Second Regular Session Seventy-second General Assembly STATE OF COLORADO

REENGROSSED

This Version Includes All Amendments Adopted in the House of Introduction SENATE BILL 20-007

LLS NO. 20-0297.01 Brita Darling x2241

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Senate Committees Health & Human Services Appropriations **House Committees**

A BILL FOR AN ACT

101 CONCERNING TREATMENT FOR SUBSTANCE USE <u>DISORDERS</u>, AND, IN

102 <u>CONNECTION THEREWITH, MAKING AN APPROPRIATION.</u>

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 <u>http://leg.colorado.gov/.</u>)

Opioid and Other Substance Use Disorders Study Committee. Section 1 of the bill requires updated community assessments every 2 years of the sufficiency of substance use disorder services in the community to be compiled by an independent entity contracted by the department of human services (DHS). The assessment must include input and the opportunity for review and comment from community entities and





individuals. Based on the community assessment, the managed service organization will prepare a draft community action plan and shall allow time for stakeholder review and comment on the plan.

Section 2 of the bill requires insurance carriers to provide coverage for the treatment of substance use disorders in accordance with the American society of addiction medicine (ASAM) criteria for placement, medical necessity, and utilization management determinations in accordance with the most recent edition of the ASAM criteria. The bill also authorizes the commissioner of insurance, in consultation with DHS and the department of health care policy and financing, to identify by rule alternate nationally recognized substance-use-disorder-specific treatment criteria if the ASAM criteria are no longer available, relevant, or reflect best practices.

Sections 3, 4, and 5 of the bill increases funding by \$1 million for provider loan forgiveness and scholarships from the Colorado health service corps fund in the department of public health and environment (CDPHE). The bill recognizes a goal of the loan forgiveness and scholarship programs of creating a diverse health care workforce that is able to address the needs of underserved populations and communities.

Section 6 of the bill authorizes a pharmacy that has entered into a collaborative pharmacy agreement with one or more physicians to receive an enhanced dispensing fee for the administration of all injectable medications for medication-assisted treatment that are approved by the federal food and drug administration, and not just injectable antagonist medication.

Section 7 of the bill requires DHS to commission a state child care and treatment study and final report to make findings and recommendations concerning gaps in family-centered substance use disorder treatment and to identify alternative payment structures for funding child care and children's services alongside substance use disorder treatment of a child's parent. DHS shall distribute the report to the general assembly and present the report in its annual presentation to committees of the general assembly.

Sections 8, 9, 10, 11, and 12 of the bill prohibit managed service organization contracted providers; withdrawal management services; and recovery residences from denying access to medical or substance use disorder treatment services, including recovery services, to persons who are participating in prescribed medication-assisted treatment for substance use disorders. In addition, the bill prohibits courts and parole, probation, and community corrections from prohibiting the use of prescribed medication-assisted treatment as a condition of participation or placement.

Section 13 of the bill requires managed care entities to provide coordination of care for the full continuum of substance use disorder and mental health treatment and recovery services, including support for individuals transitioning between levels of care.

Section 14 of the bill appropriates \$250,000 to the office of behavioral health in DHS for allocation to the center for research into substance use disorder prevention, treatment, and recovery support strategies for the continued employment of grant writers to aid local communities in need of assistance to access federal and state money to address opioid and other substance use disorders in their communities.

Section 15 of the bill authorizes the commissioner of insurance, in consultation with CDPHE, to promulgate rules, or to seek a revision of the essential health benefits package, for prescription medications for medication-assisted treatment to be included on insurance carriers' formularies.

Section 16 of the bill requires insurance carriers to report to the commissioner of insurance on the number of in-network providers who are licensed to prescribe medication-assisted treatment for substance use disorders, including buprenorphine, and of that number, to indicate how many providers are actively prescribing medication-assisted treatment. The bill requires the commissioner of insurance to promulgate rules concerning the reporting.

Section 17 of the bill requires insurance carriers to provide coverage for naloxone hydrochloride, or other similarly acting drug, without prior authorization and without imposing any deductible, copayment, coinsurance, or other cost-sharing requirement.

Section 18 of the bill requires DHS to implement a program for training and community outreach relating to, at a minimum, the availability of and process for civil commitment of persons with an alcohol or substance use disorder. The training must be provided to first responders, law enforcement, emergency departments, primary care providers, and persons and families of persons with a substance use disorder, among others.

Sections 19 through 65 of the bill consolidate part 1 of article 82 of title 27, C.R.S., relating to emergency treatment and voluntary and involuntary commitment of persons for treatment of drugs into the existing part 1 of article 81 of title 27, C.R.S., relating to emergency treatment and voluntary and involuntary commitment of persons for treatment of alcohol use disorders, in order to create a single process that includes all substances.

The new scope of part 1 of article 81 of title 27, C.R.S., includes both alcohol use disorder and substance use disorder under the defined term "substance use disorder".

The amendments and additions to part 1 of article 81 of title 27, C.R.S., include:

- ! Defining "administrator" to include an administrator's designee;
- ! Adding a definition of "incapacitated by substances" to

include a person who is incapacitated by alcohol or incapacitated by substances;

- ! Changing terminology throughout to refer to "substances" to include both alcohol and drugs;
- ! Adjusting the duration of the initial involuntary commitment from 30 days to up to 90 days;
- ! Allowing a person to enter into a stipulated order for committed treatment, expediting placement into treatment;
- ! Removing the mandatory hearing for the initial involuntary commitment but allowing a person to request a hearing if the person does not want to enter into a stipulated order for committed treatment;
- ! Incorporating in statute "patient's rights" relating to civil commitment;
- ! Using person-centered language throughout the statutory process; and
- ! Relocating the existing opioid crisis recovery funds advisory committee from article 82 in title 27, C.R.S., to article 81 in title 27, C.R.S.

In addition, the bill makes conforming amendments, including several in the professional licensing statutes in title 12, C.R.S., to remove references to both alcohol use disorder and substance use disorder as grounds for professional discipline, and replaces those terms with the single term "substance use disorder", which the bill now defines in article 81 of title 27, C.R.S., to include both drugs and alcohol.

The bill also makes conforming amendments to remove statutory references to provisions in part 2 of article 82 of title 27, C.R.S., which the bill repeals, and replaces those references with a new reference to the relevant provisions in article 81 of title 27, C.R.S.

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

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3 SECTION <u>1.</u> In Colorado Revised Statutes, 10-16-104, amend

- 4 (5.5)(a)(I) as follows:
 - 10-16-104. Mandatory coverage provisions definitions -
- 6 rules. (5.5) Behavioral, mental health, and substance use disorders
- 7 rules. (a) (I) Every health benefit plan subject to part 2, 3, or 4 of this
- 8 article 16, except those described in section 10-16-102 (32)(b), must

1 provide coverage:

(A) For the prevention of, screening for, and treatment of
behavioral, mental health, and substance use disorders that is no less
extensive than the coverage provided for any physical illness and that
complies with the requirements of the MHPAEA; AND

6 (B) AT A MINIMUM, FOR THE TREATMENT OF SUBSTANCE USE 7 DISORDERS IN ACCORDANCE WITH THE AMERICAN SOCIETY OF ADDICTION 8 MEDICINE CRITERIA FOR PLACEMENT, MEDICAL NECESSITY, AND 9 UTILIZATION MANAGEMENT DETERMINATIONS AS SET FORTH IN THE MOST 10 RECENT EDITION OF "THE ASAM CRITERIA FOR ADDICTIVE, 11 SUBSTANCE-RELATED, AND CO-OCCURRING CONDITIONS"; EXCEPT THAT 12 THE COMMISSIONER MAY IDENTIFY BY RULE, IN CONSULTATION WITH THE 13 DEPARTMENT OF HEALTH CARE POLICY AND FINANCING AND THE OFFICE 14 OF BEHAVIORAL HEALTH IN THE DEPARTMENT OF HUMAN SERVICES, AN 15 ALTERNATE NATIONALLY RECOGNIZED AND EVIDENCE-BASED 16 SUBSTANCE-USE-DISORDER-SPECIFIC CRITERIA FOR PLACEMENT, MEDICAL 17 NECESSITY, OR UTILIZATION MANAGEMENT, IF AMERICAN SOCIETY OF 18 ADDICTION MEDICINE CRITERIA ARE NO LONGER AVAILABLE, RELEVANT, 19 OR DO NOT FOLLOW BEST PRACTICES FOR SUBSTANCE USE DISORDER 20 TREATMENT.

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24 SECTION <u>2.</u> In Colorado Revised Statutes, 27-80-107, amend
25 (4) as follows:

26 27-80-107. Designation of managed service organizations 27 purchase of services - revocation of designation. (4) The terms and

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1 conditions for providing substance use disorder treatment services must 2 be specified in the contract entered into between the office of behavioral 3 health and the designated managed service organization. CONTRACTS 4 ENTERED INTO BETWEEN THE OFFICE OF BEHAVIORAL HEALTH AND THE 5 DESIGNATED MANAGED SERVICE ORGANIZATION MUST INCLUDE TERMS 6 AND CONDITIONS PROHIBITING A DESIGNATED MANAGED SERVICE 7 ORGANIZATION CONTRACTED TREATMENT PROVIDER FROM DENYING OR 8 PROHIBITING ACCESS TO MEDICATION-ASSISTED TREATMENT, AS DEFINED 9 IN SECTION 23-21-803, FOR A SUBSTANCE USE DISORDER.

SECTION <u>3.</u> In Colorado Revised Statutes, 27-80-108, amend
(1)(c) as follows:

12 27-80-108. Rules. (1) The state board of human services, created 13 in section 26-1-107, has the power to promulgate rules governing the 14 provisions of this article 80. The rules may include, but are not limited to: 15 (c) Requirements for public and private agencies, organizations, 16 and institutions from which the office of behavioral health may purchase 17 services pursuant to section 27-80-106 (1), WHICH REQUIREMENTS MUST 18 INCLUDE PROHIBITING THE PURCHASE OF SERVICES FROM ENTITIES THAT 19 DENY OR PROHIBIT ACCESS TO MEDICAL SERVICES OR SUBSTANCE USE 20 DISORDER TREATMENT AND SERVICES TO PERSONS WHO ARE 21 PARTICIPATING IN PRESCRIBED MEDICATION-ASSISTED TREATMENT, AS 22 DEFINED IN SECTION 23-21-803, FOR A SUBSTANCE USE DISORDER;

23 SECTION <u>4.</u> In Colorado Revised Statutes, 25-1.5-108.5, amend
24 (2) as follows:

25 25-1.5-108.5. Regulation of recovery residences - definition rules. (2) A recovery residence may admit individuals who are receiving
 medication-assisted treatment, including agonist treatment, for substance

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use disorders; EXCEPT THAT A RECOVERY RESIDENCE RECEIVING STATE
 MONEY OR PROVIDING SERVICES THAT ARE PAID FOR THROUGH STATE
 PROGRAMS SHALL NOT DENY ADMISSION TO PERSONS WHO ARE
 PARTICIPATING IN PRESCRIBED MEDICATION-ASSISTED TREATMENT, AS
 DEFINED IN SECTION 23-21-803, FOR A SUBSTANCE USE DISORDER.

6 SECTION <u>5.</u> In Colorado Revised Statutes, add 13-1-139 as
7 follows:

8 13-1-139. Court limitations on medication-assisted treatment 9 - prohibited. A COURT SHALL NOT CONDITION PARTICIPATION IN A DRUG 10 OR PROBLEM-SOLVING COURT OR OTHER JUDICIAL PROGRAM, OR ENTER 11 ORDERS RELATING TO PROBATION OR PAROLE OR PLACEMENT IN 12 COMMUNITY CORRECTIONS, BASED ON THE REQUIREMENT THAT A PERSON 13 CEASE PARTICIPATING IN PRESCRIBED MEDICATION-ASSISTED TREATMENT 14 FOR SUBSTANCE USE DISORDERS, AS DEFINED IN SECTION 23-21-803, 15 UNLESS THE PERSON OR THE PRESCRIBER DETERMINES THAT 16 MEDICATION-ASSISTED TREATMENT IS NO LONGER NECESSARY OR IS NO 17 LONGER AN EFFECTIVE TREATMENT FOR THE PERSON.

