaration of the vote thereon by the governor.