Second Regular Session Seventy-first General Assembly STATE OF COLORADO

REENGROSSED

This Version Includes All Amendments Adopted in the House of Introduction

LLS NO. 18-1251.01 Jane Ritter x4342

SENATE BILL 18-251

SENATE SPONSORSHIP

Gardner and Lambert, Jahn, Lundberg, Moreno

HOUSE SPONSORSHIP

Lee and Young, Hamner, Rankin, Singer

Senate Committees

House Committees

Judiciary Appropriations

A BILL FOR AN ACT

101	CONCERNING ESTABLISHING A STATEWIDE BEHAVIORAL HEALTH
102	COURT LIAISON PROGRAM, AND, IN CONNECTION THEREWITH
103	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.)

The bill establishes in the office of the state court administrator (office) a statewide behavioral health court liaison program (program). The purpose of the program is to identify and dedicate local behavioral health professionals as court liaisons (court liaisons) in each state judicial district to facilitate communication and collaboration among judicial,

SENATE 3rd Reading Unamended May 3, 2018

SENATE Amended 2nd Reading May 2, 2018 health care, and behavioral health systems. The office shall administer the program and establish procedures, timelines, and funding guidelines for the program. Program funding must be allocated to judicial districts based on case volume, geographical complexity, and density of need. Specific duties of the court liaisons are outlined, as well as reporting requirements.

1	Be it enacted by the General Assembly of the State of Colorado:
2	SECTION 1. In Colorado Revised Statutes, add part 2 to article
3	11.9 of title 16 as follows:
4	PART 2
5	STATEWIDE BEHAVIORAL HEALTH COURT
6	LIAISON PROGRAM
7	16-11.9-201. Legislative declaration and intent. (1) THE
8	GENERAL ASSEMBLY FINDS AND DECLARES THAT:
9	(a) COLORADO'S CITIZENS WHO ARE LIVING WITH MENTAL HEALTH
10	AND SUBSTANCE USE DISORDERS ARE OVER-REPRESENTED IN THE
11	CRIMINAL JUSTICE SYSTEM, AND THEY ARE AT A SIGNIFICANTLY GREATER
12	RISK OF INCURRING CRIMINAL JUSTICE INVOLVEMENT, LONGER TERMS OF
13	INVOLVEMENT, AND HARSHER CONSEQUENCES OF THAT INVOLVEMENT
14	WHEN COMPARED TO THE GENERAL PUBLIC;
15	(b) COLORADO MUST MAKE A COMMITMENT TO ENSURE THAT ALL
16	INDIVIDUALS WITHIN THE CRIMINAL JUSTICE SYSTEM ARE TREATED FAIRLY
17	AND HUMANELY, REGARDLESS OF THEIR BEHAVIORAL HEALTH HISTORY OR
18	MENTAL STATE; AND
19	(c) THERE IS A SIGNIFICANT NEED FOR ENHANCED COMMUNICATION
20	AMONG HEALTH CARE SYSTEMS, BEHAVIORAL HEALTH SYSTEMS, AND
21	CRIMINAL JUSTICE ENTITIES, INCLUDING LAW ENFORCEMENT, DEFENSE
22	ATTORNEYS, DISTRICT ATTORNEYS, JUDGES, AND PROBATION, TO FOSTER
23	COLLABORATION THAT PROVIDES ALL INDIVIDUALS WITH A FAIR CHANCE