18 SECTION <u>6.</u> In Colorado Revised Statutes, 17-27-104, add (13)
19 as follows:

20 17-27-104. Community corrections programs operated by 21 units of local government, state agencies, or nongovernmental 22 agencies. (13) THE ADMINISTRATOR OF ANY COMMUNITY CORRECTIONS 23 PROGRAM ESTABLISHED PURSUANT TO THIS SECTION SHALL NOT REJECT 24 ANY OFFENDER REFERRED FOR PLACEMENT BASED ON THE OFFENDER'S 25 PARTICIPATION IN MEDICATION-ASSISTED TREATMENT, AS DEFINED IN 26 SECTION 23-21-803, OR ESTABLISH ANY RULE OR CONDITION OR GUIDELINE 27 FOR THE CONDUCT OF AN OFFENDER THAT PROHIBITS OR SIGNIFICANTLY IMPAIRS AN OFFENDER'S ABILITY TO PARTICIPATE IN PRESCRIBED
 MEDICATION-ASSISTED TREATMENT.

3 SECTION <u>7.</u> In Colorado Revised Statutes, 25.5-5-402, add
4 (3)(c.5) as follows:

5 25.5-5-402. Statewide managed care system - definition - rules.
(3) The statewide managed care system must include a statewide system
of community behavioral health care that must:

8 (c.5) PROVIDE COORDINATION OF CARE FOR THE FULL CONTINUUM
9 OF SUBSTANCE USE DISORDER AND MENTAL HEALTH TREATMENT AND
10 RECOVERY, INCLUDING SUPPORT FOR INDIVIDUALS TRANSITIONING
11 BETWEEN LEVELS OF CARE;

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13 SECTION <u>8.</u> In Colorado Revised Statutes, 10-16-148, add (1.5)
14 as follows:

15 10-16-148. Medication-assisted treatment - limitations on 16 carriers - rules - definition. (1.5) THE COMMISSIONER, IN 17 CONSULTATION WITH THE DEPARTMENT OF PUBLIC HEALTH AND 18 ENVIRONMENT, MAY PROMULGATE RULES OR SEEK A REVISION TO THE 19 PRESCRIPTION DRUG BENEFITS REQUIRED UNDER THE ESSENTIAL HEALTH 20 BENEFITS PACKAGE CONCERNING PRESCRIPTION MEDICATIONS THAT MUST 21 BE INCLUDED ON A CARRIER'S FORMULARY FOR MEDICATION-ASSISTED 22 TREATMENT OF SUBSTANCE USE DISORDERS.

23 SECTION <u>9.</u> In Colorado Revised Statutes, add 10-16-710 as
24 follows:

25 10-16-710. Reporting to commissioner - medication-assisted
 26 treatment - rules. (1) A CARRIER SHALL REPORT TO THE COMMISSIONER:
 27 (a) THE NUMBER OF IN-NETWORK PROVIDERS WHO ARE FEDERALLY

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LICENSED TO PRESCRIBE MEDICATION-ASSISTED TREATMENT FOR
 SUBSTANCE USE DISORDERS, INCLUDING BUPRENORPHINE; AND

3 (b) THE NUMBER OF PRESCRIPTIONS FILLED BY ENROLLEES FOR
 4 MEDICATION-ASSISTED TREATMENT FOR SUBSTANCE USE DISORDERS; AND
 5 (c) THE CARRIER'S EFFORTS TO ENSURE SUFFICIENT CAPACITY FOR
 6 AND ACCESS TO MEDICATION-ASSISTED TREATMENT FOR SUBSTANCE USE
 7 DISORDERS.

8 (2) THE COMMISSIONER SHALL PROMULGATE RULES CONCERNING 9 THE REPORTING REQUIREMENTS SPECIFIED IN SUBSECTION (1) OF THIS 10 SECTION, INCLUDING THE REPORTING PERIOD, THE FREQUENCY OF 11 REPORTING, AND ANY OTHER PROVISIONS NECESSARY TO COMPLY WITH 12 THE REPORTING REQUIREMENT.

SECTION <u>10.</u> In Colorado Revised Statutes, 10-16-104, amend
(5.5)(a)(III)(A); and add (5.5)(a)(III)(C) as follows:

15 10-16-104. Mandatory coverage provisions - rules definitions. (5.5) Behavioral, mental health, and substance use 16 17 disorders - rules. (a) (III) (A) Except as provided in subsection 18 (5.5)(a)(III)(B) SUBSECTIONS (5.5)(a)(III)(B) AND (5.5)(a)(III)(C) of this 19 section, any preauthorization or utilization review mechanism used in the 20 determination to provide the coverage required by this subsection (5.5)(a)21 must be the same as, or no more restrictive than, that used in the 22 determination to provide coverage for a physical illness. The 23 commissioner shall adopt rules as necessary to implement and administer 24 this subsection (5.5).

25 (C) A HEALTH BENEFIT PLAN SUBJECT TO THIS SUBSECTION (5.5)
26 MUST PROVIDE COVERAGE FOR <u>AT LEAST ONE</u> OPIATE ANTAGONIST, AS
27 DEFINED IN <u>SECTION 12-30-110 (7)(d).</u>

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2 SECTION <u>11.</u> In Colorado Revised Statutes, repeal and reenact,
3 with amendments, 27-81-101 as follows:

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4 27-81-101. [Similar to 27-82-101] Legislative declaration. 5 (1)THE GENERAL ASSEMBLY RECOGNIZES THE CHARACTER AND 6 PERVASIVENESS OF SUBSTANCE USE DISORDERS AND THAT SUBSTANCE USE 7 DISORDERS ARE SERIOUS PROBLEMS. THE GENERAL ASSEMBLY FURTHER 8 FINDS AND DECLARES THAT THESE PROBLEMS HAVE BEEN VERY SERIOUSLY 9 NEGLECTED AND THAT THE SOCIAL AND ECONOMIC COSTS AND THE WASTE 10 OF HUMAN RESOURCES CAUSED BY SUBSTANCE USE DISORDERS ARE 11 MASSIVE, TRAGIC, AND NO LONGER ACCEPTABLE. THE GENERAL ASSEMBLY 12 BELIEVES THAT THE BEST INTERESTS OF THIS STATE DEMAND AN 13 ACROSS-THE-BOARD, LOCALLY ORIENTED ATTACK ON THE MASSIVE 14 PROBLEMS OF DRUG ABUSE AND SUBSTANCE USE DISORDERS. THE ATTACK 15 INCLUDES PREVENTION, EDUCATION, AND TREATMENT, AND THIS ARTICLE 16 81 PROVIDES A BASE FROM WHICH TO LAUNCH THE ATTACK AND REDUCE 17 THE TRAGIC HUMAN LOSS.

18 (2) IT IS THE POLICY OF THIS STATE THAT PERSONS WITH
19 SUBSTANCE USE DISORDERS, PERSONS INTOXICATED BY ALCOHOL, AND
20 PERSONS UNDER THE INFLUENCE OF DRUGS SHOULD BE AFFORDED
21 TREATMENT SO THEY MAY LEAD NORMAL LIVES AS PRODUCTIVE MEMBERS
22 OF SOCIETY. THE GENERAL ASSEMBLY FINDS AND DECLARES THAT
23 SUBSTANCE USE DISORDERS ARE MATTERS OF STATEWIDE CONCERN.

SECTION <u>12.</u> In Colorado Revised Statutes, 27-81-102, amend (14); amend as it exists until July 1, 2022, (1); amend as it will become effective July 1, 2022, (1); add (9.4); add with amended and relocated provisions (6.5), (9.2), (13.6), and (13.9); add with amended and relocated provisions as it exists until July 1, 2022, (1.2); and add with
 amended and relocated provisions as they will become effective July
 1, 2022, (1.2) and (13.8) as follows:

4 27-81-102. Definitions. As used in this article 81, unless the
5 context otherwise requires:

6 (1) *Editor's note: This version of subsection (1) is effective until* 7 July 1, 2022.] "Alcohol use disorder" means a condition by which a 8 person habitually lacks self-control as to the use of alcoholic beverages 9 or uses alcoholic beverages to the extent that his or her health is 10 substantially impaired or endangered or his or her social or economic 11 function is substantially disrupted. Nothing in this subsection (1) 12 precludes the denomination of a person with an alcohol use disorder as 13 intoxicated by alcohol or incapacitated by alcohol "ADMINISTRATOR" 14 MEANS THE ADMINISTRATOR OF AN APPROVED TREATMENT FACILITY OR 15 AN INDIVIDUAL AUTHORIZED IN WRITING TO ACT AS THE ADMINISTRATOR'S 16 DESIGNEE.

17 (1) Editor's note: This version of subsection (1) is effective July 18 1, 2022.] "Alcohol use disorder" means a chronic relapsing brain disease 19 characterized by recurrent use of alcohol causing clinically significant 20 impairment, including health problems, disability, and failure to meet 21 major responsibilities at work, school, and home "ADMINISTRATOR" 22 MEANS THE ADMINISTRATOR OF AN APPROVED TREATMENT FACILITY OR 23 AN INDIVIDUAL AUTHORIZED IN WRITING TO ACT AS THE ADMINISTRATOR'S 24 DESIGNEE.

(1.2) [Formerly 27-81-102 (1) as it is effective until July 1,
26 2022] "Alcohol use disorder" means a condition by which a person
27 habitually lacks self-control as to the use of alcoholic beverages or uses

alcoholic beverages to the extent that his or her THE PERSON'S health is
 substantially impaired or endangered or his or her THE PERSON'S social or
 economic function is substantially disrupted. Nothing in this subsection
 (1) SUBSECTION (1.2) precludes the denomination of a person with an
 alcohol use disorder as intoxicated by alcohol or incapacitated by alcohol.

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(1.2) [Formerly 27-81-102 (1) as it will become effective July 1,
2022] "Alcohol use disorder" means a chronic relapsing brain disease characterized by recurrent use of alcohol causing clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, and home.

11 (6.5) [Formerly 27-82-102 (7)] "Drug" means a controlled
12 substance, as defined in section 18-18-102 (5), C.R.S., and toxic vapors.

13 (9.2) [Formerly 27-82-102 (10)] "Incapacitated by drugs" means 14 that a person, as a result of the use of drugs, is unconscious or has his or 15 her judgment otherwise so impaired that he or she THE PERSON is 16 incapable of realizing and making a rational decision with respect to his 17 or her THE PERSON'S need for treatment, is unable to take care of his or her 18 basic personal needs or safety, or lacks sufficient understanding or 19 capacity to make or communicate rational decisions concerning himself 20 or herself.

21 (9.4) "INCAPACITATED BY SUBSTANCES" MEANS THAT A PERSON IS
22 INCAPACITATED BY ALCOHOL OR IS INCAPACITATED BY DRUGS.

(13.6) [Formerly 27-82-102 (13)] "Person under the influence of
 drugs" means any person whose mental or physical functioning is
 temporarily but substantially impaired as a result of the presence of drugs
 in his or her THE PERSON'S body.

27 (13.8) [Formerly 27-82-102 (13.5) as it will become effective

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July 1, 2022] "Substance use disorder" means a chronic relapsing brain
 disease, characterized by recurrent use of alcohol, drugs, or both, causing
 clinically significant impairment, including health problems, disability,
 and failure to meet major responsibilities at work, school, or home.

5 (13.9) [Formerly 27-82-102 (14)] "Toxic vapors" means a
6 substance or product containing such substances as defined in section
7 18-18-412 (3). C.R.S.

8 (14) "Treatment" means the broad range of emergency, outpatient, 9 intermediate, and inpatient services and care, including diagnostic 10 evaluation, medical, psychiatric, psychological, and social service care, 11 vocational rehabilitation, and career counseling that may be extended to 12 a person with an alcohol A SUBSTANCE use disorder, A PERSON 13 INCAPACITATED BY SUBSTANCES, A PERSON UNDER THE INFLUENCE OF 14 DRUGS, and A PERSON intoxicated persons BY ALCOHOL.

