

CHAPTER 276

HUMAN SERVICES - BEHAVIORAL HEALTH

SENATE BILL 19-228

BY SENATOR(S) Winter and Moreno, Bridges, Court, Crowder, Fenberg, Ginal, Gonzales, Pettersen, Priola, Story, Tate, Todd, Garcia;
also REPRESENTATIVE(S) Buentello and Singer, Arndt, 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., Becker.

AN ACT

CONCERNING MEASURES TO PREVENT SUBSTANCE ABUSE, AND, IN CONNECTION THEREWITH, REQUIRING CERTAIN PRESCRIBERS TO COMPLETE SUBSTANCE USE DISORDER TRAINING; PROHIBITING PRESCRIBERS FROM ACCEPTING BENEFITS FOR PRESCRIBING SPECIFIC MEDICATIONS; REQUIRING OPIOID PRESCRIPTIONS TO BEAR WARNING LABELS; ALLOWING MEDICAL EXAMINERS AND CORONERS ACCESS TO THE PRESCRIPTION DRUG MONITORING PROGRAM; AUTHORIZING THE DEPARTMENT OF HUMAN SERVICES TO CONDUCT SUBSTANCE USE RESEARCH; PROVIDING FUNDING TO ADDRESS OPIOID AND SUBSTANCE USE DISORDERS THROUGH PUBLIC HEALTH INTERVENTIONS IN LOCAL COMMUNITIES; REQUIRING STATE DEPARTMENTS TO REPORT RECEIPT AND ELIGIBILITY FOR FEDERAL FUNDS FOR HIV AND HEPATITIS TESTING; REQUIRING THE CENTER FOR RESEARCH INTO SUBSTANCE USE DISORDER PREVENTION, TREATMENT, AND RECOVERY SUPPORT STRATEGIES TO DEVELOP AND IMPLEMENT A PROGRAM TO INCREASE PUBLIC AWARENESS CONCERNING THE SAFE USE, STORAGE, AND DISPOSAL OF ANTAGONIST DRUGS; AND MAKING AN APPROPRIATION.

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

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

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

(2) IF A PHARMACY DISPENSES AN OPIOID THAT IS A SCHEDULE II OR SCHEDULE III DRUG PURSUANT TO SECTION 18-18-204 OR 18-18-205 TO A PATIENT WHO HAS

Capital letters or bold & italic numbers indicate new material added to existing law; dashes through words or numbers indicate deletions from existing law and such material is not part of the act.

NOT PREVIOUSLY RECEIVED AN OPIOID PRESCRIPTION AND THE PHARMACY PROVIDES COUNSELING CONCERNING THE RISK OF OPIOIDS TO THE PATIENT, THE DISPENSING PHARMACY SHALL RECEIVE AN ENHANCED DISPENSING FEE.

(3) SUBSECTION (2) OF THIS SECTION DOES NOT REQUIRE A CARRIER TO CONTRACT WITH A PHARMACY OR PHARMACIST WILLING TO ABIDE BY THE TERMS AND CONDITIONS FOR PARTICIPATION ESTABLISHED BY THE HEALTH BENEFIT PLAN OR CARRIER.

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

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

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

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

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

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

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

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

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

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

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

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

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

19-1-129. Department - research authorized - prenatal substance exposure - newborn and family outcomes - report. (1) THE DEPARTMENT MAY CONDUCT RESEARCH AS RELATED TO THE DEFINITION OF "ABUSE" IN SECTION 19-1-103 CONCERNING THE INCIDENCE OF PRENATAL SUBSTANCE EXPOSURE AND RELATED NEWBORN AND FAMILY HEALTH AND HUMAN SERVICES OUTCOMES AS THE RESULT OF A MOTHER'S LAWFUL AND UNLAWFUL INTAKE OF CONTROLLED SUBSTANCES.

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

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

25-1-521. State department - local public health agencies - address substance use disorders - appropriation - repeal. (1) FOR THE 2019-20 FISCAL YEAR, THE GENERAL ASSEMBLY SHALL APPROPRIATE TWO MILLION DOLLARS TO THE STATE DEPARTMENT TO ADDRESS OPIOID AND SUBSTANCE USE DISORDERS THROUGH PUBLIC HEALTH INTERVENTIONS AND TO WORK WITH COMMUNITY PARTNERS, INCLUDING COUNTY AND DISTRICT PUBLIC HEALTH AGENCIES, TO ADDRESS OPIOID AND OTHER SUBSTANCE USE PRIORITIES THROUGHOUT THE STATE. THE STATE DEPARTMENT MAY USE THE MONEY FOR DATA COLLECTION, ANALYSIS, AND DISSEMINATION ACTIVITIES RELATED TO OPIOID AND OTHER SUBSTANCE USE 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.