-2- 251

1	OF LIVING A HEALTHY AND PRODUCTIVE LIFE.
2	(2) THE GENERAL ASSEMBLY FURTHER FINDS THAT:
3	(a) COLORADO HAS AN OBLIGATION TO ENSURE THAT ENTITIES
4	WITHIN THE CRIMINAL JUSTICE SYSTEM ARE EQUIPPED WITH A GREATER
5	UNDERSTANDING OF BEHAVIORAL HEALTH TREATMENT OPTIONS IN THE
6	COMMUNITY; AND
7	(b) COMMUNITY MENTAL HEALTH PROVIDERS, INCLUDING
8	COMMUNITY MENTAL HEALTH CENTERS, ARE A CRITICAL COMPONENT OF
9	ACHIEVING POSITIVE OUTCOMES FOR INDIVIDUALS LIVING WITH MENTAL
10	HEALTH, BEHAVIORAL HEALTH, AND SUBSTANCE USE DISORDERS AND
11	HAVE LONG HELD AN ESSENTIAL ROLE IN ENGAGING CRIMINAL JUSTICE
12	ENTITIES.
13	(3) The general assembly therefore finds that it is
14	CRITICAL TO CREATE A NETWORK OF PROFESSIONALS WHO CAN
15	COMPREHENSIVELY BRIDGE THE CRIMINAL JUSTICE SYSTEM AND THE
16	COMMUNITY BEHAVIORAL HEALTH SYSTEMS ACROSS THE STATE IN ORDER
17	TO:
18	(a) PROMOTE POSITIVE OUTCOMES FOR INDIVIDUALS LIVING WITH
19	MENTAL HEALTH OR CO-OCCURRING BEHAVIORAL HEALTH CONDITIONS;
20	(b) Inform criminal justice entities about community
21	TREATMENT OPTIONS; <u>AND</u>
22	(c) CONNECT INDIVIDUALS TO BEHAVIORAL HEALTH <u>SERVICES.</u>
23	_
24	(4) Therefore, the general assembly declares that a
25	STATEWIDE BEHAVIORAL HEALTH COURT LIAISON PROGRAM MUST
26	PROVIDE A METHOD FOR COLLABORATION AND CONSULTATION AMONG
27	BEHAVIORAL HEALTH PROVIDERS, DISTRICT ATTORNEYS, AND DEFENSE

-3- 251

1	ATTORNEYS ABOUT COMPETENCY EVALUATIONS, RESTORATION TO
2	COMPETENCY SERVICES, AND OTHER RELEVANT DECISIONS AND ISSUES
3	FACING INDIVIDUALS WITH MENTAL HEALTH OR CO-OCCURRING
4	BEHAVIORAL HEALTH CONDITIONS WHO ARE INVOLVED WITH THE
5	CRIMINAL JUSTICE SYSTEM, INCLUDING APPROPRIATENESS FOR
6	COMMUNITY TREATMENT AND RESOURCE AVAILABILITY.
7	16-11.9-202. Definitions. AS USED IN THIS PART 2, UNLESS THE
8	CONTEXT OTHERWISE REQUIRES:
9	(1) "Behavioral Health condition" refers to mental
10	HEALTH AND CO-OCCURRING SUBSTANCE USE CONDITIONS THAT ARE
11	INDICATIVE OF A POSSIBLE BEHAVIORAL HEALTH PROBLEM, CONCERN, OR
12	DISORDER.
13	(2) "Behavioral health services" or "behavioral health
14	SYSTEMS" MEANS SERVICE SYSTEMS THAT ENCOMPASS PREVENTION AND
15	PROMOTION OF EMOTIONAL HEALTH, PREVENTION AND TREATMENT
16	SERVICES FOR MENTAL HEALTH AND SUBSTANCE USE CONDITIONS, AND
17	RECOVERY SUPPORT.
18	(3) "COURT LIAISON" MEANS A PERSON WHO IS HIRED AS A
19	DEDICATED BEHAVIORAL HEALTH COURT LIAISON FOR THE PROGRAM
20	PURSUANT TO SECTION 16-11.9-203.
21	(4) "Program" means the statewide behavioral health
22	COURT LIAISON PROGRAM ESTABLISHED IN SECTION 16-11.9-203.
23	
24	(5) "STATE COURT ADMINISTRATOR" MEANS THE STATE COURT
25	ADMINISTRATOR ESTABLISHED PURSUANT TO SECTION 13-3-101.
26	16-11.9-203. Statewide behavioral health court liaison
2.7	program - established - purpose - administration. (1) (a) THE