15 SECTION <u>13.</u> In Colorado Revised Statutes, 27-81-103, amend
 (1)(a), (1)(b), (1)(d), (1)(e), and (1)(h) as follows:

17 27-81-103. Powers of the office of behavioral health. (1) To
18 carry out the purposes of this article 81, the office of behavioral health
19 may:

20 (a) Plan, establish, and maintain alcohol SUBSTANCE use disorder
21 treatment programs as necessary or desirable;

(b) Make contracts necessary or incidental to the performance of
its duties and the execution of its powers, including contracts with public
and private agencies, organizations, and individuals to pay them for
services rendered or furnished to persons with alcohol SUBSTANCE use
disorders, or PERSONS intoxicated persons BY ALCOHOL, OR PERSONS
UNDER THE INFLUENCE OF DRUGS;

(d) Administer or supervise the administration of the provisions
 relating to persons with alcohol SUBSTANCE use disorders, and intoxicated
 persons INTOXICATED BY ALCOHOL, AND PERSONS UNDER THE INFLUENCE
 OF DRUGS of any state plan submitted for federal funding pursuant to
 federal health, welfare, or treatment legislation;

6 Coordinate its activities and cooperate with alcohol (e) 7 SUBSTANCE use disorder treatment programs in this state and other states 8 and make contracts and other joint or cooperative arrangements with 9 state, local, or private agencies in this state and other states for the 10 treatment of persons with alcohol SUBSTANCE use disorders, and 11 intoxicated persons INTOXICATED BY ALCOHOL, AND PERSONS UNDER THE 12 INFLUENCE OF DRUGS and for the common advancement of alcohol 13 SUBSTANCE use disorder treatment programs;

(h) Acquire, hold, or dispose of real property, or any interest
therein, and construct, lease, or otherwise provide alcohol SUBSTANCE use
disorder treatment facilities for persons with alcohol SUBSTANCE use
disorders, PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons
UNDER THE INFLUENCE OF DRUGS.

SECTION <u>14.</u> In Colorado Revised Statutes, amend 27-81-104
as follows:

21 27-81-104. Duties of the office of behavioral health - review.
(1) In addition to duties prescribed by section 27-80-102, the office of
23 behavioral health shall:

(a) Develop, encourage, and foster statewide, regional, and local
plans and programs for the prevention of alcohol SUBSTANCE use
disorders and treatment of persons with alcohol SUBSTANCE use disorders,
PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE

INFLUENCE OF DRUGS, in cooperation with public and private agencies,
 organizations, and individuals and provide technical assistance and
 consultation services for these purposes;

4 (b) Coordinate the efforts and enlist the assistance of all public
5 and private agencies, organizations, and individuals interested in
6 prevention of alcohol SUBSTANCE use disorders and treatment of persons
7 with alcohol SUBSTANCE use disorders, PERSONS INTOXICATED BY
8 ALCOHOL, and intoxicated persons UNDER THE INFLUENCE OF DRUGS;

9 (c) [*Editor's note: This version of subsection (1)(c) is effective*10 *until July 1, 2022.*] Utilize community mental health centers and clinics,
11 OR OTHER APPROVED TREATMENT FACILITIES, whenever feasible;

(c) [*Editor's note: This version of subsection (1)(c) is effective July 1, 2022.*] Utilize behavioral health entities, community mental health
centers and clinics, OR OTHER APPROVED TREATMENT FACILITIES,
whenever feasible;

16 (d) Cooperate with the department of corrections in establishing 17 and conducting programs for the prevention of alcohol SUBSTANCE use 18 disorders and treatment of persons with alcohol SUBSTANCE use disorders, 19 PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE 20 INFLUENCE OF DRUGS in appropriate agencies and institutions and for 21 persons with alcohol SUBSTANCE use disorders, PERSONS INTOXICATED BY 22 ALCOHOL, and intoxicated persons UNDER THE INFLUENCE OF DRUGS in or 23 on parole from correctional institutions and in carrying out duties 24 specified in subsections (1)(i) and (1)(k) of this section;

(e) Cooperate with the department of education, schools, police
departments, courts, and other public and private agencies, organizations,
and individuals in establishing programs for the prevention of alcohol

1 SUBSTANCE use disorders and treatment of persons with alcohol 2 SUBSTANCE use disorders, PERSONS INTOXICATED BY ALCOHOL, and 3 intoxicated persons UNDER THE INFLUENCE OF DRUGS and preparing 4 curriculum materials for use at all levels of school education;

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(f)Prepare, publish, evaluate, and disseminate educational 6 material dealing with the nature and effects of alcohol AND DRUGS;

7 Develop and implement, as an integral part of alcohol (g) 8 SUBSTANCE use disorder treatment programs, an educational program for 9 use in the treatment of persons with alcohol SUBSTANCE use disorders, 10 PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE 11 INFLUENCE OF DRUGS. The program must include the dissemination of 12 information concerning the nature and effects of alcohol AND DRUGS;

13 (h) Organize and foster training programs for all persons engaged 14 in treatment of persons with alcohol SUBSTANCE use disorders, PERSONS 15 INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE 16 INFLUENCE OF DRUGS;

17 (i) Sponsor and encourage research into the causes and nature of 18 alcohol SUBSTANCE use disorders and treatment of persons with alcohol 19 SUBSTANCE use disorders, PERSONS INTOXICATED BY ALCOHOL, and 20 intoxicated persons UNDER THE INFLUENCE OF DRUGS, and serve as a 21 clearinghouse for information relating to alcohol SUBSTANCE use 22 disorders;

23 (j) Specify uniform methods for keeping statistical information by 24 public and private agencies, organizations, and individuals and collect 25 and make available relevant statistical information, including number of 26 persons treated, frequency of admission and readmission, and frequency 27 and duration of treatment;

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(k) Advise the governor in the preparation of a comprehensive
 plan for treatment of persons with alcohol SUBSTANCE use disorders,
 PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE
 INFLUENCE OF DRUGS for inclusion in the state's comprehensive health
 plan;

6 (1) Review all state health, welfare, and treatment plans to be
7 submitted for federal funding under federal legislation and advise the
8 governor on provisions to be included relating to alcohol SUBSTANCE use
9 disorders, persons with alcohol SUBSTANCE use disorders, and intoxicated
10 persons UNDER THE INFLUENCE OF DRUGS;

(m) Assist in the development of, and cooperate with, alcohol
SUBSTANCE USE education and treatment programs for employees of state
and local governments and businesses and industries in this state;

(n) Utilize the support and assistance of interested persons in the
community, particularly persons with alcohol SUBSTANCE use disorders
that are in remission, to encourage persons with alcohol SUBSTANCE use
disorders to voluntarily undergo treatment;

(o) Cooperate with the department of transportation in
establishing and conducting programs designed to deal with the problem
of persons operating motor vehicles while under the influence of, or
impaired by, alcohol OR DRUGS;

(p) Encourage general hospitals and other appropriate health
facilities to admit without discrimination persons with alcohol
SUBSTANCE use disorders, PERSONS INTOXICATED BY ALCOHOL, and
intoxicated persons UNDER THE INFLUENCE OF DRUGS and to provide them
with adequate and appropriate treatment;

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(q) Encourage all health and disability insurance programs to

- 1 include alcohol SUBSTANCE use disorders as a covered illness; and
- 2 (r) Submit to the governor an annual report covering the activities3 of the office of behavioral health.
- 4 SECTION <u>15.</u> In Colorado Revised Statutes, 27-81-105, amend
 5 (1) and (3) as follows:
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27-81-105. Comprehensive program for treatment - regional facilities. (1) The office of behavioral health shall establish a comprehensive and coordinated program for the treatment of persons with alcohol SUBSTANCE use disorders, PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE INFLUENCE OF DRUGS.

(3) The office of behavioral health shall provide adequate and
appropriate treatment for persons with alcohol SUBSTANCE use disorders,
PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE
INFLUENCE OF DRUGS admitted pursuant to sections 27-81-109 to
27-81-112. Except as otherwise provided in section 27-81-111, treatment
may MUST not be provided at a correctional institution, except for
inmates.

18 SECTION <u>16.</u> In Colorado Revised Statutes, 27-81-106, repeal
 19 and reenact, with amendments, (6) as follows:

20 27-81-106. Standards for public and private treatment 21 facilities - fees - enforcement procedures - penalties. (6) [Similar to 22 **27-82-103 (6)** A PERSON SHALL NOT OPERATE A PRIVATE OR PUBLIC 23 TREATMENT FACILITY IN THIS STATE WITHOUT APPROVAL FROM THE 24 OFFICE OF BEHAVIORAL HEALTH; EXCEPT THAT THIS ARTICLE 81 DOES NOT 25 APPLY TO A PRIVATE TREATMENT FACILITY THAT ACCEPTS ONLY PRIVATE 26 MONEY AND DOES NOT DISPENSE CONTROLLED SUBSTANCES. THE DISTRICT 27 COURT MAY RESTRAIN ANY VIOLATION OF, REVIEW ANY DENIAL,

1 RESTRICTION, OR REVOCATION OF APPROVAL UNDER, AND GRANT OTHER

2 RELIEF REQUIRED TO ENFORCE THE PROVISIONS OF THIS SECTION.

3

SECTION 17. In Colorado Revised Statutes, 27-81-108, amend 4 (1) introductory portion, (1)(b), and (1)(c) as follows:

5 **27-81-108.** Acceptance for treatment - rules. (1) The director 6 shall adopt and may amend and repeal rules for acceptance of persons 7 into the SUBSTANCE USE DISORDER treatment program, considering 8 available treatment resources and facilities, for the purpose of early and 9 effective treatment of persons with alcohol SUBSTANCE use disorders, 10 PERSONS INTOXICATED BY ALCOHOL, and intoxicated persons UNDER THE 11 INFLUENCE OF DRUGS. In establishing the rules, THE FOLLOWING 12 STANDARDS GUIDE the director: shall be guided by the following 13 standards:

14 (b) A patient shall be initially assigned or transferred to outpatient 15 or intermediate treatment, unless he or she is found to require inpatient 16 treatment QUALIFIED STAFF SHALL ASSESS THE PROPER LEVEL OF CARE FOR 17 THE PERSON PURSUANT TO RULES ADOPTED BY THE DIRECTOR AND MAKE 18 A REFERRAL FOR PLACEMENT.

19 (c) A person shall MUST not be denied treatment solely because he 20 or she THE PERSON has withdrawn from treatment against medical advice 21 on a prior occasion or because he or she THE PERSON has relapsed after 22 earlier treatment.

23 SECTION 18. In Colorado Revised Statutes, repeal and reenact, 24 with amendments, 27-81-109 as follows:

25 27-81-109. [Similar to 27-82-105] Voluntary treatment of 26 persons with substance use disorders. (1) A PERSON WITH A 27 SUBSTANCE USE DISORDER, INCLUDING A MINOR, MAY APPLY FOR

VOLUNTARY TREATMENT DIRECTLY TO AN APPROVED TREATMENT
 FACILITY.

3 (2)SUBJECT TO RULES ADOPTED BY THE DIRECTOR, THE 4 ADMINISTRATOR IN CHARGE OF AN APPROVED TREATMENT FACILITY SHALL 5 DETERMINE WHO IS ADMITTED FOR TREATMENT. IF A PERSON IS REFUSED 6 ADMISSION TO AN APPROVED TREATMENT FACILITY, THE ADMINISTRATOR 7 MAY REFER THE PERSON TO ANOTHER APPROVED AND APPROPRIATE 8 TREATMENT FACILITY FOR TREATMENT IF IT IS DEEMED LIKELY TO BE 9 BENEFICIAL. A PERSON MUST NOT BE REFERRED FOR FURTHER TREATMENT 10 IF IT IS DETERMINED THAT FURTHER TREATMENT IS NOT LIKELY TO BRING 11 ABOUT SIGNIFICANT IMPROVEMENT IN THE PERSON'S CONDITION, OR 12 TREATMENT IS NO LONGER APPROPRIATE, OR FURTHER TREATMENT IS 13 UNLIKELY TO BE BENEFICIAL

14 (3) IF A PATIENT RECEIVING RESIDENTIAL CARE LEAVES AN
15 APPROVED TREATMENT FACILITY, THE PERSON IS ENCOURAGED TO
16 CONSENT TO OUTPATIENT TREATMENT OR SUPPORTIVE SERVICES IF
17 APPROPRIATE.

