

Second Regular Session
Seventy-third General Assembly
STATE OF COLORADO

PREAMENDED

*This Unofficial Version Includes Committee
Amendments Not Yet Adopted on Second Reading*

LLS NO. 22-0802.01 Conrad Imel x2313

HOUSE BILL 22-1281

HOUSE SPONSORSHIP

Gonzales-Gutierrez and Ricks, Amabile, Bradfield, Michaelson Jenet, Van Beber, Bacon, Benavidez, Bennett, Bird, Boesenecker, Cutter, Duran, Esgar, Exum, Froelich, Herod, Hooton, Jodeh, Kipp, Lindsay, Lontine, McCluskie, McCormick, Mullica, Ortiz, Sirota, Titone, Valdez A., Valdez D., Weissman, Woodrow, Young

SENATE SPONSORSHIP

Winter and Rankin,

House Committees

Public & Behavioral Health & Human Services
Appropriations

Senate Committees

Appropriations

A BILL FOR AN ACT

101 **CONCERNING A PROGRAM TO FUND BEHAVIORAL HEALTH-CARE**
102 **SERVICES, AND, IN CONNECTION THEREWITH, MAKING AN**
103 **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>.)

The bill establishes the community behavioral health-care continuum gap grant program (grant program) in the behavioral health administration (BHA). The BHA administers the grant program. As part of the grant program, the BHA may award community investment grants to support services along the continuum of behavioral health care and

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.

HOUSE
3rd Reading Unamended
April 25, 2022

HOUSE
Amended 2nd Reading
April 22, 2022

children, youth, and family services grants to expand youth-oriented and family-oriented behavioral health-care services. A community-based organization, local government, or nonprofit organization is eligible for a grant award.

The BHA must develop a behavioral health-care services assessment tool that grant applicants can use to identify regional gaps in services on the behavioral health-care service continuum. In awarding grants, the BHA shall give preference to applicants providing a service that addresses a gap in services identified with the assessment tool.

In order to receive a grant, an applicant must submit an application and identify a source of contributing funds or nonfinancial contributing resources, such as in-kind contributions, that directly support the behavioral health-care services provided with the grant award.

Each grant recipient must report to the BHA information about the use of the grant award. The state department of human services must include information about the grant program in its annual "State Measurement for Accountable, Responsive, and Transparent (SMART) Government Act" hearing.

The bill appropriates \$90 million from the behavioral and mental health cash fund to the state department for the grant program.

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

2 **SECTION 1. Legislative declaration.** (1) The general assembly
3 declares that it intends to further the goals declared by the behavioral
4 health transformational task force, established by the general assembly in
5 2021, which includes ensuring that:

6 (a) Those with the highest needs get the care they need when they
7 need it;

8 (b) People can access a behavioral health-care service when they
9 need it and as early in the continuum as possible;

10 (c) People with behavioral health-care needs are connected to
11 services across the behavioral health-care the continuum;

12 (d) Equitable, culturally responsive, inclusive, effective, and
13 high-quality services are available in all regions across Colorado;

14 (e) The state has a trained, qualified, and diverse workforce that

1 is sufficient to meet the needs of Coloradans; and

2 (f) There is integration and parity between physical and behavioral
3 health.

4 (2) The general assembly further finds and declares that:

5 (a) The federal government enacted the "American Rescue Plan
6 Act of 2021" (ARPA), Pub.L. 117-2, pursuant to which Colorado
7 received \$3,828,761,790 to mitigate the fiscal effects stemming from the
8 COVID-19 public health emergency;

9 (b) Government recipients of ARPA funds may use the funds to
10 provide resources for governments to meet the public health and
11 economic needs of those impacted by the pandemic in their communities.
12 Pursuant to ARPA and subsequent federal regulations, when providing
13 behavioral health-care services, government recipients may presume that
14 the general public was impacted by the pandemic, and they can therefore
15 use ARPA funds to provide a broad range of behavioral health-care
16 services to the public.

17 (c) The expenditures for the community behavioral health-care
18 continuum gap grant program, which provides grants for programs and
19 services along the behavioral health-care continuum, are considered an
20 allowable use under ARPA and are necessary to respond to the
21 COVID-19 public health emergency; and

22 (d) The behavioral health-care services and programs and funding
23 for behavioral health facilities and equipment described in this act are
24 important government services.

