

**First Regular Session
Seventy-second General Assembly
STATE OF COLORADO**

REREVISED

*This Version Includes All Amendments
Adopted in the Second House*

LLS NO. 19-1084.01 Kristen Forrestal x4217

SENATE BILL 19-228

SENATE SPONSORSHIP

Winter and Moreno, Bridges, Court, Crowder, Fenberg, Garcia, Ginal, Gonzales, Pettersen, Priola, Story, Tate, Todd

HOUSE SPONSORSHIP

Buentello and Singer, Arndt, Becker, Bird, Buckner, Caraveo, Cutter, Duran, Esgar, Froelich, Galindo, Garnett, Gonzales-Gutierrez, Gray, Hansen, Herod, Hooton, Jackson, Jaquez Lewis, Kennedy, Kipp, Lontine, McCluskie, McLachlan, Melton, Michaelson Jenet, Mullica, Sandridge, Sirota, Snyder, Tipper, Titone, Valdez A., Valdez D.

Senate Committees

Health & Human Services
Appropriations

House Committees

Health & Insurance
Appropriations

A BILL FOR AN ACT

101 **CONCERNING MEASURES TO PREVENT SUBSTANCE ABUSE, AND, IN**
102 **CONNECTION THEREWITH, REQUIRING CERTAIN PRESCRIBERS TO**
103 **COMPLETE SUBSTANCE USE DISORDER TRAINING; PROHIBITING**
104 **PRESCRIBERS FROM ACCEPTING BENEFITS FOR PRESCRIBING**
105 **SPECIFIC MEDICATIONS; REQUIRING OPIOID PRESCRIPTIONS TO**
106 **BEAR WARNING LABELS; ALLOWING MEDICAL EXAMINERS AND**
107 **CORONERS ACCESS TO THE PRESCRIPTION DRUG MONITORING**
108 **PROGRAM; AUTHORIZING THE DEPARTMENT OF HUMAN**
109 **SERVICES TO CONDUCT SUBSTANCE USE RESEARCH; PROVIDING**
110 **FUNDING TO ADDRESS OPIOID AND SUBSTANCE USE DISORDERS**
111 **THROUGH PUBLIC HEALTH INTERVENTIONS IN LOCAL**
112 **COMMUNITIES; REQUIRING STATE DEPARTMENTS TO REPORT**
113 **RECEIPT AND ELIGIBILITY FOR FEDERAL FUNDS FOR HIV 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
Amended 3rd Reading
May 2, 2019

HOUSE
Amended 2nd Reading
May 1, 2019

SENATE
Amended 3rd Reading
April 25, 2019

SENATE
Amended 2nd Reading
April 24, 2019

101 HEPATITIS TESTING; ■■■■ ■■■■ ■■■■ REQUIRING THE CENTER FOR
102 RESEARCH INTO SUBSTANCE USE DISORDER PREVENTION,
103 TREATMENT, AND RECOVERY SUPPORT STRATEGIES TO DEVELOP
104 AND IMPLEMENT A PROGRAM TO INCREASE PUBLIC AWARENESS
105 CONCERNING THE SAFE USE, STORAGE, AND DISPOSAL OF
106 ANTAGONIST DRUGS; AND 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:

- ! Requires certain health care providers who have prescriptive authority to complete substance use disorder training as part of continuing education required to renew the provider's license. Specifically, the requirement applies to podiatrists (**section 1** of the bill), dentists (**section 2**), advanced practice nurses (**section 3**), optometrists (**section 4**), and veterinarians (**section 5**).
- ! Prohibits a physician or physician assistant from accepting any direct or indirect benefits for prescribing a specific medication (**section 6**);
- ! Requires a prescription for an opioid for outpatient use to bear a warning label (**section 7**);
- ! Allows medical examiners access to the prescription drug monitoring program under specified circumstances (**section 8**);
- ! For the 2019-20 fiscal year, appropriates \$5 million from the general fund to the department of public health and environment for the purpose of working at state and local levels to address opioid and other substance use disorder priorities (**section 9**);
- ! Requires specified state departments to report to the health committees of the general assembly by December 31, 2019, the amount of federal funds that each is receiving or is eligible to receive for use in testing for hepatitis and HIV and the number of individuals currently and anticipated to be tested. The departments are also required to share eligibility standards for treatment with primary care

- providers (**section 10**).
- ! Creates 2 grant programs in the office of behavioral health in the department of human services to address opioid and other substance use disorder prevention and recovery. The grant programs focus on at-risk youth and their families affected by substance use disorders and who have not been successful in seeking aid through existing resources. The general assembly is required to appropriate \$3 million to the youth opioid and substance use prevention fund from the marijuana tax cash fund and \$3 million to the local substance use disorder prevention and recovery pilot program fund from the general fund to administer the programs (**section 11**).
 - ! Requires the center for research into substance use disorder prevention, treatment, and recovery support strategies (center) to develop and implement a program to increase public awareness about the safe use, storage, and disposal of opioids, and about the availability of antagonist drugs. The general assembly is required to annually appropriate \$750,000 to the center from the marijuana tax cash fund to implement the program (**section 12**).
 - ! Requires the center to hire additional staff to assist local communities in applying for grants, and requires the general assembly to appropriate general funds for the 2019-20 fiscal year to enable the center to hire staff for this purpose (section 12);
 - ! Requires the center to conduct a statewide maternal and perinatal population-based needs assessment to gather information regarding substance use disorders among mothers and pregnant women and other mental health issues. For the 2019-20 and 2020-21 fiscal years, the general assembly is directed to appropriate \$100,000 per year from the general fund for allocation to the center to conduct the needs assessment (**section 14**).
 - ! Requires the center to establish a pilot program to test the implementation of screening, brief intervention, and referral to treatment (SBIRT) for women's health and prenatal and postpartum care in 5 counties. The general assembly is directed to appropriate \$228,000 from the marijuana tax cash fund to implement SBIRT in the 2019-20 fiscal year (section 14).
 - ! Requires the college of nursing to implement and provide a training and technical assistance program for health care and mental health care providers in specified counties regarding SBIRT online training and tools to teach women

of the risks of alcohol and substance use during pregnancy. For the 2019-20 and 2020-21 fiscal years, the general assembly is directed to appropriate \$172,000 per year from the marijuana tax cash fund to implement the program (section 14).

