

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

**PREAMENDED**

*This Unofficial Version Includes Committee  
Amendments Not Yet Adopted on Second Reading*

LLS NO. 20-0297.01 Brita Darling x2241

**SENATE BILL 20-007**

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**SENATE SPONSORSHIP**

**Pettersen and Winter**, Donovan, Priola

**HOUSE SPONSORSHIP**

**Buentello and Wilson**, Herod, Kennedy

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**Senate Committees**

Health & Human Services  
Appropriations

**House Committees**

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**A BILL FOR AN ACT**

101 **CONCERNING TREATMENT FOR SUBSTANCE USE DISORDERS, AND, IN**  
102 **CONNECTION THEREWITH, MAKING AN APPROPRIATION.**

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov/>.)*

**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

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.  
Capital letters or bold & italic numbers indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.

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:*

2           **SECTION 1.** In Colorado Revised Statutes, 27-80-107.5, **amend**  
 3 (2), (3)(a), (5)(a), (5)(c)(II), and (7); **repeal** (3)(b); and **add** (2.5) as  
 4 follows:

5           **27-80-107.5. Increasing access to effective substance use**  
 6 **disorder services act - managed service organizations - substance use**  
 7 **disorder services - community assessment - community action plan**  
 8 **- allocations - reporting requirements - evaluation.** (2) (a) On or

1 before February 1, 2017, AND ON OR BEFORE SEPTEMBER 1, 2021, AND ON  
2 OR BEFORE SEPTEMBER 1 EVERY THREE YEARS THEREAFTER, each  
3 managed service organization designated pursuant to section 27-80-107  
4 shall assess the sufficiency of substance use disorder services within its  
5 geographic region for adolescents ages seventeen and younger; young  
6 adults ages eighteen through twenty-five; pregnant women; women who  
7 are postpartum and parenting; and other adults, INCLUDING INDIVIDUALS  
8 WITH CO-OCCURRING OR COMPLEX CONDITIONS, who are in need of such  
9 services. BEGINNING WITH THE 2021 ASSESSMENT, during the community  
10 assessment process, each managed service organization shall ~~seek input~~  
11 ~~and information from appropriate entities, such as community mental~~  
12 ~~health centers, behavioral health organizations, county departments of~~  
13 ~~human or social services, local public health agencies, substance use~~  
14 ~~disorder treatment providers, law enforcement agencies, probation~~  
15 ~~departments, organizations that serve veterans or homeless individuals,~~  
16 ~~and other relevant stakeholders~~ CONTRACT WITH AN INDEPENDENT  
17 ORGANIZATION TO COMPILE A COMMUNITY ASSESSMENT. THE  
18 DEPARTMENT MAY REQUIRE STANDARDIZATION OF THE COMMUNITY  
19 ASSESSMENT AND SHALL DISSEMINATE THE REQUIREMENT TO THE  
20 MANAGED SERVICE ORGANIZATIONS WITHIN A REASONABLE TIME PRIOR TO  
21 THE COMMENCEMENT OF THE COMMUNITY ASSESSMENT. FOR THE 2021-22  
22 STATE FISCAL YEAR, AND FOR EACH STATE FISCAL YEAR THEREAFTER IN  
23 WHICH A COMMUNITY ASSESSMENT IS PERFORMED PURSUANT TO THIS  
24 SECTION, THE GENERAL ASSEMBLY SHALL APPROPRIATE MONEY FOR  
25 MANAGED SERVICE ORGANIZATIONS TO CONTRACT FOR THE COMMUNITY  
26 ASSESSMENT.

27 (b) The community assessment must include:

1 (I) ~~an~~ A REVIEW AND analysis of existing ~~funding and resources~~  
2 ASSESSMENTS AND OTHER REPORTS IDENTIFYING NEEDED RESOURCES AND  
3 GAPS within the community, ~~to provide~~ USING QUANTITATIVE AND  
4 QUALITATIVE DATA; AND

5 (II) A REVIEW OF THE ADEQUACY OF THE continuum of substance  
6 use disorder services, including prevention, intervention, treatment, and  
7 recovery support services, for:

8 (A) Adolescents ages seventeen and younger;

9 (B) Young adults ages eighteen through twenty-five;

10 (C) Pregnant women;

11 (D) Women who are postpartum and parenting; and

12 (E) Other adults who are in need of such services, INCLUDING  
13 INDIVIDUALS WITH CO-OCCURRING OR COMPLEX CONDITIONS.

14 (c) THE COMMUNITY ASSESSMENT MUST INCLUDE INPUT, AND  
15 PROVIDE OPPORTUNITY FOR REVIEW AND COMMENT, FROM APPROPRIATE  
16 ENTITIES, SUCH AS PEOPLE WITH LIVED EXPERIENCE; COMMUNITY MENTAL  
17 HEALTH CENTERS; REGIONAL ACCOUNTABLE ENTITIES; COUNTY  
18 DEPARTMENTS OF HUMAN OR SOCIAL SERVICES; LOCAL PUBLIC HEALTH  
19 AGENCIES; PROBATION DEPARTMENTS; SCHOOLS; TRIBAL LEADERS; AND  
20 OTHER COMMUNITY ORGANIZATIONS THAT SERVE VETERANS, YOUTH,  
21 FAMILIES, OR HOMELESS INDIVIDUALS, AS WELL AS OTHER RELEVANT  
22 STAKEHOLDERS.

23 (d) THE INDEPENDENT CONTRACTOR, IN CONDUCTING THE  
24 COMMUNITY ASSESSMENT, AND THE MANAGED SERVICE ORGANIZATION,  
25 IN DEVELOPING A DRAFT COMMUNITY ACTION PLAN, SHALL USE BEST  
26 PRACTICES TO ENSURE FEEDBACK FROM UNDERSERVED POPULATIONS AND  
27 COMMUNITIES AND TO IDENTIFY AND ADDRESS HEALTH INEQUITIES IN

1 COMMUNITIES.

2 (2.5) ON OR BEFORE FEBRUARY 1, 2022, AND ON OR BEFORE  
3 FEBRUARY 1 EVERY THREE YEARS THEREAFTER, EACH MANAGED SERVICE  
4 ORGANIZATION SHALL DEVELOP AND DISSEMINATE FOR FEEDBACK THE  
5 COMMUNITY ASSESSMENT AND A DRAFT COMMUNITY ACTION PLAN TO  
6 STAKEHOLDERS THAT PARTICIPATED IN THE COMMUNITY ASSESSMENT.  
7 THE MANAGED SERVICE ORGANIZATION SHALL PROVIDE AT LEAST THIRTY  
8 DAYS FOR STAKEHOLDER COMMENT ON THE COMMUNITY ASSESSMENT AND  
9 A DRAFT COMMUNITY ACTION PLAN.

10 (3) (a) On or before March 1, 2017, AND ON OR BEFORE MAY 1,  
11 2022, AND ON OR BEFORE MAY 1 EVERY THREE YEARS THEREAFTER, each  
12 managed service organization that has completed a community  
13 assessment pursuant to subsection (2) of this section shall ~~prepare and~~  
14 submit in electronic format to the department and the department of  
15 health care policy and financing ~~a~~ THE COMMUNITY ASSESSMENT; AND  
16 THE community action plan to increase access to effective substance use  
17 disorder services, referred to in this section as the "community action  
18 plan". The community action plan must summarize the results of the  
19 community assessment and include a description of how the managed  
20 service organization will utilize its allocation of funding from the  
21 marijuana tax cash fund, created in section 39-28.8-501, ~~C.R.S.~~, to  
22 address the most critical service gaps in its geographic region and a  
23 timeline for implementation of the community action plan. THE  
24 DEPARTMENT SHALL POST ON ITS WEBSITE THE UPDATED COMMUNITY  
25 ACTION PLANS RECEIVED FROM EACH MANAGED SERVICE ORGANIZATION.

26 (b) ~~A managed service organization may periodically update its~~  
27 ~~community action plan to reflect changes in community needs and~~

1 ~~priorities. Any such updated plan must be submitted in electronic format~~  
2 ~~to the department and the department of health care policy and financing.~~

3 (5) (a) ~~On or before September 1, 2017, and on or before each~~  
4 ~~September 1 thereafter,~~ Each designated managed service organization  
5 shall submit an annual report to the department, INCLUDING THE AMOUNT  
6 AND PURPOSE OF ACTUAL EXPENDITURES MADE USING MONEY FROM THE  
7 MARIJUANA TAX CASH FUND, CREATED IN SECTION 39-28.8-501, IN THE  
8 PREVIOUS STATE FISCAL YEAR, AND SHALL JOINTLY DEVELOP A  
9 COMMUNICATION PLAN WITH THE DEPARTMENT FOR DISSEMINATION OF  
10 THE REPORT. THE COMMUNICATION PLAN MUST INCLUDE THE PROCESS FOR  
11 DISSEMINATING THE REPORT TO LOCAL COUNTY GOVERNMENTS.  
12 NOTWITHSTANDING THE PROVISIONS OF SECTION 24-1-136 (11)(a)(I), THE  
13 DEPARTMENT SHALL ALSO SUBMIT A REPORT TO the joint budget  
14 committee, the health and human services committee of the senate, and  
15 the public health care and human services committee of the house of  
16 representatives, or ~~their~~ ANY successor committees, concerning the  
17 amount and purpose of actual expenditures made using money from the  
18 marijuana tax cash fund, CREATED IN SECTION 39-28.8-501, in the  
19 previous state fiscal year. The report must contain a description of the  
20 impact of the expenditures on addressing the needs that were identified  
21 in the initial and any subsequent community assessments and COMMUNITY  
22 action plans developed pursuant to subsection (3) of this section, as well  
23 as any other requirements established for the contents of the report by the  
24 department.

25 (c) On or before November 1, 2020, the department, in  
26 collaboration with the designated managed service organizations, shall  
27 submit a report to the joint budget committee and the joint health and

1 human services committee, or any successor committees. The report must:

2 (II) Describe the impact the expenditures have had on increasing  
3 statewide access to a continuum of effective substance use disorder  
4 services, including the availability of prevention, intervention, treatment,  
5 and recovery support services in each designated service area AND HOW  
6 THE MONEY WAS USED TO INCREASE THE NETWORK OF PROVIDERS IN THE  
7 REGION; and

8 (7) Notwithstanding section 24-1-136 (11)(a)(I), the department  
9 shall report on outcomes related to the implementation of this section as  
10 part of its annual "State Measurement for Accountable, Responsive, and  
11 Transparent (SMART) Government Act" hearing required by section  
12 2-7-203, beginning with the hearing ~~that precedes the 2019~~ AT THE  
13 BEGINNING OF THE 2020 legislative session.

