

**First Regular Session  
Seventy-third General Assembly  
STATE OF COLORADO**

**REREVISED**

*This Version Includes All Amendments  
Adopted in the Second House*

LLS NO. 21-0303.02 Alana Rosen x2602

**HOUSE BILL 21-1021**

**HOUSE SPONSORSHIP**

**Pelton and Caraveo**, Cutter, Kennedy, Larson, Michaelson Jenet, Young, Amabile, Bacon, Bennett, Bird, Duran, Exum, Froelich, Gonzales-Gutierrez, Gray, Herod, Hooton, Jackson, Lontine, McCluskie, McCormick, Mullica, Ortiz, Ricks, Snyder, Titone, Valdez A., Will

**SENATE SPONSORSHIP**

**Zenzinger and Hisey**, Coram, Garcia, Ginal, Hansen, Kolker, Lee, Moreno, Pettersen, Story, Winter

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**House Committees**

Public & Behavioral Health & Human Services  
Finance  
Appropriations

**Senate Committees**

Finance  
Appropriations

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**A BILL FOR AN ACT**

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

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**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 the department of human services (state department) to establish procedures to approve recovery support services organizations for reimbursement of peer support professional services. The bill also gives the executive director of the state department rule-making authority to establish other criteria and standards as

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  
3rd Reading Unamended  
May 19, 2021

SENATE  
2nd Reading Unamended  
May 18, 2021

HOUSE  
3rd Reading Unamended  
April 26, 2021

HOUSE  
Amended 2nd Reading  
April 23, 2021

necessary.

The bill permits a recovery support services organization to charge and submit for reimbursement from the medical assistance program certain eligible peer support services provided by peer support professionals.

The bill authorizes the department of health care policy and financing to reimburse recovery support services organizations for permissible claims for peer support services submitted under the medical services program.

The bill requires contracts entered into between the state department's office of behavioral health and designated managed service organizations to include terms and conditions related to the support of peer-run recovery support services organizations.

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

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

4 **27-60-108. Peer support professionals - cash fund - fees -**  
5 **requirements - rules - legislative declaration - definitions.** (1)(a) THE  
6 GENERAL ASSEMBLY HEREBY FINDS AND DECLARES THAT:

7 (I) PEER SUPPORT PROFESSIONALS HELP PEOPLE ACHIEVE THEIR  
8 RECOVERY GOALS THROUGH SHARED UNDERSTANDING, RESPECT, AND  
9 EMPOWERMENT. PEER SUPPORT OFFERS A FORM OF ACCEPTANCE,  
10 UNDERSTANDING, AND VALIDATION NOT OFTEN FOUND IN OTHER  
11 PROFESSIONAL RELATIONSHIPS.

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

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

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

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

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

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

- 18 (A) PEER-RUN DROP-IN CENTERS;
- 19 (B) RECOVERY AND WELLNESS CENTERS;
- 20 (C) EMPLOYMENT SERVICES;
- 21 (D) PREVENTION AND EARLY INTERVENTION ACTIVITIES;
- 22 (E) PEER MENTORING FOR CHILDREN AND ADOLESCENTS;
- 23 (F) WARM LINES; OR
- 24 (G) ADVOCACY SERVICES.

25 (VIII) PEER-RUN ORGANIZATIONS, INCLUDING RECOVERY  
26 COMMUNITY ORGANIZATIONS, ARE IMPORTANT COMPONENTS IN  
27 COLORADO'S BEHAVIORAL HEALTH SYSTEM. THESE ORGANIZATIONS HELP

1 INDIVIDUALS DEFINE THEIR LIFE GOALS AND FIND A UNIQUE PATH TOWARD  
2 RECOVERY IN A HOLISTIC MANNER.

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

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

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

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

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

20 (III) PHYSICIAN ASSISTANT LICENSED PURSUANT TO SECTION  
21 12-240-113 WITH SPECIFIC TRAINING IN SUBSTANCE USE DISORDERS OR  
22 MENTAL HEALTH;

23 (IV) PSYCHIATRIC TECHNICIAN LICENSED PURSUANT TO ARTICLE  
24 295 OF TITLE 12; AND

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

27 (b) "PEER SUPPORT PROFESSIONAL" MEANS A PEER SUPPORT

1 SPECIALIST, RECOVERY COACH, PEER AND FAMILY RECOVERY SUPPORT  
2 SPECIALIST, PEER MENTOR, FAMILY ADVOCATE, OR FAMILY SYSTEMS  
3 NAVIGATOR WHO MEETS THE QUALIFICATIONS DESCRIBED IN SUBSECTION  
4 (3)(a)(III) OF THIS SECTION.