25 **SECTION 2.** In Colorado Revised Statutes, **add** part 3 to article
26 60 of title 27 as follows:

27 **PART 3**

1 COMMUNITY BEHAVIORAL HEALTH-CARE CONTINUUM

2 GAP GRANT PROGRAM

3 **27-60-301. Definitions.** AS USED IN THIS PART 3, UNLESS THE
4 CONTEXT OTHERWISE REQUIRES:

5 (1) "BEHAVIORAL HEALTH ADMINISTRATION" OR "BHA" MEANS
6 THE BEHAVIORAL HEALTH ADMINISTRATION ESTABLISHED IN SECTION
7 27-60-203.

8 (2) "BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION"
9 MEANS A BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION
10 DESIGNATED BY THE BHA COMMISSIONER AFTER CONSULTATION WITH
11 THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING AND
12 CONSIDERATION OF THE REGIONAL STRUCTURE THAT SERVES THE
13 MEDICAID POPULATION.

14 (3) "BEHAVIORAL HEALTH-CARE SERVICES ASSESSMENT TOOL"
15 MEANS THE ASSESSMENT TOOL DESCRIBED IN SECTION 27-60-302 (1)(c)
16 DEVELOPED BY THE BHA TO IDENTIFY REGIONAL GAPS IN BEHAVIORAL
17 HEALTH-CARE SERVICES.

18 (4) "CARE ACCESS POINT" MEANS A LOCATION AT WHICH A PERSON
19 SEEKING BEHAVIORAL HEALTH CARE CAN RECEIVE CARE COORDINATION.

20 (5) "COMMUNITY-BASED ORGANIZATION" MEANS A NONPROFIT OR
21 FOR-PROFIT ORGANIZATION THAT PROVIDES BEHAVIORAL HEALTH-CARE
22 SERVICES.

23 (6) "GRANT PROGRAM" MEANS THE COMMUNITY BEHAVIORAL
24 HEALTH-CARE CONTINUUM GAP GRANT PROGRAM ESTABLISHED IN SECTION
25 27-60-302.

26 (7) "LOCAL EDUCATION PROVIDER" MEANS A SCHOOL DISTRICT, A
27 CHARTER SCHOOL AUTHORIZED PURSUANT TO PART 1 OF ARTICLE 30.5 OF

1 TITLE 22, AN INSTITUTE CHARTER SCHOOL AUTHORIZED PURSUANT TO
2 PART 5 OF ARTICLE 30.5 OF TITLE 22, OR A BOARD OF COOPERATIVE
3 SERVICES AS DEFINED IN SECTION 22-5-103.

4 (8) "LOCAL GOVERNMENT" MEANS A COUNTY, MUNICIPALITY, CITY
5 AND COUNTY, OR LOCAL EDUCATION PROVIDER.

6 (9) "MEDICATION-ASSISTED TREATMENT" OR "MAT" HAS THE
7 SAME MEANING AS SET FORTH IN SECTION 23-21-803.

8 (10) "NONPROFIT ORGANIZATION" MEANS AN ORGANIZATION THAT
9 IS EXEMPT FROM TAXATION UNDER SECTION 501 (c)(3) OF THE FEDERAL
10 "INTERNAL REVENUE CODE OF 1986", AS AMENDED.

11 **27-60-302. Behavioral health-care continuum grant**

12 **program - established - rules.** (1) (a) THERE IS ESTABLISHED IN THE
13 BEHAVIORAL HEALTH ADMINISTRATION THE BEHAVIORAL HEALTH-CARE
14 CONTINUUM GAP GRANT PROGRAM TO PROVIDE GRANTS TO LOCAL
15 GOVERNMENTS, COMMUNITY-BASED ORGANIZATIONS, AND NONPROFIT
16 ORGANIZATIONS FOR PROGRAMS AND SERVICES ALONG THE BEHAVIORAL
17 HEALTH-CARE CONTINUUM IN AREAS OF HIGHEST NEED, INCLUDING
18 CHILDREN-ORIENTED, YOUTH-ORIENTED, AND FAMILY-ORIENTED
19 BEHAVIORAL HEALTH-CARE SERVICES.

20 (b) (I) THE BEHAVIORAL HEALTH ADMINISTRATION SHALL
21 ADMINISTER THE GRANT PROGRAM. THE BHA SHALL CREATE A GRANT
22 APPLICATION PROCESS AND MAKE THE PROCESS PUBLICLY AVAILABLE ON
23 ITS WEBSITE PRIOR TO ACCEPTING APPLICATIONS. THE BHA SHALL BEGIN
24 ACCEPTING GRANT APPLICATIONS NO LATER THAN DECEMBER 31, 2022.

