A BILL FOR AN ACT

CONCERNING THE "BEHAVIORAL HEALTH RECOVERY ACT OF 2021",
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
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.

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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".

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5 SECTION 2. In Colorado Revised Statutes, 12-30-109, repeal (5)
as follows:

12-30-109. Prescribing opioids - limitations - definition - repeal. (5) This section is repealed, effective September 1, 2021.

SECTION 3. In Colorado Revised Statutes, 23-1-104, amend (1)(b)(II); and amend as it will become effective July 1, 2021, (1)(c) as follows:

23-1-104. Financing the system of postsecondary education - report. (1) (b) (II) For the 2010-11 fiscal year and for fiscal years beginning on or after July 1, 2016, the general assembly shall also make annual appropriations of cash funds, other than cash funds received as tuition income or as fees, as a single line item to each governing board for the operation of its campuses. Each governing board shall allocate said cash fund appropriations to the institutions under its control in the manner deemed most appropriate by the governing board; except that, if the general assembly appropriates money pursuant to section 23-31.5-112 OR 27-80-118, that money is not included within the single line item appropriation described in this subsection (1)(b)(II).

(c) [Editor's note: This version of subsection (1)(c) introductory portion is effective July 1, 2021.] In addition to any appropriations made pursuant to subsection (1)(a) or (1)(b) of this section, the general assembly may make annual appropriations of general fund money and of money received pursuant to a fee-for-service contract negotiated by the board of governors of the Colorado state university system and the department of higher education, as described in section 23-18-303 or 23-18-303.5, whichever is applicable, as separate line items to:

(I) The Colorado state forest service described in part 3 of article 31 of this title TITLE 23;
(II) The agricultural experiment station department of the Colorado state university described in part 6 of article 31 of this title; and

TITLE 23;

(III) The Colorado state university cooperative extension service described in part 7 of article 31 of this title TITLE 23; AND

(IV) THE CENTER FOR RESEARCH INTO SUBSTANCE USE DISORDER PREVENTION, TREATMENT, AND RECOVERY SUPPORT STRATEGIES CREATED IN SECTION 27-80-118.

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

23-21-808. Funding for pilot program. (1) (a) For the 2019-20 and 2020-21 state fiscal years YEAR 2021-22, AND EACH STATE FISCAL YEAR THEREAFTER, the general assembly shall annually appropriate two THREE million five hundred thousand dollars per fiscal year from the marijuana tax cash fund created in section 39-28.8-501 to the board of regents of the university of Colorado, for allocation to the center to implement and administer the MAT expansion pilot program. The center may use a portion of the money annually appropriated for the pilot program to pay the direct and indirect costs that the center incurs to administer the pilot program, as well as to provide consulting services to and oversight of grant recipients, for data collection and analysis, evaluation of the pilot program, and program reporting.

(b) If any unexpended or uncommitted money appropriated for a fiscal year remains at the end of that fiscal year, the center may expend the money in accordance with this section in the succeeding fiscal year. Any unexpended or uncommitted money remaining at the end of the 2020-21 fiscal year reverts to the marijuana tax cash fund.
SECTION 5. In Colorado Revised Statutes, **repeal** 23-21-809 as follows:

23-21-809. **Repeal of part.** This part is repealed, effective June 30, 2022.

SECTION 6. In Colorado Revised Statutes, **add** 23-31-707 as follows:

23-31-707. **Colorado AgrAbility project - extension program** - creation - appropriation - legislative declaration. (1) The General Assembly finds that Colorado should expand the Colorado AgrAbility Project by providing funding for the project's rural rehabilitation specialists with the goal of informing, educating, and assisting farmers, ranchers, and farm workers with disabilities and their families so they can continue to have successful careers in agriculture.

(2) Colorado State University shall implement and administer the Colorado AgrAbility Project, referred to in this section as the "AgrAbility Project", in cooperation with the federal government pursuant to the "Food, Agriculture, Conservation, and Trade Act of 1990", as amended. Colorado State University shall expand the AgrAbility Project by providing rural rehabilitation specialists with funding 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. **Rural rehabilitation specialists shall be**
CULTURALLY RESPONSIVE AND TRAUMA-INFORMED.

(3) For the 2021-22 fiscal year, and each fiscal year thereafter, the general assembly shall annually appropriate nine hundred thousand dollars to Colorado State University for the AgrAbility project to expand behavioral health education and services pursuant to subsection (2) of this section.