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

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

16 (I) PROVIDES RECOVERY-FOCUSED SERVICES AND SUPPORTS;  
17 (II) EMPLOYS OR CONTRACTS WITH A LICENSED MENTAL HEALTH  
18 PROVIDER TO ADMINISTER ON-GOING SUPERVISION OF PEER SUPPORT  
19 PROFESSIONALS EMPLOYED BY RECOVERY SUPPORT SERVICES  
20 ORGANIZATIONS. THE LICENSED MENTAL HEALTH PROVIDER MUST BE IN  
21 GOOD STANDING AND MUST DEMONSTRATE HAVING RECEIVED FORMAL  
22 TRAINING SPECIFIC TO THE PROVISION OF PEER SUPPORT SERVICES AND  
23 SUPERVISION OF PEER SUPPORT PROFESSIONALS;

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

26 (A) SELF-IDENTIFY AS HAVING EXPERIENCED THE PROCESS OF  
27 RECOVERY FROM A MENTAL HEALTH DISORDER, SUBSTANCE USE

1 DISORDER, TRAUMA, OR ONE OR ALL OF SUCH CONDITIONS, EITHER AS A  
2 CONSUMER OF RECOVERY SERVICES OR AS THE PARENT OR A FAMILY  
3 MEMBER OF THE CONSUMER;

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

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

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

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

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

26 (I) JUSTICE-INVOLVED SETTINGS;

27 (II) PHYSICAL HEALTH SETTINGS, SUCH AS PEDIATRICIAN OR

1 OBSTETRIC AND GYNECOLOGICAL HEALTH CARE OFFICES;

2 (III) EMERGENCY DEPARTMENTS;

3 (IV) SERVICES DELIVERED VIA TELEHEALTH;

4 (V) AGENCIES SERVING HOMELESS COMMUNITIES;

5 (VI) PEER RESPITE HOMES; █

6 (VII) SCHOOL-BASED HEALTH CENTERS; AND

7 (VIII) HOME- AND COMMUNITY-BASED SETTINGS.

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

13 (4) THE STATE DEPARTMENT MAY CHARGE A FEE █ █ █ FOR  
14 RECOVERY SUPPORT SERVICES ORGANIZATIONS SEEKING APPROVAL  
15 PURSUANT TO SUBSECTION (3)(a) OF THIS SECTION. IF THE EXECUTIVE  
16 DIRECTOR OF THE STATE DEPARTMENT CHARGES A FEE TO RECOVERY  
17 SUPPORT SERVICES ORGANIZATIONS, THE EXECUTIVE DIRECTOR SHALL  
18 PROMULGATE RULES TO ESTABLISH THE FEE AT AN AMOUNT NOT TO  
19 SUBSTANTIALLY EXCEED THE AMOUNT CHARGED TO OTHER BEHAVIORAL  
20 HEALTH PROVIDERS SEEKING APPROVAL FROM THE STATE DEPARTMENT.

21 █ THE STATE DEPARTMENT SHALL DEPOSIT ANY FEES COLLECTED INTO  
22 THE PEER SUPPORT PROFESSIONAL WORKFORCE CASH FUND CREATED IN  
23 SUBSECTION (6) OF THIS SECTION.

24 (5) THE STATE DEPARTMENT MAY SEEK, ACCEPT, AND EXPEND  
25 GIFTS, GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR  
26 THE PURPOSES OF THIS SECTION. THE STATE DEPARTMENT SHALL  
27 TRANSFER EACH GIFT, GRANT, AND DONATION TO THE STATE TREASURER,

1 WHO SHALL CREDIT THE SAME TO THE PEER SUPPORT PROFESSIONAL  
2 WORKFORCE CASH FUND CREATED IN SUBSECTION (6) OF THIS SECTION.

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

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

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

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

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

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

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

21 (7) A PEER-RUN RECOVERY SERVICE PROVIDER SHALL NOT BE  
22 COMPELLED TO SEEK APPROVAL FROM THE STATE DEPARTMENT TO  
23 BECOME A RECOVERY SUPPORT SERVICES ORGANIZATION. EXPANDED  
24 SERVICE FUNDING AVAILABLE FOR RECOVERY SERVICES THROUGH  
25 RECOVERY SUPPORT SERVICES ORGANIZATIONS IS INTENDED TO  
26 SUPPLEMENT EXISTING STATE INVESTMENT IN THE RECOVERY SYSTEM  
27 INFRASTRUCTURE. THE STATE DEPARTMENT SHALL FUND RECOVERY



1 SERVICES, WITHIN EXISTING APPROPRIATIONS, INCLUDING PEER-RUN  
2 ORGANIZATIONS THAT DO NOT SEEK TO BE RECOVERY SUPPORT SERVICES  
3 ORGANIZATIONS.