14 **SECTION 2.** In Colorado Revised Statutes, 10-16-104, **amend**  
15 (5.5)(a)(I) as follows:

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

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

25 (B) AT A MINIMUM, FOR THE TREATMENT OF SUBSTANCE USE  
26 DISORDERS IN ACCORDANCE WITH THE AMERICAN SOCIETY OF ADDICTION  
27 MEDICINE CRITERIA FOR PLACEMENT, MEDICAL NECESSITY, AND

1 UTILIZATION MANAGEMENT DETERMINATIONS AS SET FORTH IN THE MOST  
2 RECENT EDITION OF "THE ASAM CRITERIA FOR ADDICTIVE,  
3 SUBSTANCE-RELATED, AND CO-OCCURRING CONDITIONS"; EXCEPT THAT  
4 THE COMMISSIONER MAY IDENTIFY BY RULE, IN CONSULTATION WITH THE  
5 DEPARTMENT OF HEALTH CARE POLICY AND FINANCING AND THE OFFICE  
6 OF BEHAVIORAL HEALTH IN THE DEPARTMENT OF HUMAN SERVICES, AN  
7 ALTERNATE NATIONALLY RECOGNIZED AND EVIDENCE-BASED  
8 SUBSTANCE-USE-DISORDER-SPECIFIC CRITERIA FOR PLACEMENT, MEDICAL  
9 NECESSITY, OR UTILIZATION MANAGEMENT, IF AMERICAN SOCIETY OF  
10 ADDICTION MEDICINE CRITERIA ARE NO LONGER AVAILABLE, RELEVANT,  
11 OR DO NOT FOLLOW BEST PRACTICES FOR SUBSTANCE USE DISORDER  
12 TREATMENT.

13 **SECTION 3.** In Colorado Revised Statutes, 25-1.5-503, **amend**  
14 (2) as follows:

15 **25-1.5-503. Colorado health service corps - program - creation**  
16 **- conditions.** (2) (a) Subject to available appropriations, the primary care  
17 office shall annually select health care professionals, behavioral health  
18 care providers, candidates for licensure, nursing faculty members, and  
19 health care professional members from the list provided by the advisory  
20 council pursuant to section 25-1.5-504 (5)(a) to participate in the  
21 Colorado health service corps.

22 (b) IN REVIEWING APPLICATIONS AND SELECTING PARTICIPANTS  
23 FOR THE PROGRAM, THE PRIMARY CARE OFFICE AND THE ADVISORY  
24 COUNCIL SHALL CONSIDER THE GOAL OF CREATING A DIVERSE HEALTH  
25 CARE WORKFORCE THAT IS ABLE TO ADDRESS THE NEEDS OF UNDERSERVED  
26 POPULATIONS AND COMMUNITIES. UPON REQUEST, THE PRIMARY CARE  
27 OFFICE SHALL PROVIDE NONIDENTIFYING DEMOGRAPHIC INFORMATION

1 CONCERNING ALL APPLICANTS AND THOSE SELECTED FOR AWARDS.

2 **SECTION 4.** In Colorado Revised Statutes, 25-1.5-503.5, **add**  
3 (1.5) as follows:

4 **25-1.5-503.5. Scholarship program for addiction counselors -**  
5 **creation - eligibility - conditions.** (1.5) THE PRIMARY CARE OFFICE  
6 SHALL ADMINISTER THE SCHOLARSHIP PROGRAM UTILIZING BEST  
7 PRACTICES FOR INCREASING DIVERSITY IN APPLICANTS FOR THE  
8 SCHOLARSHIP PROGRAM, INCLUDING APPLICANTS FROM  
9 UNDERREPRESENTED POPULATIONS AND PERSONS IN RECOVERY, AND  
10 SHALL CONSIDER THE NEEDS OF THE POPULATIONS AND COMMUNITIES  
11 BEING SERVED IN SELECTING SCHOLARSHIP RECIPIENTS. UPON REQUEST,  
12 THE PRIMARY CARE OFFICE SHALL PROVIDE NONIDENTIFYING  
13 DEMOGRAPHIC INFORMATION CONCERNING ALL APPLICANTS AND THOSE  
14 SELECTED FOR SCHOLARSHIPS.

15 **SECTION 5.** In Colorado Revised Statutes, 25-1.5-506, **amend**  
16 (4)(a) introductory portion as follows:

17 **25-1.5-506. Colorado health service corps fund - created -**  
18 **acceptance of grants and donations - annual appropriation from**  
19 **marijuana tax cash fund.** (4) (a) For the 2018-19 AND 2019-20 fiscal  
20 ~~year and each fiscal year thereafter~~ YEARS, the general assembly shall  
21 appropriate two million five hundred thousand dollars; AND FOR THE  
22 2020-21 FISCAL YEAR, ANDEACH FISCAL YEAR THEREAFTER, THE GENERAL  
23 ASSEMBLY SHALL APPROPRIATE THREE MILLION FIVE HUNDRED THOUSAND  
24 DOLLARS, from the marijuana tax cash fund created in section  
25 39-28.8-501 to the primary care office to:

26 **SECTION 6.** In Colorado Revised Statutes, **amend** 25.5-5-510  
27 as follows:

1           **25.5-5-510. Pharmacy reimbursement - substance use disorder**  
2   **- injections.** If a pharmacy has entered into a collaborative pharmacy  
3 practice agreement with one or more physicians pursuant to section  
4 12-280-602 to administer AN injectable ~~antagonist~~ medication for  
5 medication-assisted treatment for substance use disorders THAT IS  
6 APPROVED BY THE FEDERAL FOOD AND DRUG ADMINISTRATION, the  
7 pharmacy administering the drug shall receive an enhanced dispensing fee  
8 that aligns with the administration fee paid to a provider in a clinical  
9 setting.

10           **SECTION 7.** In Colorado Revised Statutes, **add** 27-80-124 as  
11 follows:

12           **27-80-124. Child care and treatment study - report.**

13 (1) (a) THE EXECUTIVE DIRECTOR, IN CONSULTATION WITH THE  
14 EXECUTIVE DIRECTOR OF THE DEPARTMENT OF HEALTH CARE POLICY AND  
15 FINANCING, SHALL COMMISSION A STATE CHILD CARE AND TREATMENT  
16 STUDY AND FINAL REPORT. AT A MINIMUM, THE STUDY AND FINAL REPORT  
17 MUST:

18           (I) MAKE FINDINGS AND RECOMMENDATIONS CONCERNING THE  
19 NEEDS AND GAPS IN FAMILY-CENTERED SUBSTANCE USE DISORDER  
20 TREATMENT IN THE STATE; AND

21           (II) IDENTIFY ALTERNATIVE PAYMENT STRUCTURES FOR FUNDING  
22 CHILD CARE AND CHILDREN'S SERVICES ALONGSIDE A PARENT'S  
23 TREATMENT FOR A SUBSTANCE USE DISORDER.

24           (b) THE EXECUTIVE DIRECTOR SHALL ISSUE A REQUEST FOR  
25 PROPOSALS FOR THE STUDY AND FINAL REPORT TO BE CONDUCTED BY AN  
26 ENTITY THAT IS INDEPENDENT OF THE DEPARTMENT.

27           (2) THE FINAL REPORT, SETTING FORTH THE STUDY'S

1 METHODOLOGIES, FINDINGS, AND RECOMMENDATIONS, MUST BE PROVIDED  
2 ON OR BEFORE MARCH 31, 2021, TO:

3 (a) THE MEMBERS OF THE GENERAL ASSEMBLY;

4 (b) THE EXECUTIVE DIRECTOR, WHO SHALL TRANSMIT A COPY OF  
5 THE FINAL REPORT TO THE OFFICE WITHIN THE DEPARTMENT CONCERNED  
6 WITH EARLY CHILDHOOD; AND

7 (c) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF HEALTH  
8 CARE POLICY AND FINANCING.

9 (3) THE DEPARTMENT SHALL INCLUDE THE FINDINGS AND  
10 RECOMMENDATIONS CONTAINED IN THE FINAL REPORT AS PART OF THE  
11 DEPARTMENT'S PRESENTATION TO THE LEGISLATIVE COMMITTEES OF  
12 REFERENCE DURING THE 2022 REGULAR LEGISLATIVE SESSION PURSUANT  
13 TO SECTION 2-7-203.

14 **SECTION 8.** In Colorado Revised Statutes, 27-80-107, **amend**  
15 (4) as follows:

16 **27-80-107. Designation of managed service organizations -**  
17 **purchase of services - revocation of designation.** (4) The terms and  
18 conditions for providing substance use disorder treatment services must  
19 be specified in the contract entered into between the office of behavioral  
20 health and the designated managed service organization. CONTRACTS  
21 ENTERED INTO BETWEEN THE OFFICE OF BEHAVIORAL HEALTH AND THE  
22 DESIGNATED MANAGED SERVICE ORGANIZATION MUST INCLUDE TERMS  
23 AND CONDITIONS PROHIBITING A DESIGNATED MANAGED SERVICE  
24 ORGANIZATION CONTRACTED TREATMENT PROVIDER FROM DENYING OR  
25 PROHIBITING ACCESS TO MEDICATION-ASSISTED TREATMENT, AS DEFINED  
26 IN SECTION 23-21-803, FOR A SUBSTANCE USE DISORDER.

27 **SECTION 9.** In Colorado Revised Statutes, 27-80-108, **amend**

1 (1)(c) as follows:

2 **27-80-108. Rules.** (1) The state board of human services, created  
3 in section 26-1-107, has the power to promulgate rules governing the  
4 provisions of this article 80. The rules may include, but are not limited to:

5 (c) Requirements for public and private agencies, organizations,  
6 and institutions from which the office of behavioral health may purchase  
7 services pursuant to section 27-80-106 (1), WHICH REQUIREMENTS MUST  
8 INCLUDE PROHIBITING THE PURCHASE OF SERVICES FROM ENTITIES THAT  
9 DENY OR PROHIBIT ACCESS TO MEDICAL SERVICES OR SUBSTANCE USE  
10 DISORDER TREATMENT AND SERVICES TO PERSONS WHO ARE  
11 PARTICIPATING IN PRESCRIBED MEDICATION-ASSISTED TREATMENT, AS  
12 DEFINED IN SECTION 23-21-803, FOR A SUBSTANCE USE DISORDER;

13 **SECTION 10.** In Colorado Revised Statutes, 25-1.5-108.5,  
14 **amend** (2) as follows:

15 **25-1.5-108.5. Regulation of recovery residences - definition -**  
16 **rules.** (2) A recovery residence may admit individuals who are receiving  
17 medication-assisted treatment, including agonist treatment, for substance  
18 use disorders; EXCEPT THAT A RECOVERY RESIDENCE RECEIVING STATE  
19 MONEY OR PROVIDING SERVICES THAT ARE PAID FOR THROUGH STATE  
20 PROGRAMS SHALL NOT DENY ADMISSION 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 11.** In Colorado Revised Statutes, **add** 13-1-139 as  
24 follows:

25 **13-1-139. Court limitations on medication-assisted treatment**  
26 **- prohibited.** A COURT SHALL NOT CONDITION PARTICIPATION IN A DRUG  
27 OR PROBLEM-SOLVING COURT OR OTHER JUDICIAL PROGRAM, OR ENTER

1 ORDERS RELATING TO PROBATION OR PAROLE OR PLACEMENT IN  
2 COMMUNITY CORRECTIONS, BASED ON THE REQUIREMENT THAT A PERSON  
3 CEASE PARTICIPATING IN PRESCRIBED MEDICATION-ASSISTED TREATMENT  
4 FOR SUBSTANCE USE DISORDERS, AS DEFINED IN SECTION 23-21-803,  
5 UNLESS THE PERSON OR THE PRESCRIBER DETERMINES THAT  
6 MEDICATION-ASSISTED TREATMENT IS NO LONGER NECESSARY OR IS NO  
7 LONGER AN EFFECTIVE TREATMENT FOR THE PERSON.