SECTION <u>19.</u> In Colorado Revised Statutes, repeal and reenact,
 with amendments, 27-81-110 as follows:

20 27-81-110. [Similar to 27-82-106] Voluntary treatment for 21 persons intoxicated by alcohol, under the influence of drugs, or 22 incapacitated by substances. (1) A PERSON INTOXICATED BY ALCOHOL, 23 UNDER THE INFLUENCE OF DRUGS, OR INCAPACITATED BY SUBSTANCES, 24 INCLUDING A MINOR IF PROVIDED BY RULES OF THE OFFICE OF BEHAVIORAL 25 HEALTH, MAY VOLUNTARILY ADMIT HIMSELF OR HERSELF TO AN APPROVED 26 TREATMENT FACILITY FOR AN EMERGENCY EVALUATION TO DETERMINE 27 NEED FOR TREATMENT.

(2) THE ADMINISTRATOR SHALL IMMEDIATELY EVALUATE OR
 EXAMINE A PERSON WHO VOLUNTARILY ENTERS AN APPROVED TREATMENT
 FACILITY. IF THE PERSON IS FOUND TO BE IN NEED OF TREATMENT, THE
 ADMINISTRATOR SHALL ADMIT THE PERSON OR REFER THE PERSON TO
 ANOTHER APPROPRIATE FACILITY. IF A PERSON IS FOUND NOT TO BE IN
 NEED OF TREATMENT, THE ADMINISTRATOR SHALL RELEASE THE PERSON
 AND MAY REFER THE PERSON TO ANOTHER APPROPRIATE FACILITY.

8 (3) EXCEPT AS PROVIDED IN SUBSECTION (7) OF THIS SECTION, A
9 TREATMENT FACILITY SHALL IMMEDIATELY RELEASE A VOLUNTARILY
10 ADMITTED PERSON UPON THE PERSON'S REQUEST.

(4) A PERSON WHO IS NOT ADMITTED TO AN APPROVED TREATMENT
FACILITY OR REFERRED TO ANOTHER HEALTH FACILITY, AND WHO HAS NO
MONEY, MAY BE TAKEN TO THE PERSON'S HOME, IF ANY. IF THE PERSON
HAS NO HOME, THE APPROVED TREATMENT FACILITY MAY ASSIST THE
PERSON IN OBTAINING SHELTER.

16 (5) IF A PERSON IS ADMITTED TO AN APPROVED TREATMENT
17 FACILITY, THE PERSON'S FAMILY OR NEXT OF KIN MUST BE NOTIFIED AS
18 PROMPTLY AS POSSIBLE IN ACCORDANCE WITH FEDERAL CONFIDENTIALITY
19 REGULATIONS FOR SUBSTANCE USE DISORDER PATIENT RECORDS, WHICH
20 REGULATIONS ARE FOUND AT 42 CFR PART 2, AS AMENDED. IF AN ADULT
21 PERSON REQUESTS THAT THERE BE NO NOTIFICATION, THE ADULT PERSON'S
22 REQUEST MUST BE RESPECTED.

(6) IF THE ADMINISTRATOR DETERMINES THAT IT IS FOR THE
PERSON'S BENEFIT, THE PERSON MUST BE ENCOURAGED TO AGREE TO
FURTHER DIAGNOSIS AND APPROPRIATE VOLUNTARY TREATMENT.

26 (7) NOTHING IN THIS SECTION PRECLUDES THE ADMINISTRATOR
27 FROM SEEKING EMERGENCY COMMITMENT OF A PERSON AS PROVIDED IN

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SECTION 27-81-111 OR INVOLUNTARY COMMITMENT OF A PERSON AS
 PROVIDED IN SECTION 27-81-112, REGARDLESS OF WHETHER THE PERSON
 HAS BEEN VOLUNTARILY ADMITTED UNDER THIS SECTION. IN SUCH CASE,
 THE ADMINISTRATOR'S FURTHER CONDUCT IS GOVERNED BY SECTION
 27-81-111 OR 27-81-112, AS APPLICABLE.

6 SECTION <u>20.</u> In Colorado Revised Statutes, amend 27-81-111
7 as follows:

8 **27-81-111.** Emergency commitment. (1) (a) When a person is 9 intoxicated UNDER THE INFLUENCE OF or incapacitated by alcohol 10 SUBSTANCES and clearly dangerous to the health and safety of himself, 11 herself, or others, he or she shall be taken into protective custody by law 12 enforcement authorities or an emergency service patrol, acting with 13 probable cause, and placed SHALL TAKE THE PERSON INTO PROTECTIVE 14 CUSTODY in an approved treatment facility. If no such facilities are 15 available, he or she THE PERSON may be detained in an emergency 16 medical facility or jail, but only for so long as may be necessary to 17 prevent injury to himself, herself, or others or to prevent a breach of the 18 peace. If the person being detained is a juvenile, as defined in section 19 19-1-103 (68), C.R.S., the juvenile shall be placed in a setting that is 20 nonsecure and physically segregated by sight and sound from the adult 21 offenders. A law enforcement officer or emergency service patrol officer, 22 in detaining the person, is taking him or her THE PERSON into protective 23 custody. In so doing, the detaining officer may protect himself or herself 24 by reasonable methods but shall make every reasonable effort to protect 25 the detainee's health and safety. A taking into protective custody under 26 this section is not an arrest, and no entry or other record shall be made to 27 indicate that the person has been arrested or charged with a crime. Law

1 enforcement or emergency service personnel who act in compliance with 2 this section are acting in the course of their official duties and are not 3 criminally or civilly liable therefor. Nothing in this subsection (1) shall 4 preclude an intoxicated or incapacitated PRECLUDES A person 5 INTOXICATED BY ALCOHOL, UNDER THE INFLUENCE OF DRUGS, OR 6 INCAPACITATED BY SUBSTANCES who is not dangerous to the health and 7 safety of himself, herself, or others from being assisted to his or her THE 8 PERSON'S home or like location by the law enforcement officer or 9 emergency service patrol officer.

10 (b) A sheriff or police chief who violates the provisions of 11 paragraph (a) of this subsection (1) SUBSECTION (1)(a) OF THIS SECTION 12 related to detaining juveniles may be subject to a civil fine of no more 13 than one thousand dollars. The decision to fine shall be based on prior 14 violations of the provisions of paragraph (a) of this subsection (1) 15 SUBSECTION (1)(a) OF THIS SECTION by the sheriff or police chief and the 16 willingness of the sheriff or police chief to address the violations in order 17 to comply with paragraph (a) of this subsection (1) SUBSECTION (1)(a) OF 18 THIS SECTION.

19 (2) A law enforcement officer, emergency service patrolman 20 PATROL OFFICER, physician, spouse, guardian, or relative of the person to 21 be committed or any other responsible person may make a written 22 application for emergency commitment under this section, directed to the 23 administrator of the approved treatment facility. The application shall 24 MUST state the circumstances requiring emergency commitment, 25 including the applicant's personal observations and the specific statements 26 of others, if any, upon which he or she THE APPLICANT relies in making 27 the application. A copy of the application shall MUST be furnished to the

1 person to be committed.

2 (3) If the approved treatment facility administrator or his or her 3 authorized designee approves the application, the person ADMINISTRATOR 4 shall be committed, evaluated, and treated COMMIT, EVALUATE, AND 5 TREAT THE PERSON for a period not to exceed five days. The person shall 6 be brought to the facility by A peace officer, the emergency service 7 patrol, or any interested person SHALL BRING THE PERSON TO THE 8 FACILITY. If necessary, the court may be contacted to issue an order to the 9 police, the peace officer's department, or the sheriff's department to 10 transport the person to the facility.

11 (4) If the approved treatment facility administrator or his or her 12 authorized designee determines that the application fails to sustain the 13 grounds for emergency commitment as set forth in subsection (1) of this 14 section, the commitment shall be refused and the person detained 15 immediately released, and the person shall be encouraged 16 ADMINISTRATOR SHALL REFUSE THE COMMITMENT, IMMEDIATELY RELEASE 17 THE DETAINED PERSON, AND ENCOURAGE THE PERSON to seek voluntary 18 treatment if appropriate.

19 (5) When the administrator determines that the grounds for 20 commitment no longer exist, he or she THE ADMINISTRATOR shall 21 discharge the person committed under this section. A person committed 22 under this section may MUST not be detained in any treatment facility for 23 more than five days; except that a person may be detained for longer than 24 five days at the approved treatment facility if, in that period of time, a 25 petition for involuntary commitment has been filed pursuant to section 26 27-81-112. A person may MUST not be detained longer than ten days, 27 EXCLUDING WEEKENDS AND HOLIDAYS, after the date of filing of the

petition for involuntary commitment UNLESS A VALID MEDICAL REASON
 EXISTS FOR DETAINING A PERSON LONGER.

3 (6) Whenever a person is involuntarily detained pursuant to this 4 section, he or she THE ADMINISTRATOR shall, immediately be advised by 5 the facility administrator or his or her authorized designee WITHIN 6 TWENTY-FOUR HOURS AFTER DETAINMENT, ADVISE THE PERSON WHO IS 7 INVOLUNTARILY DETAINED, both orally and in writing, of his or her THE 8 PERSON'S right to challenge such THE detention by application to the 9 courts for a writ of habeas corpus, to be represented by counsel at every 10 stage of any proceedings relating to his or her commitment and 11 recommitment, and to have counsel appointed by the court or provided by 12 the court if he or she THE PERSON wants the assistance of counsel and is 13 unable to obtain counsel.

14 (7) ANY LAW ENFORCEMENT OFFICER, EMERGENCY SERVICE 15 PERSONNEL, PHYSICIAN, SPOUSE, GUARDIAN, OR RELATIVE OF ANY PERSON 16 TO BE COMMITTED; ANY TREATMENT FACILITY ADMINISTRATOR OR THE 17 ADMINISTRATOR'S DESIGNEE; OR ANY OTHER EMPLOYEE OR PERSON 18 ACTING ON BEHALF OF AN APPROVED TREATMENT FACILITY, 19 PARTICIPATING IN OR CARRYING OUT THE EMERGENCY COMMITMENT AND 20 TREATMENT AS DESCRIBED IN THIS SECTION, WHETHER ACTING 21 INDIVIDUALLY OR IN HIS OR HER OFFICIAL CAPACITY, IS NOT CRIMINALLY 22 OR CIVILLY LIABLE THEREFOR. 23 SECTION 21. In Colorado Revised Statutes, amend 27-81-112 24 as follows:

25 27-81-112. Involuntary commitment of a person with a
26 substance use disorder. (1) The court may commit a person to the
27 custody of the office of behavioral health upon the petition of the person's

1 spouse or guardian, a relative, a physician, an advanced practice nurse, 2 the administrator in charge of an approved treatment facility, or any other 3 responsible person. The petition must allege that the person is a person 4 with an alcohol HAS A SUBSTANCE use disorder and that the person has 5 threatened or attempted to inflict or inflicted physical harm on himself or 6 herself or on another and that unless committed the person is likely to 7 inflict physical harm on himself or herself or on another or that the person 8 is incapacitated by alcohol SUBSTANCES. A refusal to undergo treatment 9 does not constitute evidence of lack of judgment as to the need for 10 treatment. The petition must be accompanied by a certificate of a licensed 11 physician who has examined the person within two TEN days before 12 submission of the petition, unless the person whose commitment is sought 13 has refused to submit to a medical examination, in which case the fact of 14 refusal must be alleged in the petition, OR AN EXAMINATION CANNOT BE 15 MADE OF THE PERSON DUE TO THE PERSON'S CONDITION. The certificate 16 must set forth the physician's findings in support of the petition's 17 allegations.