-4- 251

1	STATEWIDE BEHAVIORAL HEALTH COURT LIAISON PROGRAM IS
2	ESTABLISHED IN THE OFFICE OF THE STATE COURT ADMINISTRATOR. THE
3	STATE COURT ADMINISTRATOR IS RESPONSIBLE FOR PROGRAM
4	ADMINISTRATION, INCLUDING ENSURING THAT EACH JUDICIAL DISTRICT
5	IMPLEMENTS A LOCAL PROGRAM DESIGN THAT IS ALIGNED WITH
6	STATEWIDE GOALS AND LEGISLATIVE INTENT.
7	(b) THE PURPOSE OF THE PROGRAM IS TO IDENTIFY AND DEDICATE
8	LOCAL BEHAVIORAL HEALTH PROFESSIONALS AS COURT LIAISONS IN EACH
9	STATE JUDICIAL DISTRICT. THE COURT LIAISONS SHALL FACILITATE
10	COMMUNICATION AND COLLABORATION BETWEEN JUDICIAL AND
11	BEHAVIORAL HEALTH SYSTEMS.
12	(2) The program is designed to keep judges, district
13	ATTORNEYS, AND DEFENSE ATTORNEYS INFORMED ABOUT AVAILABLE
14	COMMUNITY-BASED BEHAVIORAL HEALTH SERVICES, INCLUDING SERVICES
15	FOR DEFENDANTS WHO HAVE BEEN ORDERED TO UNDERGO A COMPETENCY
16	EVALUATION OR RECEIVE COMPETENCY RESTORATION SERVICES
17	PURSUANT TO ARTICLE 8.5 OF THIS TITLE 16.

(3) ON OR BEFORE OCTOBER 1, 2018, AND AS NECESSARY THEREAFTER, THE STATE COURT ADMINISTRATOR SHALL ESTABLISH PROGRAM PROCEDURES, TIMELINES, FUNDING GUIDELINES, AND ACCEPTABLE EXPENSES FOR THE DISTRIBUTION OF PROGRAM FUNDS TO JUDICIAL DISTRICTS. THE STATE COURT ADMINISTRATOR SHALL ALLOCATE PROGRAM FUNDING TO JUDICIAL DISTRICTS BASED ON CASE VOLUME, GEOGRAPHICAL COMPLEXITY, AND DENSITY OF NEED.

(4) THE STATE COURT ADMINISTRATOR SHALL IMPLEMENT CAPABILITIES WITHIN THE EXISTING STATEWIDE COURT DATA SYSTEM TO INDICATE BEHAVIORAL HEALTH CONDITIONS IN CASES BROUGHT TO THE

-5- 251

1	COURTS.
2	(5) EACH JUDICIAL DISTRICT SHALL USE ALLOCATED PROGRAM
3	MONEY TO PARTNER WITH COMMUNITY MENTAL HEALTH <u>PROVIDERS</u> ,
4	SUCH AS A COMMUNITY MENTAL HEALTH CENTER, THAT $\underline{\mathtt{ARE}}$ ABLE TO
5	PROVIDE A CONTINUUM OF COMMUNITY-BASED BEHAVIORAL HEALTH
6	SERVICES IN $\underline{\text{THEIR}}$ REGION TO ACCOMPLISH THE PROGRAM GOALS SET
7	FORTH IN SUBSECTIONS (1) AND (2) OF THIS SECTION. PROGRAM MONEY
8	MAY BE USED FOR THE PURPOSES ESTABLISHED BY THE STATE COURT
9	ADMINISTRATOR PURSUANT TO SUBSECTION (3) OF THIS SECTION,
10	INCLUDING BUT NOT LIMITED TO:
11	(a) PROGRAM IMPLEMENTATION AND START-UP COSTS
12	DETERMINED NECESSARY AND APPROPRIATE BY THE STATE COURT
13	ADMINISTRATOR;
14	(b) Contracting for an adequate number of dedicated
15	COURT LIAISONS RESPONSIBLE FOR THE DUTIES SET FORTH IN SECTION
16	16-11.9-204;
17	(c) PRIORITIZING, THROUGH THE COURT LIAISONS, CASES WHERE
18	COMPETENCY TO PROCEED AND RESTORATION TO COMPETENCY ARE
19	RAISED, AND PROVIDING NECESSARY SERVICES FOR SUCH CASES; AND
20	(d) OPERATIONAL FUNDING FOR COURT LIAISON ACTIVITIES AS
21	DETERMINED NECESSARY AND APPROPRIATE BY THE STATE COURT
22	ADMINISTRATOR.
23	16-11.9-204. Behavioral health court liaisons - duties and
24	responsibilities - consultation and collaboration. (1) A COURT LIAISON
25	HIRED PURSUANT TO THIS PART 2 HAS THE FOLLOWING DUTIES AND
26	RESPONSIBILITIES:
27	(a) Accessing local community mental health center