25 (II) THE BHA SHALL PROVIDE GRANT APPLICATION SUPPORT TO AN
26 APPLICANT, UPON REQUEST, FROM A GRANT APPLICATION WRITING
27 PROFESSIONAL WHO IS INDEPENDENT FROM THE GRANT PROGRAM.

1 (III) IN CONNECTION WITH THE REVIEW OF GRANT APPLICATIONS
2 AND AWARDS, THE BHA SHALL SOLICIT INPUT FROM A DIVERSE
3 STAKEHOLDER GROUP THAT REFLECTS THE GEOGRAPHIC AND
4 DEMOGRAPHIC DIVERSITY OF THE ENTIRE STATE, INCLUDING MEMBERS
5 FROM RURAL AND URBAN AREAS, AND MEMBERS OF DIVERSE RACIAL,
6 DISABILITY, AND CULTURAL GROUPS AND OF DIVERSE SEXUAL
7 ORIENTATIONS AND GENDERS.

8 (c) THE BHA SHALL DEVELOP A BEHAVIORAL HEALTH-CARE
9 SERVICES ASSESSMENT TOOL TO IDENTIFY REGIONAL GAPS IN SERVICES ON
10 THE BEHAVIORAL HEALTH-CARE SERVICE CONTINUUM. THE BHA SHALL
11 MAKE THE ASSESSMENT TOOL PUBLICLY AVAILABLE ON ITS WEBSITE PRIOR
12 TO ACCEPTING APPLICATIONS FOR A GRANT PURSUANT TO THIS PART 3.

13 (d) IN ADMINISTERING THE GRANT PROGRAM, THE BHA MAY
14 AWARD THE FOLLOWING TYPES OF GRANTS:

15 (I) COMMUNITY INVESTMENT GRANTS, AS DESCRIBED IN
16 SUBSECTION (2) OF THIS SECTION, TO ADDRESS IDENTIFIED LOCAL
17 BEHAVIORAL HEALTH-CARE NEEDS [REDACTED] ALONG THE CONTINUUM OF
18 BEHAVIORAL HEALTH CARE, INCLUDING SERVICES FOR ADULTS OR
19 FAMILIES WITH ACUTE, COMPLEX, OR SEVERE CONDITIONS AND NEEDS;
20 AND

21 (II) CHILDREN, YOUTH, AND FAMILY SERVICES GRANTS, AS
22 DESCRIBED IN SUBSECTION (3) OF THIS SECTION, TO EXPAND
23 CHILDREN-ORIENTED, YOUTH-ORIENTED, AND FAMILY-ORIENTED
24 BEHAVIORAL HEALTH-CARE SERVICES TO ADDRESS IDENTIFIED LOCAL
25 BEHAVIORAL HEALTH-CARE NEEDS ALONG THE CONTINUUM OF
26 BEHAVIORAL HEALTH CARE, INCLUDING SERVICES FOR CHILDREN, YOUTH,
27 AND FAMILIES WITH ACUTE, COMPLEX, OR SEVERE CONDITIONS AND NEEDS.

1 (2) **Community investment grants.** (a) AS PART OF THE GRANT
2 PROGRAM, THE BHA SHALL AWARD GRANTS TO INVEST IN AND ADDRESS
3 IDENTIFIED BEHAVIORAL HEALTH-CARE NEEDS IN THE GRANT APPLICANT'S
4 COMMUNITY.

5 (b) A COMMUNITY-BASED ORGANIZATION, LOCAL GOVERNMENT,
6 FEDERALLY RECOGNIZED INDIAN TRIBE, OR NONPROFIT ORGANIZATION IS
7 ELIGIBLE FOR A COMMUNITY INVESTMENT GRANT.