(2) A COURT SHALL NOT ACCEPT a petition submitted pursuant to
subsection (1) of this section shall not be accepted unless there is
documentation of the refusal by the person to be committed to accessible
and affordable voluntary treatment. The documentation may include, but
shall not be IS NOT limited to, notations in the person's medical or law
enforcement records or statements by a physician, advanced practice
nurse, or witness.

25 (3) (a) Upon filing the petition, THE PERSON WHOSE COMMITMENT
26 IS SOUGHT MUST BE NOTIFIED OF THE PERSON'S RIGHT TO:

27 (I) ENTER INTO A STIPULATED ORDER OF THE COURT FOR

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COMMITTED TREATMENT IN ORDER TO EXPEDITE PLACEMENT IN AN
 APPROVED TREATMENT FACILITY BY THE OFFICE OF BEHAVIORAL HEALTH;
 OR

4

(II) TO CONTEST THE COMMITMENT PROCEEDING.

5 (b) IF A STIPULATED ORDER IS ENTERED, THE OFFICE OF 6 BEHAVIORAL HEALTH SHALL PLACE THE PERSON IN AN APPROVED 7 TREATMENT PROGRAM THAT REFLECTS THE LEVEL OF NEED OF THE 8 PERSON.

9 (c) IF THE PERSON WHOSE COMMITMENT IS SOUGHT EXERCISES THE 10 RIGHT TO CONTEST THE PETITION, the court shall fix a date for a hearing 11 no later than ten days, EXCLUDING WEEKENDS AND HOLIDAYS, after the 12 date the petition was filed. A copy of the petition and the notice of the 13 hearing, including the date fixed by the court, must be personally served 14 on the petitioner, the person whose commitment is sought, and one of his 15 or her THE PERSON'S parents or his or her THE PERSON'S legal guardian if 16 he or she THE PERSON is a minor. A copy of the petition and notice of 17 hearing must be mailed PROVIDED to the office of behavioral health, to 18 counsel for the person whose commitment is sought, to the administrator 19 in charge of the approved treatment facility to which the person may have 20 been committed for emergency treatment, and to any other person the 21 court believes advisable.

(4) At the hearing, the court shall hear all relevant testimony,
including, if possible, the testimony of at least one licensed physician who
has examined the person whose commitment is sought. The person shall
MUST be present unless the court believes that the person's presence is
likely to be injurious to the person; in this event, the court shall appoint
a guardian ad litem to represent the person throughout the proceeding. If

1 the person has refused to be examined by a licensed physician, he or she 2 shall THE PERSON MUST be given an opportunity to be examined by a 3 court-appointed licensed physician. If the person refuses and there is 4 sufficient evidence to believe that the allegations of the petition are true 5 or if the court believes that more medical evidence is necessary, the court 6 may commit the person to a licensed hospital for a period of not more 7 than five days for a diagnostic examination. In such event, the court shall 8 schedule a further hearing for final determination of commitment, in no 9 event later than five days after the first hearing.

10 (5) If after hearing all relevant evidence, including the results of 11 any diagnostic examination by the licensed hospital, the court finds that 12 grounds for involuntary commitment have been established by clear and 13 convincing proof, it THE COURT shall make an order of commitment to the 14 office of behavioral health. The office of behavioral health has the right 15 to delegate physical custody of the person to an appropriate approved 16 treatment facility. The court may not order commitment of a person 17 unless it determines that the office of behavioral health is able to provide 18 adequate and appropriate treatment for the person, and the treatment is 19 likely to be beneficial.

(6) Upon the court's commitment of a person to the office of
behavioral health, the court may issue an order to the sheriff to transport
the person to the facility designated by the office of behavioral health.

(7) A person committed as provided for in this section remains in
 the custody of the office of behavioral health for treatment for a period of
 thirty UP TO NINETY days. unless discharged sooner. At the end of the
 thirty-day NINETY-DAY period, he or she shall be discharged automatically
 THE TREATMENT FACILITY SHALL AUTOMATICALLY DISCHARGE THE

1 PERSON unless the office of behavioral health, before expiration of the 2 thirty-day NINETY-DAY period, obtains a court order for his or her THE 3 PERSON'S recommitment on the grounds set forth in subsection (1) of this 4 section for a further period of ninety days unless discharged sooner. If a 5 person has been committed because he or she THE PERSON is a person 6 with an alcohol A SUBSTANCE use disorder who is likely to inflict physical 7 harm on another, the office of behavioral health shall apply for 8 recommitment if, after examination, it is determined that the likelihood 9 to inflict physical harm on another still exists.

10 (8) A person who is recommitted as provided for in subsection (7) 11 of this section and who has not been discharged by the office of 12 behavioral health before the end of the ninety-day period is discharged at 13 the expiration of that ninety-day period unless the office of behavioral 14 health, before expiration of the ninety-day period, obtains a court order 15 on the grounds set forth in subsection (1) of this section for 16 recommitment for a further period, not to exceed ninety days. If a person has been committed because he or she THE PERSON is a person with an 17 18 alcohol A SUBSTANCE use disorder who is likely to inflict physical harm 19 on another, the office of behavioral health shall apply for recommitment 20 if, after examination, it is determined that the likelihood to inflict physical 21 harm on another still exists. Only two recommitment orders pursuant to 22 subsection (7) of this section and this subsection (8) are permitted.

(9) Upon the filing of a petition for recommitment under
subsections (7) and (8) of this section, the court shall fix a date for
hearing no NOT later than ten days, EXCLUDING WEEKENDS AND
HOLIDAYS, after the date the petition was filed UNLESS A VALID MEDICAL
REASON EXISTS FOR DELAYING THE HEARING. A copy of the petition and

of the notice of hearing shall be served and mailed PROVIDED as required
 in subsection (3) of this section. At the hearing, the court shall proceed as
 provided in subsection (4) of this section.

4 (10) The office of behavioral health shall provide adequate and
5 appropriate treatment of a person committed to its custody. The office of
6 behavioral health may transfer any person committed to its custody from
7 one approved treatment facility to another, if transfer is advisable.

8 (11) The office of behavioral health shall discharge a person 9 committed to its custody for treatment at any time before the end of the 10 period for which he or she THE PERSON has been committed if either of 11 the following conditions is met:

(a) In the case of a person with an alcohol A SUBSTANCE use
disorder committed on the grounds that he or she THE PERSON is likely to
inflict physical harm upon another, that he or she THE PERSON no longer
has an alcohol A SUBSTANCE use disorder that requires treatment or the
likelihood to inflict physical harm upon another no longer exists; or

17 (b) In the case of a person with an alcohol A SUBSTANCE use 18 disorder committed on the grounds of the need of treatment and 19 incapacity, that the incapacity no longer exists, OR IN THE CASE OF A 20 PERSON WITH A SUBSTANCE USE DISORDER COMMITTED ON ANY GROUNDS 21 PURSUANT TO THIS SECTION, THAT further treatment will is not likely TO 22 bring about significant improvement in the person's condition, or 23 treatment is no longer appropriate, OR THAT FURTHER TREATMENT IS 24 UNLIKELY TO BE BENEFICIAL.

(12) The court shall inform the person whose commitment or
 recommitment is sought of his or her THE PERSON'S right to contest the
 application, to be represented by counsel at every stage of any

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1 proceedings relating to the person's commitment and recommitment, and 2 to have counsel appointed by the court or provided by the court if he or 3 she THE PERSON wants the assistance of counsel and is unable to obtain 4 counsel. If the court believes that the person needs the assistance of 5 counsel, the court shall require, by appointment if necessary, counsel for 6 the person regardless of his or her THE PERSON'S wishes. The person 7 whose commitment or recommitment is sought shall be informed of his 8 or her THE PERSON'S right to be examined by a licensed physician of the 9 person's choice. If the person is unable to obtain a licensed physician and 10 requests examination by a physician, the court shall employ a licensed 11 physician.

(13) If a private treatment facility agrees with the request of a
competent patient or his or her THE PATIENT'S parent, sibling, adult child,
or guardian to accept the patient for treatment, the administrator of the
public treatment facility shall transfer him or her THE PATIENT to the
private treatment facility.

17 (14) A person committed under this article ARTICLE 81 may at any
18 time seek to be discharged from commitment by an order in the nature of
19 habeas corpus.

20 (15) The venue for proceedings under this section is the county in
21 which the person to be committed resides or is present.

(16) All proceedings conducted pursuant to this article shall be
ARTICLE 81 ARE conducted by the district attorney of the county where the
proceeding is held or by an attorney acting for the district attorney
appointed by the court for that purpose; except that, in any county or in
any city and county having a population exceeding one hundred thousand
persons, the proceedings shall be conducted by the county attorney or by

1 an attorney acting for the county attorney appointed by the court.

2 SECTION <u>22.</u> In Colorado Revised Statutes, amend 27-81-113
3 as follows:

27-81-113. Records of persons with substance use disorders,
persons intoxicated by alcohol, and persons under the influence of
substances. (1) The registration and other records of treatment facilities
shall remain ARE confidential AND FULLY PROTECTED AS OUTLINED IN
FEDERAL CONFIDENTIALITY REGULATIONS FOR SUBSTANCE USE DISORDER
RECORDS FOUND AT 42 CFR PART 2, AS AMENDED, and are privileged to
the patient.

(2) Notwithstanding subsection (1) of this section, the director
may make available information from patients' records for purposes of
research into the causes and treatment of alcohol SUBSTANCE use
disorders. Information under MADE AVAILABLE PURSUANT TO this
subsection (2) must not be published in a way that discloses patients'
names or other identifying information.

17 (3) Nothing in this section shall be construed to prohibit or limit
18 PROHIBITS OR LIMITS the sharing of information by a state institution of
19 higher education police department to authorized university
20 administrators pursuant to section 23-5-141. C.R.S.

SECTION <u>23.</u> In Colorado Revised Statutes, repeal and reenact,
 with amendments, 27-81-114 as follows:

23 27-81-114. Rights of persons receiving evaluation, care, or
24 treatment. (1) A FACILITY SHALL IMMEDIATELY ADVISE EACH PERSON
25 RECEIVING EVALUATION, CARE, OR TREATMENT UNDER ANY PROVISION OF
26 THIS ARTICLE 81, ORALLY AND IN WRITING, THAT THE PERSON HAS AND IS
27 AFFORDED THE FOLLOWING RIGHTS:

(a) TO BE EVALUATED TO DETERMINE THE PERSON'S BEHAVIORAL
 HEALTH TREATMENT NEEDS RELATING TO THE USE OF SUBSTANCES,
 INCLUDING ALCOHOL OR DRUGS;

4 (b) IF UNDER AN EMERGENCY COMMITMENT PURSUANT TO SECTION
5 27-81-111, TO REFUSE TO BE EXAMINED BY A LICENSED PHYSICIAN FOR
6 CERTIFICATION. A PERSON'S REFUSAL TO BE EXAMINED FOR CERTIFICATION
7 MAY BE ALLEGED IN A PETITION FOR INVOLUNTARY COMMITMENT. A
8 PERSON MAY REQUEST TO BE EXAMINED BY THE PERSON'S PHYSICIAN, OR
9 A COURT MAY ORDER A PERSON TO BE EVALUATED BY A LICENSED
10 PHYSICIAN FOR CERTIFICATION.