(4) Nothing in this section prevents Colorado State University from complying with federal requirements for the AgrAbility project in order for Colorado State University to qualify for federal funds under the federal "Food, Agriculture, Conservation, and Trade Act of 1990", as amended.

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

25-20.5-1102. Harm reduction grant program cash fund - creation. (3) Subject to annual appropriation by the general assembly, the department may expend money from the fund for the purposes of this part. Money in the fund is continuously appropriated to the department for the implementation of this part. 11.

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

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

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

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

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

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

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

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

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

(2) The screening must be made available to the parent of each child enrolled in the Medical Assistance Program, regardless of whether the parent is enrolled in the Medical Assistance Program, so long as the parent's child is enrolled in the Medical Assistance Program.

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

26-6.5-406. Data collection - reporting. (1) On or before July 1, 2023, the department shall 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. The data collection and information system, and any related processes, must place the least burden possible on the mental health consultants in the program. In selecting the implementation data and outcomes, the department shall incorporate the variability across diverse settings and populations.

(2) Notwithstanding section 24-1-136 (11)(a)(I), the department shall, beginning in 2023 and continuing every two years thereafter, in its presentation to the joint budget committee of the general assembly, as well as its presentation to its committee of reference at the hearing held pursuant to section 2-7-203 (2)(a) of the "State Measurement for State Measurement for..."
ACCOUNTABLE, RESPONSIVE, AND TRANSPARENT (SMART) GOVERNMENT ACT" IN JANUARY 2027, REPORT ON THE FOLLOWING ISSUES:

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

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

(3) ON OR BEFORE AUGUST 1, 2026, THE DEPARTMENT SHALL CONTRACT WITH AN INDEPENDENT THIRD PARTY TO CONDUCT AN EVALUATION, USING STANDARD EVALUATION MEASURES, OF THE PROGRAM AND ITS IMPACT ON EARLY CHILDHOOD AND PROGRAM OUTCOMES ACROSS THE STATE. THE DEPARTMENT SHALL PRESENT THE RESULTS OF THE EVALUATION AS PART OF ITS PRESENTATION TO ITS COMMITTEE OF REFERENCE AT THE HEARING HELD PURSUANT TO SECTION 2-7-203 (2)(a) OF THE "STATE MEASUREMENT FOR ACCOUNTABLE, RESPONSIVE, AND TRANSPARENT (SMART) GOVERNMENT ACT" IN JANUARY 2027.

26-6.5-407. Funding support. The department and the department of health care policy and financing shall explore funding options for the program and improving access to mental health consultants, including access to various funding sources, as well as the children's basic health plan, article 8 of title 25.5, and the state medical assistance program, articles 4 to 6 of title 25.5. On or before January 1, 2023, the departments
SHALL REPORT ON ANY IDENTIFIED FUNDING OPTIONS TO THE JOINT
BUDGET COMMITTEE OF THE GENERAL ASSEMBLY AS NECESSARY
THEREAFTER, IN ACCORDANCE WITH SECTION 24-1-136.

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

27-60-108. Behavioral health-care services for rural and
agricultural communities - vouchers - contract - appropriation.
(1) NO LATER THAN ONE HUNDRED EIGHTY DAYS AFTER THE EFFECTIVE
DATE OF THIS SECTION, THE STATE DEPARTMENT, IN COLLABORATION WITH
THE DEPARTMENT OF AGRICULTURE, SHALL CONTRACT WITH A NONPROFIT
ORGANIZATION PRIMARILY FOCUSED ON SERVING AGRICULTURAL AND
RURAL COMMUNITIES IN COLORADO, AS IDENTIFIED BY THE STATE
DEPARTMENT, TO PROVIDE VOUCHERS TO INDIVIDUALS LIVING IN RURAL
AND FRONTIER COMMUNITIES IN NEED OF BEHAVIORAL HEALTH-CARE
SERVICES.