! Requires the office of behavioral health in the department of human services to administer a pilot program to integrate substance use disorder and medication-assisted treatment with obstetric and gynecological health care and requires the general assembly to appropriate money from the general fund in the 2019-20, 2020-21, and 2021-22 fiscal years to fund the pilot program (section 15).

Sections 16 through 23 make conforming amendments to harmonize the bill with the title 12 recodification bill, House Bill 19-1172.

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

2 **SECTION 1. In Colorado Revised Statutes, amend 10-16-143.5**
3 **as follows:**

4 **10-16-143.5. Pharmacy reimbursement - substance use**
5 **disorders - injections - patient counseling.** (1) If a pharmacy has
6 **entered into a collaborative pharmacy practice agreement with one or**
7 **more physicians pursuant to section 12-42.5-602 to administer injectable**
8 **antagonist medication for medication-assisted treatment for substance use**
9 **disorders, the pharmacy administering the drug shall receive an enhanced**
10 **dispensing fee.**

11 **(2) IF A PHARMACY DISPENSES AN OPIOID THAT IS A SCHEDULE II**
12 **OR SCHEDULE III DRUG PURSUANT TO SECTION 18-18-204 OR 18-18-205 TO**
13 **A PATIENT WHO HAS NOT PREVIOUSLY RECEIVED AN OPIOID PRESCRIPTION**
14 **AND THE PHARMACY PROVIDES COUNSELING CONCERNING THE RISK OF**
15 **OPIOIDS TO THE PATIENT, THE DISPENSING PHARMACY SHALL RECEIVE AN**
16 **ENHANCED DISPENSING FEE.**

17 **(3) SUBSECTION (2) OF THIS SECTION DOES NOT REQUIRE A**

1 CARRIER TO CONTRACT WITH A PHARMACY OR PHARMACIST WILLING TO
2 ABIDE BY THE TERMS AND CONDITIONS FOR PARTICIPATION ESTABLISHED
3 BY THE HEALTH BENEFIT PLAN OR CARRIER.

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5 **SECTION 2.** In Colorado Revised Statutes, **add** 12-36-117.8 as
6 follows:

7 **12-36-117.8. Prescription medications - financial benefit for**
8 **prescribing prohibited.** A PHYSICIAN OR PHYSICIAN ASSISTANT SHALL
9 NOT ACCEPT ANY DIRECT OR INDIRECT BENEFIT FROM A PHARMACEUTICAL
10 MANUFACTURER OR PHARMACEUTICAL REPRESENTATIVE FOR PRESCRIBING
11 A SPECIFIC MEDICATION TO A PATIENT. FOR THE PURPOSES OF THIS
12 SECTION, A DIRECT OR INDIRECT BENEFIT DOES NOT INCLUDE A BENEFIT
13 OFFERED TO A PHYSICIAN OR PHYSICIAN ASSISTANT REGARDLESS OF
14 WHETHER THE SPECIFIC MEDICATION IS BEING PRESCRIBED.

15 **SECTION 3.** In Colorado Revised Statutes, 12-38-111.6, **add**
16 (13) as follows:

17 **12-38-111.6. Prescriptive authority - advanced practice nurses**
18 **- limits on opioid prescriptions - financial benefit for prescribing**
19 **prohibited - repeal.** (13) AN ADVANCED PRACTICE NURSE SHALL NOT
20 ACCEPT ANY DIRECT OR INDIRECT BENEFIT FROM A PHARMACEUTICAL
21 MANUFACTURER OR PHARMACEUTICAL REPRESENTATIVE FOR PRESCRIBING
22 A SPECIFIC MEDICATION TO A PATIENT. FOR THE PURPOSES OF THIS
23 SECTION, A DIRECT OR INDIRECT BENEFIT DOES NOT INCLUDE A BENEFIT
24 OFFERED TO AN ADVANCED PRACTICE NURSE REGARDLESS OF WHETHER
25 THE SPECIFIC MEDICATION IS BEING PRESCRIBED.

26 **SECTION 4.** In Colorado Revised Statutes, 12-42.5-121, add (3)
27 as follows:

1 **12-42.5-121. Labeling - rules. (3)** THE BOARD SHALL
2 PROMULGATE RULES CONCERNING THE LABELING REQUIREMENTS FOR A
3 PRESCRIPTION DRUG THAT IS DISPENSED TO A PATIENT FOR OUTPATIENT
4 USE AND CONTAINS AN OPIOID, EXCEPT FOR AN OPIOID PRESCRIBED FOR
5 TREATMENT OF A SUBSTANCE USE DISORDER OR THAT IS A PARTIAL OPIOID
6 ANTAGONIST, WHICH RULES MUST INCLUDE A WARNING TO INDICATE RISKS
7 SUCH AS OVERDOSE AND ADDICTION.

8 **SECTION 5.** In Colorado Revised Statutes, 12-42.5-404, **add**
9 (3)(j) as follows:

10 **12-42.5-404. Program operation - access - rules - definitions -**
11 **repeal.** (3) The program is available for query only to the following
12 persons or groups of persons:

13 (j) A MEDICAL EXAMINER WHO IS A PHYSICIAN LICENSED
14 PURSUANT TO ARTICLE 36 OF THIS TITLE 12 WHOSE LICENSE IS IN GOOD
15 STANDING, AND WHO IS LOCATED AND EMPLOYED IN THE STATE OF
16 COLORADO, OR A CORONER ELECTED PURSUANT TO SECTION 30-10-601,
17 IF:

18 (I) THE INFORMATION RELEASED IS SPECIFIC TO AN INDIVIDUAL
19 WHO IS THE SUBJECT OF AN AUTOPSY CONDUCTED BY THE MEDICAL
20 EXAMINER OR CORONER;

21 (II) THE MEDICAL EXAMINER OR THE CORONER HAS LEGITIMATE
22 ACCESS TO THE INDIVIDUAL'S MEDICAL RECORD; AND

23 (III) THE INDIVIDUAL'S DEATH OR INJURY OCCURRED UNDER
24 UNUSUAL, SUSPICIOUS, OR UNNATURAL CIRCUMSTANCES.