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

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

26-1-141. Departments - report required - hepatitis and HIV tests - definitions. (1) ON OR BEFORE DECEMBER 31, 2019, THE EXECUTIVE DIRECTORS OF THE DEPARTMENT OF HUMAN SERVICES, THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, AND THE DEPARTMENT OF CORRECTIONS SHALL SUBMIT A REPORT TO THE PUBLIC HEALTH CARE AND HUMAN SERVICES COMMITTEE AND THE HEALTH AND INSURANCE COMMITTEE OF THE HOUSE OF REPRESENTATIVES AND THE HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE CONCERNING:

(a) THE AMOUNT OF FEDERAL FUNDS THAT EACH DEPARTMENT IS ELIGIBLE TO

RECEIVE OR IS CURRENTLY RECEIVING THAT MAY BE USED FOR TESTING FOR HEPATITIS B, HEPATITIS C, OR HIV;

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

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

(2) THE DEPARTMENTS SPECIFIED IN SUBSECTION (1) OF THIS SECTION SHALL PREPARE MATERIALS DESCRIBING THE ELIGIBILITY STANDARDS CURRENTLY IN USE FOR TREATMENT OF HEPATITIS B, HEPATITIS C, AND HIV AND DISTRIBUTE MATERIALS TO PRIMARY CARE PROVIDERS IN THE STATE. THE DEPARTMENTS MAY DISTRIBUTE THE MATERIALS BY PROVIDING THE MATERIALS TO THE RELEVANT PROFESSIONAL ASSOCIATION FOR THE PROVIDERS, AT PROFESSIONAL ASSOCIATION MEETINGS AND CONFERENCES, OR BY OTHER APPROPRIATE MEANS AS DETERMINED BY EACH DEPARTMENT.

(3) AS USED IN THIS SECTION:

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

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

(II) "PRIMARY CARE" INCLUDES:

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

(B) MATERNITY CARE, INCLUDING PRENATAL CARE;

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

(D) ADULT PREVENTIVE SERVICES;

(E) DIAGNOSTIC LABORATORY AND RADIOLOGY SERVICES;

(F) EMERGENCY CARE FOR MINOR TRAUMA;

(G) PHARMACEUTICAL SERVICES; AND

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

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

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

27-80-106. Purchase of prevention and treatment services - repeal.

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

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

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

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

27-80-118. Center for research into substance use disorder prevention, treatment, and recovery support strategies - legislative declaration - established - repeal. (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.

(b) (I) FOR THE 2019-20 FISCAL YEAR AND EACH FISCAL YEAR THEREAFTER THROUGH THE 2023-24 FISCAL YEAR, THE GENERAL ASSEMBLY SHALL APPROPRIATE SEVEN 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.

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

(b) FOR THE FISCAL YEAR 2019-20, THE GENERAL ASSEMBLY SHALL APPROPRIATE MONEY FROM THE MARIJUANA TAX CASH FUND CREATED IN SECTION 39-28.8-501 (1) TO THE DEPARTMENT FOR ALLOCATION TO THE CENTER FOR THE PURPOSES OF THIS

SUBSECTION (6). THE CENTER MAY USE THE MONEY TO HIRE NEW EMPLOYEES AND FOR THE DIRECT AND INDIRECT COSTS ASSOCIATED WITH THIS SUBSECTION (6).

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

24-34-104. General assembly review of regulatory agencies and functions for repeal, continuation, or reestablishment - legislative declaration. (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 12. In Colorado Revised Statutes, **add** 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:

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

(b) HUMAN SERVICE AND PUBLIC HEALTH PROGRAM UTILIZATION 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.

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

(4) ON OR BEFORE JANUARY 1, 2021, 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 13. In Colorado Revised Statutes, **add** part 2 to article 82 of title 27 as follows:

PART 2
MATERNAL AND CHILD HEALTH PILOT PROGRAM

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

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

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

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

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

(4) "TREATMENT FACILITY" MEANS A HEALTH CARE FACILITY THAT PROVIDES SUBSTANCE USE DISORDER OR MEDICATION-ASSISTED TREATMENT AND THAT IS APPROVED BY THE OFFICE OF BEHAVIORAL HEALTH PURSUANT TO SECTION 27-82-103.

27-82-203. Maternal and child health pilot program - created - eligibility of grant recipients - rules - report. (1) THERE IS CREATED IN THE DEPARTMENT THE MATERNAL AND CHILD HEALTH PILOT PROGRAM. THE OFFICE OF BEHAVIORAL HEALTH SHALL ADMINISTER THE PILOT PROGRAM. THE PURPOSE OF THE PILOT PROGRAM IS TO:

(a) PROVIDE GRANTS TO TWO TREATMENT FACILITIES TO FACILITATE THE

INTEGRATION OF OBSTETRIC AND GYNECOLOGICAL HEALTH CARE; AND

(b) PROVIDE GRANTS TO FOUR CLINICS TO FACILITATE THE INTEGRATION OF BEHAVIORAL HEALTH, INCLUDING SUBSTANCE USE DISORDER TREATMENT OR MEDICATION-ASSISTED TREATMENT, INTO OBSTETRIC AND GYNECOLOGICAL HEALTH CARE AT THE CLINICS.

