

HOUSE COMMITTEE OF REFERENCE AMENDMENT

Committee on Public & Behavioral Health & Human Services.

HB22-1278 be amended as follows:

- 1 Amend printed bill, page 19, line 3, strike "PROVIDERS" and substitute
- 2 "PROVIDERS, INCLUDING THOSE THAT CONTRACT WITH MANAGED CARE
- 3 ENTITIES OR BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES
- 4 ORGANIZATIONS,".
- 5 Page 22, line 24, after "WITH" insert "RELEVANT STAKEHOLDERS,".
- 6 Page 22, line 25, strike "FINANCING" and substitute "FINANCING,".
- 7 Page 22, line 27, strike "THAT ENTERED INTO A FORMAL AGREEMENT
- 8 PURSUANT TO".
- 9 Page 23, line 1, strike "SECTION 27-50-202".
- 10 Page 23, line 7, after "GRIEVANCE" insert "AND OCCURRENCE".
- 11 Page 24, lines 2 and 3, strike "SECTION 27-63-104 (2)(c)(IV);" and
- 12 substitute "SECTIONS 27-50-302 AND 27-50-303;".
- 13 Page 24, after line 7 insert:
  - 14 "(2) THE UNIVERSAL CONTRACT MAY HAVE ALTERNATE
  - 15 STANDARDIZED PROVISIONS, DEPENDING ON ITS APPLICATION, SUCH AS
  - 16 WHETHER THE PROVIDER IS A COMPREHENSIVE BEHAVIORAL HEALTH
  - 17 SAFETY NET PROVIDER OR AN ESSENTIAL BEHAVIORAL HEALTH SAFETY
  - 18 NET PROVIDER, THE SERVICE TYPE, OR OTHER FACTORS.
  - 19 (3) ADDITIONAL TERMS NOT INCLUDED IN THE UNIVERSAL
  - 20 CONTRACT MAY BE NEGOTIATED AND ADDED BY THE CONTRACTING
  - 21 PARTIES.".
- 22 Page 25, line 7, after "SERVICES" insert "FOR CHILDREN, YOUTH, AND
- 23 ADULTS".
- 24 Page 25, line 11, strike "HARD-TO-SERVE INDIVIDUALS" and substitute
- 25 "PRIORITY POPULATIONS".
- 26 Page 25, line 17, strike "CHILDREN" and substitute "CHILDREN, YOUTH,".
- 27 Page 26, line 15, after "AVAILABLE" insert "FOR CHILDREN, YOUTH, AND
- 28 ADULTS".

1 Page 27, line 5, after "STANDARDS" insert "AND HEALTH, SAFETY, AND  
2 WELFARE STANDARDS".

3 Page 27, line 12, strike "BEHAVIORAL" and substitute "EXCEPT AS  
4 PROVIDED IN SECTION 27-50-303, BEHAVIORAL".

5 Page 27, line 24, strike "PSYCHIATRIC FACILITY" and substitute "LICENSED  
6 FACILITY PROVIDING INPATIENT PSYCHIATRIC SERVICES".

7 Page 28, line 3, strike "DISABILITY;" and substitute "DISABILITY,  
8 IRRESPECTIVE OF PRIMARY DIAGNOSIS, CO-OCCURRING CONDITIONS, OR IF  
9 AN INDIVIDUAL REQUIRES ASSISTANCE WITH ACTIVITIES OF DAILY LIVING  
10 OR INSTRUMENTAL ACTIVITIES OF DAILY LIVING, AS DEFINED IN SECTION  
11 12-270-104 (6);".

12 Page 28, strike lines 11 through 14 and substitute:

13 "(5) THE BHA MAY PROMULGATE RULES OR DETERMINE OTHER  
14 APPROPRIATE PROCESSES TO APPROVE BEHAVIORAL HEALTH PROVIDERS AS  
15 BEHAVIORAL HEALTH SAFETY NET PROVIDERS. BEHAVIORAL HEALTH  
16 PROVIDERS THAT DO NOT HOLD A LICENSE FROM THE BHA BUT ARE  
17 OTHERWISE LICENSED OR AUTHORIZED TO PROVIDE BEHAVIORAL HEALTH  
18 SERVICES IN THE STATE OF COLORADO ARE ELIGIBLE TO BE APPROVED AS  
19 BEHAVIORAL HEALTH SAFETY NET PROVIDERS."