(2) THE NONPROFIT ORGANIZATION AWARDED THE CONTRACT
PURSUANT TO SUBSECTION (1) OF THIS SECTION SHALL:
(a) CONTRACT WITH LICENSED BEHAVIORAL HEALTH-CARE
PROVIDERS THAT HAVE COMPLETED TRAINING ON CULTURAL
COMPETENCIES SPECIFIC TO THE COLORADO AGRICULTURAL AND RURAL
COMMUNITY LIFESTYLE TO PROVIDE DIRECT BEHAVIORAL HEALTH-CARE
SERVICES TO FARMERS, RANCHERS, FARM AND RANCH WORKERS AND
THEIR FAMILIES, AND OTHER UNDERSERVED POPULATIONS IN RURAL AND
AGRICULTURAL COMMUNITIES. AT LEAST SIXTY PERCENT OF THE MONEY
RECEIVED PURSUANT TO THE CONTRACT MUST BE USED FOR DIRECT
BEHAVIORAL HEALTH-CARE SERVICES DESCRIBED IN THIS SUBSECTION
(2)(a).
(b) **Develop training materials and train behavioral health-care providers on cultural competencies specific to the Colorado agricultural and rural community lifestyle.**

(3) **For the 2021-22 fiscal year, and each fiscal year thereafter, the General Assembly shall annually appropriate fifty thousand dollars for the contract awarded pursuant to subsection (1) of this section.**

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

**27-80-118. Center for research into substance use disorder prevention, treatment, and recovery support strategies - established - appropriation - legislative declaration.** (4) (c) **For the 2021-22 state fiscal year, and each fiscal year thereafter, the General Assembly shall appropriate seven hundred fifty thousand dollars to the center from the marijuana tax cash fund created in section 39-28.8-501 for the purposes of this subsection (4).**

(5) (a) The center shall develop and implement a program to increase public awareness concerning the safe use, storage, and disposal of opioids and the availability of naloxone and other drugs used to block the effects of an opioid overdose. The center shall engage in community engagement activities to address substance use prevention, harm reduction, criminal justice system response, treatment, and recovery.

(b) (I) (A) **For the 2019-20 2021-22 state fiscal year, the General Assembly shall appropriate seven hundred fifty thousand dollars to the center from the marijuana tax cash fund created in section 39-28.8-501 (1) for the purposes of this subsection (5):**
(B) For the 2020-21-22 state fiscal year, and each state fiscal year thereafter, through the 2023-24 state fiscal year, the general assembly shall appropriate two hundred fifty thousand dollars per year to the center from the marijuana tax cash fund created in section 39-28.8-501 (1) for the purposes of this subsection (5).

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

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

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

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

27-80-121. Perinatal substance use data linkage project - center for research into substance use disorder prevention, treatment, and recovery support strategies - report. (1) The center for research into substance use disorder prevention, treatment, and recovery support strategies established in section 27-80-118, referred to in this section as the "center", in partnership with an institution of higher education and the state substance abuse trend and response task force established in section 18-18.5-103, may conduct a statewide perinatal substance use data linkage project that uses ongoing collection, analysis, interpretation, and dissemination of data for the planning, implementation, and evaluation of public health actions to improve outcomes for families impacted by substance use during pregnancy. The
data linkage project may consider state-administered data sources that include SHALL UTILIZE DATA FROM THE MEDICAL ASSISTANCE PROGRAM, ARTICLES 4 TO 6 OF TITLE 25.5; THE ELECTRONIC PRESCRIPTION DRUG MONITORING PROGRAM CREATED IN PART 4 OF ARTICLE 280 OF TITLE 12; THE COLORADO TRAILS SYSTEM, AS DEFINED IN SECTION 16-20.5-102 (10); THE COLORADO IMMUNIZATION INFORMATION SYSTEM, CREATED PURSUANT TO SECTION 25-4-2401, ET SEQ.; THE COLORADO CHILD CARE ASSISTANCE PROGRAM, CREATED IN PART 8 OF ARTICLE 2 OF TITLE 26; THE OFFICE OF BEHAVIORAL HEALTH IN THE DEPARTMENT OF HUMAN SERVICES; AND BIRTH AND DEATH RECORDS TO EXAMINE THE FOLLOWING:

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

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

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

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

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

(2.5) (3) The statewide perinatal substance use data linkage
The data linkage project may connect additional state and non-state data sources for the purpose of improving population-level estimates of perinatal substance exposure and examining system utilization and outcomes.

The governor's office of information technology will obtain data and perform secure linkage and anonymization on behalf of the state.

Notwithstanding section 24-1-136 (11)(a)(I), on or before January 1, 2021, and annually thereafter throughout the duration of the data linkage project, the center shall report progress on the data linkage project and the results, if available, to the health and insurance committee and the public health care and human services committee of the house of representatives and the health and human services committee of the senate or their successor committees.