8 (c) (I) A COMMUNITY INVESTMENT GRANT AWARD MAY BE USED
9 FOR EVIDENCE-BASED OR EVIDENCE-INFORMED SERVICES ALONG THE
10 BEHAVIORAL HEALTH-CARE CONTINUUM, INCLUDING PREVENTION,
11 TREATMENT, CRISIS SERVICES, RECOVERY, HARM REDUCTION, CARE
12 NAVIGATION AND COORDINATION, TRAUMA RECOVERY,
13 TRAUMA-INFORMED TRAINING, TRAINING ON PROVIDING SERVICES IN A
14 CULTURALLY RESPONSIVE MANNER, TRANSITIONAL HOUSING, SUPPORTIVE
15 HOUSING, AND RECOVERY HOMES. A COMMUNITY INVESTMENT GRANT
16 AWARD MAY ALSO BE USED FOR CAPITAL EXPENDITURES RELATED TO
17 PROVIDING THESE SERVICES, WHICH MAY INCLUDE THE CREATION OR
18 REDESIGN OF MENTAL HEALTH INPATIENT BEDS, EMERGENCY ROOM BEDS
19 FOR MENTAL HEALTH CRISIS PATIENTS, OUTPATIENT MENTAL HEALTH
20 BEDS, AND STEP-DOWN FACILITIES CONNECTED WITH A HOSPITAL. A
21 COMMUNITY INVESTMENT GRANT AWARD MAY ALSO BE USED TO EXPAND
22 CAPACITY FOR EXISTING TREATMENT, PROGRAMS, OR SERVICES WITHIN
23 THE GRANT RECIPIENT'S JURISDICTION OR SERVICE AREA.

24 (II) A GRANT RECIPIENT THAT IS A PRIMARY CARE PROVIDER,
25 WITHDRAWAL MANAGEMENT PROVIDER, OUTPATIENT SUBSTANCE USE
26 TREATMENT PROVIDER, OR HOSPITAL MAY USE A GRANT AWARD TO
27 CREATE A PROGRAM COMMONLY KNOWN AS "TREATMENT ON DEMAND" TO

1 PREPARE PROVIDERS TO OFFER SAME-DAY ACCESS TO INITIATE
2 MEDICATION-ASSISTED TREATMENT, SUBSTANCE USE COUNSELING, PEER
3 SUPPORT, AND NAVIGATION SERVICES. AS PART OF A
4 TREATMENT-ON-DEMAND PROGRAM, A GRANT AWARD MAY BE USED FOR:

5 (A) TECHNICAL ASSISTANCE TO REDESIGN ACCESS AND IMPROVE
6 EFFICIENCIES THAT WOULD MAKE TREATMENT ACCESSIBLE ON A
7 SAME-DAY BASIS, INCLUDING EDUCATION OF PROVIDERS ON
8 DETERMINATION OF LEVELS OF CARE AS DESCRIBED BY THE AMERICAN
9 SOCIETY OF ADDICTION MEDICINE;

10 (B) DEVELOPING PROTOCOLS AND CREDENTIALING PROVIDERS TO
11 INITIATE PSYCHOPHARMACOLOGICAL TREATMENTS; OR

12 (C) RECRUITING AND TRAINING PEER SUPPORT PROFESSIONALS TO
13 ACT AS NAVIGATORS AND ADVOCATES FOR INDIVIDUALS AND DEVELOPING
14 PARTNERSHIPS ACROSS LEVELS OF CARE TO FACILITATE TRANSFERS OF
15 CARE FROM HOSPITAL AND WITHDRAWAL MANAGEMENT PROGRAMS TO
16 ONGOING TREATMENT.

17 (3) **Children, youth, and family services grants.** (a) AS PART OF
18 THE GRANT PROGRAM, THE BHA SHALL AWARD CHILDREN, YOUTH, AND
19 FAMILY SERVICES GRANTS TO EXPAND CHILDREN-ORIENTED,
20 YOUTH-ORIENTED, AND FAMILY-ORIENTED BEHAVIORAL HEALTH-CARE
21 SERVICES WITH THE GOAL OF ESTABLISHING A CARE ACCESS POINT IN EACH
22 BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION.

23 (b) A COMMUNITY-BASED ORGANIZATION; LOCAL GOVERNMENT;
24 FEDERALLY RECOGNIZED INDIAN TRIBE; LOCAL COLLABORATIVE
25 MANAGEMENT PROGRAMS, AS DESCRIBED IN SECTION 24-1.9-102; LOCAL
26 JUVENILE SERVICES PLANNING COMMITTEE CREATED PURSUANT TO
27 SECTION 19-2.5-302; OR NONPROFIT ORGANIZATION IS ELIGIBLE FOR A

1 CHILDREN, YOUTH, AND FAMILY SERVICES GRANT.

2 (c) A CHILDREN, YOUTH, AND FAMILY SERVICES GRANT AWARD
3 MAY BE USED FOR:

4 (I) ESTABLISHING AND OPERATING A CHILDREN-ORIENTED,
5 YOUTH-ORIENTED, AND FAMILY-ORIENTED CARE ACCESS POINT THAT IS
6 PHYSICALLY CONNECTED TO A FAMILY RESOURCE CENTER, AS DEFINED IN
7 SECTION 26-18-102, OR A FACILITY THAT PROVIDES BEHAVIORAL
8 HEALTH-CARE TREATMENT;

9 (II) CHILDREN-ORIENTED, YOUTH-ORIENTED, AND
10 FAMILY-ORIENTED BEHAVIORAL HEALTH-CARE NAVIGATION AND
11 COORDINATION SERVICES;

12 (III) EXPANDING EVIDENCE-BASED OR EVIDENCE-INFORMED
13 BEHAVIORAL HEALTH-CARE TREATMENT, INCLUDING SUBSTANCE USE
14 DISORDER TREATMENT, FOR CHILDREN, YOUTH, AND FAMILIES;

15 (IV) INTENSIVE OUTPATIENT SERVICES, INCLUDING HIGH-FIDELITY
16 WRAPAROUND YOUTH MOBILE RESPONSE AND EXPANDED CAREGIVER
17 INTERVENTIONS; AND

18 (V) CAPITAL EXPENDITURES RELATED TO PROVIDING THE
19 TREATMENT AND SERVICES DESCRIBED IN THIS SUBSECTION (3)(c).

20 **27-60-303. Grant program application - criteria - contributing**
21 **resources - award - rules.** (1) IN ORDER TO RECEIVE A GRANT, AN
22 ENTITY MUST USE THE BEHAVIORAL HEALTH-CARE SERVICES ASSESSMENT
23 TOOL OR A COUNTY, REGIONAL, OR COMMUNITY ASSESSMENT TOOL TO
24 IDENTIFY GAPS IN BEHAVIORAL HEALTH-CARE SERVICES IN THE
25 BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION SERVED BY THE
26 GRANT AWARD AND SUBMIT AN APPLICATION TO THE BHA. AT A
27 MINIMUM, THE APPLICATION MUST INCLUDE:

1 (a) WHETHER THE GRANT IS A COMMUNITY INVESTMENT GRANT,
2 AS DESCRIBED IN SECTION 27-60-302 (2), OR A CHILDREN, YOUTH, AND
3 FAMILY SERVICES GRANT, AS DESCRIBED IN SECTION 27-60-302 (3);

4 (b) THE REQUESTED AMOUNT OF THE GRANT AWARD AND A
5 DESCRIPTION OF THE SERVICE THAT WILL BE PROVIDED WITH THE GRANT
6 AWARD;

7 (c) A DEMONSTRATION OF THE NEED FOR THE SERVICE THAT WILL
8 BE PROVIDED, INCLUDING WHETHER THE SERVICE ADDRESSES A GAP IN
9 SERVICES IDENTIFIED BY THE APPLICANT;

10 (d) A DEMONSTRATION THAT THE APPLICANT HAS COLLABORATED
11 OR COMMUNICATED WITH RELEVANT COMMUNITY-BASED ORGANIZATIONS
12 AND WITH A LOCAL GOVERNMENT IN WHICH SERVICES WILL BE OFFERED;

13 (e) THE SOURCE OF CONTRIBUTING FUNDS OR IN-KIND
14 CONTRIBUTING RESOURCES, AS DESCRIBED IN SUBSECTION (3) OF THIS
15 SECTION, OR WHETHER THE APPLICANT IS REQUESTING A WAIVER FROM
16 THE CONTRIBUTING FUNDS OR IN-KIND CONTRIBUTING RESOURCES
17 REQUIREMENT;

18 (f) WHETHER THE INTENDED USE OF THE GRANT AWARD ALIGNS
19 WITH A REGIONAL OPIOID SETTLEMENT PLAN, IF APPLICABLE, OR A LOCAL
20 PUBLIC HEALTH NEEDS ASSESSMENT FOR THE AREA IN WHICH THE
21 SERVICES WILL BE PROVIDED;

22 (g) A PLAN TO SUSTAIN THE SERVICES PROVIDED WITH A GRANT
23 AWARD BEYOND THE DURATION OF THE GRANT, IF APPLICABLE;

24 (h) A DESCRIPTION OF THE APPLICANT'S EXPERIENCE IN PROVIDING
25 CULTURALLY COMPETENT AND GENDER RESPONSIVE SERVICES, AND
26 WHETHER THE APPLICANT IS REPRESENTATIVE OF THE INDIVIDUALS THE
27 APPLICANT SEEKS TO SERVE WITH THE GRANT; AND

1 (i) ANY OTHER INFORMATION REQUIRED BY THE STATE
2 DEPARTMENT.