25 **SECTION 6.** In Colorado Revised Statutes, **add** 19-1-129 as
26 follows:

27 **19-1-129. Department - research authorized - prenatal**

1 **substance exposure - newborn and family outcomes - report.** (1) THE
2 DEPARTMENT MAY CONDUCT RESEARCH AS RELATED TO THE DEFINITION
3 OF "ABUSE" IN SECTION 19-1-103 CONCERNING THE INCIDENCE OF
4 PRENATAL SUBSTANCE EXPOSURE AND RELATED NEWBORN AND FAMILY
5 HEALTH AND HUMAN SERVICES OUTCOMES AS THE RESULT OF A MOTHER'S
6 LAWFUL AND UNLAWFUL INTAKE OF CONTROLLED SUBSTANCES.

7 (2) BEGINNING IN JANUARY 2021 AND EVERY TWO YEARS
8 THEREAFTER, THE DEPARTMENT SHALL REPORT THE OUTCOMES OF ANY
9 RESEARCH CONDUCTED PURSUANT TO SUBSECTION (1) OF THIS SECTION TO
10 THE JOINT HEALTH COMMITTEES OF THE GENERAL ASSEMBLY AS PART OF
11 ITS "STATE MEASUREMENT FOR ACCOUNTABLE, RESPONSIVE, AND
12 TRANSPARENT (SMART) GOVERNMENT ACT" PRESENTATION REQUIRED
13 BY SECTION 2-7-203.

14 **SECTION 7.** In Colorado Revised Statutes, **add** 25-1-521 as
15 follows:

16 **25-1-521. State department - local public health agencies -**
17 **address substance use disorders - appropriation - repeal.** (1) FOR THE
18 2019-20 FISCAL YEAR, THE GENERAL ASSEMBLY SHALL APPROPRIATE TWO
19 MILLION DOLLARS TO THE STATE DEPARTMENT TO ADDRESS OPIOID AND
20 SUBSTANCE USE DISORDERS THROUGH PUBLIC HEALTH INTERVENTIONS
21 AND TO WORK WITH COMMUNITY PARTNERS, INCLUDING COUNTY AND
22 DISTRICT PUBLIC HEALTH AGENCIES, TO ADDRESS OPIOID AND OTHER
23 SUBSTANCE USE PRIORITIES THROUGHOUT THE STATE. THE STATE
24 DEPARTMENT MAY USE THE MONEY FOR DATA COLLECTION, ANALYSIS,
25 AND DISSEMINATION ACTIVITIES RELATED TO OPIOID AND OTHER
26 SUBSTANCE USE DISORDERS AT THE STATE AND LOCAL LEVELS, INCLUDING
27 COMMUNITY HEALTH ASSESSMENTS AND IMPROVEMENT PLANNING. THE

1 STATE DEPARTMENT MAY USE UP TO FIVE HUNDRED THOUSAND DOLLARS
2 OF THE MONEY FOR ADMINISTRATIVE COSTS AND OTHER ACTIVITIES
3 RELATED TO THE PURPOSES OF THIS SECTION.

4 (2) THIS SECTION IS REPEALED, EFFECTIVE JULY 1, 2020.

5 **SECTION 8.** In Colorado Revised Statutes, **add 26-1-141** as
6 follows:

7 **26-1-141. Departments - report required - hepatitis and HIV**

8 **tests - definitions.** (1) ON OR BEFORE DECEMBER 31, 2019, THE
9 EXECUTIVE DIRECTORS OF THE DEPARTMENT OF HUMAN SERVICES, THE
10 DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, AND THE
11 DEPARTMENT OF CORRECTIONS SHALL SUBMIT A REPORT TO THE PUBLIC
12 HEALTH CARE AND HUMAN SERVICES COMMITTEE AND THE HEALTH AND
13 INSURANCE COMMITTEE OF THE HOUSE OF REPRESENTATIVES AND THE
14 HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE CONCERNING:

15 (a) THE AMOUNT OF FEDERAL FUNDS THAT EACH DEPARTMENT IS
16 ELIGIBLE TO RECEIVE OR IS CURRENTLY RECEIVING THAT MAY BE USED FOR
17 TESTING FOR HEPATITIS B, HEPATITIS C, OR HIV;

18 (b) THE NUMBER OF INDIVIDUALS CURRENTLY BEING TESTED FOR
19 EACH DISEASE LISTED IN SUBSECTION (1)(a) OF THIS SECTION; AND

20 (c) WHETHER EACH DEPARTMENT IS PLANNING TO INCREASE THE
21 NUMBER OF PEOPLE BEING TESTED FOR EACH DISEASE LISTED IN
22 SUBSECTION (1)(a) OF THIS SECTION.

23 (2) THE DEPARTMENTS SPECIFIED IN SUBSECTION (1) OF THIS
24 SECTION SHALL PREPARE MATERIALS DESCRIBING THE ELIGIBILITY
25 STANDARDS CURRENTLY IN USE FOR TREATMENT OF HEPATITIS B,
26 HEPATITIS C, AND HIV AND DISTRIBUTE MATERIALS TO PRIMARY CARE
27 PROVIDERS IN THE STATE. THE DEPARTMENTS MAY DISTRIBUTE THE

1 MATERIALS BY PROVIDING THE MATERIALS TO THE RELEVANT
2 PROFESSIONAL ASSOCIATION FOR THE PROVIDERS, AT PROFESSIONAL
3 ASSOCIATION MEETINGS AND CONFERENCES, OR BY OTHER APPROPRIATE
4 MEANS AS DETERMINED BY EACH DEPARTMENT.