8 **SECTION 12.** In Colorado Revised Statutes, 17-27-104, **add** (13)  
9 as follows:

10 **17-27-104. Community corrections programs operated by**  
11 **units of local government, state agencies, or nongovernmental**  
12 **agencies.** (13) THE ADMINISTRATOR OF ANY COMMUNITY CORRECTIONS  
13 PROGRAM ESTABLISHED PURSUANT TO THIS SECTION SHALL NOT REJECT  
14 ANY OFFENDER REFERRED FOR PLACEMENT BASED ON THE OFFENDER'S  
15 PARTICIPATION IN MEDICATION-ASSISTED TREATMENT, AS DEFINED IN  
16 SECTION 23-21-803, OR ESTABLISH ANY RULE OR CONDITION OR GUIDELINE  
17 FOR THE CONDUCT OF AN OFFENDER THAT PROHIBITS OR SIGNIFICANTLY  
18 IMPAIRS AN OFFENDER'S ABILITY TO PARTICIPATE IN PRESCRIBED  
19 MEDICATION-ASSISTED TREATMENT.

20 **SECTION 13.** In Colorado Revised Statutes, 25.5-5-402, **add**  
21 (3)(c.5) as follows:

22 **25.5-5-402. Statewide managed care system - definition - rules.**  
23 (3) The statewide managed care system must include a statewide system  
24 of community behavioral health care that must:

25 (c.5) PROVIDE COORDINATION OF CARE FOR THE FULL CONTINUUM  
26 OF SUBSTANCE USE DISORDER AND MENTAL HEALTH TREATMENT AND  
27 RECOVERY, INCLUDING SUPPORT FOR INDIVIDUALS TRANSITIONING

1 BETWEEN LEVELS OF CARE;

2 **SECTION 14.** In Colorado Revised Statutes, 27-80-118, **amend**  
3 (6)(a); and **add** (6)(c) as follows:

4 **27-80-118. Center for research into substance use disorder**  
5 **prevention, treatment, and recovery support strategies - established**  
6 **- legislative declaration - repeal.** (6) (a) The center may employ up to  
7 three additional employees to work as grant writers in order to aid local  
8 communities in need of assistance in applying for grants to access state  
9 and federal money to address opioid and other substance use disorders in  
10 their communities. The center shall determine the communities in which  
11 to provide the grant writing assistance. IN REVIEWING AND SELECTING  
12 APPLICATIONS FOR GRANT WRITING ASSISTANCE, THE CENTER SHALL  
13 CONSIDER THE GOAL OF ADDRESSING THE NEEDS OF UNDERSERVED  
14 POPULATIONS AND COMMUNITIES.

15 (c) FOR STATE FISCAL YEARS 2020-21 THROUGH 2024-25, THE  
16 GENERAL ASSEMBLY SHALL APPROPRIATE TWO HUNDRED FIFTY THOUSAND  
17 DOLLARS FROM THE MARIJUANA TAX CASH FUND CREATED IN SECTION  
18 39-28.8-501 (1) TO THE DEPARTMENT FOR ALLOCATION TO THE CENTER  
19 FOR THE PURPOSES OF THIS SUBSECTION (6). THE CENTER MAY USE THE  
20 MONEY TO HIRE NEW EMPLOYEES AND FOR THE DIRECT AND INDIRECT  
21 COSTS ASSOCIATED WITH THIS SUBSECTION (6).

22 **SECTION 15.** In Colorado Revised Statutes, 10-16-148, **add**  
23 (1.5) as follows:

24 **10-16-148. Medication-assisted treatment - limitations on**  
25 **carriers - rules - definition.** (1.5) THE COMMISSIONER, IN  
26 CONSULTATION WITH THE DEPARTMENT OF PUBLIC HEALTH AND  
27 ENVIRONMENT, MAY PROMULGATE RULES OR SEEK A REVISION TO THE

1 PRESCRIPTION DRUG BENEFITS REQUIRED UNDER THE ESSENTIAL HEALTH  
2 BENEFITS PACKAGE CONCERNING PRESCRIPTION MEDICATIONS THAT MUST  
3 BE INCLUDED ON A CARRIER'S FORMULARY FOR MEDICATION-ASSISTED  
4 TREATMENT OF SUBSTANCE USE DISORDERS.

5 **SECTION 16.** In Colorado Revised Statutes, **add** 10-16-710 as  
6 follows:

7 **10-16-710. Reporting to commissioner - medication-assisted**  
8 **treatment - rules.** (1) A CARRIER SHALL REPORT TO THE COMMISSIONER:

9 (a) THE NUMBER OF IN-NETWORK PROVIDERS WHO ARE FEDERALLY  
10 LICENSED TO PRESCRIBE MEDICATION-ASSISTED TREATMENT FOR  
11 SUBSTANCE USE DISORDERS, INCLUDING BUPRENORPHINE; AND

12 (b) FOR THE PROVIDERS IDENTIFIED PURSUANT TO SUBSECTION  
13 (1)(a) OF THIS SECTION, THE NUMBER OF PRESCRIPTIONS WRITTEN BY THE  
14 PROVIDER FOR MEDICATION-ASSISTED TREATMENT DURING THE  
15 REPORTING PERIOD THAT ARE PAID FOR OR DENIED BY THE CARRIER.

16 (2) THE COMMISSIONER SHALL PROMULGATE RULES CONCERNING  
17 THE REPORTING REQUIREMENTS SPECIFIED IN SUBSECTION (1) OF THIS  
18 SECTION, INCLUDING THE REPORTING PERIOD, THE FREQUENCY OF  
19 REPORTING, AND ANY OTHER PROVISIONS NECESSARY TO COMPLY WITH  
20 THE REPORTING REQUIREMENT.

21 **SECTION 17.** In Colorado Revised Statutes, 10-16-104, **amend**  
22 (5.5)(a)(III)(A); and **add** (5.5)(a)(III)(C) as follows:

23 **10-16-104. Mandatory coverage provisions - rules -**  
24 **definitions.** (5.5) **Behavioral, mental health, and substance use**  
25 **disorders - rules.** (a) (III) (A) Except as provided in ~~subsection~~  
26 ~~(5.5)(a)(III)(B)~~ SUBSECTIONS (5.5)(a)(III)(B) AND (5.5)(a)(III)(C) of this  
27 section, any preauthorization or utilization review mechanism used in the

1 determination to provide the coverage required by this subsection (5.5)(a)  
2 must be the same as, or no more restrictive than, that used in the  
3 determination to provide coverage for a physical illness. The  
4 commissioner shall adopt rules as necessary to implement and administer  
5 this subsection (5.5).

6 (C) A HEALTH BENEFIT PLAN SUBJECT TO THIS SUBSECTION (5.5)  
7 MUST PROVIDE COVERAGE FOR AT LEAST ONE OPIATE ANTAGONIST, AS  
8 DEFINED IN SECTION 12-30-110 (7)(d), WITHOUT PRIOR AUTHORIZATION  
9 AND WITHOUT IMPOSING ANY DEDUCTIBLE, COPAYMENT, COINSURANCE,  
10 OR OTHER COST-SHARING REQUIREMENT.

11 **SECTION 18.** In Colorado Revised Statutes, **add** 27-80-110.5 as  
12 follows:

13 **27-80-110.5. Training and community outreach relating to**  
14 **civil commitment of persons with a substance use disorder.**

15 (1) BEGINNING NO LATER THAN SEPTEMBER 1, 2020, THE OFFICE OF  
16 BEHAVIORAL HEALTH SHALL IMPLEMENT A PROGRAM FOR TRAINING AND  
17 COMMUNITY OUTREACH RELATING TO SUBSTANCE USE DISORDER  
18 TREATMENT. AT A MINIMUM, THE TRAINING AND COMMUNITY OUTREACH  
19 MUST INCLUDE THE AVAILABILITY OF AND PROCESS FOR CIVIL  
20 COMMITMENT OF PERSONS WITH A SUBSTANCE USE DISORDER, AS DEFINED  
21 IN SECTION 27-81-102. THE TRAINING AND COMMUNITY OUTREACH  
22 PROGRAM MAY ALSO INCLUDE INFORMATION CONCERNING THE CARE  
23 NAVIGATION PROGRAM CREATED IN SECTION 27-80-119, THE  
24 TWENTY-FOUR-HOUR TELEPHONE CRISIS SERVICES PROVIDED PURSUANT  
25 TO SECTION 27-60-103, AND OTHER RESOURCES FOR THE COMMUNITY AND  
26 FOR PERSONS AND FAMILIES OF PERSONS WITH A SUBSTANCE USE  
27 DISORDER.

1 (2) THE TRAINING AND OUTREACH PROGRAM MUST PROVIDE  
2 TRAINING AND OUTREACH TO FIRST RESPONDERS, LAW ENFORCEMENT AND  
3 CRIMINAL JUSTICE AGENCIES, EMERGENCY DEPARTMENTS, HOSPITALS,  
4 TREATMENT FACILITIES, PRIMARY CARE PROVIDERS, BEHAVIORAL HEALTH  
5 PROVIDERS, COUNTY DEPARTMENTS OF HUMAN OR SOCIAL SERVICES,  
6 PERSONS AND FAMILIES OF PERSONS WITH A SUBSTANCE USE DISORDER,  
7 AND ORGANIZATIONS WORKING WITH PERSONS AND FAMILIES OF PERSONS  
8 WITH A SUBSTANCE USE DISORDER.

9 SECTION 19. In Colorado Revised Statutes, amend 25.5-5-509  
10 as follows:

11 25.5-5-509. Substance use disorder - prescription drugs -  
12 medication-assisted treatment - definition. (1) AS USED IN THIS  
13 SECTION, "FDA" MEANS THE FOOD AND DRUG ADMINISTRATION IN THE  
14 UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES.

15 (2) Notwithstanding any provisions of this part 5 to the contrary,  
16 for the treatment of a substance use disorder, in promulgating rules, and  
17 subject to any necessary federal authorization, the state board shall  
18 authorize reimbursement for at least one federal food and drug  
19 administration-approved FDA-approved ready-to-use opioid overdose  
20 reversal drug without prior authorization.

21 (3) NO LATER THAN AUGUST 1, 2020, THE STATE BOARD'S RULES  
22 SHALL:

23 (a) NOT IMPOSE ANY PRIOR AUTHORIZATION REQUIREMENTS ON  
24 ANY PRESCRIPTION MEDICATION APPROVED BY THE FDA FOR THE  
25 TREATMENT OF SUBSTANCE USE DISORDERS;

26 (b) NOT IMPOSE ANY STEP THERAPY REQUIREMENTS AS A  
27 PREREQUISITE TO AUTHORIZING COVERAGE FOR A PRESCRIPTION

1 MEDICATION APPROVED BY THE FDA FOR THE TREATMENT OF SUBSTANCE  
2 USE DISORDERS; AND

3 (c) NOT EXCLUDE COVERAGE FOR ANY PRESCRIPTION MEDICATION  
4 APPROVED BY THE FDA FOR THE TREATMENT OF SUBSTANCE USE  
5 DISORDERS AND ANY ASSOCIATED COUNSELING OR WRAPAROUND  
6 SERVICES SOLELY ON THE GROUNDS THAT THE MEDICATIONS AND  
7 SERVICES WERE COURT ORDERED.