(2) THE OFFICE OF BEHAVIORAL HEALTH SHALL DETERMINE THE CRITERIA FOR TREATMENT FACILITIES AND CLINICS TO BE ELIGIBLE TO RECEIVE THE GRANTS.

(3)(a)(I) A TREATMENT FACILITY THAT IS AWARDED A GRANT SHALL INTEGRATE PRENATAL, POSTPARTUM, AND OTHER HEALTH CARE SERVICES DELIVERED BY LICENSED HEALTH CARE PROVIDERS INTO THE SERVICES CURRENTLY PROVIDED AT THE TREATMENT FACILITY.

(II) A TREATMENT FACILITY THAT IS AWARDED A GRANT MAY USE THE GRANT TO HIRE CLINICAL STAFF AND TO PROVIDE CLINICAL UPDATES, INCLUDING TRAINING STAFF AND UPGRADING AND CHANGING TECHNOLOGY PLATFORMS TO SUPPORT INTEGRATED CARE, IN ORDER TO PERFORM OBSTETRIC AND GYNECOLOGICAL HEALTH CARE WITHIN THE TREATMENT FACILITY. A TREATMENT FACILITY WITH LOW PATIENT VOLUME MAY PARTNER WITH OTHER TREATMENT FACILITIES AND CLINICS TO PROVIDE INTEGRATED CARE.

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

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

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

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

(b) GRANT APPLICATION CONTENTS; AND

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

(5) THE EXECUTIVE DIRECTOR SHALL DETERMINE A PROCESS TO EVALUATE THE GRANT RECIPIENTS AND THE INTEGRATION OF HEALTH CARE RESULTING FROM THE PILOT PROGRAM. THE OFFICE OF BEHAVIORAL HEALTH SHALL REPORT THE RESULTS

OF THE PILOT PROGRAM TO THE HEALTH CARE AND HUMAN SERVICES AND THE HEALTH AND INSURANCE COMMITTEES OF THE HOUSE OF REPRESENTATIVES AND THE HEALTH AND HUMAN SERVICES COMMITTEE OF THE SENATE, OR THEIR SUCCESSOR COMMITTEES.

27-82-204. Funding for pilot program. (1) (a) FOR THE 2019-20 THROUGH 2021-22 FISCAL YEARS, 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).

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

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

SECTION 14. In Colorado Revised Statutes, **add to article 30 as relocated by House Bill 19-1172** 12-30-114 as follows:

12-30-114. Demonstrated competency - opiate prescribers - rules - definition - repeal. (1) (a) THE APPLICABLE LICENSING BOARD FOR EACH LICENSED HEALTH CARE PROVIDER SHALL PROMULGATE RULES THAT REQUIRE EACH LICENSED HEALTH CARE PROVIDER, AS A CONDITION OF RENEWING, REACTIVATING, OR REINSTATING A LICENSE ON OR AFTER OCTOBER 1, 2019, TO COMPLETE UP TO FOUR CREDIT HOURS OF TRAINING PER LICENSING CYCLE IN ORDER TO DEMONSTRATE COMPETENCY REGARDING: BEST PRACTICES FOR OPIOID PRESCRIBING, ACCORDING TO THE MOST RECENT VERSION OF THE DIVISION'S GUIDELINES FOR THE SAFE PRESCRIBING AND DISPENSING OF OPIOIDS; RECOGNITION OF SUBSTANCE USE DISORDERS; REFERRAL OF PATIENTS WITH SUBSTANCE USE DISORDERS FOR TREATMENT; AND THE USE OF THE ELECTRONIC PRESCRIPTION DRUG MONITORING PROGRAM CREATED IN PART 4 OF ARTICLE 280 OF THIS TITLE 12.

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

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

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

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

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

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

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

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

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

12-280-124. Labeling - rules. (3) THE BOARD SHALL PROMULGATE RULES CONCERNING THE LABELING REQUIREMENTS FOR A PRESCRIPTION DRUG THAT IS DISPENSED TO A PATIENT FOR OUTPATIENT USE AND CONTAINS AN OPIOID, EXCEPT FOR AN OPIOID PRESCRIBED FOR TREATMENT OF A SUBSTANCE USE DISORDER OR THAT IS A PARTIAL OPIOID ANTAGONIST, WHICH RULES MUST INCLUDE A WARNING TO INDICATE RISKS SUCH AS OVERDOSE AND ADDICTION.

SECTION 18. In Colorado Revised Statutes, 12-280-404, **add as relocated by House Bill 19-1172** (3)(1) as follows:

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

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

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

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

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

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

(a) \$692,367 for the maternal and child health pilot program, which amount is based on an assumption that the office will require an additional 1.6 FTE; and

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

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

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

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

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

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

SECTION 20. Effective date - applicability. (1) This act takes effect upon passage; except that sections 14 to 18 of this act take effect only if House Bill 19-1172 becomes law, in which case sections 14 to 18 take effect October 1, 2019.

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

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

Approved: May 23, 2019