5 (3) AS USED IN THIS SECTION:

6 (a) "ARRANGING FOR THE PROVISION" MEANS DEMONSTRATING
7 ESTABLISHED REFERRAL RELATIONSHIPS WITH HEALTH CARE PROVIDERS
8 FOR ANY OF THE COMPREHENSIVE PRIMARY CARE SERVICES NOT DIRECTLY
9 PROVIDED BY AN ENTITY.

10 (b) (I) "PRIMARY CARE" MEANS THE BASIC ENTRY-LEVEL HEALTH
11 CARE PROVIDED BY PHYSICIAN OR NONPHYSICIAN HEALTH CARE
12 PRACTITIONERS THAT IS GENERALLY PROVIDED IN AN OUTPATIENT
13 SETTING.

14 (II) "PRIMARY CARE" INCLUDES:

15 (A) PROVIDING OR ARRANGING FOR THE PROVISION OF PRIMARY
16 HEALTH CARE;

17 (B) MATERNITY CARE, INCLUDING PRENATAL CARE;

18 (C) PREVENTIVE, DEVELOPMENTAL, AND DIAGNOSTIC SERVICES
19 FOR INFANTS AND CHILDREN;

20 (D) ADULT PREVENTIVE SERVICES;

21 (E) DIAGNOSTIC LABORATORY AND RADIOLOGY SERVICES;

22 (F) EMERGENCY CARE FOR MINOR TRAUMA;

23 (G) PHARMACEUTICAL SERVICES; AND

24 (H) COORDINATION AND FOLLOW-UP FOR HOSPITAL CARE.

25 (III) "PRIMARY CARE" MAY ALSO INCLUDE OPTIONAL SERVICES
26 BASED ON A PATIENT'S NEEDS.

27 

1 **SECTION 9.** In Colorado Revised Statutes, 27-80-106, **add** (3)
2 as follows:

3 **27-80-106. Purchase of prevention and treatment services.**

4 (3) (a) THERE IS CREATED IN THE OFFICE OF BEHAVIORAL HEALTH,
5 REFERRED TO IN THIS SECTION AS THE "OFFICE", THE CHARLIE HUGHES
6 AND NATHAN GAUNA OPIOID PREVENTION GRANT PROGRAM TO IMPROVE
7 YOUNG LIVES, REFERRED TO IN THIS SECTION AS THE "PROGRAM", FOR
8 PREVENTING OPIOID USE AMONG THE STATE'S YOUTH POPULATION.

9 (b) THE OFFICE SHALL, IN COORDINATION WITH THE STATE PLAN
10 FORMULATED PURSUANT TO SECTION 27-80-102, PURCHASE PREVENTION
11 SERVICES FROM ONE OR MORE COMMUNITY-BASED YOUTH DEVELOPMENT
12 ORGANIZATIONS THAT ADMINISTER EVIDENCE-BASED SUBSTANCE USE
13 PREVENTION PROGRAMS TO YOUTH AND FAMILIES. THE OFFICE SHALL
14 PRIORITIZE THE AMOUNTS OF FUNDING REQUESTED IN THEIR ENTIRETY OR
15 IN AMOUNTS SUFFICIENT TO ENSURE THAT GRANT RECIPIENTS ARE ABLE TO
16 FULLY OR SUBSTANTIALLY IMPLEMENT PROGRAMS TO FIDELITY. THE
17 OFFICE MAY USE UP TO TEN PERCENT OF THE MONEY APPROPRIATED TO
18 THE PROGRAM FOR ADMINISTRATION AND EVALUATION OF THE PROGRAM.

19 (c) THIS SUBSECTION (3) IS REPEALED, EFFECTIVE SEPTEMBER 1,
20 2020.

21 **SECTION 10.** In Colorado Revised Statutes, 27-80-118, **add** (5)
22 and (6) as follows:

23 **27-80-118. Center for research into substance use disorder**
24 **prevention, treatment, and recovery support strategies - legislative**
25 **declaration - established - repeal.** (5) (a) THE CENTER SHALL DEVELOP
26 AND IMPLEMENT A PROGRAM TO INCREASE PUBLIC AWARENESS
27 CONCERNING THE SAFE USE, STORAGE, AND DISPOSAL OF OPIOIDS AND THE

1 AVAILABILITY OF NALOXONE AND OTHER DRUGS USED TO BLOCK THE
2 EFFECTS OF AN OPIOID OVERDOSE.

3 (b) (I) FOR THE 2019-20 FISCAL YEAR AND EACH FISCAL YEAR
4 THEREAFTER THROUGH THE 2023-24 FISCAL YEAR, THE GENERAL
5 ASSEMBLY SHALL APPROPRIATE SEVEN HUNDRED FIFTY THOUSAND
6 DOLLARS PER YEAR TO THE CENTER FROM THE MARIJUANA TAX CASH FUND
7 CREATED IN SECTION 39-28.8-501 (1) FOR THE PURPOSES OF THIS
8 SUBSECTION (5).

9 (II) THIS SUBSECTION (5) IS REPEALED, EFFECTIVE SEPTEMBER 1,
10 2024. BEFORE ITS REPEAL, THE PROGRAM CREATED IN THIS SUBSECTION
11 (5) IS SCHEDULED FOR REVIEW PURSUANT TO SECTION 24-34-104.

12 (6) (a) THE CENTER MAY EMPLOY UP TO **THREE** ADDITIONAL
13 EMPLOYEES TO WORK AS GRANT WRITERS IN ORDER TO AID LOCAL
14 COMMUNITIES IN NEED OF ASSISTANCE IN APPLYING FOR GRANTS TO
15 ACCESS STATE AND FEDERAL MONEY TO ADDRESS OPIOID AND OTHER
16 SUBSTANCE USE DISORDERS IN THEIR COMMUNITIES. THE CENTER SHALL
17 DETERMINE THE COMMUNITIES IN WHICH TO PROVIDE THE GRANT WRITING
18 ASSISTANCE.