8 **SECTION 20.** In Colorado Revised Statutes, **repeal and reenact,**  
9 **with amendments,** 27-81-101 as follows:

10 **27-81-101. [Similar to 27-82-101] Legislative declaration.**

11 (1) THE GENERAL ASSEMBLY RECOGNIZES THE CHARACTER AND  
12 PERVASIVENESS OF SUBSTANCE USE DISORDERS AND THAT SUBSTANCE USE  
13 DISORDERS ARE SERIOUS PROBLEMS. THE GENERAL ASSEMBLY FURTHER  
14 FINDS AND DECLARES THAT THESE PROBLEMS HAVE BEEN VERY SERIOUSLY  
15 NEGLECTED AND THAT THE SOCIAL AND ECONOMIC COSTS AND THE WASTE  
16 OF HUMAN RESOURCES CAUSED BY SUBSTANCE USE DISORDERS ARE  
17 MASSIVE, TRAGIC, AND NO LONGER ACCEPTABLE. THE GENERAL ASSEMBLY  
18 BELIEVES THAT THE BEST INTERESTS OF THIS STATE DEMAND AN  
19 ACROSS-THE-BOARD, LOCALLY ORIENTED ATTACK ON THE MASSIVE  
20 PROBLEMS OF DRUG ABUSE AND SUBSTANCE USE DISORDERS. THE ATTACK  
21 INCLUDES PREVENTION, EDUCATION, AND TREATMENT, AND THIS ARTICLE  
22 81 PROVIDES A BASE FROM WHICH TO LAUNCH THE ATTACK AND REDUCE  
23 THE TRAGIC HUMAN LOSS.

24 (2) IT IS THE POLICY OF THIS STATE THAT PERSONS WITH  
25 SUBSTANCE USE DISORDERS, PERSONS INTOXICATED BY ALCOHOL, AND  
26 PERSONS UNDER THE INFLUENCE OF DRUGS SHOULD BE AFFORDED  
27 TREATMENT SO THEY MAY LEAD NORMAL LIVES AS PRODUCTIVE MEMBERS

1 OF SOCIETY. THE GENERAL ASSEMBLY FINDS AND DECLARES THAT  
2 SUBSTANCE USE DISORDERS ARE MATTERS OF STATEWIDE CONCERN.

3 **SECTION 21.** In Colorado Revised Statutes, 27-81-102, **amend**  
4 **(14); amend as it exists until July 1, 2022, (1); amend as it will become**  
5 **effective July 1, 2022, (1); add (9.4); add with amended and relocated**  
6 **provisions (6.5), (9.2), (13.6), and (13.9); add with amended and**  
7 **relocated provisions as it exists until July 1, 2022, (1.2); and add with**  
8 **amended and relocated provisions as they will become effective July**  
9 **1, 2022, (1.2) and (13.8) as follows:**

10 **27-81-102. Definitions.** As used in this article 81, unless the  
11 context otherwise requires:

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

23 (1) ~~*[Editor's note: This version of subsection (1) is effective July*~~  
24 ~~*1, 2022.] "Alcohol use disorder" means a chronic relapsing brain disease*~~  
25 ~~*characterized by recurrent use of alcohol causing clinically significant*~~  
26 ~~*impairment, including health problems, disability, and failure to meet*~~  
27 ~~*major responsibilities at work, school, and home "ADMINISTRATOR"*~~

1 MEANS THE ADMINISTRATOR OF AN APPROVED TREATMENT FACILITY OR  
2 AN INDIVIDUAL AUTHORIZED IN WRITING TO ACT AS THE ADMINISTRATOR'S  
3 DESIGNEE.

4 (1.2) [Formerly 27-81-102 (1) as it is effective until July 1,  
5 2022] "Alcohol use disorder" means a condition by which a person  
6 habitually lacks self-control as to the use of alcoholic beverages or uses  
7 alcoholic beverages to the extent that ~~his or her~~ THE PERSON'S health is  
8 substantially impaired or endangered or ~~his or her~~ THE PERSON'S social or  
9 economic function is substantially disrupted. Nothing in this subsection  
10 ~~(1)~~ SUBSECTION (1.2) precludes the denomination of a person with an  
11 alcohol use disorder as intoxicated by alcohol or incapacitated by alcohol.

12 (1.2) [Formerly 27-81-102 (1) as it will become effective July 1,  
13 2022] "Alcohol use disorder" means a chronic relapsing brain disease  
14 characterized by recurrent use of alcohol causing clinically significant  
15 impairment, including health problems, disability, and failure to meet  
16 major responsibilities at work, school, and home.

17 (6.5) [Formerly 27-82-102 (7)] "Drug" means a controlled  
18 substance, as defined in section 18-18-102 (5), ~~C.R.S.~~, and toxic vapors.

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

27 (9.4) "INCAPACITATED BY SUBSTANCES" MEANS THAT A PERSON IS

1 INCAPACITATED BY ALCOHOL OR IS INCAPACITATED BY DRUGS.

2 (13.6) [Formerly 27-82-102 (13)] "Person under the influence of  
3 drugs" means any person whose mental or physical functioning is  
4 temporarily but substantially impaired as a result of the presence of drugs  
5 in ~~his or her~~ THE PERSON'S body.

6 (13.8) [Formerly 27-82-102 (13.5) as it will become effective  
7 July 1, 2022] "Substance use disorder" means a chronic relapsing brain  
8 disease, characterized by recurrent use of alcohol, drugs, or both, causing  
9 clinically significant impairment, including health problems, disability,  
10 and failure to meet major responsibilities at work, school, or home.

11 (13.9) [Formerly 27-82-102 (14)] "Toxic vapors" means a  
12 substance or product containing such substances as defined in section  
13 18-18-412 (3). ~~C.R.S.~~

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

21 **SECTION 22.** In Colorado Revised Statutes, 27-81-103, **amend**  
22 (1)(a), (1)(b), (1)(d), (1)(e), and (1)(h) as follows:

23 **27-81-103. Powers of the office of behavioral health.** (1) To  
24 carry out the purposes of this article 81, the office of behavioral health  
25 may:

26 (a) Plan, establish, and maintain ~~alcohol~~ SUBSTANCE use disorder  
27 treatment programs as necessary or desirable;

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

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

12 (e) Coordinate its activities and cooperate with ~~alcohol~~  
13 SUBSTANCE use disorder treatment programs in this state and other states  
14 and make contracts and other joint or cooperative arrangements with  
15 state, local, or private agencies in this state and other states for the  
16 treatment of persons with ~~alcohol~~ SUBSTANCE use disorders, ~~and~~  
17 ~~intoxicated~~ persons INTOXICATED BY ALCOHOL, AND PERSONS UNDER THE  
18 INFLUENCE OF DRUGS and for the common advancement of ~~alcohol~~  
19 SUBSTANCE use disorder treatment programs;

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

25 **SECTION 23.** In Colorado Revised Statutes, **amend** 27-81-104  
26 as follows:

27 **27-81-104. Duties of the office of behavioral health - review.**

1 (1) In addition to duties prescribed by section 27-80-102, the office of  
2 behavioral health shall:

3 (a) Develop, encourage, and foster statewide, regional, and local  
4 plans and programs for the prevention of ~~alcohol~~ SUBSTANCE use  
5 disorders and treatment of persons with ~~alcohol~~ SUBSTANCE use disorders,  
6 PERSONS INTOXICATED BY ALCOHOL, and ~~intoxicated~~ persons UNDER THE  
7 INFLUENCE OF DRUGS, in cooperation with public and private agencies,  
8 organizations, and individuals and provide technical assistance and  
9 consultation services for these purposes;

10 (b) Coordinate the efforts and enlist the assistance of all public  
11 and private agencies, organizations, and individuals interested in  
12 prevention of ~~alcohol~~ SUBSTANCE use disorders and treatment of persons  
13 with ~~alcohol~~ SUBSTANCE use disorders, PERSONS INTOXICATED BY  
14 ALCOHOL, and ~~intoxicated~~ persons UNDER THE INFLUENCE OF DRUGS;

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

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

22 (d) Cooperate with the department of corrections in establishing  
23 and conducting programs for the prevention of ~~alcohol~~ SUBSTANCE use  
24 disorders and treatment of persons with ~~alcohol~~ SUBSTANCE use disorders,  
25 PERSONS INTOXICATED BY ALCOHOL, and ~~intoxicated~~ persons UNDER THE  
26 INFLUENCE OF DRUGS in appropriate agencies and institutions and for  
27 persons with ~~alcohol~~ SUBSTANCE use disorders, PERSONS INTOXICATED BY

1 ALCOHOL, and ~~intoxicated~~ persons UNDER THE INFLUENCE OF DRUGS in or  
2 on parole from correctional institutions and in carrying out duties  
3 specified in subsections (1)(i) and (1)(k) of this section;

4 (e) Cooperate with the department of education, schools, police  
5 departments, courts, and other public and private agencies, organizations,  
6 and individuals in establishing programs for the prevention of ~~alcohol~~  
7 SUBSTANCE use disorders and treatment of persons with ~~alcohol~~  
8 SUBSTANCE use disorders, PERSONS INTOXICATED BY ALCOHOL, and  
9 ~~intoxicated~~ persons UNDER THE INFLUENCE OF DRUGS and preparing  
10 curriculum materials for use at all levels of school education;

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

13 (g) Develop and implement, as an integral part of ~~alcohol~~  
14 SUBSTANCE use disorder treatment programs, an educational program for  
15 use in the treatment of persons with ~~alcohol~~ SUBSTANCE use disorders,  
16 PERSONS INTOXICATED BY ALCOHOL, and ~~intoxicated~~ persons UNDER THE  
17 INFLUENCE OF DRUGS. The program must include the dissemination of  
18 information concerning the nature and effects of alcohol AND DRUGS;

19 (h) Organize and foster training programs for all persons engaged  
20 in treatment of persons with ~~alcohol~~ SUBSTANCE use disorders, PERSONS  
21 INTOXICATED BY ALCOHOL, and ~~intoxicated~~ persons UNDER THE  
22 INFLUENCE OF DRUGS;

23 (i) Sponsor and encourage research into the causes and nature of  
24 ~~alcohol~~ SUBSTANCE use disorders and treatment of persons with ~~alcohol~~  
25 SUBSTANCE use disorders, PERSONS INTOXICATED BY ALCOHOL, and  
26 ~~intoxicated~~ persons UNDER THE INFLUENCE OF DRUGS, and serve as a  
27 clearinghouse for information relating to ~~alcohol~~ SUBSTANCE use

1 disorders;

2 (j) Specify uniform methods for keeping statistical information by  
3 public and private agencies, organizations, and individuals and collect  
4 and make available relevant statistical information, including number of  
5 persons treated, frequency of admission and readmission, and frequency  
6 and duration of treatment;

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

12 (l) Review all state health, welfare, and treatment plans to be  
13 submitted for federal funding under federal legislation and advise the  
14 governor on provisions to be included relating to ~~alcohol~~ SUBSTANCE use  
15 disorders, persons with ~~alcohol~~ SUBSTANCE use disorders, and ~~intoxicated~~  
16 persons UNDER THE INFLUENCE OF DRUGS;

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

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

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

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

6 (q) Encourage all health and disability insurance programs to  
7 include ~~alcohol~~ SUBSTANCE use disorders as a covered illness; and

8 (r) Submit to the governor an annual report covering the activities  
9 of the office of behavioral health.