3 (2) THE BHA SHALL ACCEPT AND REVIEW GRANT APPLICATIONS
4 AND AWARD GRANTS. IN AWARDING GRANTS, THE BHA SHALL CONSIDER
5 THE CRITERIA DESCRIBED IN SUBSECTION (1) OF THIS SECTION AND SHALL
6 GIVE PREFERENCE TO APPLICANTS PROVIDING A SERVICE THAT ADDRESSES
7 A GAP IN SERVICES IDENTIFIED BY THE APPLICANT WITH THE BEHAVIORAL
8 HEALTH-CARE SERVICES ASSESSMENT TOOL.

9 (3) (a) THE BHA SHALL ONLY AWARD GRANTS TO APPLICANTS
10 THAT OFFER A MONETARY CONTRIBUTION OR IN-KIND CONTRIBUTIONS
11 THAT DIRECTLY SUPPORT THE SERVICES PROVIDED WITH A GRANT AWARD.
12 IN DETERMINING THE AMOUNT OF CONTRIBUTING RESOURCES REQUIRED
13 FOR AN APPLICANT, THE BHA SHALL CONSIDER THE SIZE OF THE
14 APPLICANT ORGANIZATION, INCLUDING AVAILABLE STAFF AND ANNUAL
15 OPERATING BUDGET. THE BHA MAY WAIVE THE CONTRIBUTING
16 RESOURCES REQUIREMENT FOR AN APPLICANT THAT IS REQUESTING A
17 GRANT AWARD OF LESS THAN FIFTY THOUSAND DOLLARS.

18 (b) IN DETERMINING WHETHER AN APPLICANT HAS IDENTIFIED A
19 GAP IN SERVICES ON THE BEHAVIORAL HEALTH-CARE SERVICE
20 CONTINUUM, THE BHA SHALL ACCEPT THE RESULTS OF AN ASSESSMENT
21 CONDUCTED BY THE APPLICANT WITH THE BEHAVIORAL HEALTH-CARE
22 SERVICES ASSESSMENT TOOL DEVELOPED BY THE BHA OR A COUNTY,
23 REGIONAL, OR COMMUNITY ASSESSMENT TOOL THAT DEMONSTRATES GAPS
24 IN SERVICES.

25 (c) A PROGRAM FUNDED BY A GRANT AWARD MUST COMPLY WITH
26 THE FEDERAL "AMERICANS WITH DISABILITIES ACT OF 1990", 42 U.S.C.
27 SEC.12101 ET SEQ., AS AMENDED, AND SERVE INDIVIDUALS WITH A

1 DISABILITY, AS DEFINED IN THE FEDERAL ACT, REGARDLESS OF PRIMARY
2 DIAGNOSIS, CO-OCCURRING CONDITIONS, OR IF THE INDIVIDUAL REQUIRES
3 ASSISTANCE WITH ACTIVITIES OF DAILY LIVING, AS DEFINED IN SECTION
4 12-270-104.

5 (4) (a) A GRANT RECIPIENT SHALL SPEND OR OBLIGATE ANY GRANT
6 MONEY BY DECEMBER 31, 2024. ANY MONEY OBLIGATED BY DECEMBER
7 31, 2024, MUST BE EXPENDED BY DECEMBER 31, 2026.

8 (b) A GRANT RECIPIENT MAY USE NO MORE THAN TEN PERCENT OF
9 A GRANT AWARD FOR ADMINISTRATIVE COSTS ASSOCIATED WITH RECEIPT
10 OF THE GRANT AWARD.

11 **27-60-304. Grant program reporting requirements.** (1) EACH
12 GRANT RECIPIENT SHALL SUBMIT A REPORT TO THE BHA FOLLOWING THE
13 EXPIRATION OF THE GRANT TERM. THE REPORT MUST INCLUDE:

14 (a) INFORMATION ABOUT THE USE OF THE GRANT AWARD,
15 INCLUDING THE SERVICES PROVIDED WITH A GRANT AWARD AND WHERE
16 THOSE SERVICES WERE PROVIDED;

17 (b) THE AMOUNT OF CONTRIBUTING FUNDS OR IN-KIND
18 CONTRIBUTING RESOURCES THAT SUPPORTED THE SERVICES;

19 (c) AGGREGATED DEMOGRAPHIC INFORMATION OF THE
20 INDIVIDUALS WHO RECEIVE SERVICES FUNDED WITH A GRANT AWARD;

21 (d) WHETHER THE RECIPIENT IS CONTINUING TO PROVIDE THE
22 SERVICES, AND ANY OTHER INFORMATION REQUESTED BY THE STATE
23 DEPARTMENT.