19 (b) FOR THE FISCAL YEAR 2019-20, THE GENERAL ASSEMBLY
20 SHALL APPROPRIATE MONEY FROM THE **MARIJUANA TAX CASH FUND**
21 **CREATED IN SECTION 39-28.8-501 (1)** TO THE DEPARTMENT FOR
22 ALLOCATION TO THE CENTER FOR THE PURPOSES OF THIS SUBSECTION (6).
23 THE CENTER MAY USE THE MONEY TO HIRE NEW EMPLOYEES AND FOR THE
24 DIRECT AND INDIRECT COSTS ASSOCIATED WITH THIS SUBSECTION (6).

25 **SECTION 11.** In Colorado Revised Statutes, 24-34-104, **add**
26 (25)(a)(XX) **as follows:**

27 **24-34-104. General assembly review of regulatory agencies**

1 **and functions for repeal, continuation, or reestablishment - legislative**
2 **declaration.** (25) (a) The following agencies, functions, or both, are
3 scheduled for repeal on September 1, 2024:

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7 (XX) THE PROGRAM TO INCREASE PUBLIC AWARENESS
8 CONCERNING THE SAFE USE, STORAGE, AND DISPOSAL OF OPIOIDS AND THE
9 AVAILABILITY OF NALOXONE AND OTHER DRUGS USED TO BLOCK THE
10 EFFECTS OF AN OPIOID OVERDOSE DEVELOPED PURSUANT TO SECTION
11 27-80-118 (5).

12 **SECTION 12.** In Colorado Revised Statutes, **add 27-80-119** as
13 **follows:**

14 **27-80-119. Perinatal substance use data linkage project -**
15 **center for research into substance use disorder prevention,**
16 **treatment, and recovery support strategies - report.** (1) THE CENTER
17 FOR RESEARCH INTO SUBSTANCE USE DISORDER PREVENTION, TREATMENT,
18 AND RECOVERY SUPPORT STRATEGIES ESTABLISHED IN SECTION 27-80-118,
19 REFERRED TO IN THIS SECTION AS THE "CENTER", IN PARTNERSHIP WITH AN
20 INSTITUTION OF HIGHER EDUCATION AND THE STATE SUBSTANCE ABUSE
21 TREND AND RESPONSE TASK FORCE ESTABLISHED IN SECTION 18-18.5-103,
22 MAY CONDUCT A STATEWIDE PERINATAL SUBSTANCE USE DATA LINKAGE
23 PROJECT THAT USES ONGOING COLLECTION, ANALYSIS, INTERPRETATION,
24 AND DISSEMINATION OF DATA FOR THE PLANNING, IMPLEMENTATION, AND
25 EVALUATION OF PUBLIC HEALTH ACTIONS TO IMPROVE OUTCOMES FOR
26 FAMILIES IMPACTED BY SUBSTANCE USE DURING PREGNANCY. THE DATA
27 LINKAGE PROJECT MAY CONSIDER STATE-ADMINISTERED DATA SOURCES

1 THAT INCLUDE:

2 (a) HEALTH CARE UTILIZATION BY PREGNANT AND POSTPARTUM
3 WOMEN WITH SUBSTANCE USE DISORDERS AND THEIR INFANTS;

4 (b) HUMAN SERVICE AND PUBLIC HEALTH PROGRAM UTILIZATION
5 BY PREGNANT AND POSTPARTUM WOMEN WITH SUBSTANCE USE DISORDERS
6 AND THEIR INFANTS;

7 (c) HEALTH CARE, HUMAN SERVICE, AND PUBLIC HEALTH PROGRAM
8 OUTCOMES AMONG PREGNANT AND POSTPARTUM WOMEN WITH
9 SUBSTANCE USE DISORDERS AND THEIR INFANTS; AND

10 (d) COSTS ASSOCIATED WITH HEALTH CARE, HUMAN SERVICE, AND
11 PUBLIC HEALTH PROGRAM PROVISION FOR PREGNANT AND POSTPARTUM
12 WOMEN WITH SUBSTANCE USE DISORDERS AND THEIR INFANTS.

13 (2) THE DATA LINKAGE PROJECT SHALL USE VITAL RECORDS TO
14 ESTABLISH MATERNAL AND INFANT DYADS BEGINNING AT THE BIRTH
15 HOSPITALIZATION AND RETROSPECTIVELY LINK THE PRENATAL PERIOD
16 AND PROSPECTIVELY LINK THE FIRST YEAR POSTPARTUM.

17 (3) THE GOVERNOR'S OFFICE OF INFORMATION TECHNOLOGY WILL
18 OBTAIN DATA AND PERFORM SECURE LINKAGE AND ANONYMIZATION ON
19 BEHALF OF THE STATE.

20 (4) ON OR BEFORE JANUARY 1, 2021, THE CENTER SHALL REPORT
21 PROGRESS ON THE DATA LINKAGE PROJECT AND THE RESULTS, IF
22 AVAILABLE, TO THE HEALTH AND INSURANCE COMMITTEE AND THE PUBLIC
23 HEALTH CARE AND HUMAN SERVICES COMMITTEE OF THE HOUSE OF
24 REPRESENTATIVES AND THE HEALTH AND HUMAN SERVICES COMMITTEE
25 OF THE SENATE OR THEIR SUCCESSOR COMMITTEES.

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27 **SECTION 13.** In Colorado Revised Statutes, **add** part 2 to article

1 82 of title 27 as follows:

2 PART 2

3 MATERNAL AND CHILD HEALTH PILOT PROGRAM

4 **27-82-201. Legislative declaration.** THE GENERAL ASSEMBLY
5 FINDS AND DECLARES THAT FACILITIES THAT PROVIDE TREATMENT TO
6 INDIVIDUALS WITH A SUBSTANCE USE DISORDER, INCLUDING
7 MEDICATION-ASSISTED TREATMENT, AND CLINICS THAT PROVIDE
8 OBSTETRIC AND GYNECOLOGICAL HEALTH CARE SERVICES WOULD BETTER
9 SERVE PREGNANT AND POSTPARTUM WOMEN IF THE SERVICES COULD BE
10 COORDINATED AND PROVIDED TO WOMEN AT THE SAME LOCATION. IT IS
11 THE INTENT OF THE GENERAL ASSEMBLY TO FUND A PILOT PROGRAM TO
12 INTEGRATE THESE HEALTH CARE SERVICES AT SPECIFIED FACILITIES AND
13 CLINICS AND REQUIRE THE OFFICE OF BEHAVIORAL HEALTH TO EVALUATE
14 THE PILOT PROGRAM AND REPORT THE RESULTS OF THE PILOT PROGRAM TO
15 THE GENERAL ASSEMBLY.