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

27-80-122. Recovery residence certifying body - competitive selection process - appropriation. (1) No later than January 1, 2022, the office of behavioral health shall use a competitive selection process pursuant to the "Procurement Code", articles 101 to 112 of title 24, to select a recovery residence certifying body to:
(a) Certify recovery residences pursuant to section 25-1.5-108.5; and

(b) Educate and train recovery residence owners and recovery residence staff on industry best practices, including best practices for providing culturally responsive and trauma-informed care.

(2) For the 2021-22 state fiscal year and each state fiscal year thereafter, the general assembly shall appropriate two hundred thousand dollars to the Office of Behavioral Health for the purpose of implementing this section.

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

27-80-124. Housing assistance for individuals with a substance use disorder - rules - report - appropriation. (1) The office of behavioral health shall 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:

(a) Transitioning out of a residential treatment setting and into recovery; or

(b) Receiving treatment for the individual's substance use disorder.

(2) The office of behavioral health may promulgate rules establishing the maximum amount of temporary financial assistance that an individual can receive and the maximum amount of time for which an individual may receive assistance. Rules promulgated pursuant to this subsection (2) related to
THE TIME FOR WHICH AN INDIVIDUAL MAY RECEIVE ASSISTANCE MUST BE
CLINICALLY BASED, CULTURALLY RESPONSIVE, AND TRAUMA-INFORMED.

(3) In awarding temporary financial housing assistance in accordance with this section, the Office of Behavioral Health shall consider funding for individuals entering into a recovery residence, as defined in Section 25-1.5-108.5 (1)(a).

(4) Notwithstanding Section 24-1-136 (11)(a)(I), by February 1, 2022, and by February 1 each year thereafter, the Office of Behavioral Health shall submit a report detailing the amount of housing assistance provided in the prior year, the number of individuals and the entities that received the housing assistance, and the duration of housing assistance each individual or entity received to the Health and Human Services Committee of the Senate, the Health and Insurance and the Public and Behavioral Health and Human Services Committees of the House of Representatives, and the Opioid and Other Substance Use Disorders Study Committee created in Section 10-22.3-101, or any successor committees.

(5) For the 2021-22 state fiscal year and each state fiscal year thereafter, the General Assembly shall appropriate four million dollars to the Office of Behavioral Health for the purpose of the housing program described in this section.

27-80-125. Recovery support services grant program - creation - eligibility - reporting requirements - appropriation - rules - definitions. (1) As used in this section, unless the context otherwise requires:

(a) "Grant program" means the recovery support services
GRANT PROGRAM CREATED IN THIS SECTION.

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

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

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

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

(b) PROVIDE GUIDANCE TO INDIVIDUALS WITH A SUBSTANCE USE DISORDER OR CO-OCCURRING SUBSTANCE USE AND MENTAL HEALTH DISORDER AND THEIR FAMILY MEMBERS ON NAVIGATING TREATMENT, SOCIAL SERVICE, AND RECOVERY SUPPORT SYSTEMS;

(c) HELP INDIVIDUALS WITH A SUBSTANCE USE DISORDER OR CO-OCCURRING SUBSTANCE USE AND MENTAL HEALTH DISORDER TO CONNECT WITH RESOURCES NEEDED TO INITIATE AND MAINTAIN
RECOVERY AS OUTLINED BY THE FEDERAL SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION’S FOUR DIMENSIONS OF RECOVERY:

Health, home, community, and purpose;

(d) Assist in establishing and sustaining a social and physical environment supportive of recovery;

(e) Provide local and state recovery resources to recovery community organization participants and community members; and

(f) Provide recovery support services for caregivers and families of individuals recovering from a substance use and co-occurring mental health disorder.

(4) The office of behavioral health shall administer the grant program. Subject to available appropriations, the office shall disburse grant money appropriated pursuant to subsection (8) of this section to each managed service organization designated pursuant to section 27-80-107.

(5) The office of behavioral health shall implement the grant program in accordance with this section. Pursuant to article 4 of title 24, the office shall promulgate rules as necessary to implement the grant program.

(6) (a) To receive a grant, a recovery community organization must submit an application to the applicable managed service organization in accordance with rules promulgated by the office of behavioral health.

(b) Each managed service organization shall review the applications received pursuant to this section. In awarding grants, the managed service organization shall prioritize an
APPLICANT WHOSE PROGRAM OUTLINES THE CAPACITY TO DELIVER RECOVERY SUPPORT SERVICES TO MEET THE NEEDS OF DIVERSE RACIAL, CULTURAL, INCOME, ABILITY, AND OTHER UNDERSERVED GROUPS, INCLUDING THE DELIVERY OF RECOVERY SUPPORT SERVICES BY CULTURALLY RESPONSIVE AND TRAUMA-INFORMED PROFESSIONALS.