24 (2) (a) IN ITS ANNUAL REPORT TO THE COMMITTEES OF REFERENCE
25 PURSUANT TO THE "STATE MEASUREMENT FOR ACCOUNTABLE,
26 RESPONSIVE, AND TRANSPARENT (SMART) GOVERNMENT ACT"
27 REQUIRED BY SECTION 2-7-203, THE STATE DEPARTMENT SHALL PROVIDE

1 INFORMATION ABOUT THE GRANT PROGRAM, INCLUDING INFORMATION ON
2 THE TYPE OF SERVICES FUNDED WITH A GRANT AWARD AND WHERE THOSE
3 SERVICES WERE PROVIDED.

4 (b) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), THE
5 REPORTING REQUIREMENT IN THIS SUBSECTION (2) CONTINUES
6 INDEFINITELY.

7 **27-60-305. Grant program funding - requirements - reports.**

8 (1) THE GENERAL ASSEMBLY SHALL APPROPRIATE TO THE STATE
9 DEPARTMENT SEVENTY-FIVE MILLION DOLLARS FROM THE BEHAVIORAL
10 AND MENTAL HEALTH CASH FUND CREATED IN SECTION 24-75-230 TO
11 IMPLEMENT THE GRANT PROGRAM.

12 (2) OF THE MONEY APPROPRIATED TO THE STATE DEPARTMENT,
13 THE BHA SHALL AWARD GRANTS IN THE FOLLOWING MANNER:

14 (a) THIRTY-FIVE MILLION DOLLARS FOR COMMUNITY INVESTMENT
15 GRANTS, AS DESCRIBED IN SECTION 27-60-302 (2); AND

16 (b) FORTY MILLION DOLLARS FOR CHILDREN, YOUTH, AND FAMILY
17 SERVICES GRANTS, AS DESCRIBED IN SECTION 27-60-302 (3).

18 (3) (a) THE STATE DEPARTMENT, BHA, AND ANY PERSON WHO
19 RECEIVES MONEY FROM THE BHA, INCLUDING EACH GRANT RECIPIENT,
20 SHALL COMPLY WITH THE COMPLIANCE, REPORTING, RECORD-KEEPING,
21 AND PROGRAM EVALUATION REQUIREMENTS ESTABLISHED BY THE OFFICE
22 OF STATE PLANNING AND BUDGETING AND THE STATE CONTROLLER IN
23 ACCORDANCE WITH SECTION 24-75-226 (5).

24 (b) TO BE ELIGIBLE TO RECEIVE GRANT MONEY FOR A CAPITAL
25 EXPENDITURE, THE GRANT APPLICANT MUST SUBMIT TO THE BHA A
26 WRITTEN JUSTIFICATION AS SET FORTH IN 31 CFR 35.6 (b)(4) FOR THE
27 CAPITAL EXPENDITURE; EXCEPT THAT THIS REQUIREMENT DOES NOT

1 APPLY IF THE BHA DETERMINES THAT THE WRITTEN JUSTIFICATION IS NOT
2 REQUIRED BASED ON HOW THE EXPENDITURES AUTHORIZED PURSUANT TO
3 THIS PART 3 WILL BE REPORTED TO THE UNITED STATES DEPARTMENT OF
4 THE TREASURY.

5 **27-60-306. Repeal of part.** THIS PART 3 IS REPEALED, EFFECTIVE
6 JANUARY 31, 2027.

7 **SECTION 3.** In Colorado Revised Statutes, **add 27-60-205** as
8 follows:

9 **27-60-205. Substance use workforce stability grant program**

10 **- repeal.** (1) THERE IS ESTABLISHED IN THE BHA THE SUBSTANCE USE
11 WORKFORCE STABILITY GRANT PROGRAM, REFERRED TO IN THIS SECTION
12 AS THE "GRANT PROGRAM". THE BHA SHALL ADMINISTER THE GRANT
13 PROGRAM AND SHALL DEVELOP POLICIES AND PROCEDURES FOR THE
14 GRANT PROGRAM, WHICH MUST INCLUDE A GRANT APPLICATION PROCESS,
15 CRITERIA FOR AWARDING GRANTS AND DETERMINING THE AMOUNT OF A
16 GRANT AWARD, AND THE TIMELINE FOR AWARDING GRANTS AND
17 DISTRIBUTING GRANT MONEY.