-6- 251

1	RECORDS AND APPOINTMENT SYSTEMS, AS ALLOWED BY STATE AND
2	FEDERAL LAW, TO ASSESS TREATMENT HISTORY AND MAKE DIRECT
3	CONNECTIONS TO SERVICES FOR A DEFENDANT WITH A BEHAVIORAL
4	HEALTH CONDITION;
5	(b) Screening for behavioral health conditions and
6	DETERMINING APPROPRIATE REFERRAL AND TREATMENT OPTIONS WHEN
7	NECESSARY;
8	(c) Using the behavioral health information from the
9	STATEWIDE COURT DATA SYSTEM, AS UPDATED PURSUANT TO SECTION
10	16-11.9-203 (4), TO MAKE A DETERMINATION REGARDING WHETHER A
11	BEHAVIORAL HEALTH CONSULTATION WOULD BE BENEFICIAL IN ACHIEVING
12	PROGRAM GOALS AND OBJECTIVES. IF THE COURT LIAISON OPERATING IN
13	THE JUDICIAL DISTRICT DETERMINES THAT A CONSULTATION WOULD BE
14	BENEFICIAL, THE COURT LIAISON SHALL CONSULT WITH EACH JUDICIAL
15	OFFICER, DEFENSE ATTORNEY, AND DISTRICT ATTORNEY WORKING ON THE
16	CASE, AND THE $\underline{\text{LIAISON}}$ MUST IDENTIFY, AT A MINIMUM, THE FOLLOWING
17	INFORMATION:
18	(I) THE NATURE OF THE INDIVIDUAL'S BEHAVIORAL HEALTH
19	CONDITION;
20	(II) WHETHER THE INDIVIDUAL HAS A READILY AVAILABLE
21	HISTORY OF BEHAVIORAL HEALTH TREATMENT;
22	(III) WHETHER THE INDIVIDUAL IS A CURRENT OR PAST CLIENT OF
23	A COMMUNITY MENTAL HEALTH CENTER IN THE JUDICIAL DISTRICT; $\underline{\text{AND}}$
24	
25	(IV) THE LOCAL, REGIONAL, OR STATE AVAILABILITY OF
26	RESOURCES THAT THE INDIVIDUAL MAY NEED, INCLUDING BUT NOT
27	LIMITED TO:

-7- 251

1	(A) OUTPATIENT AND OUT-OF-CUSTODY COMPETENCY
2	EVALUATIONS OR COMPETENCY RESTORATION SERVICES;
3	(B) BEHAVIORAL HEALTH SERVICES OR PSYCHIATRIC SERVICES OR
4	SUPPORTS; OR
5	(C) EMPLOYMENT, HOUSING, OR OTHER SOCIAL SUPPORTS.
6	(d) FACILITATING COMMUNICATION BETWEEN BEHAVIORAL
7	HEALTH SYSTEMS AND CRIMINAL JUSTICE ENTITIES AND PROVIDING
8	CONSULTATION TO CRIMINAL JUSTICE PERSONNEL REGARDING
9	BEHAVIORAL HEALTH AND COMMUNITY TREATMENT OPTIONS;
10	(e) COORDINATING WITH JAIL-BASED BEHAVIORAL HEALTH
11	PROVIDERS TO ENSURE CONTINUITY OF CARE AND SERVICE <u>DELIVERY</u> ; <u>AND</u>
12	(f) IDENTIFYING EXISTING PROGRAMS AND RESOURCES THAT ARE
13	ALREADY AVAILABLE IN THE COMMUNITY, INCLUDING BUT NOT LIMITED
14	<u>TO:</u>
15	(I) CO-RESPONDER PROGRAMS THAT PAIR LOCAL COMMUNITY
16	BEHAVIORAL HEALTH SPECIALISTS AND PROVIDERS WITH LAW
17	ENFORCEMENT PERSONNEL;
18	(II) OTHER CRIMINAL JUSTICE DIVERSION PROGRAMS FOR
19	INDIVIDUALS WITH BEHAVIORAL HEALTH CONDITIONS;
20	(III) COMMUNITY MENTAL HEALTH CENTERS AND OTHER LOCAL
21	COMMUNITY BEHAVIORAL HEALTH PROVIDERS THAT RECEIVE STATE
22	FUNDING THROUGH THE OFFICE OF BEHAVIORAL HEALTH FOR SERVICES
23	SUCH AS:
24	(A) MENTAL HEALTH SERVICES FOR JUVENILE AND ADULT
25	<u>OFFENDERS;</u>
26	(B) SUBSTANCE USE TREATMENT SERVICES FOR OFFENDERS AND
27	INDIVIDUALS DIVERTED FROM THE CRIMINAL JUSTICE SYSTEM;