(7) (a) ON OR BEFORE DECEMBER 1, 2023, AND ON OR BEFORE DECEMBER 1 EACH YEAR THEREAFTER, EACH MANAGED SERVICE ORGANIZATION THAT AWARDS GRANTS SHALL SUBMIT A REPORT TO THE OFFICE OF BEHAVIORAL HEALTH. AT A MINIMUM, THE REPORT MUST INCLUDE THE FOLLOWING INFORMATION:

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

(II) A DETAILED DESCRIPTION OF THE ORGANIZATION’S ADVOCACY EFFORTS;

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

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

(b) ON OR BEFORE MARCH 1, 2022, AND ON OR BEFORE MARCH 1 EACH YEAR THEREAFTER FOR THE DURATION OF THE GRANT PROGRAM, THE OFFICE OF BEHAVIORAL HEALTH SHALL SUBMIT A SUMMARIZED REPORT ON THE GRANT PROGRAM TO THE HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE AND THE HEALTH AND INSURANCE AND THE PUBLIC AND BEHAVIORAL HEALTH AND HUMAN SERVICES COMMITTEES OF THE HOUSE OF REPRESENTATIVES, OR ANY SUCCESSOR COMMITTEES, AND TO THE OPIOID AND OTHER SUBSTANCE USE DISORDERS STUDY COMMITTEE.
CREATED IN SECTION 10-22.3-101.

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

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

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

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

(b) If any unexpended or uncommitted money appropriated for the 2019-20 or 2020-21 fiscal year remains at the end of either fiscal year, the office of behavioral health may expend the money in accordance with this section in the succeeding fiscal year without further appropriation. Any unexpended or uncommitted money remaining at the
end of the 2021-22 fiscal year reverts to the marijuana tax cash fund created in section 39-28.8-501 (1):

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

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

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

SECTION 19. In Colorado Revised Statutes, 17-1-113.4, **amend** (2) and (4)(b); and **add** (3.5) as follows:

**17-1-113.4. Opioid treatment for a person in custody - definitions.** (2) (a) Qualified medication administration personnel may, in accordance with a written physician's order, administer opioid agonists and opioid antagonists FOR THE TREATMENT OF AN OPIOID USE DISORDER pursuant to subsection (1) of this section.

(b) AS FUNDING AND SUPPLIES ALLOW, IF A PERSON IN CUSTODY IS TREATED FOR AN OPIOID USE DISORDER PURSUANT TO THIS SECTION, THE CORRECTIONAL FACILITY OR PRIVATE CONTRACT PRISON SHALL OFFER THE PERSON, UPON RELEASE FROM THE FACILITY, AT LEAST TWO DOSES OF AN OPIOID REVERSAL MEDICATION, IN A FORM APPROVED BY THE FEDERAL DRUG ADMINISTRATION, AND PROVIDE EDUCATION TO THE PERSON ABOUT THE APPROPRIATE USE OF THE MEDICATION.

(3.5) **Nothing in this section imposes civil or criminal**
LIABILITY ON STATE LAW ENFORCEMENT AGENCY OR LAW ENFORCEMENT OFFICER WHEN ORDINARY CARE IS USED IN THE ADMINISTRATION OR PROVISION OF AN OPIOID REVERSAL MEDICATION IN CASES WHEN AN INDIVIDUAL APPEARS TO BE EXPERIENCING AN OPIOID OVERDOSE.

(4) As used in this section, unless the context otherwise requires:

(b) "Opioid antagonist" means naltrexone, AN OPIOID REVERSAL MEDICATION, or any similarly acting drug USED FOR THE TREATMENT OF AN OPIOID USE DISORDER that is not a controlled substance and that is approved by the federal food and drug administration for the treatment of an opioid use disorder.".

SECTION 20. In Colorado Revised Statutes, 18-18-607, amend (4) as follows:

18-18-607. Safe stations - disposal of controlled substances - medical evaluation - definition. (4) As used in this section, unless the context otherwise requires, a "safe station" means any municipal police station OR county sheriff's office. or municipal, county, or fire protection district fire station.".