11 (c) TO RECEIVE TIMELY MEDICAL AND BEHAVIORAL HEALTH CARE
12 AND TREATMENT, AS SPECIFIED IN LAW, THAT IS DETERMINED BASED ON
13 THE PERSON'S NEEDS AND THAT IS DELIVERED IN THE LEAST RESTRICTIVE
14 TREATMENT SETTING POSSIBLE, AS SET FORTH IN DEPARTMENT RULES;

15 (d) TO BE TREATED FAIRLY AND TO RECEIVE THE SAME
16 CONSIDERATION AND ACCESS TO APPROPRIATE SERVICES AS OTHERS,
17 REGARDLESS OF RACE, COLOR, NATIONAL ORIGIN, AGE, GENDER IDENTITY,
18 SEXUAL ORIENTATION, POLITICAL AFFILIATION, RELIGIOUS BELIEFS,
19 FINANCIAL STATUS, OR DISABILITY;

20 (e) TO CONTEST A COMMITMENT PROCEEDING OR TO ENTER INTO
21 A STIPULATED ORDER OF THE COURT FOR COMMITTED TREATMENT;

(f) TO RETAIN AND CONSULT WITH AN ATTORNEY AT ANY TIME
AND TO HAVE AN ATTORNEY APPOINTED BY OR PROVIDED BY THE COURT
IN A TIMELY MANNER IN ANY PROCEEDINGS RELATING TO COMMITMENT OR
RECOMMITMENT, IF THE PERSON WANTS THE ASSISTANCE OF AN ATTORNEY
AND IS UNABLE TO OBTAIN AN ATTORNEY;

27 (g) TO AT ANY TIME SEEK TO BE DISCHARGED FROM COMMITMENT

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1 BY AN ORDER IN THE NATURE OF HABEAS CORPUS;

(h) ONCE NO LONGER UNDER THE INFLUENCE OF DRUGS OR
INTOXICATED BY ALCOHOL, TO SIGN IN AND SEEK VOLUNTARY SUBSTANCE
USE DISORDER TREATMENT, UNLESS THE ADMINISTRATOR DETERMINES IN
WRITING THAT REASONABLE GROUNDS EXIST TO BELIEVE THAT THE
PERSON WILL NOT REMAIN IN VOLUNTARY TREATMENT OR THAT THE
PERSON IS CLEARLY DANGEROUS TO THE HEALTH AND SAFETY OF HIMSELF
OR HERSELF OR OTHERS;

9 (i) IF IN COMMITTED TREATMENT, TO RECEIVE 10 TWENTY-FOUR-HOUR NOTICE PRIOR TO BEING TRANSFERRED TO ANOTHER 11 FACILITY;

(j) TO HAVE REASONABLE OPPORTUNITIES FOR CONTINUING
VISITATION AND COMMUNICATION WITH THE PERSON'S FAMILY AND
FRIENDS, CONSISTENT WITH AN EFFECTIVE TREATMENT PROGRAM AND AS
DETERMINED IN DEPARTMENT RULES. EACH PERSON MAY MEET WITH THE
PERSON'S ATTORNEY, CLERGYPERSON, OR HEALTH CARE PROVIDER AT ANY
TIME.

18 (k) TO HAVE REASONABLE ACCESS TO MAIL AND WRITING
19 MATERIALS, INCLUDING POSTAGE, AS WELL AS THE ASSISTANCE OF
20 FACILITY STAFF IF THE PERSON IS UNABLE TO WRITE, PREPARE, OR MAIL
21 CORRESPONDENCE;

(1) SUBJECT TO DEPARTMENT RULES RELATING TO THE USE OF
TELEPHONES AND OTHER COMMUNICATION DEVICES, TO HAVE
REASONABLE ACCESS TO TELEPHONES OR OTHER COMMUNICATION
DEVICES, AND TO MAKE AND TO RECEIVE CALLS OR COMMUNICATIONS IN
PRIVACY. FACILITY STAFF SHALL NOT OPEN, DELAY, INTERCEPT, READ, OR
CENSOR MAIL OR OTHER COMMUNICATIONS OR USE MAIL OR OTHER

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1 COMMUNICATIONS AS A METHOD TO ENFORCE COMPLIANCE WITH FACILITY

2 STAFF.

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3 (m) TO WEAR HIS OR HER OWN CLOTHES, KEEP AND USE PERSONAL
4 POSSESSIONS, AND KEEP AND BE ALLOWED TO SPEND A REASONABLE SUM
5 OF THE PERSON'S OWN MONEY;

(n) TO HAVE ACCESS TO MEDICAL RECORDS;

7 (o) TO HAVE TREATMENT RECORDS REMAIN CONFIDENTIAL,
8 EXCEPT AS REQUIRED BY LAW;

9 (p) TO NOT BE FINGERPRINTED, UNLESS REQUIRED BY LAW;

10 (q) TO REFUSE TO BE PHOTOGRAPHED, EXCEPT FOR TREATMENT
11 FACILITY IDENTIFICATION PURPOSES;

12 (r) TO HAVE THE OPPORTUNITY TO REGISTER AND VOTE BY
13 ABSENTEE BALLOT WITH THE ASSISTANCE OF FACILITY STAFF;

14 (s) TO HAVE APPROPRIATE ACCESS TO ADEQUATE FOOD, WATER,15 AND HYGIENE PRODUCTS;

- 16 (t) TO HAVE PHYSICAL PRIVACY IN SHOWERING, CHANGING, AND
 17 USING THE RESTROOM; AND
- 18 (u) TO BE FREE OF RESTRAINTS AND SOLITARY CONFINEMENT.

19 (2) ONLY QUALIFIED STAFF PROVIDING EVALUATION, TREATMENT, 20 OR CARE FOR A PERSON MAY DENY OR RESTRICT THE PERSON'S RIGHTS 21 UNDER SUBSECTION (1) OF THIS SECTION IF THE PERSON'S HEALTH OR 22 SAFETY WOULD BE CLEARLY ENDANGERED IF THE RIGHTS WERE NOT 23 DENIED OR RESTRICTED. IF A PERSON'S RIGHTS ARE DENIED OR 24 RESTRICTED, THE REASON FOR THE DENIAL OR RESTRICTION MUST BE 25 EXPLAINED TO THE PERSON AND ENTERED INTO THE PERSON'S TREATMENT 26 RECORD. THE FACILITY SHALL PROVIDE THE PERSON AND THE PERSON'S 27 ATTORNEY THE INFORMATION PERTAINING TO A DENIAL OR RESTRICTION OF RIGHTS CONTAINED IN THE PERSON'S TREATMENT RECORD. THE
 PERSON'S RIGHTS MUST BE IMMEDIATELY RESTORED AS SOON AS THE
 PERSON'S HEALTH AND SAFETY ARE NO LONGER CLEARLY ENDANGERED.

4 (3) A PERSON RECEIVING EVALUATION, CARE, OR TREATMENT
5 UNDER ANY PROVISION OF THIS ARTICLE 81 MAY SUBMIT A GRIEVANCE OR
6 COMPLAINT AGAINST THE FACILITY OR FACILITY STAFF PURSUANT TO A
7 GRIEVANCE OR COMPLAINT PROCESS, WHICH IS EXPLAINED TO THE PERSON
8 IN DETAIL AND INCLUDED WITH THE ORAL AND WRITTEN EXPLANATION OF
9 RIGHTS.

10 (4) AS PART OF THE IMMEDIATE ORAL AND WRITTEN ADVISEMENT 11 OF THE RIGHTS ENUMERATED IN THIS SECTION, A FACILITY SHALL ALSO 12 INCLUDE THE TELEPHONE NUMBER AND E-MAIL ADDRESS FOR THE OFFICE 13 OF THE OMBUDSMAN FOR BEHAVIORAL HEALTH ACCESS TO CARE, CREATED 14 IN SECTION 27-80-303. THE WRITTEN ADVISEMENTS MUST BE TRANSLATED 15 IF THE PERSON CANNOT READ OR UNDERSTAND ENGLISH. THE 16 ADMINISTRATOR SHALL CAUSE THE RIGHTS ENUMERATED IN THIS SECTION 17 TO BE POSTED IN A PROMINENT LOCATION WHERE CLIENTS IN THE FACILITY 18 RESIDE, WHICH POSTING MUST ALSO INCLUDE THE NUMBER AND E-MAIL 19 ADDRESS FOR THE OFFICE OF THE OMBUDSMAN FOR BEHAVIORAL HEALTH 20 ACCESS TO CARE, CREATED IN SECTION 27-80-303.

21 SECTION <u>24.</u> In Colorado Revised Statutes, 27-81-115, amend
22 (1) as follows:

23 27-81-115. Emergency service patrol - establishment - rules.
24 (1) The office of behavioral health and cities, counties, city and counties,
25 and regional service authorities may establish emergency service patrols.
26 A patrol consists of persons trained to give assistance in the streets and
27 in other public places to persons who are intoxicated or incapacitated by

alcohol, UNDER THE INFLUENCE OF DRUGS, OR INCAPACITATED BY
 SUBSTANCES. Members of an emergency service patrol must be capable
 of providing first aid in emergency situations and are authorized to
 transport a person intoxicated or incapacitated by alcohol, UNDER THE
 INFLUENCE OF DRUGS, OR INCAPACITATED BY SUBSTANCES to his or her
 home and to and from treatment facilities.

7 SECTION <u>25.</u> In Colorado Revised Statutes, amend 27-81-117
8 as follows:

9 **27-81-117. Criminal laws - limitations.** (1) A county, 10 municipality, or other political subdivision may not adopt or enforce a 11 local law, ordinance, resolution, or rule having the force of law that 12 includes drinking, being a person with an alcohol use disorder, or being 13 found in an intoxicated condition as one of the elements of the offense 14 giving rise to a criminal or civil penalty or sanction.

(2) A county, municipality, or other political subdivision may
SHALL not interpret or apply any law of general application to circumvent
the provisions of subsection (1) of this section.

(3) Nothing in this article ARTICLE 81 affects any law, ordinance,
resolution, or rule against drunken driving, driving under the influence of
alcohol OR DRUGS, or other similar offense involving the operation of a
vehicle, an aircraft, or a boat or machinery or other equipment or
regarding the sale, purchase, dispensing, possessing, or use of DRUGS OR
alcoholic beverages at stated times and places or by a particular class of
persons.

(4) The fact that a person is intoxicated or incapacitated by
alcohol, shall UNDER THE INFLUENCE OF DRUGS, OR INCAPACITATED BY
SUBSTANCES DOES not prevent his or her THE PERSON'S arrest or

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prosecution for the commission of any criminal act or conduct not
 enumerated in subsection (1) of this section.

3 (5) Nothing in this article shall be construed as a limitation upon
ARTICLE 81 LIMITS the right of a police officer to make an otherwise legal
arrest, notwithstanding the fact that the arrested person may be
intoxicated BY ALCOHOL, UNDER THE INFLUENCE OF DRUGS, or
incapacitated by alcohol SUBSTANCES.

8 SECTION <u>26.</u> In Colorado Revised Statutes, add with amended
9 and relocated provisions 27-81-118 as follows:

10 27-81-118. [Formerly 27-82-114] Opioid crisis recovery funds 11 advisory committee - creation - membership - purpose. (1) There is 12 hereby created the opioid crisis recovery funds advisory committee, 13 referred to in this section as the "committee", which is created to advise 14 and collaborate with the department of law on uses of any custodial funds 15 received by the state as the result of opioid-addiction-related litigation 16 and for which the use of the funds is not predetermined or committed by 17 court order or other action by a state or federal court of law.