20 Page 29, after line 4 insert:

21 **"27-50-302. Requirement to serve priority populations -**  
22 **screening and triage for individuals in need of behavioral health**  
23 **services - referrals.** (1) EXCEPT AS PROVIDED IN THIS SECTION,  
24 COMPREHENSIVE BEHAVIORAL HEALTH SAFETY NET PROVIDERS MUST  
25 PROVIDE THE SAFETY NET SERVICES LISTED IN SECTION 27-50-101 (11) TO  
26 PRIORITY POPULATIONS.

27 (2) EXCEPT AS PROVIDED IN SECTION 27-50-303, ESSENTIAL  
28 BEHAVIORAL HEALTH SAFETY NET PROVIDERS SHALL PROVIDE THE SAFETY  
29 NET SERVICE OR SERVICES THAT THEY CONTRACT WITH THE BEHAVIORAL  
30 HEALTH ADMINISTRATIVE SERVICES ORGANIZATION OR MANAGED CARE  
31 ENTITY TO PROVIDE TO PRIORITY POPULATIONS.

32 (3) NOTWITHSTANDING ANY OTHER PROVISION OF THIS SECTION TO  
33 THE CONTRARY, EMERGENCY AND CRISIS SERVICES MUST BE AVAILABLE  
34 TO ANY INDIVIDUAL WHO IS EXPERIENCING A BEHAVIORAL HEALTH CRISIS,  
35 REGARDLESS OF WHETHER THE INDIVIDUAL IS A PRIORITY POPULATION;

36 (4) (a) WHEN A PRIORITY POPULATION CLIENT INITIATES

1 TREATMENT WITH A BEHAVIORAL HEALTH SAFETY NET PROVIDER, PRIOR  
2 TO THE INTAKE THE PROVIDER SHALL COMPLETE AN INITIAL SCREENING  
3 AND TRIAGE PROCESS TO DETERMINE URGENCY AND APPROPRIATENESS OF  
4 CARE WITH THE PROVIDER.

5 (b) THE BEHAVIORAL HEALTH SAFETY NET PROVIDER SHALL USE  
6 OBJECTIVE CRITERIA FOR DETERMINING WHETHER A CLIENT'S NEEDS  
7 EXCEED THE CLINICAL EXPERTISE OF THE PROVIDER.

8 (c) IF A PRIORITY POPULATION CLIENT'S NEEDS EXCEED THE  
9 TREATMENT CAPACITY OR CLINICAL EXPERTISE OF AN ESSENTIAL  
10 BEHAVIORAL HEALTH SAFETY NET PROVIDER, THE PROVIDER SHALL REFER  
11 THE CLIENT TO ANOTHER APPROPRIATE PROVIDER.

12 (d) IF A PRIORITY POPULATION CLIENT'S NEEDS EXCEED THE  
13 TREATMENT CAPACITY OR CLINICAL EXPERTISE OF A COMPREHENSIVE  
14 BEHAVIORAL HEALTH SAFETY NET PROVIDER, THE PROVIDER MUST ENSURE  
15 THAT THE CLIENT HAS ACCESS TO INTERIM BEHAVIORAL HEALTH SERVICES  
16 IN A TIMELY MANNER UNTIL THE CLIENT IS CONNECTED TO THE MOST  
17 APPROPRIATE PROVIDER FOR ONGOING CARE. THIS MAY INCLUDE USE OF  
18 PROVIDERS WITHIN THE NETWORK OF THE BEHAVIORAL HEALTH  
19 ADMINISTRATIVE SERVICES ORGANIZATION OR THE REGIONAL MANAGED  
20 CARE ENTITY.

21 (e) THE COMPREHENSIVE BEHAVIORAL HEALTH SAFETY NET  
22 PROVIDER SHALL OBTAIN APPROVAL FROM THE BEHAVIORAL HEALTH  
23 ADMINISTRATIVE SERVICES ORGANIZATION UNDER WHICH THE PROVIDER  
24 IS OPERATING, OR THE REGIONAL MANAGED CARE ENTITY FOR MEDICAID  
25 CLIENTS, PRIOR TO REFERRING A PRIORITY POPULATION CLIENT TO  
26 ALTERNATIVE SERVICES; EXCEPT THAT AN INDIVIDUAL EXPERIENCING A  
27 BEHAVIORAL HEALTH CRISIS MAY BE REFERRED TO EMERGENCY OR CRISIS  
28 SERVICES WITHOUT PRIOR APPROVAL.

