SENATE BILL 21-137

SENATE SPONSORSHIP
Pettersen,

HOUSE SPONSORSHIP
Michaelson Jenet and Kennedy,

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.

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

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

SECTION 2. In Colorado Revised Statutes, 12-290-111, repeal (3)(b) as follows:
12-290-111. Prescriptions - requirement to advise patients - limit on opioid prescriptions. (3) (b) This subsection (3) is repealed, effective September 1, 2021.

SECTION 3. 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 THROUGH 2023-24 state fiscal years, the general assembly shall annually appropriate 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 2022-23 fiscal year reverts to the marijuana tax cash fund.

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

23-21-809. Repeal of part. This part is repealed, effective June 30, 2022 2023.

SECTION 5. 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.

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

25-1-521. State department - local public health agencies - address behavioral health disorders - appropriation. For the 2021-22 fiscal year, and each fiscal year thereafter, the general assembly shall appropriate two million dollars to the state department to address behavioral health disorders through public health prevention and intervention and to work with community partners, including county and district public health agencies, to address behavioral health, mental health, and substance use priorities throughout the state. The state department may use the money for data collection, analysis, and dissemination activities related to behavioral health disorders at the state and local levels, including community health assessments and improvement planning. The state department may use up to five hundred thousand dollars of the money for administrative costs and other activities related to the purposes of this section.

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
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.
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 ANY PERSON, REGARDLESS OF WHETHER THE PERSON IS ENROLLED IN THE MEDICAL ASSISTANCE PROGRAM, SO LONG AS THE PERSON'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
(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 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".
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:


(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

(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 2021-22 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 project may conduct ongoing research related to the incidence of perinatal substance exposure or related infant and family health and human service outcomes based on the standards specified in sections 19-1-103(1)(a)(VII) and 19-3-102 (1)(g) for determining child abuse or neglect or whether a child is neglected or dependent.

(4) 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.

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

(4) (6) 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.

(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.

(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.

(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
OPPIOID 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 A LOCAL OR 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, $500,000 is appropriated to the department of education. This appropriation is from the general fund. The department may use this appropriation for the behavioral health care professional matching grant program created in section 22-96-103, C.R.S.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(7) For the 2021-22 state fiscal year, $120,000 is appropriated to
the department of law. The appropriation is from the general fund. The
department may use this appropriation for the safe2tell program created
in section 24-31-606, C.R.S.

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