-8- 251

1	(C) Transition services and wraparound services for
2	INDIVIDUALS WITH SERIOUS MENTAL HEALTH DISORDERS WHO ARE
3	TRANSITIONING FROM A PSYCHIATRIC HOSPITAL OR WHO REQUIRE MORE
4	INTENSIVE SERVICES IN THE COMMUNITY TO AVOID INSTITUTIONAL
5	PLACEMENT; AND
6	(D) BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM SERVICES OR
7	THE ASSOCIATED TELEPHONE HOTLINE; AND
8	(IV) BEHAVIORAL HEALTH SERVICES PROVIDED FOR MEDICAID
9	CLIENTS THROUGH THE REGIONAL ACCOUNTABLE ENTITY THAT THE
10	DEPARTMENT OF HEALTH CARE POLICY AND FINANCING CONTRACTS WITH
11	FOR THE PROVISION OF SUCH SERVICES.
12	(2) If a consultation occurs pursuant to subsection $(1)(c)$
13	OF THIS SECTION, THE STATEWIDE COURT DATA SYSTEM MUST INCLUDE A
14	RECORD OF SUCH CONSULTATION ON THE INDIVIDUAL'S CASE RECORDS.
15	16-11.9-205. Reporting requirements. (1) THE STATE COURT
16	ADMINISTRATOR SHALL COLLABORATE WITH EACH JUDICIAL JURISDICTION
17	IN THE STATE AND EACH COURT LIAISON TO COLLECT AND ANALYZE DATA
18	REGARDING THE WORK OF THE PROGRAM, INCLUDING DATA THAT
19	DEMONSTRATES THE IMPACT OF CONSULTATION, UTILIZATION OF THE
20	COURT LIAISONS BY JUDICIAL DISTRICTS, AND THE EFFICIENCY OF THE
21	PROGRAM IN PROMOTING THE LEGISLATIVE INTENT AND STATEWIDE GOALS
22	AS SET FORTH IN THIS PART 2.
23	(2) NOTWITHSTANDING THE PROVISIONS OF SECTION 24-1-136, ON
24	OR BEFORE OCTOBER 1, 2019, AND EACH OCTOBER 1 THEREAFTER, THE
25	STATE COURT ADMINISTRATOR SHALL REPORT TO THE JOINT BUDGET
26	COMMITTEE, OR ANY SUCCESSOR COMMITTEE, THE NUMBER OF CASES IN
27	THE PAST YEAR FOR WHICH A BEHAVIORAL HEALTH CONDITION WAS

-9- 251

1	IDENTIFIED AND RESULTED IN A CONSULTATION PURSUANT TO SECTION
2	16-11.9-204, AND OUTCOMES RELATED TO THE LEGISLATIVE INTENT AND
3	STATEWIDE GOALS OF THE PROGRAM, AS SET FORTH IN THIS PART 2.
4	SECTION 2. Appropriation. For the 2018-19 state fiscal year,
5	\$1,997,112 is appropriated to the judicial department. This appropriation
6	is from the general fund and is based on an assumption that the
7	department will require an additional 0.9 FTE. To implement this act, the
8	department may use this appropriation for the statewide behavioral health
9	court liaison program.
10	SECTION 3. Safety clause. The general assembly hereby finds,
11	determines, and declares that this act is necessary for the immediate
12	preservation of the public peace, health, and safety.

-10- 251