10 **SECTION 24.** In Colorado Revised Statutes, 27-81-105, **amend**  
11 (1) and (3) as follows:

12 **27-81-105. Comprehensive program for treatment - regional**  
13 **facilities.** (1) The office of behavioral health shall establish a  
14 comprehensive and coordinated program for the treatment of persons with  
15 ~~alcohol~~ SUBSTANCE use disorders, PERSONS INTOXICATED BY ALCOHOL,  
16 and ~~intoxicated~~ persons UNDER THE INFLUENCE OF DRUGS.

17 (3) The office of behavioral health shall provide adequate and  
18 appropriate treatment for persons with ~~alcohol~~ SUBSTANCE use disorders,  
19 PERSONS INTOXICATED BY ALCOHOL, and ~~intoxicated~~ persons UNDER THE  
20 INFLUENCE OF DRUGS admitted pursuant to sections 27-81-109 to  
21 27-81-112. Except as otherwise provided in section 27-81-111, treatment  
22 ~~may~~ MUST not be provided at a correctional institution, except for  
23 inmates.

24 **SECTION 25.** In Colorado Revised Statutes, 27-81-106, **repeal**  
25 **and reenact, with amendments,** (6) as follows:

26 **27-81-106. Standards for public and private treatment**  
27 **facilities - fees - enforcement procedures - penalties.** (6) [Similar to

1     **27-82-103 (6)]** A PERSON SHALL NOT OPERATE A PRIVATE OR PUBLIC  
2 TREATMENT FACILITY IN THIS STATE WITHOUT APPROVAL FROM THE  
3 OFFICE OF BEHAVIORAL HEALTH; EXCEPT THAT THIS ARTICLE 81 DOES NOT  
4 APPLY TO A PRIVATE TREATMENT FACILITY THAT ACCEPTS ONLY PRIVATE  
5 MONEY AND DOES NOT DISPENSE CONTROLLED SUBSTANCES. THE DISTRICT  
6 COURT MAY RESTRAIN ANY VIOLATION OF, REVIEW ANY DENIAL,  
7 RESTRICTION, OR REVOCATION OF APPROVAL UNDER, AND GRANT OTHER  
8 RELIEF REQUIRED TO ENFORCE THE PROVISIONS OF THIS SECTION.

9             **SECTION 26.** In Colorado Revised Statutes, 27-81-108, **amend**  
10 (1) introductory portion, (1)(b), and (1)(c) as follows:

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

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

25             (c) A person ~~shall~~ MUST not be denied treatment solely because ~~he~~  
26 ~~or she~~ THE PERSON has withdrawn from treatment against medical advice  
27 on a prior occasion or because ~~he or she~~ THE PERSON has relapsed after

1 earlier treatment.

2 **SECTION 27.** In Colorado Revised Statutes, **repeal and reenact,**  
3 **with amendments,** 27-81-109 as follows:

4 **27-81-109. [Similar to 27-82-105] Voluntary treatment of**  
5 **persons with substance use disorders.** (1) A PERSON WITH A  
6 SUBSTANCE USE DISORDER, INCLUDING A MINOR, MAY APPLY FOR  
7 VOLUNTARY TREATMENT DIRECTLY TO AN APPROVED TREATMENT  
8 FACILITY.

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

20 (3) IF A PATIENT RECEIVING RESIDENTIAL CARE LEAVES AN  
21 APPROVED TREATMENT FACILITY, THE PERSON IS ENCOURAGED TO  
22 CONSENT TO OUTPATIENT TREATMENT OR SUPPORTIVE SERVICES IF  
23 APPROPRIATE.

24 **SECTION 28.** In Colorado Revised Statutes, **repeal and reenact,**  
25 **with amendments,** 27-81-110 as follows:

26 **27-81-110. [Similar to 27-82-106] Voluntary treatment for**  
27 **persons intoxicated by alcohol, under the influence of drugs, or**

1     **incapacitated by substances.** (1) A PERSON INTOXICATED BY ALCOHOL,  
2     UNDER THE INFLUENCE OF DRUGS, OR INCAPACITATED BY SUBSTANCES,  
3     INCLUDING A MINOR IF PROVIDED BY RULES OF THE OFFICE OF BEHAVIORAL  
4     HEALTH, MAY VOLUNTARILY ADMIT HIMSELF OR HERSELF TO AN APPROVED  
5     TREATMENT FACILITY FOR AN EMERGENCY EVALUATION TO DETERMINE  
6     NEED FOR TREATMENT.

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

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

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

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

1 REQUEST MUST BE RESPECTED.

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

5 (7) NOTHING IN THIS SECTION PRECLUDES THE ADMINISTRATOR  
6 FROM SEEKING EMERGENCY COMMITMENT OF A PERSON AS PROVIDED IN  
7 SECTION 27-81-111 OR INVOLUNTARY COMMITMENT OF A PERSON AS  
8 PROVIDED IN SECTION 27-81-112, REGARDLESS OF WHETHER THE PERSON  
9 HAS BEEN VOLUNTARILY ADMITTED UNDER THIS SECTION. IN SUCH CASE,  
10 THE ADMINISTRATOR'S FURTHER CONDUCT IS GOVERNED BY SECTION  
11 27-81-111 OR 27-81-112, AS APPLICABLE.

12 **SECTION 29.** In Colorado Revised Statutes, **amend** 27-81-111  
13 as follows:

14 **27-81-111. Emergency commitment.** (1) (a) When a person is  
15 ~~intoxicated~~ UNDER THE INFLUENCE OF or incapacitated by ~~alcohol~~  
16 SUBSTANCES and clearly dangerous to the health and safety of himself,  
17 herself, or others, ~~he or she shall be taken into protective custody by law~~  
18 enforcement authorities or an emergency service patrol, acting with  
19 probable cause, ~~and placed~~ SHALL TAKE THE PERSON INTO PROTECTIVE  
20 CUSTODY in an approved treatment facility. If no such facilities are  
21 available, ~~he or she~~ THE PERSON may be detained in an emergency  
22 medical facility or jail, but only for so long as may be necessary to  
23 prevent injury to himself, herself, or others or to prevent a breach of the  
24 peace. If the person being detained is a juvenile, as defined in section  
25 19-1-103 (68), ~~C.R.S.~~, the juvenile shall be placed in a setting that is  
26 nonsecure and physically segregated by sight and sound from the adult  
27 offenders. A law enforcement officer or emergency service patrol officer,

1 in detaining the person, is taking ~~him or her~~ THE PERSON into protective  
2 custody. In so doing, the detaining officer may protect himself or herself  
3 by reasonable methods but shall make every reasonable effort to protect  
4 the detainee's health and safety. A taking into protective custody under  
5 this section is not an arrest, and no entry or other record shall be made to  
6 indicate that the person has been arrested or charged with a crime. Law  
7 enforcement or emergency service personnel who act in compliance with  
8 this section are acting in the course of their official duties and are not  
9 criminally or civilly liable therefor. Nothing in this subsection (1) ~~shall~~  
10 ~~preclude an intoxicated or incapacitated~~ PRECLUDES A person  
11 INTOXICATED BY ALCOHOL, UNDER THE INFLUENCE OF DRUGS, OR  
12 INCAPACITATED BY SUBSTANCES who is not dangerous to the health and  
13 safety of himself, herself, or others from being assisted to ~~his or her~~ THE  
14 PERSON'S home or like location by the law enforcement officer or  
15 emergency service patrol officer.

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

25 (2) A law enforcement officer, emergency service ~~patrolman~~  
26 PATROL OFFICER, physician, spouse, guardian, or relative of the person to  
27 be committed or any other responsible person may make a written

1 application for emergency commitment under this section, directed to the  
2 administrator of the approved treatment facility. The application ~~shall~~  
3 MUST state the circumstances requiring emergency commitment,  
4 including the applicant's personal observations and the specific statements  
5 of others, if any, upon which ~~he or she~~ THE APPLICANT relies in making  
6 the application. A copy of the application ~~shall~~ MUST be furnished to the  
7 person to be committed.

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

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

25 (5) When the administrator determines that the grounds for  
26 commitment no longer exist, ~~he or she~~ THE ADMINISTRATOR shall  
27 discharge the person committed under this section. A person committed

1 under this section ~~may~~ MUST not be detained in any treatment facility for  
2 more than five days; except that a person may be detained for longer than  
3 five days at the approved treatment facility if, in that period of time, a  
4 petition for involuntary commitment has been filed pursuant to section  
5 27-81-112. A person ~~may~~ MUST not be detained longer than ten days,  
6 EXCLUDING WEEKENDS AND HOLIDAYS, after the date of filing of the  
7 petition for involuntary commitment UNLESS A VALID MEDICAL REASON  
8 EXISTS FOR DETAINING A PERSON LONGER.

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

20 **SECTION 30.** In Colorado Revised Statutes, **amend** 27-81-112  
21 as follows:

22 **27-81-112. Involuntary commitment of a person with a**  
23 **substance use disorder.** (1) The court may commit a person to the  
24 custody of the office of behavioral health upon the petition of the person's  
25 spouse or guardian, a relative, a physician, an advanced practice nurse,  
26 the administrator in charge of an approved treatment facility, or any other  
27 responsible person. The petition must allege that the person is ~~a person~~

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

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

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

24 (I) ENTER INTO A STIPULATED ORDER OF THE COURT FOR  
25 COMMITTED TREATMENT IN ORDER TO EXPEDITE PLACEMENT IN AN  
26 APPROVED TREATMENT FACILITY BY THE OFFICE OF BEHAVIORAL HEALTH;  
27 OR

1 (II) TO CONTEST THE COMMITMENT PROCEEDING.

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

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

19 (4) At the hearing, the court shall hear all relevant testimony,  
20 including, if possible, the testimony of at least one licensed physician who  
21 has examined the person whose commitment is sought. The person ~~shall~~  
22 MUST be present unless the court believes that the person's presence is  
23 likely to be injurious to the person; in this event, the court shall appoint  
24 a guardian ad litem to represent the person throughout the proceeding. If  
25 the person has refused to be examined by a licensed physician, ~~he or she~~  
26 ~~shall~~ THE PERSON MUST be given an opportunity to be examined by a  
27 court-appointed licensed physician. If the person refuses and there is

1 sufficient evidence to believe that the allegations of the petition are true  
2 or if the court believes that more medical evidence is necessary, the court  
3 may commit the person to a licensed hospital for a period of not more  
4 than five days for a diagnostic examination. In such event, the court shall  
5 schedule a further hearing for final determination of commitment, in no  
6 event later than five days after the first hearing.

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

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

20 (7) A person committed as provided for in this section remains in  
21 the custody of the office of behavioral health for treatment for a period of  
22 ~~thirty~~ UP TO NINETY days. ~~unless discharged sooner.~~ At the end of the  
23 ~~thirty-day~~ NINETY-DAY period, ~~he or she shall be discharged automatically~~  
24 THE TREATMENT FACILITY SHALL AUTOMATICALLY DISCHARGE THE  
25 PERSON unless the office of behavioral health, before expiration of the  
26 ~~thirty-day~~ NINETY-DAY period, obtains a court order for ~~his or her~~ THE  
27 PERSON'S recommitment on the grounds set forth in subsection (1) of this

1 section for a further period of ninety days unless discharged sooner. If a  
2 person has been committed because ~~he or she~~ THE PERSON is a person  
3 with ~~an alcohol~~ A SUBSTANCE use disorder who is likely to inflict physical  
4 harm on another, the office of behavioral health shall apply for  
5 recommitment if, after examination, it is determined that the likelihood  
6 to inflict physical harm on another still exists.