16 **27-82-202. Definitions.** AS USED IN THIS PART 2, UNLESS THE
17 CONTEXT OTHERWISE REQUIRES:

18 (1) "CLINIC" MEANS A SITE THAT PROVIDES OBSTETRIC AND
19 GYNECOLOGICAL HEALTH CARE.

20 (2) "LICENSED HEALTH CARE PROVIDER" MEANS A PHYSICIAN OR
21 PHYSICIAN ASSISTANT LICENSED PURSUANT TO ARTICLE 36 OF TITLE 12 OR
22 A NURSE LICENSED PURSUANT TO ARTICLE 38 OF TITLE 12.

23 (3) "PILOT PROGRAM" MEANS THE MATERNAL AND CHILD HEALTH
24 PILOT PROGRAM CREATED IN SECTION 27-82-203.

25 (4) "TREATMENT FACILITY" MEANS A HEALTH CARE FACILITY THAT
26 PROVIDES SUBSTANCE USE DISORDER OR MEDICATION-ASSISTED
27 TREATMENT AND THAT IS APPROVED BY THE OFFICE OF BEHAVIORAL

1 HEALTH PURSUANT TO SECTION 27-82-103.

2 **27-82-203. Maternal and child health pilot program - created**

3 **- eligibility of grant recipients - rules - report.** (1) THERE IS CREATED

4 IN THE DEPARTMENT THE MATERNAL AND CHILD HEALTH PILOT PROGRAM.

5 THE OFFICE OF BEHAVIORAL HEALTH SHALL ADMINISTER THE PILOT

6 PROGRAM. THE PURPOSE OF THE PILOT PROGRAM IS TO:

7 (a) PROVIDE GRANTS TO **TWO** TREATMENT FACILITIES TO

8 FACILITATE THE INTEGRATION OF OBSTETRIC AND GYNECOLOGICAL

9 HEALTH CARE; AND

10 (b) PROVIDE GRANTS TO **FOUR** CLINICS TO FACILITATE THE

11 INTEGRATION OF BEHAVIORAL HEALTH, INCLUDING SUBSTANCE USE

12 DISORDER TREATMENT OR MEDICATION-ASSISTED TREATMENT, INTO

13 OBSTETRIC AND GYNECOLOGICAL HEALTH CARE AT THE CLINICS.

14 (2) THE OFFICE OF BEHAVIORAL HEALTH SHALL DETERMINE THE

15 CRITERIA FOR TREATMENT FACILITIES AND CLINICS TO BE ELIGIBLE TO

16 RECEIVE THE GRANTS.

17 (3) (a) (I) A TREATMENT FACILITY THAT IS AWARDED A GRANT

18 SHALL INTEGRATE PRENATAL, POSTPARTUM, AND OTHER HEALTH CARE

19 SERVICES DELIVERED BY LICENSED HEALTH CARE PROVIDERS INTO THE

20 SERVICES CURRENTLY PROVIDED AT THE TREATMENT FACILITY.

21 (II) A TREATMENT FACILITY THAT IS AWARDED A GRANT MAY USE

22 THE GRANT TO HIRE CLINICAL STAFF AND TO PROVIDE CLINICAL UPDATES,

23 INCLUDING TRAINING STAFF AND UPGRADING AND CHANGING

24 TECHNOLOGY PLATFORMS TO SUPPORT INTEGRATED CARE, IN ORDER TO

25 PERFORM OBSTETRIC AND GYNECOLOGICAL HEALTH CARE WITHIN THE

26 TREATMENT FACILITY. A TREATMENT FACILITY WITH LOW PATIENT

27 VOLUME MAY PARTNER WITH OTHER TREATMENT FACILITIES AND CLINICS

1 TO PROVIDE INTEGRATED CARE.

2 (b) (I) A CLINIC THAT IS AWARDED A GRANT SHALL INTEGRATE
3 BEHAVIORAL HEALTH CARE SERVICES PROVIDED BY SOCIAL WORKERS AND
4 OTHER BEHAVIORAL HEALTH CARE PROFESSIONALS LICENSED PURSUANT
5 TO ARTICLE 43 OF TITLE 12, INCLUDING MENTAL HEALTH SERVICES,
6 SUBSTANCE USE DISORDER TREATMENT, OR MEDICATION-ASSISTED
7 TREATMENT, INTO THE HEALTH CARE SERVICES CURRENTLY PROVIDED AT
8 THE CLINIC.

9 (II) A CLINIC MAY USE THE GRANT FOR SERVICES INCLUDING
10 TRAINING CLINICAL STAFF, UPGRADING AND CHANGING TECHNOLOGY
11 PLATFORMS TO SUPPORT INTEGRATED CARE, EMPLOYING BEHAVIORAL
12 HEALTH CARE PROVIDERS, AND COORDINATING AND REFERRING PATIENTS
13 TO BEHAVIORAL HEALTH CARE PROVIDERS OUTSIDE THE CLINIC.

14 (4) THE STATE BOARD OF HUMAN SERVICES WITHIN THE
15 DEPARTMENT, IN CONSULTATION WITH THE OFFICE OF BEHAVIORAL
16 HEALTH, MAY PROMULGATE RULES TO IMPLEMENT THE PILOT PROGRAM.
17 THE RULES MUST INCLUDE:

18 (a) THE PROCEDURES AND TIMELINES BY WHICH A TREATMENT
19 FACILITY OR CLINIC MAY APPLY FOR A GRANT;

20 (b) GRANT APPLICATION CONTENTS; AND

21 (c) CRITERIA FOR DETERMINING ELIGIBILITY FOR AND THE AMOUNT
22 OF EACH GRANT AWARDED TO A TREATMENT FACILITY OR CLINIC.