18 (2) A SUBSTANCE USE DISORDER TREATMENT PROVIDER OR A
19 RECOVERY PROVIDER, INCLUDING PROVIDERS THAT SERVE CHILDREN, AND
20 A LOCAL GOVERNMENT, AS DEFINED IN SECTION 27-60-301, IS ELIGIBLE
21 FOR A GRANT. IN ORDER TO RECEIVE A GRANT, A PROVIDER MUST SUBMIT
22 AN APPLICATION TO THE BHA AND MUST PRIORITIZE PROVIDING SERVICES
23 TO VOLUNTARY AND CIVIL CLIENTS.

24 (3) THE BHA SHALL ACCEPT AND REVIEW GRANT APPLICATIONS
25 AND AWARD GRANTS. THE BHA SHALL PRIORITIZE AWARDING GRANTS TO
26 PROVIDERS THAT OFFER SAME-DAY OR NEXT-DAY APPOINTMENTS, SERVE
27 LOW-INCOME AND MARGINALIZED POPULATIONS, OR INTEND TO EXPAND

1 THE NUMBER OF INDIVIDUALS THEY SERVE.

2 (4) A GRANT RECIPIENT SHALL USE A GRANT AWARD TO SUPPORT
3 DIRECT CARE STAFF WHO SPEND FIFTY PERCENT OR MORE OF THEIR TIME
4 WORKING WITH CLIENTS. SUPPORTING DIRECT CARE STAFF MAY INCLUDE
5 TEMPORARY SALARY INCREASES, RECRUITMENT AND RETENTION
6 BONUSES, AND OTHER TACTICS THAT SUPPORT STAFF.

7 (5) (a) THE GENERAL ASSEMBLY SHALL APPROPRIATE TO THE
8 STATE DEPARTMENT FIFTEEN MILLION DOLLARS FROM THE BEHAVIORAL
9 AND MENTAL HEALTH CASH FUND CREATED IN SECTION 24-75-230 FOR
10 THE GRANT PROGRAM.

11 (b) THE STATE DEPARTMENT, BHA, AND ANY PERSON WHO
12 RECEIVES MONEY FROM THE BHA, INCLUDING EACH GRANT RECIPIENT,
13 SHALL COMPLY WITH THE COMPLIANCE, REPORTING, RECORD-KEEPING,
14 AND PROGRAM EVALUATION REQUIREMENTS ESTABLISHED BY THE OFFICE
15 OF STATE PLANNING AND BUDGETING AND THE STATE CONTROLLER IN
16 ACCORDANCE WITH SECTION 24-75-226 (5).

17 (6) THIS SECTION IS REPEALED, EFFECTIVE JUNE 30, 2027.

18 **SECTION 4. Appropriation.** (1) For the 2022-23 state fiscal
19 year, \$90,000,000 is appropriated to the department of human services
20 for use by the behavioral health administration. This appropriation is
21 from the behavioral and mental health cash fund created in section
22 24-75-230 (2)(a), C.R.S., and is of money the state received from the
23 federal coronavirus state fiscal recovery fund. Any amount appropriated
24 in this section not expended prior to July 1, 2023, is further appropriated
25 to the administration from July 1, 2023, through December 30, 2024, for
26 the same purpose. To implement this act, the administration may use this
27 appropriation as follows:

1 (a) \$75,000,000 for the behavioral health-care continuum gap
2 grant program, which amount is based on an assumption that the
3 department will require 4.2 FTE in the 2022-23 state fiscal year and 3.8
4 FTE in the 2023-24 state fiscal year; and

5 (b) \$15,000,000 for the substance use workforce stability grant
6 program, which amount is based on an assumption that the department
7 will require 0.8 FTE in the 2022-23 state fiscal year and 0.7 FTE in the
8 2023-24 state fiscal year. _____

9 **SECTION 5. Safety clause.** The general assembly hereby finds,
10 determines, and declares that this act is necessary for the immediate
11 preservation of the public peace, health, or safety.