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

20 (9) Upon the filing of a petition for recommitment under  
21 subsections (7) and (8) of this section, the court shall fix a date for  
22 hearing ~~no~~ NOT later than ten days, EXCLUDING WEEKENDS AND  
23 HOLIDAYS, after the date the petition was filed UNLESS A VALID MEDICAL  
24 REASON EXISTS FOR DELAYING THE HEARING. A copy of the petition and  
25 of the notice of hearing shall be served and ~~mailed~~ PROVIDED as required  
26 in subsection (3) of this section. At the hearing, the court shall proceed as  
27 provided in subsection (4) of this section.

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

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

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

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

22 (12) The court shall inform the person whose commitment or  
23 recommitment is sought of ~~his or her~~ THE PERSON'S right to contest the  
24 application, to be represented by counsel at every stage of any  
25 proceedings relating to the person's commitment and recommitment, and  
26 to have counsel appointed by the court or provided by the court if ~~he or~~  
27 ~~she~~ THE PERSON wants the assistance of counsel and is unable to obtain

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

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

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

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

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

26 **SECTION 31.** In Colorado Revised Statutes, **amend** 27-81-113  
27 as follows:

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

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

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

18           **SECTION 32.** In Colorado Revised Statutes, **repeal and reenact,**  
19 **with amendments,** 27-81-114 as follows:

20           **27-81-114. Rights of persons receiving evaluation, care, or**  
21 **treatment.** (1) A FACILITY SHALL IMMEDIATELY ADVISE EACH PERSON  
22 RECEIVING EVALUATION, CARE, OR TREATMENT UNDER ANY PROVISION OF  
23 THIS ARTICLE 81, ORALLY AND IN WRITING, THAT THE PERSON HAS AND IS  
24 AFFORDED THE FOLLOWING RIGHTS:

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

1 (b) IF UNDER AN EMERGENCY COMMITMENT PURSUANT TO SECTION  
2 27-81-111, TO REFUSE TO BE EXAMINED BY A LICENSED PHYSICIAN FOR  
3 CERTIFICATION. A PERSON'S REFUSAL TO BE EXAMINED FOR CERTIFICATION  
4 MAY BE ALLEGED IN A PETITION FOR INVOLUNTARY COMMITMENT. A  
5 PERSON MAY REQUEST TO BE EXAMINED BY THE PERSON'S PHYSICIAN, OR  
6 A COURT MAY ORDER A PERSON TO BE EVALUATED BY A LICENSED  
7 PHYSICIAN FOR CERTIFICATION.

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

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

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

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

24 (g) TO AT ANY TIME SEEK TO BE DISCHARGED FROM COMMITMENT  
25 BY AN ORDER IN THE NATURE OF HABEAS CORPUS;

26 (h) ONCE NO LONGER UNDER THE INFLUENCE OF DRUGS OR  
27 INTOXICATED BY ALCOHOL, TO SIGN IN AND SEEK VOLUNTARY SUBSTANCE

1 USE DISORDER TREATMENT, UNLESS THE ADMINISTRATOR DETERMINES IN  
2 WRITING THAT REASONABLE GROUNDS EXIST TO BELIEVE THAT THE  
3 PERSON WILL NOT REMAIN IN VOLUNTARY TREATMENT OR THAT THE  
4 PERSON IS CLEARLY DANGEROUS TO THE HEALTH AND SAFETY OF HIMSELF  
5 OR HERSELF OR OTHERS;

6 (i) IF IN COMMITTED TREATMENT, TO RECEIVE  
7 TWENTY-FOUR-HOUR NOTICE PRIOR TO BEING TRANSFERRED TO ANOTHER  
8 FACILITY;

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

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

19 (l) SUBJECT TO DEPARTMENT RULES RELATING TO THE USE OF  
20 TELEPHONES AND OTHER COMMUNICATION DEVICES, TO HAVE  
21 REASONABLE ACCESS TO TELEPHONES OR OTHER COMMUNICATION  
22 DEVICES, AND TO MAKE AND TO RECEIVE CALLS OR COMMUNICATIONS IN  
23 PRIVACY. FACILITY STAFF SHALL NOT OPEN, DELAY, INTERCEPT, READ, OR  
24 CENSOR MAIL OR OTHER COMMUNICATIONS OR USE MAIL OR OTHER  
25 COMMUNICATIONS AS A METHOD TO ENFORCE COMPLIANCE WITH FACILITY  
26 STAFF.

27 (m) TO WEAR HIS OR HER OWN CLOTHES, KEEP AND USE PERSONAL

1 POSSESSIONS, AND KEEP AND BE ALLOWED TO SPEND A REASONABLE SUM  
2 OF THE PERSON'S OWN MONEY;

3 (n) TO HAVE ACCESS TO MEDICAL RECORDS;

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

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

7 (q) TO REFUSE TO BE PHOTOGRAPHED, EXCEPT FOR TREATMENT  
8 FACILITY IDENTIFICATION PURPOSES;

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

11 (s) TO HAVE APPROPRIATE ACCESS TO ADEQUATE FOOD, WATER,  
12 AND HYGIENE PRODUCTS;

13 (t) TO HAVE PHYSICAL PRIVACY IN SHOWERING, CHANGING, AND  
14 USING THE RESTROOM; AND

15 (u) TO BE FREE OF RESTRAINTS AND SOLITARY CONFINEMENT.

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

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

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

18           **SECTION 33.** In Colorado Revised Statutes, 27-81-115, **amend**  
19 (1) as follows:

20           **27-81-115. Emergency service patrol - establishment - rules.**

21 (1) The office of behavioral health and cities, counties, city and counties,  
22 and regional service authorities may establish emergency service patrols.  
23 A patrol consists of persons trained to give assistance in the streets and  
24 in other public places to persons who are intoxicated ~~or incapacitated~~ by  
25 alcohol, UNDER THE INFLUENCE OF DRUGS, OR INCAPACITATED BY  
26 SUBSTANCES. Members of an emergency service patrol must be capable  
27 of providing first aid in emergency situations and are authorized to

1 transport a person intoxicated ~~or incapacitated~~ by alcohol, UNDER THE  
2 INFLUENCE OF DRUGS, OR INCAPACITATED BY SUBSTANCES to his or her  
3 home and to and from treatment facilities.

4 **SECTION 34.** In Colorado Revised Statutes, **amend** 27-81-117  
5 as follows:

6 **27-81-117. Criminal laws - limitations.** (1) A county,  
7 municipality, or other political subdivision may not adopt or enforce a  
8 local law, ordinance, resolution, or rule having the force of law that  
9 includes drinking, being a person with an alcohol use disorder, or being  
10 found in an intoxicated condition as one of the elements of the offense  
11 giving rise to a criminal or civil penalty or sanction.

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

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

22 (4) The fact that a person is intoxicated ~~or incapacitated~~ by  
23 alcohol, ~~shall~~ UNDER THE INFLUENCE OF DRUGS, OR INCAPACITATED BY  
24 SUBSTANCES DOES not prevent ~~his or her~~ THE PERSON'S arrest or  
25 prosecution for the commission of any criminal act or conduct not  
26 enumerated in subsection (1) of this section.

27 (5) Nothing in this ~~article shall be construed as a limitation upon~~

1 ARTICLE 81 LIMITS the right of a police officer to make an otherwise legal  
2 arrest, notwithstanding the fact that the arrested person may be  
3 intoxicated BY ALCOHOL, UNDER THE INFLUENCE OF DRUGS, or  
4 incapacitated by ~~alcohol~~ SUBSTANCES.

5 SECTION 35. In Colorado Revised Statutes, **add with amended**  
6 **and relocated provisions** 27-81-118 as follows:

7 **27-81-118. [Formerly 27-82-114] Opioid crisis recovery funds**  
8 **advisory committee - creation - membership - purpose.** (1) There is  
9 ~~hereby~~ created the opioid crisis recovery funds advisory committee,  
10 referred to in this section as the "committee", which is created to advise  
11 and collaborate with the department of law on uses of any custodial funds  
12 received by the state as the result of opioid-addiction-related litigation  
13 and for which the use of the funds is not predetermined or committed by  
14 court order or other action by a state or federal court of law.

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

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

17 (A) One member licensed to practice medicine pursuant to article  
18 240 of title 12;

19 (B) One member licensed to practice pharmacy pursuant to article  
20 280 of title 12;

21 (C) One member licensed to practice as a nurse pursuant to article  
22 255 of title 12;

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

25 (E) One member licensed as a veterinarian pursuant to article 315  
26 of title 12;

27 (F) One member licensed as a physical therapist pursuant to article

- 1 285 of title 12;
- 2 (G) One member representing a local public health agency;
- 3 (H) One member who has been affected by the opioid crisis;
- 4 (I) One family member of a person who has been affected by the  
5 opioid crisis;
- 6 (J) One member representing an advocacy organization for people  
7 with substance use disorders;
- 8 (K) Two members appointed from nominees submitted by  
9 statewide organizations representing counties, with one member  
10 representing the western slope and one member representing the eastern  
11 part of the state; and
- 12 (L) One member from an association that represents behavioral  
13 health providers;
- 14 (II) Two members appointed by the executive director of the  
15 department of human services, one of whom must represent an  
16 association of substance use providers;
- 17 (III) Two members appointed by the executive director of the  
18 department of public health and environment, one of whom is a pain  
19 management patient;
- 20 (IV) One member appointed by the executive director of the  
21 department of regulatory agencies;
- 22 (V) One member appointed by the executive director of the  
23 department of health care policy and financing;
- 24 (VI) One member from the state substance abuse trend and  
25 response task force, created in section 18-18.5-103, appointed by the  
26 attorney general;
- 27 (VII) One member from the center for research into substance use

1 disorder prevention, treatment, and recovery support strategies, created  
2 in section 27-80-118 (3), appointed by the director of the center;

3 (VIII) One member from each safety net hospital that provides  
4 addiction services, appointed by the hospital;

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

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

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

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

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

25 (4) If the state receives custodial funds from a settlement or  
26 damage award from opioid-addiction-related litigation and the use of the  
27 funds is not predetermined or committed by court order or other action by

1 a state or federal court of law, the attorney general shall convene and call  
2 a meeting of the committee, and any subsequent meetings as necessary,  
3 to seek input and recommendations from the committee on the proper  
4 expenditure of the funds received.

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

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

13 **SECTION 36. Repeal of relocated and nonrelocated**  
14 **provisions in this act.** (1) In Colorado Revised Statutes, repeal part 1 of  
15 article 82 of title 27.

16 (2) The repeal of part 1 includes sections 27-82-102 (13.3) and  
17 (13.5) and 27-82-103.5 as they would become effective July 1, 2022.