23 (5) THE EXECUTIVE DIRECTOR SHALL DETERMINE A PROCESS TO
24 EVALUATE THE GRANT RECIPIENTS AND THE INTEGRATION OF HEALTH
25 CARE RESULTING FROM THE PILOT PROGRAM. THE OFFICE OF BEHAVIORAL
26 HEALTH SHALL REPORT THE RESULTS OF THE PILOT PROGRAM TO THE
27 HEALTH CARE AND HUMAN SERVICES AND THE HEALTH AND INSURANCE

1 COMMITTEES OF THE HOUSE OF REPRESENTATIVES AND THE HEALTH AND
2 HUMAN SERVICES COMMITTEE OF THE SENATE, OR THEIR SUCCESSOR
3 COMMITTEES.

4 **27-82-204. Funding for pilot program.** (1)(a) FOR THE 2019-20
5 THROUGH 2021-22 FISCAL YEARS, THE GENERAL ASSEMBLY SHALL
6 APPROPRIATE MONEY EACH FISCAL YEAR FROM THE MARIJUANA TAX CASH
7 FUND CREATED IN SECTION 39-28.8-501 (1) TO THE DEPARTMENT, FOR
8 ALLOCATION TO THE OFFICE OF BEHAVIORAL HEALTH TO IMPLEMENT THE
9 PILOT PROGRAM. THE OFFICE OF BEHAVIORAL HEALTH MAY USE A PORTION
10 OF THE MONEY ANNUALLY APPROPRIATED FOR THE PILOT PROGRAM TO
11 PAY THE DIRECT AND INDIRECT COSTS INCURRED TO ADMINISTER THE
12 PILOT PROGRAM.

13 (b) IF ANY UNEXPENDED OR UNCOMMITTED MONEY APPROPRIATED
14 FOR THE 2019-20 OR 2020-21 FISCAL YEAR REMAINS AT THE END OF
15 EITHER FISCAL YEAR, THE OFFICE OF BEHAVIORAL HEALTH MAY EXPEND
16 THE MONEY IN ACCORDANCE WITH THIS SECTION IN THE SUCCEEDING
17 FISCAL YEAR WITHOUT FURTHER APPROPRIATION. ANY UNEXPENDED OR
18 UNCOMMITTED MONEY REMAINING AT THE END OF THE 2021-22 FISCAL
19 YEAR REVERTS TO THE MARIJUANA TAX CASH FUND CREATED IN SECTION
20 39-28.8-501 (1).

21 (2) THE DEPARTMENT MAY SOLICIT, ACCEPT, AND EXPEND ANY
22 GIFTS, GRANTS, OR DONATIONS FROM PRIVATE OR PUBLIC SOURCES TO
23 IMPLEMENT OR ADMINISTER THE PILOT PROGRAM.

24 **27-82-205. Repeal of part.** THIS PART 2 IS REPEALED, EFFECTIVE
25 DECEMBER 31, 2022.

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27 =====

1 **SECTION 14.** In Colorado Revised Statutes, add to article 30
2 **as relocated by House Bill 19-1172 12-30-111 as follows:**

3 **12-30-111. Demonstrated competency - opiate prescribers -**
4 **rules - definition - repeal.** (1) (a) THE APPLICABLE LICENSING BOARD
5 FOR EACH LICENSED HEALTH CARE PROVIDER SHALL PROMULGATE RULES
6 THAT REQUIRE EACH LICENSED HEALTH CARE PROVIDER, AS A CONDITION
7 OF RENEWING, REACTIVATING, OR REINSTATING A LICENSE ON OR AFTER
8 OCTOBER 1, 2019, TO COMPLETE UP TO FOUR CREDIT HOURS OF TRAINING
9 PER LICENSING CYCLE IN ORDER TO DEMONSTRATE COMPETENCY
10 REGARDING: BEST PRACTICES FOR OPIOID PRESCRIBING, ACCORDING TO
11 THE MOST RECENT VERSION OF THE DIVISION'S GUIDELINES FOR THE SAFE
12 PRESCRIBING AND DISPENSING OF OPIOIDS; RECOGNITION OF SUBSTANCE
13 USE DISORDERS; REFERRAL OF PATIENTS WITH SUBSTANCE USE DISORDERS
14 FOR TREATMENT; AND THE USE OF THE ELECTRONIC PRESCRIPTION DRUG
15 MONITORING PROGRAM CREATED IN PART 4 OF ARTICLE 280 OF THIS TITLE
16 12.

17 (b) THE RULES PROMULGATED BY EACH BOARD SHALL EXEMPT A
18 LICENSED HEALTH CARE PROVIDER WHO:

19 (I) MAINTAINS A NATIONAL BOARD CERTIFICATION THAT REQUIRES
20 EQUIVALENT SUBSTANCE USE PREVENTION TRAINING; OR

21 (II) ATTESTS TO THE APPROPRIATE BOARD THAT THE HEALTH CARE
22 PROVIDER DOES NOT PRESCRIBE OPIOIDS.

23 (2) FOR THE PURPOSES OF THIS SECTION, "LICENSED HEALTH CARE
24 PROVIDER" INCLUDES A PHYSICIAN, PHYSICIAN ASSISTANT, PODIATRIST,
25 DENTIST, ADVANCED PRACTICE NURSE WITH PRESCRIPTIVE AUTHORITY,
26 OPTOMETRIST, AND VETERINARIAN LICENSED PURSUANT TO THIS TITLE 12.