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

6 **25.5-5-327. Eligible peer support services - reimbursement -**  
7 **definitions.** (1) AS USED IN THIS SECTION, UNLESS THE CONTEXT  
8 OTHERWISE REQUIRES:

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

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

13 (2) SUBJECT TO AVAILABLE APPROPRIATIONS AND TO THE EXTENT  
14 PERMITTED UNDER FEDERAL LAW, THE MEDICAL ASSISTANCE PROGRAM  
15 PURSUANT TO THIS ARTICLE 5 AND ARTICLES 4 AND 6 OF THIS TITLE 25.5  
16 INCLUDES PEER SUPPORT PROFESSIONAL SERVICES PROVIDED TO  
17 RECIPIENTS THROUGH A RECOVERY SUPPORT SERVICES ORGANIZATION.  
18 PEER SUPPORT PROFESSIONAL SERVICES MUST NOT BE PROVIDED TO  
19 RECIPIENTS UNTIL FEDERAL APPROVAL HAS BEEN OBTAINED.

20 **SECTION 3.** In Colorado Revised Statutes, 27-80-107, **amend**  
21 (1), (4), (6), and (7)(c) as follows:

22 **27-80-107. Designation of managed service organizations -**  
23 **purchase of services - revocation of designation.** (1) The director of  
24 the office of behavioral health shall establish designated service areas to  
25 provide substance use disorder treatment AND RECOVERY services in a  
26 particular geographical region of the state.

27 (4) (a) The terms and conditions for providing substance use

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

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

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

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

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

1           **25-27.6-103. Behavioral health entity implementation and**  
2           **advisory committee - creation - membership - duties - repeal.**

3           (2) (a) The committee consists of:

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

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

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

11           **25.5-5-310. Treatment program for high-risk pregnant and**  
12           **parenting women - cooperation with private entities - definition.**

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

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

25                 **25.5-5-312. Treatment program for high-risk pregnant and**  
26                 **parenting women - extended coverage - federal approval.** (1) The  
27                 state department shall seek federal approval to continue providing

1 substance use disorder treatment AND RECOVERY services for twelve  
2 months following a pregnancy to women who are eligible to receive  
3 services under the medical assistance program, who are receiving services  
4 pursuant to the treatment program for high-risk pregnant and parenting  
5 women, and who continue to participate in the treatment program. The  
6 state department shall implement the continued services to the extent  
7 allowed by the federal government.

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

10 **25.5-5-315. Acceptance of gifts, grants, and donations - Native**  
11 **American substance abuse treatment cash fund.** (1) The executive  
12 director may accept and expend money from gifts, grants, and donations  
13 for purposes of providing for the administrative costs of preparing and  
14 submitting the request for federal approval to provide substance use  
15 disorder treatment AND RECOVERY services to Native Americans as  
16 provided for in section 25.5-5-314. All such gifts, grants, and donations  
17 ~~shall~~ MUST be transmitted to the state treasurer who shall credit the same  
18 to the Native American substance abuse treatment cash fund, which fund  
19 is created and referred to in this section as the "fund". The money in the  
20 fund is subject to annual appropriation by the general assembly. All  
21 investment earnings derived from the deposit and investment of money  
22 in the fund remains in the fund and shall not be transferred or revert to the  
23 general fund of the state at the end of any fiscal year.

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

26 **26-1-132. Department of human services - rate setting -**  
27 **residential treatment service providers - monitoring and auditing -**

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

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

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

15 **27-80-119. Care navigation program - creation - reporting -**  
16 **rules - legislative declaration - definition.** (2) As used in this section,  
17 "engaged client" means an individual who is interested in and willing to  
18 engage in substance use disorder treatment AND RECOVERY services or  
19 other treatment services either for the individual or an affected family  
20 member or friend.

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

23 **27-80-120. Building substance use disorder treatment capacity**  
24 **in underserved communities - grant program - repeal.** (4) Local  
25 grants must be used to ensure that local communities increase access to  
26 a continuum of substance use disorder treatment AND RECOVERY services,  
27 including medical or clinical detoxification, residential treatment,

1 recovery support services, and intensive outpatient treatment.

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

8 (a) \$22,454, which consists of \$20,054 from the general fund and  
9 \$2,400 from the peer support professional workforce cash fund, for  
10 community behavioral health administration personal services, which  
11 amount is based on an assumption that the office will require an  
12 additional 0.3 FTE; and

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

15 **SECTION 12. Act subject to petition - effective date.** This act  
16 takes effect at 12:01 a.m. on the day following the expiration of the  
17 ninety-day period after final adjournment of the general assembly; except  
18 that, if a referendum petition is filed pursuant to section 1 (3) of article V  
19 of the state constitution against this act or an item, section, or part of this  
20 act within such period, then the act, item, section, or part will not take  
21 effect unless approved by the people at the general election to be held in  
22 November 2022 and, in such case, will take effect on the date of the  
23 official declaration of the vote thereon by the governor.