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

20 **SECTION 37.** In Colorado Revised Statutes, 12-100-120, **amend**  
21 (1)(l) as follows:

22 **12-100-120. Grounds for disciplinary action - administrative**  
23 **penalties.** (1) After notice and hearing as provided in section  
24 12-100-123, the board may take disciplinary or other action as authorized  
25 in section 12-20-404 and impose other conditions or limitations on a  
26 person for any of the following causes:

27 (l) ~~An alcohol~~ A SUBSTANCE use disorder, as defined in section

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

5 **SECTION 38.** In Colorado Revised Statutes, 12-110-111, **amend**  
6 (1)(d) as follows:

7 **12-110-111. Grounds for discipline.** (1) The director may take  
8 disciplinary or other action as authorized in section 12-20-404 against a  
9 license or an application for a license if the applicant or licensee:

10 (d) Has ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
11 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
12 ~~27-82-102,~~ or is an excessive or a habitual user or abuser of alcohol or  
13 habit-forming drugs or is a habitual user of a controlled substance, as  
14 defined in section 18-18-102 (5), if the use, disorder, or dependency is a  
15 danger to other licensees;

16 **SECTION 39.** In Colorado Revised Statutes, 12-155-113, **amend**  
17 (1)(l) as follows:

18 **12-155-113. Disciplinary action by board - procedures -**  
19 **cease-and-desist orders.** (1) The board may take disciplinary or other  
20 action as authorized by section 12-20-404 for any of the following  
21 reasons:

22 (l) ~~An alcohol~~ A SUBSTANCE use disorder, as defined in section  
23 27-81-102, ~~or a substance use disorder, as defined in section 27-82-102,~~  
24 or excessive use of any habit-forming drug, any controlled substance, as  
25 defined in section 18-18-102 (5), or any alcoholic beverage;

26 **SECTION 40.** In Colorado Revised Statutes, 12-205-111, **amend**  
27 (2)(c) as follows:

1           **12-205-111. Grounds for discipline - disciplinary proceedings**  
2   **- definitions.** (2) The director may take disciplinary or other action in  
3 accordance with section 12-20-404 or issue a cease-and-desist order in  
4 accordance with section 12-205-112 upon reasonable grounds that the  
5 licensee:

6           (c) Has ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
7 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
8 ~~27-82-102~~, or is an excessive or habitual user or abuser of alcohol or  
9 habit-forming drugs or is a habitual user of a controlled substance, as  
10 defined in section 18-18-102 (5), or other drugs having similar effects;  
11 except that the director has the discretion not to discipline the licensee if  
12 the licensee is participating in good faith in an alcohol or substance use  
13 disorder treatment program approved by the director;

14           **SECTION 41.** In Colorado Revised Statutes, 12-210-108, **amend**  
15 (2)(q) as follows:

16           **12-210-108. Disciplinary actions - grounds for discipline.**

17 (2) The following acts constitute grounds for discipline:

18           (q) Having ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
19 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
20 ~~27-82-102~~, or excessively or habitually using or abusing alcohol or  
21 habit-forming drugs or habitually using a controlled substance, as defined  
22 in section 18-18-102 (5), or other drugs or substances having similar  
23 effects; except that the director has the discretion not to discipline the  
24 licensee if he or she is participating in good faith in an alcohol or  
25 substance use disorder treatment program approved by the director;

26           **SECTION 42.** In Colorado Revised Statutes, 12-215-115, **amend**  
27 (1)(d) as follows:

1           **12-215-115. Discipline of licensees - suspension, revocation,**  
2 **denial, and probation - grounds - definitions.** (1) Upon any of the  
3 following grounds, the board may take disciplinary or other action as  
4 specified in section 12-20-404 or impose conditions on a licensee's  
5 license:

6           (d) A substance use disorder, as defined in ~~section 27-82-102~~  
7 SECTION 27-81-102, or excessive use by the licensee of a controlled  
8 substance, as defined in section 18-18-102 (5), or a habit-forming drug;

9           **SECTION 43.** In Colorado Revised Statutes, 12-235-111, **amend**  
10 (1)(f) as follows:

11           **12-235-111. Grounds for discipline - definitions.** (1) The  
12 director is authorized to take disciplinary action pursuant to section  
13 12-235-112 against any person who has:

14           (f) ~~An alcohol~~ A SUBSTANCE use disorder, as defined in section  
15 27-81-102, ~~or a substance use disorder, as defined in section 27-82-102,~~  
16 or a dependence on or addiction to alcohol or any habit-forming drug, or  
17 who abuses or engages in the habitual or excessive use of any  
18 habit-forming drug or any controlled substance as defined in section  
19 18-18-102 (5), but the director may take into account the licensee's  
20 participation in a substance use disorder treatment program when  
21 considering disciplinary action;

22           **SECTION 44.** In Colorado Revised Statutes, 12-260-114, **amend**  
23 (1)(g) as follows:

24           **12-260-114. Grounds for discipline.** (1) The board may suspend,  
25 revoke, or deny any person's certification to practice as a nurse aide or  
26 authority to practice as a medication aide in accordance with section  
27 12-20-404 (1)(d) or may issue to the person a letter of admonition under

1 the circumstances specified in and in accordance with section 12-20-404  
2 (4), upon proof that a person:

3 (g) Has ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
4 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
5 ~~27-82-102~~, or excessively uses any habit-forming drug or any controlled  
6 substance, as defined in section 18-18-102 (5), or other drugs having  
7 similar effects, or is diverting controlled substances, as defined in section  
8 18-18-102 (5), or other drugs having similar effects from the person's  
9 place of employment;

10 **SECTION 45.** In Colorado Revised Statutes, 12-265-113, **amend**  
11 (1)(g) as follows:

12 **12-265-113. Grounds for discipline.** (1) The board has the  
13 power to take disciplinary or other action as specified in sections  
14 12-20-404 and 12-265-107 (1)(d), upon proof that the person:

15 (g) Has ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
16 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
17 ~~27-82-102~~, abuses or engages in the habitual or excessive use of any such  
18 habit-forming drug or any controlled substance as defined in section  
19 18-18-102 (5), or participates in the unlawful use of controlled substances  
20 as specified in section 18-18-404; except that the board has the discretion  
21 not to discipline the licensee if the person is participating, in good faith,  
22 in a substance use disorder treatment program approved by the board;

23 **SECTION 46.** In Colorado Revised Statutes, 12-275-110, **amend**  
24 (1)(d) as follows:

25 **12-275-110. Application for license - licensure by endorsement**  
26 **- rules.** (1) A person who desires to practice optometry in the state may  
27 file with the board an application for a license, giving the information

1 required in a form and manner approved by the board. The applicant shall  
2 demonstrate that the applicant possesses the following qualifications:

3 (d) The applicant does not have ~~an alcohol~~ A SUBSTANCE use  
4 disorder, as defined in section 27-81-102, ~~or a substance use disorder, as~~  
5 ~~defined in section 27-82-102~~; or has not habitually or excessively used or  
6 abused alcohol, habit-forming drugs, or controlled substances as defined  
7 in section 18-18-102 (5).

8 **SECTION 47.** In Colorado Revised Statutes, 12-280-126, **amend**  
9 (1)(e) as follows:

10 **12-280-126. Unprofessional conduct - grounds for discipline.**

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

15 (e) Has ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
16 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
17 ~~27-82-102~~; or engages in the habitual or excessive use or abuse of  
18 alcohol, a habit-forming drug, or a controlled substance, as defined in  
19 section 18-18-102 (5);

20 **SECTION 48.** In Colorado Revised Statutes, 12-280-204, **amend**  
21 (2)(a) as follows:

22 **12-280-204. Eligibility - participants.** (2) In order to be eligible  
23 for participation, a licensee shall:

24 (a) Acknowledge the existence or the potential existence of a  
25 psychiatric, psychological, or emotional problem; excessive alcohol or  
26 drug use; or ~~an alcohol~~ A SUBSTANCE use disorder, as defined in section  
27 27-81-102; ~~or a substance use disorder, as defined in section 27-82-102~~;

1           **SECTION 49.** In Colorado Revised Statutes, 12-300-109, **amend**  
2 (2)(h) as follows:

3           **12-300-109. Grounds for action - disciplinary proceedings.**

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

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

15           **SECTION 50.** In Colorado Revised Statutes, 12-305-112, **amend**  
16 (2)(c) as follows:

17           **12-305-112. Grounds for discipline - definitions.** (2) The  
18 director may take disciplinary or other action specified in section  
19 12-20-404 or 12-305-113 or issue a cease-and-desist order to a certificate  
20 holder in accordance with sections 12-20-405 and 12-305-113 (8) upon  
21 proof that the certificate holder:

22           (c) Has ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
23 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
24 ~~27-82-102~~, excessively or habitually uses or abuses alcohol or  
25 habit-forming drugs, or habitually uses a controlled substance, as defined  
26 in section 18-18-102 (5), or other drugs having similar effects; except that  
27 the director has the discretion not to discipline the certificate holder if the

1 certificate holder is participating in good faith in an alcohol or substance  
2 use disorder treatment program approved by the director;

3 **SECTION 51.** In Colorado Revised Statutes, 12-310-106, **amend**  
4 (2)(c) as follows:

5 **12-310-106. Grounds for discipline - disciplinary proceedings**  
6 **- judicial review.** (2) The director may take disciplinary or other action  
7 as authorized in section 12-20-404 against, or issue a cease-and-desist  
8 order in accordance with section 12-20-405 to, a registrant in accordance  
9 with this section and section 12-20-403, upon proof that the registrant:

10 (c) Has ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
11 section 27-81-102; ~~or a substance use disorder, as defined in section~~  
12 ~~27-82-102~~; is an excessive or habitual user or abuser of alcohol or  
13 habit-forming drugs; or is a habitual user of a controlled substance, as  
14 defined in section 18-18-102 (5), or other drugs having similar effects;

15 **SECTION 52.** In Colorado Revised Statutes, 13-5-142, **amend**  
16 (1)(b) as follows:

17 **13-5-142. National instant criminal background check system**  
18 **- reporting.** (1) On and after March 20, 2013, the state court  
19 administrator shall send electronically the following information to the  
20 Colorado bureau of investigation created pursuant to section 24-33.5-401,  
21 referred to in this section as the "bureau":

22 (b) The name of each person who has been committed by order of  
23 the court to the custody of the office of behavioral health in the  
24 department of human services pursuant to section 27-81-112; ~~or~~  
25 ~~27-82-108~~; and

26 **SECTION 53.** In Colorado Revised Statutes, 13-5-142.5, **amend**  
27 (2)(a)(II) as follows:

1           **13-5-142.5. National instant criminal background check**  
2 **system - judicial process for awarding relief from federal**  
3 **prohibitions - legislative declaration. (2) Eligibility.** A person may  
4 petition for relief pursuant to this section if:

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

8           **SECTION 54.** In Colorado Revised Statutes, 13-9-123, **amend**  
9 (1)(b) as follows:

10           **13-9-123. National instant criminal background check system**  
11 **- reporting. (1)** On and after March 20, 2013, the state court  
12 administrator shall send electronically the following information to the  
13 Colorado bureau of investigation created pursuant to section 24-33.5-401,  
14 referred to in this section as the "bureau":

15           (b) The name of each person who has been committed by order of  
16 the court to the custody of the office of behavioral health in the  
17 department of human services pursuant to section 27-81-112; ~~or~~  
18 ~~27-82-108~~; and

19           **SECTION 55.** In Colorado Revised Statutes, 13-9-124, **amend**  
20 (2)(a)(II) as follows:

21           **13-9-124. National instant criminal background check system**  
22 **- judicial process for awarding relief from federal prohibitions -**  
23 **legislative declaration. (2) Eligibility.** A person may petition for relief  
24 pursuant to this section if:

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

1           **SECTION 56.** In Colorado Revised Statutes, 13-14.5-105,  
2 **amend** (8)(b) as follows:

3           **13-14.5-105. Hearings on petition - grounds for order issuance.**

4 (8) (b) Before issuing an extreme risk protection order, the court shall  
5 consider whether the respondent meets the standard for an emergency  
6 commitment pursuant to section 27-81-111. ~~or 27-82-107.~~ If the court  
7 determines that the respondent meets the standard, then, in addition to  
8 issuing an extreme risk protection order, the court shall order an  
9 emergency commitment pursuant to section 27-81-111. ~~or 27-82-107.~~

10           **SECTION 57.** In Colorado Revised Statutes, 13-90-107, **amend**  
11 (1)(m)(IV)(C) as follows:

12           **13-90-107. Who may not testify without consent - definitions.**

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

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

17           (C) Due to INTOXICATION BY alcohol, ~~or other substance~~  
18 ~~intoxication or abuse~~ BEING UNDER THE INFLUENCE OF DRUGS, OR  
19 INCAPACITATION BY SUBSTANCES as described in ~~sections 27-81-111 and~~  
20 ~~27-82-107, C.R.S.~~ SECTION 27-81-111, the person receiving peer support  
21 is a clear and immediate danger to the person's self or others;

22           **SECTION 58.** In Colorado Revised Statutes, 25-1-1202, **amend**  
23 (1)(vv) as follows:

24           **25-1-1202. Index of statutory sections regarding medical**  
25 **record confidentiality and health information.** (1) Statutory provisions  
26 concerning policies, procedures, and references to the release, sharing,  
27 and use of medical records and health information include the following:

1 (vv) ~~Sections 27-82-106 and 27-82-109~~ SECTIONS 27-81-109 AND  
2 27-81-113, concerning the treatment of persons with substance use  
3 disorders;

4 **SECTION 59**. In Colorado Revised Statutes, 25-3.5-208, **amend**  
5 (7)(a)(I) as follows:

6 **25-3.5-208. Emergency medical service providers' peer health**  
7 **assistance program - fund - rules.** (7) (a) Any certificate holder who  
8 does not have access to an employee assistance program may apply to the  
9 department for participation in a qualified peer health assistance program.  
10 In order to be eligible for participation, a certificate holder shall:

11 (I) Acknowledge the existence or the potential existence of a  
12 physical, psychological, or emotional condition; excessive alcohol or drug  
13 use; or ~~an alcohol~~ A SUBSTANCE use disorder, as defined in section  
14 27-81-102; ~~(1); or a substance use disorder, as defined in section~~  
15 ~~27-82-102 (13.5);~~

16 **SECTION 60**. In Colorado Revised Statutes, 25-27.6-104,  
17 **amend as it will become effective July 1, 2022**, (1)(b) as follows:

18 **25-27.6-104. License required - criminal and civil penalties.**  
19 (1) (b) On or after July 1, 2023, an entity seeking initial licensure as a  
20 behavioral health entity shall apply for a behavioral health entity license  
21 if the entity would previously have been licensed or subject to approval  
22 by the office of behavioral health in the department of human services  
23 pursuant to section 27-81-106 ~~or 27-82-103~~ as an approved treatment  
24 program for alcohol use disorders or substance use disorders.

25 **SECTION 61**. In Colorado Revised Statutes, 26-6.9-101, **amend**  
26 (1) as follows:

27 **26-6.9-101. Definitions.** As used in this article 6.9, unless the

1 context otherwise requires:

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

5 **SECTION 62.** In Colorado Revised Statutes, 27-60-104.5,  
6 **amend** (3)(e)(I) as follows:

7 **27-60-104.5. Behavioral health capacity tracking system -**  
8 **legislative declaration - definitions - rules.** (3) Pursuant to subsection  
9 (8) of this section, the state department shall implement a behavioral  
10 health capacity tracking system, which must include the following:

11 (e) Capacity reporting for the following facilities and treatment  
12 providers statewide:

13 (I) Facilities that provide evaluation and treatment to individuals  
14 held under an emergency commitment pursuant to section 27-81-111, ~~or~~  
15 ~~section 27-82-107~~, an involuntary commitment pursuant to section  
16 27-81-112, ~~or section 27-82-108~~, or a civil commitment pursuant to  
17 section 27-65-105, including crisis stabilization units, acute treatment  
18 units, community mental health centers, and hospitals, including state  
19 mental health institutes;

20 **SECTION 63.** In Colorado Revised Statutes, 27-66.5-102,  
21 **amend** (3)(a)(IV) and (3)(a)(V) as follows:

22 **27-66.5-102. Definitions.** As used in this article 66.5, unless the  
23 context otherwise requires:

24 (3) "High-risk individual" means a person who:

25 (a) Is under:

26 (IV) An emergency commitment pursuant to section 27-81-111;  
27 ~~or 27-82-107~~; or

1 (V) An involuntary commitment pursuant to section 27-81-112;  
2 ~~or 27-82-108;~~

3 **SECTION 64.** In Colorado Revised Statutes, 27-82-202, **amend**  
4 (4) as follows:

5 **27-82-202. Definitions.** As used in this part 2, unless the context  
6 otherwise requires:

7 (4) "Treatment facility" means a health care facility that provides  
8 substance use disorder or medication-assisted treatment and that is  
9 approved by the office of behavioral health pursuant to ~~section 27-82-103~~  
10 SECTION 27-81-106.

11 **SECTION 65.** In Colorado Revised Statutes, 42-2-104, **amend**  
12 (2)(c) as follows:

13 **42-2-104. Licenses issued - denied.** (2) Except as otherwise  
14 provided in this article 2, the department shall not license a person to  
15 operate any motor vehicle in this state:

16 (c) Who has been adjudged or determined by a court of competent  
17 jurisdiction to have ~~an alcohol~~ A SUBSTANCE use disorder, as defined in  
18 section 27-81-102, ~~or a substance use disorder, as defined in section~~  
19 ~~27-82-102~~, with respect to a controlled substance, as defined in section  
20 18-18-102 (5);

21 **SECTION 66.** In Colorado Revised Statutes, 42-4-1301.3,  
22 **amend** (4)(a) as follows:

23 **42-4-1301.3. Alcohol and drug driving safety program -**  
24 **definition.** (4) (a) There is created an alcohol and drug driving safety  
25 program fund in the office of the state treasurer, referred to in this  
26 subsection (4) as the "fund". The fund consists of money deposited in it  
27 as directed by this subsection (4)(a). The assessment in effect on July 1,

1 1998, remains in effect unless the judicial department and the office of  
2 behavioral health in the department of human services have provided the  
3 general assembly with a statement of the cost of the program, including  
4 costs of administration for the past and current fiscal year to include a  
5 proposed change in the assessment. The general assembly shall then  
6 consider the proposed new assessment and approve the amount to be  
7 assessed against each person during the following fiscal year in order to  
8 ensure that the alcohol and drug driving safety program established in this  
9 section is financially self-supporting. Any adjustment in the amount to be  
10 assessed must be noted in the appropriation to the judicial department and  
11 the office of behavioral health in the department of human services as a  
12 footnote or line item related to this program in the general appropriation  
13 bill. The state auditor shall periodically audit the costs of the programs to  
14 determine that they are reasonable and that the rate charged is accurate  
15 based on these costs. Any other fines, fees, or costs levied against a  
16 person are not part of the program fund. The court shall transmit to the  
17 state treasurer the amount assessed for the alcohol and drug evaluation to  
18 be credited to the fund. Fees charged pursuant to ~~sections 27-81-106 (1)~~  
19 ~~and 27-82-103 (1)~~ SECTION 27-81-106 (1) to approved alcohol and drug  
20 treatment facilities that provide level I and level II programs as provided  
21 in subsection (3)(c) of this section must be transmitted to the state  
22 treasurer, who shall credit the fees to the fund. Upon appropriation by the  
23 general assembly, the money must be expended by the judicial department  
24 and the office of behavioral health in the department of human services  
25 for the administration of the alcohol and drug driving safety program. In  
26 administering the alcohol and drug driving safety program, the judicial  
27 department is authorized to contract with any agency for any services the

1 judicial department deems necessary. Money deposited in the fund  
2 remains in the fund to be used for the purposes set forth in this section  
3 and must not revert or transfer to the general fund except by further act  
4 of the general assembly.

5 SECTION 67. Appropriation. (1) For the 2020-21 state fiscal  
6 year, \$1,155,684 is appropriated to the department of human services for  
7 use by the office of behavioral health. This appropriation consists of  
8 \$655,684 from the general fund and \$500,000 from the marijuana tax  
9 cash fund created in section 39-28.8-501 (1), C.R.S. To implement this  
10 act, the office may use this appropriation as follows:

11 (a) \$131,544 from the general fund for personal services related  
12 to community behavioral health administration, which amount is based on  
13 an assumption that the office will require an additional 1.8 FTE;

14 (b) \$24,140 from the general fund for operating expenses related  
15 to community behavioral health administration;

16 (c) \$750,000, which consists of \$500,000 from the general fund  
17 and \$250,000 from the marijuana tax cash fund, for treatment and  
18 detoxification programs; and

19 (d) \$250,000 from the marijuana tax cash fund for increasing  
20 access to effective substance use disorder services.

21 (2) For the 2020-21 state fiscal year, \$1,000,000 is appropriated  
22 to the department of public health and environment for use by the  
23 prevention services division. This appropriation is from the marijuana tax  
24 cash fund created in section 39-28.8-501 (1), C.R.S., and is based on an  
25 assumption that the division will require an additional 1.0 FTE. To  
26 implement this act, the division may use this appropriation for the primary  
27 care office.

1           (3) For the 2020-21 state fiscal year, \$170,313 is appropriated to  
2 the department of health care policy and financing. This appropriation  
3 consists of \$116,189 from the general fund, which is subject to the "(M)"  
4 notation as defined in the annual general appropriation act for the same  
5 fiscal year, and \$54,124 from the healthcare affordability and  
6 sustainability fee cash fund created in section 25.5-4-402.4 (5)(a), C.R.S.  
7 To implement this act, the department may use this appropriation for  
8 behavioral health fee-for-service payments.

9           (4) For the 2020-21 state fiscal year, the general assembly  
10 anticipates that the department of health care policy and financing will  
11 receive \$350,014 in federal funds for behavioral health fee-for-service  
12 payments to implement this act. The appropriation in subsection (3) of  
13 this section is based on the assumption that the department will receive  
14 this amount of federal funds.

15           (5) For the 2020-21 state fiscal year, \$22,372 is appropriated to  
16 the department of regulatory agencies for use by the division of insurance.  
17 This appropriation is from the division of insurance cash fund created in  
18 section 10-1-103 (3), C.R.S., and is based on an assumption that the  
19 division will require an additional 0.3 FTE. To implement this act, the  
20 division may use this appropriation for personal services.

21           **SECTION 68. Safety clause.** The general assembly hereby finds,  
22 determines, and declares that this act is necessary for the immediate  
23 preservation of the public peace, health, or safety.