27 ==

1 **SECTION 15.** In Colorado Revised Statutes, **add to article 240**
2 **as relocated by House Bill 19-1172** 12-240-145 as follows:

3 **12-240-145. Prescription medications - financial benefit for**
4 **prescribing prohibited.** A PHYSICIAN OR PHYSICIAN ASSISTANT SHALL
5 NOT ACCEPT ANY DIRECT OR INDIRECT BENEFIT FROM A PHARMACEUTICAL
6 MANUFACTURER OR PHARMACEUTICAL REPRESENTATIVE FOR PRESCRIBING
7 A SPECIFIC MEDICATION TO A PATIENT. FOR THE PURPOSES OF THIS
8 SECTION, A DIRECT OR INDIRECT BENEFIT DOES NOT INCLUDE A BENEFIT
9 OFFERED TO A PHYSICIAN OR PHYSICIAN ASSISTANT REGARDLESS OF
10 WHETHER THE SPECIFIC MEDICATION IS BEING PRESCRIBED.

11 **SECTION 16.** In Colorado Revised Statutes, 12-255-112, **add as**
12 **relocated by House Bill 19-1172** (12) as follows:

13 **12-255-112. Prescriptive authority - advanced practice nurses**
14 **- limits on opioid prescriptions - rules - financial benefit for**
15 **prescribing prohibited - repeal.** (12) AN ADVANCED PRACTICE NURSE
16 SHALL NOT ACCEPT ANY DIRECT OR INDIRECT BENEFIT FROM A
17 PHARMACEUTICAL MANUFACTURER OR PHARMACEUTICAL
18 REPRESENTATIVE FOR PRESCRIBING A SPECIFIC MEDICATION TO A PATIENT.
19 FOR THE PURPOSES OF THIS SECTION, A DIRECT OR INDIRECT BENEFIT DOES
20 NOT INCLUDE A BENEFIT OFFERED TO AN ADVANCED PRACTICE NURSE
21 REGARDLESS OF WHETHER THE SPECIFIC MEDICATION IS BEING
22 PRESCRIBED.

23 **SECTION 17.** In Colorado Revised Statutes, 12-280-124, add as
24 **relocated by House Bill 19-1172** (3) as follows:

25 **12-280-124. Labeling - rules.** (3) THE BOARD SHALL
26 PROMULGATE RULES CONCERNING THE LABELING REQUIREMENTS FOR A
27 PRESCRIPTION DRUG THAT IS DISPENSED TO A PATIENT FOR OUTPATIENT

1 USE AND CONTAINS AN OPIOID, EXCEPT FOR AN OPIOID PRESCRIBED FOR
2 TREATMENT OF A SUBSTANCE USE DISORDER OR THAT IS A PARTIAL OPIOID
3 ANTAGONIST, WHICH RULES MUST INCLUDE A WARNING TO INDICATE RISKS
4 SUCH AS OVERDOSE AND ADDICTION.

5 **SECTION 18.** In Colorado Revised Statutes, 12-280-404, **add as**
6 **relocated by House Bill 19-1172 (3)(l)** as follows:

7 **12-280-404. Program operation - access - rules - definitions -**
8 **repeal.** (3) The program is available for query only to the following
9 persons or groups of persons:

10 (I) A MEDICAL EXAMINER WHO IS A PHYSICIAN LICENSED
11 PURSUANT TO ARTICLE 240 OF THIS TITLE 12, WHOSE LICENSE IS IN GOOD
12 STANDING, AND WHO IS LOCATED AND EMPLOYED IN THE STATE OF
13 COLORADO, OR A CORONER ELECTED PURSUANT TO SECTION 30-10-601,
14 IF:

15 (I) THE INFORMATION RELEASED IS SPECIFIC TO AN INDIVIDUAL
16 WHO IS THE SUBJECT OF AN AUTOPSY CONDUCTED BY THE MEDICAL
17 EXAMINER OR CORONER;

18 (II) THE MEDICAL EXAMINER OR THE CORONER HAS LEGITIMATE
19 ACCESS TO THE INDIVIDUAL'S MEDICAL RECORD; AND

20 (III) THE INDIVIDUAL'S DEATH OR INJURY OCCURRED UNDER
21 UNUSUAL, SUSPICIOUS, OR UNNATURAL CIRCUMSTANCES.

22 **SECTION 19. Appropriation.** (1) For the 2019-20 state fiscal
23 year, \$1,192,367 is appropriated to the department of human services for
24 use by the office of behavioral health. This appropriation is from the
25 marijuana tax cash fund created in section 39-28.8-501 (1), C.R.S. To
26 implement this act, the office may use this appropriation as follows:

27 (a) \$692,367 for the maternal and child health pilot program,

1 which amount is based on an assumption that the office will require an
2 additional 1.6 FTE; and

3 (b) \$500,000 for the Charlie Hughes and Nathan Guana opioid
4 prevention grant program to improve young lives, which amount is based
5 on an assumption that the office will require an additional 0.5 FTE.

6 (2) For the 2019-20 state fiscal year, \$1,100,000 is appropriated
7 to the department of higher education for use by the regents of the
8 university of Colorado. This appropriation is from the marijuana tax cash
9 fund created in section 39-28.8-501 (1), C.R.S. To implement this act, the
10 regents may use this appropriation for allocation to the center for research
11 into substance use disorder prevention, treatment, and recovery support
12 strategies.

13 (3) For the 2019-20 state fiscal year, \$2,000,000 is appropriated
14 to the department of public health and environment. This appropriation
15 is from the marijuana tax cash fund created in section 39-28.8-501 (1),
16 C.R.S. To implement this act, the office may use this appropriation as
17 follows:

18 (a) \$71,852 for use by the prevention services division for
19 administration, which amount is based on an assumption that the division
20 will require an additional 0.9 FTE;

21 (b) \$1,564,148 for distributions to local public health agencies;
22 and

23 (c) \$364,000 for personal services related to health statistics and
24 vital records.

25
26 **SECTION 20. Effective date - applicability.** (1) This act takes
27 effect upon passage; except that sections 14 to 18 of this act take effect

1 only if House Bill 19-1172 becomes law, in which case sections 14 to 18
2 take effect October 1, 2019.

3 (2) This act applies to conduct occurring on or after the effective
4 date of this act.

5 **SECTION 21. Safety clause.** The general assembly hereby finds,
6 determines, and declares that this act is necessary for the immediate
7 preservation of the public peace, health, and safety.