29 (5) WHEN REFERRING A CLIENT TO ALTERNATIVE SERVICES, A  
30 BEHAVIORAL HEALTH SAFETY NET PROVIDER SHALL ASSIST THE CLIENT IN  
31 IDENTIFYING AND INITIATING SERVICES WITH AN APPROPRIATE PROVIDER  
32 FOR ONGOING CARE. AS APPROPRIATE, THE BEHAVIORAL HEALTH SAFETY  
33 NET PROVIDER SHALL USE THE BEHAVIORAL HEALTH ADMINISTRATIVE  
34 SERVICES ORGANIZATION OR, FOR MEDICAID CLIENTS, THE REGIONAL  
35 MANAGED CARE ENTITY FOR CARE COORDINATION.

36 (6)(a) BEHAVIORAL HEALTH SAFETY NET PROVIDERS SHALL TRACK  
37 THE FOLLOWING INFORMATION FOR ALL INDIVIDUALS WHO WERE  
38 REFERRED TO ALTERNATIVE SERVICES PURSUANT TO THIS SECTION:

39 (I) CLIENT DEMOGRAPHICS;

40 (II) STANDARDIZED DESCRIPTIONS OF THE NEEDS OF THE CLIENT  
41 THAT COULD NOT BE MET AND REQUIRE THE CLIENT TO BE REFERRED TO  
42 ANOTHER PROVIDER;

43 (III) THE OUTCOME AND TIMELINESS OF THE REFERRAL; AND

- 1 (IV) ANY OTHER INFORMATION REQUIRED BY THE BHA.
- 2 (b) THE PROVIDER SHALL PROVIDE THE REPORT AT REGULAR
- 3 INTERVALS TO THE BHA AND TO EITHER THE BEHAVIORAL HEALTH
- 4 ADMINISTRATIVE SERVICES ORGANIZATION UNDER WHICH THE PROVIDER
- 5 IS OPERATING OR, FOR MEDICAID CLIENTS, TO THE MANAGED CARE ENTITY.
- 6 **27-50-303. Essential behavioral health safety net providers -**
- 7 **approval to serve limited priority populations.** (1) ESSENTIAL
- 8 BEHAVIORAL HEALTH SAFETY NET PROVIDERS MUST SERVE ALL PRIORITY
- 9 POPULATIONS UNLESS THE UNIVERSAL CONTRACT WITH THE BEHAVIORAL
- 10 HEALTH ADMINISTRATIVE SERVICES ORGANIZATION LIMITS THE
- 11 PROVIDER'S SCOPE AND RESPONSIBILITY TO A SPECIFIC SUBPOPULATION
- 12 PURSUANT TO SUBSECTION (2) OF THIS SECTION.
- 13 (2) BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES
- 14 ORGANIZATIONS MAY CONTRACT WITH AN ESSENTIAL BEHAVIORAL
- 15 HEALTH SAFETY NET PROVIDER TO PROVIDE A SAFETY NET SERVICE OR
- 16 SERVICES, INCLUDING THOSE DETERMINED NECESSARY PURSUANT TO
- 17 SECTION 27-50-301 (3)(a)(XV), TO ONLY A SUBPOPULATION OF THE
- 18 PRIORITY POPULATIONS."
- 19 Renumber succeeding C.R.S. section accordingly.
- 20 Page 33, line 13, after "CARE" insert "AND NETWORK ADEQUACY".
- 21 Page 33, line 26, strike "DISORDER;" and substitute "DISORDER AND
- 22 BEHAVIORAL HEALTH SERVICES DEEMED MEDICALLY NECESSARY
- 23 PURSUANT TO THE EARLY AND PERIODIC SCREENING, DIAGNOSTIC, AND
- 24 TREATMENT BENEFIT;"
- 25 Page, 40, line 8, strike "SECTION 27-63-104 (2)(c)(IV);" and substitute
- 26 "SECTIONS 27-50-302 AND 27-50-303;"
- 27 Page 41, line 27, strike "POPULATIONS, INCLUDING BUT NOT" and
- 28 substitute "POPULATIONS;"
- 29 Page 42, strike lines 1 through 3.
- 30 Page 42, strike lines 10 through 14.
- 31 Reletter succeeding paragraphs accordingly.
- 32 Page 55, after line 22 insert:
- 33 "(4) THE BHA SHALL COLLABORATE WITH THE DEPARTMENT OF

1 HEALTH CARE POLICY AND FINANCING TO SUPPORT THE EARLY AND  
2 PERIODIC SCREENING, DIAGNOSTIC, AND TREATMENT BENEFIT ACCESS AND  
3 PROVIDER NETWORK."

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