18 (2) (a) The committee consists of members appointed as follows:

(I) Thirteen members appointed by the governor, including:

19

20 (A) One member licensed to practice medicine pursuant to article
21 240 of title 12;

(B) One member licensed to practice pharmacy pursuant to article
280 of title 12;

24 (C) One member licensed to practice as a nurse pursuant to article
25 of title 12;

26 (D) One member licensed as a dentist pursuant to article 220 of
27 title 12;

1	(E) One member licensed as a veterinarian pursuant to article 315
2	of title 12;
3	(F) One member licensed as a physical therapist pursuant to article
4	285 of title 12;
5	(G) One member representing a local public health agency;
6	(H) One member who has been affected by the opioid crisis;
7	(I) One family member of a person who has been affected by the
8	opioid crisis;
9	(J) One member representing an advocacy organization for people
10	with substance use disorders;
11	(K) Two members appointed from nominees submitted by
12	statewide organizations representing counties, with one member
13	representing the western slope and one member representing the eastern
14	part of the state; and
15	(L) One member from an association that represents behavioral
16	health providers;
17	(II) Two members appointed by the executive director of the
18	department of human services, one of whom must represent an
19	association of substance use providers;
20	(III) Two members appointed by the executive director of the
21	department of public health and environment, one of whom is a pain
22	management patient;
23	(IV) One member appointed by the executive director of the
24	department of regulatory agencies;
25	(V) One member appointed by the executive director of the
26	department of health care policy and financing;
27	(VI) One member from the state substance abuse trend and

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response task force, created in section 18-18.5-103, appointed by the
 attorney general;

3 (VII) One member from the center for research into substance use
4 disorder prevention, treatment, and recovery support strategies, created
5 in section 27-80-118 (3), appointed by the director of the center;

6 (VIII) One member from each safety net hospital that provides7 addiction services, appointed by the hospital;

8 (IX) One member from the Colorado district attorneys' council, or
9 any successor organization, appointed by its executive director;

10 (X) Two members representing law enforcement agencies, one of 11 whom is appointed by the Colorado association of chiefs of police, or any 12 successor organization, and one of whom is appointed by the county 13 sheriffs of Colorado, or any successor organization; and

(XI) One member representing the Colorado municipal league, or
any successor organization, appointed by the president of the executive
board of the Colorado municipal league or the president's designee.

17 (b) The attorney general shall notify the appointing authorities if 18 the state receives a settlement or damage award for which the use of the 19 custodial funds is not predetermined or committed by court order or other 20 action by a state or federal court of law. The appointing authorities shall 21 make their initial appointments to the committee no later than ninety days 22 after receiving the notice.

(3) Each member of the committee who is appointed pursuant to
subsection (2) of this section serves at the pleasure of the appointing
authority that appointed the member. THE APPOINTING AUTHORITY SHALL
FILL a vacancy shall be filled in the same manner as the initial
appointment.

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1 (4) If the state receives custodial funds from a settlement or 2 damage award from opioid-addiction-related litigation and the use of the 3 funds is not predetermined or committed by court order or other action by 4 a state or federal court of law, the attorney general shall convene and call 5 a meeting of the committee, and any subsequent meetings as necessary, 6 to seek input and recommendations from the committee on the proper 7 expenditure of the funds received.

8 (5) (a) Each member of the committee shall maintain 9 confidentiality throughout the process of determining the proper 10 expenditure of custodial funds. Members shall not disclose the contents 11 of any requests for funding with anyone outside of the committee.

(b) Each committee member shall affirm that the member does not
have a personal or financial interest regarding any organization that may
request funding. Members shall disclose all potential conflict of interest
situations to the attorney general before reviewing funding requests.

SECTION <u>27.</u> Repeal of relocated and nonrelocated
provisions in this act. (1) In Colorado Revised Statutes, repeal part 1 of
article 82 of title 27.

19 (2) The repeal of part 1 includes sections 27-82-102 (13.3) and
20 (13.5) and 27-82-103.5 as they would become effective July 1, 2022.

21 (3) Section 27-82-102 (7), (10), (13), (13.5) as it would become
22 effective July 1, 2022, and (14) and section 27-82-114 are relocated.

23 SECTION <u>28.</u> In Colorado Revised Statutes, 12-100-120, amend
24 (1)(1) as follows:

12-100-120. Grounds for disciplinary action - administrative
 penalties. (1) After notice and hearing as provided in section
 12-100-123, the board may take disciplinary or other action as authorized

in section 12-20-404 and impose other conditions or limitations on a
 person for any of the following causes:

(1) An alcohol A SUBSTANCE use disorder, as defined in section
27-81-102, or a substance use disorder, as defined in section 27-82-102,
or an excessive use of a habit-forming drug, controlled substance, as
defined in section 18-18-102 (5), or alcohol beverage that renders the
certified public accountant unfit to practice public accounting;

8 SECTION <u>29.</u> In Colorado Revised Statutes, 12-110-111, amend
9 (1)(d) as follows:

12-110-111. Grounds for discipline. (1) The director may take
 disciplinary or other action as authorized in section 12-20-404 against a
 license or an application for a license if the applicant or licensee:

(d) Has an alcohol A SUBSTANCE use disorder, as defined in
section 27-81-102, or a substance use disorder, as defined in section
27-82-102, or is an excessive or a habitual user or abuser of alcohol or
habit-forming drugs or is a habitual user of a controlled substance, as
defined in section 18-18-102 (5), if the use, disorder, or dependency is a
danger to other licensees;

SECTION <u>30.</u> In Colorado Revised Statutes, 12-155-113, amend
(1)(1) as follows:

12-155-113. Disciplinary action by board - procedures cease-and-desist orders. (1) The board may take disciplinary or other
 action as authorized by section 12-20-404 for any of the following
 reasons:

(1) An alcohol A SUBSTANCE use disorder, as defined in section
26 27-81-102, or a substance use disorder, as defined in section 27-82-102,
27 or excessive use of any habit-forming drug, any controlled substance, as

1 defined in section 18-18-102 (5), or any alcoholic beverage;

SECTION <u>31.</u> In Colorado Revised Statutes, 12-205-111, amend
 (2)(c) as follows:

4 12-205-111. Grounds for discipline - disciplinary proceedings
5 - definitions. (2) The director may take disciplinary or other action in
6 accordance with section 12-20-404 or issue a cease-and-desist order in
7 accordance with section 12-205-112 upon reasonable grounds that the
8 licensee:

9 (c) Has an alcohol A SUBSTANCE use disorder, as defined in 10 section 27-81-102, or a substance use disorder, as defined in section 11 27-82-102, or is an excessive or habitual user or abuser of alcohol or 12 habit-forming drugs or is a habitual user of a controlled substance, as 13 defined in section 18-18-102 (5), or other drugs having similar effects; 14 except that the director has the discretion not to discipline the licensee if 15 the licensee is participating in good faith in an alcohol or substance use 16 disorder treatment program approved by the director;

SECTION <u>32.</u> In Colorado Revised Statutes, 12-210-108, amend
(2)(q) as follows:

19 12-210-108. Disciplinary actions - grounds for discipline.
20 (2) The following acts constitute grounds for discipline:

(q) Having an alcohol A SUBSTANCE use disorder, as defined in
section 27-81-102, or a substance use disorder, as defined in section
27-82-102, or excessively or habitually using or abusing alcohol or
habit-forming drugs or habitually using a controlled substance, as defined
in section 18-18-102 (5), or other drugs or substances having similar
effects; except that the director has the discretion not to discipline the
licensee if he or she is participating in good faith in an alcohol or

1 2 substance use disorder treatment program approved by the director;

SECTION <u>33.</u> In Colorado Revised Statutes, 12-235-111, **amend** (1)(f) as follows:

4

3

12-235-111. Grounds for discipline - definitions. (1) The
director is authorized to take disciplinary action pursuant to section
12-235-112 against any person who has:

8 (f) An alcohol A SUBSTANCE use disorder, as defined in section 9 27-81-102, or a substance use disorder, as defined in section 27-82-102, 10 or a dependence on or addiction to alcohol or any habit-forming drug, or 11 who abuses or engages in the habitual or excessive use of any 12 habit-forming drug or any controlled substance as defined in section 13 18-18-102 (5), but the director may take into account the licensee's 14 participation in a substance use disorder treatment program when 15 considering disciplinary action;

SECTION <u>34.</u> In Colorado Revised Statutes, 12-260-114, amend
(1)(g) as follows:

12-260-114. Grounds for discipline. (1) The board may suspend,
revoke, or deny any person's certification to practice as a nurse aide or
authority to practice as a medication aide in accordance with section
12-20-404 (1)(d) or may issue to the person a letter of admonition under
the circumstances specified in and in accordance with section 12-20-404
(4), upon proof that a person:

(g) Has an alcohol A SUBSTANCE use disorder, as defined in
section 27-81-102, or a substance use disorder, as defined in section
27-82-102, or excessively uses any habit-forming drug or any controlled
substance, as defined in section 18-18-102 (5), or other drugs having

similar effects, or is diverting controlled substances, as defined in section
 18-18-102 (5), or other drugs having similar effects from the person's
 place of employment;

4 SECTION <u>35.</u> In Colorado Revised Statutes, 12-265-113, amend
5 (1)(g) as follows:

12-265-113. Grounds for discipline. (1) The board has the
power to take disciplinary or other action as specified in sections
12-20-404 and 12-265-107 (1)(d), upon proof that the person:

9 (g) Has an alcohol A SUBSTANCE use disorder, as defined in 10 section 27-81-102, or a substance use disorder, as defined in section 11 27-82-102, abuses or engages in the habitual or excessive use of any such 12 habit-forming drug or any controlled substance as defined in section 13 18-18-102(5), or participates in the unlawful use of controlled substances 14 as specified in section 18-18-404; except that the board has the discretion 15 not to discipline the licensee if the person is participating, in good faith, 16 in a substance use disorder treatment program approved by the board;

SECTION <u>36.</u> In Colorado Revised Statutes, 12-275-110, amend
(1)(d) as follows:

19 12-275-110. Application for license - licensure by endorsement
20 - rules. (1) A person who desires to practice optometry in the state may
21 file with the board an application for a license, giving the information
22 required in a form and manner approved by the board. The applicant shall
23 demonstrate that the applicant possesses the following qualifications:

(d) The applicant does not have an alcohol A SUBSTANCE use
disorder, as defined in section 27-81-102, or a substance use disorder, as
defined in section 27-82-102, or has not habitually or excessively used or
abused alcohol, habit-forming drugs, or controlled substances as defined

1 in section 18-18-102 (5).

2 SECTION <u>37.</u> In Colorado Revised Statutes, 12-280-126, amend
3 (1)(e) as follows:

12-280-126. Unprofessional conduct - grounds for discipline.
(1) The board may take disciplinary or other action as authorized in
section 12-20-404, after a hearing held in accordance with the provisions
of sections 12-20-403 and 12-280-127, upon proof that the licensee,
certificant, or registrant:

9 (e) Has an alcohol A SUBSTANCE use disorder, as defined in 10 section 27-81-102, or a substance use disorder, as defined in section 11 27-82-102, or engages in the habitual or excessive use or abuse of 12 alcohol, a habit-forming drug, or a controlled substance, as defined in 13 section 18-18-102 (5);

SECTION <u>38.</u> In Colorado Revised Statutes, 12-280-204, amend
(2)(a) as follows:

16 12-280-204. Eligibility - participants. (2) In order to be eligible
17 for participation, a licensee shall:

(a) Acknowledge the existence or the potential existence of a
psychiatric, psychological, or emotional problem; excessive alcohol or
drug use; or an alcohol A SUBSTANCE use disorder, as defined in section
27-81-102; or a substance use disorder, as defined in section 27-82-102;
SECTION <u>39.</u> In Colorado Revised Statutes, 12-300-109, amend
(2)(h) as follows:

12-300-109. Grounds for action - disciplinary proceedings.
(2) The director has the power to take disciplinary or other action as
authorized in section 12-20-404 against a licensee in accordance with
subsections (4), (5), (6), and (8) of this section upon proof that the person:

1 (h) Has an alcohol A SUBSTANCE use disorder, as defined in 2 section 27-81-102, or a substance use disorder, as defined in section 3 27-82-102, or is an excessive or habitual user or abuser of alcohol or 4 habit-forming drugs or is a habitual user of a controlled substance, as 5 defined in section 18-18-102 (5), or other drugs having similar effects; 6 except that the director has the discretion not to discipline the license 7 holder if he or she is participating in good faith in an alcohol or substance 8 use disorder treatment program approved by the director;

9 SECTION <u>40.</u> In Colorado Revised Statutes, 12-305-112, amend
10 (2)(c) as follows:

11 12-305-112. Grounds for discipline - definitions. (2) The
12 director may take disciplinary or other action specified in section
13 12-20-404 or 12-305-113 or issue a cease-and-desist order to a certificate
14 holder in accordance with sections 12-20-405 and 12-305-113 (8) upon
15 proof that the certificate holder:

16 (c) Has an alcohol A SUBSTANCE use disorder, as defined in 17 section 27-81-102, or a substance use disorder, as defined in section 18 27-82-102, excessively or habitually uses or abuses alcohol or 19 habit-forming drugs, or habitually uses a controlled substance, as defined 20 in section 18-18-102 (5), or other drugs having similar effects; except that 21 the director has the discretion not to discipline the certificate holder if the 22 certificate holder is participating in good faith in an alcohol or substance 23 use disorder treatment program approved by the director;

SECTION <u>41.</u> In Colorado Revised Statutes, 12-310-106, amend
(2)(c) as follows:

12-310-106. Grounds for discipline - disciplinary proceedings
 - judicial review. (2) The director may take disciplinary or other action

as authorized in section 12-20-404 against, or issue a cease-and-desist
 order in accordance with section 12-20-405 to, a registrant in accordance
 with this section and section 12-20-403, upon proof that the registrant:

- 4 (c) Has an alcohol A SUBSTANCE use disorder, as defined in
 5 section 27-81-102; or a substance use disorder, as defined in section
 6 27-82-102; is an excessive or habitual user or abuser of alcohol or
 7 habit-forming drugs; or is a habitual user of a controlled substance, as
 8 defined in section 18-18-102 (5), or other drugs having similar effects;
- 9 SECTION <u>42.</u> In Colorado Revised Statutes, 13-5-142, amend
 10 (1)(b) as follows:

11 13-5-142. National instant criminal background check system
12 - reporting. (1) On and after March 20, 2013, the state court
13 administrator shall send electronically the following information to the
14 Colorado bureau of investigation created pursuant to section 24-33.5-401,
15 referred to in this section as the "bureau":

(b) The name of each person who has been committed by order of
the court to the custody of the office of behavioral health in the
department of human services pursuant to section 27-81-112; or
27-82-108; and

20 SECTION <u>43.</u> In Colorado Revised Statutes, 13-5-142.5, amend
21 (2)(a)(II) as follows:

13-5-142.5. National instant criminal background check
 system - judicial process for awarding relief from federal
 prohibitions - legislative declaration. (2) Eligibility. A person may
 petition for relief pursuant to this section if:

26 (a) (II) He or she has been committed by order of the court to the
27 custody of the office of behavioral health in the department of human

1 services pursuant to section 27-81-112; or 27-82-108; or

2 SECTION <u>44.</u> In Colorado Revised Statutes, 13-9-123, amend
3 (1)(b) as follows:

13-9-123. National instant criminal background check system
- reporting. (1) On and after March 20, 2013, the state court
administrator shall send electronically the following information to the
Colorado bureau of investigation created pursuant to section 24-33.5-401,
referred to in this section as the "bureau":

9 (b) The name of each person who has been committed by order of 10 the court to the custody of the office of behavioral health in the 11 department of human services pursuant to section 27-81-112; or 12 27-82-108; and

SECTION <u>45.</u> In Colorado Revised Statutes, 13-9-124, amend
(2)(a)(II) as follows:

15 13-9-124. National instant criminal background check system
- judicial process for awarding relief from federal prohibitions legislative declaration. (2) Eligibility. A person may petition for relief
pursuant to this section if:

(a) (II) He or she has been committed by order of the court to the
custody of the office of behavioral health in the department of human
services pursuant to section 27-81-112; or 27-82-108; or

22 SECTION <u>46.</u> In Colorado Revised Statutes, 13-14.5-105,
23 amend (8)(b) as follows:

13-14.5-105. Hearings on petition - grounds for order issuance.
(8) (b) Before issuing an extreme risk protection order, the court shall
consider whether the respondent meets the standard for an emergency
commitment pursuant to section 27-81-111. or 27-82-107. If the court

determines that the respondent meets the standard, then, in addition to
 issuing an extreme risk protection order, the court shall order an
 emergency commitment pursuant to section 27-81-111. or 27-82-107.

4 SECTION <u>47.</u> In Colorado Revised Statutes, 13-90-107, amend
5 (1)(m)(IV)(C) as follows:

6

13-90-107. Who may not testify without consent - definitions.

7 (1) There are particular relations in which it is the policy of the law to
8 encourage confidence and to preserve it inviolate; therefore, a person
9 shall not be examined as a witness in the following cases:

10

(m) (IV) This subsection (1)(m) does not apply in cases in which:

11 (C) Due to INTOXICATION BY alcohol, or other substance 12 intoxication or abuse BEING UNDER THE INFLUENCE OF DRUGS, OR 13 INCAPACITATION BY SUBSTANCES as described in sections 27-81-111 and 14 27-82-107, C.R.S. SECTION 27-81-111, the person receiving peer support 15 is a clear and immediate danger to the person's self or others;

SECTION <u>48.</u> In Colorado Revised Statutes, 25-1-1202, amend
(1)(vv) as follows:

18 25-1-1202. Index of statutory sections regarding medical
 19 record confidentiality and health information. (1) Statutory provisions
 20 concerning policies, procedures, and references to the release, sharing,
 21 and use of medical records and health information include the following:
 22 (vv) Sections 27-82-106 and 27-82-109 SECTIONS 27-81-109 AND
 23 27-81-113, concerning the treatment of persons with substance use
 24 disorders;

25 SECTION <u>49.</u> In Colorado Revised Statutes, 25-3.5-208, amend
26 (7)(a)(I) as follows:

27 **25-3.5-208.** Emergency medical service providers' peer health

assistance program - fund - rules. (7) (a) Any certificate holder who
does not have access to an employee assistance program may apply to the
department for participation in a qualified peer health assistance program.
In order to be eligible for participation, a certificate holder shall:

(I) Acknowledge the existence or the potential existence of a
physical, psychological, or emotional condition; excessive alcohol or drug
use; or an alcohol A SUBSTANCE use disorder, as defined in section
27-81-102; (1); or a substance use disorder, as defined in section
27-82-102 (13.5);

SECTION <u>50.</u> In Colorado Revised Statutes, 25-27.6-104,
amend as it will become effective July 1, 2022, (1)(b) as follows:

25-27.6-104. License required - criminal and civil penalties.
(1) (b) On or after July 1, 2023, an entity seeking initial licensure as a
behavioral health entity shall apply for a behavioral health entity license
if the entity would previously have been licensed or subject to approval
by the office of behavioral health in the department of human services
pursuant to section 27-81-106 or 27-82-103 as an approved treatment
program for alcohol use disorders or substance use disorders.

SECTION <u>51.</u> In Colorado Revised Statutes, 26-6.9-101, amend
(1) as follows:

21 26-6.9-101. Definitions. As used in this article 6.9, unless the
22 context otherwise requires:

(1) "Facility" means an agency meeting the standards described
in section 27-81-106 (1) or 27-82-103 (1) and approved pursuant to
section 27-81-106. or 27-82-103.

26 SECTION <u>52.</u> In Colorado Revised Statutes, 27-60-104.5,
27 amend (3)(e)(I) as follows:

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1 27-60-104.5. Behavioral health capacity tracking system -2 legislative declaration - definitions - rules. (3) Pursuant to subsection 3 (8) of this section, the state department shall implement a behavioral 4 health capacity tracking system, which must include the following: 5 (e) Capacity reporting for the following facilities and treatment 6 providers statewide: 7 (I) Facilities that provide evaluation and treatment to individuals 8 held under an emergency commitment pursuant to section 27-81-111, or 9 section 27-82-107, an involuntary commitment pursuant to section 10 27-81-112, or section 27-82-108, or a civil commitment pursuant to 11 section 27-65-105, including crisis stabilization units, acute treatment 12 units, community mental health centers, and hospitals, including state 13 mental health institutes; 14 SECTION 53. In Colorado Revised Statutes, 27-66.5-102, 15 **amend** (3)(a)(IV) and (3)(a)(V) as follows: 16 **27-66.5-102.** Definitions. As used in this article 66.5, unless the 17 context otherwise requires: (3) "High-risk individual" means a person who: 18 19 (a) Is under: 20 (IV) An emergency commitment pursuant to section 27-81-111; 21 or 27-82-107; or 22 (V) An involuntary commitment pursuant to section 27-81-112; 23 or 27-82-108; 24 SECTION 54. In Colorado Revised Statutes, 27-82-202, amend 25 (4) as follows: 26 **27-82-202.** Definitions. As used in this part 2, unless the context 27 otherwise requires:

(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
 SECTION 27-81-106.

5 SECTION <u>55.</u> In Colorado Revised Statutes, 42-2-104, amend
6 (2)(c) as follows:

7 42-2-104. Licenses issued - denied. (2) Except as otherwise
8 provided in this article 2, the department shall not license a person to
9 operate any motor vehicle in this state:

(c) Who has been adjudged or determined by a court of competent
jurisdiction to have an alcohol A SUBSTANCE use disorder, as defined in
section 27-81-102, or a substance use disorder, as defined in section
27-82-102, with respect to a controlled substance, as defined in section
18-18-102 (5);

15 SECTION <u>56.</u> In Colorado Revised Statutes, 42-4-1301.3,
16 amend (4)(a) as follows:

17 42-4-1301.3. Alcohol and drug driving safety program -18 **definition.** (4) (a) There is created an alcohol and drug driving safety 19 program fund in the office of the state treasurer, referred to in this 20 subsection (4) as the "fund". The fund consists of money deposited in it 21 as directed by this subsection (4)(a). The assessment in effect on July 1, 22 1998, remains in effect unless the judicial department and the office of 23 behavioral health in the department of human services have provided the 24 general assembly with a statement of the cost of the program, including 25 costs of administration for the past and current fiscal year to include a 26 proposed change in the assessment. The general assembly shall then 27 consider the proposed new assessment and approve the amount to be

1 assessed against each person during the following fiscal year in order to 2 ensure that the alcohol and drug driving safety program established in this 3 section is financially self-supporting. Any adjustment in the amount to be 4 assessed must be noted in the appropriation to the judicial department and 5 the office of behavioral health in the department of human services as a 6 footnote or line item related to this program in the general appropriation 7 bill. The state auditor shall periodically audit the costs of the programs to 8 determine that they are reasonable and that the rate charged is accurate 9 based on these costs. Any other fines, fees, or costs levied against a 10 person are not part of the program fund. The court shall transmit to the 11 state treasurer the amount assessed for the alcohol and drug evaluation to 12 be credited to the fund. Fees charged pursuant to sections 27-81-106 (1) 13 and 27-82-103 (1) SECTION 27-81-106 (1) to approved alcohol and drug 14 treatment facilities that provide level I and level II programs as provided 15 in subsection (3)(c) of this section must be transmitted to the state 16 treasurer, who shall credit the fees to the fund. Upon appropriation by the 17 general assembly, the money must be expended by the judicial department 18 and the office of behavioral health in the department of human services 19 for the administration of the alcohol and drug driving safety program. In 20 administering the alcohol and drug driving safety program, the judicial 21 department is authorized to contract with any agency for any services the 22 judicial department deems necessary. Money deposited in the fund 23 remains in the fund to be used for the purposes set forth in this section 24 and must not revert or transfer to the general fund except by further act 25 of the general assembly.

26 <u>SECTION 57. Appropriation.</u> For the 2020-21 state fiscal year,
 27 <u>\$22,372 is appropriated to the department of regulatory agencies for use</u>

1	by the division of insurance. This appropriation is from the division of
2	insurance cash fund created in section 10-1-103 (3), C.R.S., and is based
3	on an assumption that the division will require an additional 0.3 FTE. To
4	implement this act, the division may use this appropriation for personal
5	services.
6	SECTION 58. Applicability. Section 1 of this act applies to
6 7	SECTION 58. Applicability. Section 1 of this act applies to health benefits plans issued or renewed on or after January 1, 2022.
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7	health benefits plans issued or renewed on or after January 1, 2022.