SECTION 21. In Session Laws of Colorado 2020, amend section 27-81-102 (13.8), Colorado Revised Statutes, as added by section 12 of chapter 286, as follows:

Section 12. In Colorado Revised Statutes, 27-81-102, amend (14); amend as it exists until July 1, 2022, (1); amend as it will become effective July 1, 2022, (1); add (9.4); add with amended and relocated provisions (6.5), (9.2), (13.6), and (13.9); add with amended and relocated provisions as it exists until July 1, 2022, (1.2) AND (13.8); and add with amended and relocated provisions as they will become effective July 1, 2022, (1.2) and (13.8) as follows:
27-81-102. Definitions. As used in this article 81, unless the context otherwise requires:

(13.8) [Formerly 27-82-102 (13.5) as it is effective until July 1, 2022] "Substance use disorder" means a condition by which a person habitually uses drugs or uses drugs to the extent that his or her health is substantially impaired or endangered or his or her social or economic function is substantially disrupted. Nothing in this subsection (13.5) precludes the denomination of a person with a substance use disorder as a person under the influence of or incapacitated by drugs. A CHRONIC RELAPSING BRAIN DISEASE, CHARACTERIZED BY RECURRENT USE OF ALCOHOL, DRUGS, OR BOTH, CAUSING CLINICALLY SIGNIFICANT IMPAIRMENT, INCLUDING HEALTH PROBLEMS, DISABILITY, AND FAILURE TO MEET MAJOR RESPONSIBILITIES AT WORK, SCHOOL, OR HOME.

(13.8) [Formerly 27-82-102 (13.5) as it will become effective July 1, 2022] "Substance use disorder" means a chronic relapsing brain disease, characterized by recurrent use of alcohol, drugs, or both, causing clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.

SECTION 22. In Colorado Revised Statutes, repeal 25-20.5-1104 and 27-82-205.

SECTION 23. Appropriation. (1) For the 2021-22 state fiscal year, $6,050,000 is appropriated to the department of human services for use by the office of behavioral health. This appropriation is from the general fund. To implement this act, the office may use this appropriation
as follows:

(a) $4,000,000 for the housing assistance program, which amount
is based on an assumption that the office will require an additional 1.0
FTE;

(b) $1,600,000 for the recovery support services grant program,
which amount is based on an assumption that the office will require an
additional 1.0 FTE;

(c) $50,000 for rural behavioral health vouchers;

(d) $200,000 for treatment and detoxification programs; and

(e) $200,000 for recovery residence certification.

(2) For the 2021-22 state fiscal year, $750,000 is appropriated to
the department of public health and environment. This appropriation is
from the general fund. To implement this act, the department may use this
appropriation as follows:

(a) $500,000 for sexually transmitted infections, HIV and AIDS
operating expenses; and

(b) $250,000 for mental health first aid training.

(3) For the 2021-22 state fiscal year, $190,000 is appropriated to
the department of human services for use by the office of early childhood.
This appropriation is from the general fund. To implement this act, the
office may use this appropriation for early childhood mental health
services.

(4) For the 2021-22 state fiscal year, $3,750,000 is appropriated
to the department of higher education from the marijuana tax cash fund
created in section 39-28.8-501 (1), C.R.S. To implement this act, the
department may use this appropriation for the center for research into
substance use disorder prevention, treatment, and recovery support.
strategies at the university of Colorado health sciences center.

(5) For the 2021-22 state fiscal year, $900,000 is appropriated to
the department of higher education. This appropriation is from the
marijuana tax cash fund created in section 39-28.8-501 (1), C.R.S. To
implement this act, the department may use this appropriation for
allocation to the Colorado state university cooperative extension service
agrability project.

(6) For the 2021-22 state fiscal year, $112,179 is appropriated to
the department of health care policy and financing. This appropriation is
from the general fund. To implement this act, the department may use this
appropriation as follows:

(a) $33,960 for use by the executive director's office for personal
services; and

(b) $78,219 for medical services premiums, which amount is
subject to the "(M)" notation as defined in the annual general
appropriations act for the same fiscal year.

(7) For the 2021-22 state fiscal year, the general assembly
anticipates that the department of health care policy and financing will
receive $112,179 in federal funds to implement this act. The
appropriation in subsection (6) of this section is based on the assumption
that the department will receive this amount of federal funds to be used
as follows:

(a) $33,960 for use by the executive director's office for personal
services and which is subject to the "(I)" notation as defined in the annual
general appropriation act for the same fiscal year; and

(b) $78,219 for medical services premiums.

SECTION 24. Safety clause. The general assembly hereby finds,
1 determines, and declares that this act is necessary for the immediate
2 preservation of the public peace, health, or safety.