

## CHAPTER 182

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**HUMAN SERVICES - BEHAVIORAL HEALTH**

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**HOUSE BILL 22-1281**

BY REPRESENTATIVE(S) Gonzales-Gutierrez and Ricks, Amabile, Bradfield, Michaelson Jenet, Van Beber, Bacon, Benavidez, Bernett, Bird, Boesenecker, Cutter, Duran, Esgar, Exum, Froelich, Herod, Hooton, Jodeh, Kipp, Lindsay, Lontine, McCluskie, McCormick, Mullica, Ortiz, Sirota, Titone, Valdez A., Valdez D., Weissman, Woodrow, Young, Caraveo, McLachlan; also SENATOR(S) Winter and Rankin, Buckner, Danielson, Donovan, Fields, Gonzales, Hansen, Hinrichsen, Jaquez Lewis, Kolker, Lee, Moreno, Pettersen, Rodriguez, Simpson, Story, Zenzinger, Fenberg.

**AN ACT**

**CONCERNING A PROGRAM TO FUND BEHAVIORAL HEALTH-CARE SERVICES, AND, IN CONNECTION THEREWITH, MAKING AN APPROPRIATION.**

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

**SECTION 1. Legislative declaration.** (1) The general assembly declares that it intends to further the goals declared by the behavioral health transformational task force, established by the general assembly in 2021, which includes ensuring that:

- (a) Those with the highest needs get the care they need when they need it;
- (b) People can access a behavioral health-care service when they need it and as early in the continuum as possible;
- (c) People with behavioral health-care needs are connected to services across the behavioral health-care continuum;
- (d) Equitable, culturally responsive, inclusive, effective, and high-quality services are available in all regions across Colorado;
- (e) The state has a trained, qualified, and diverse workforce that is sufficient to meet the needs of Coloradans; and
- (f) There is integration and parity between physical and behavioral health.

(2) The general assembly further finds and declares that:

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

(a) The federal government enacted the "American Rescue Plan Act of 2021" (ARPA), Pub.L. 117-2, pursuant to which Colorado received \$3,828,761,790 to mitigate the fiscal effects stemming from the COVID-19 public health emergency;

(b) Government recipients of ARPA funds may use the funds to provide resources for governments to meet the public health and economic needs of those impacted by the pandemic in their communities. Pursuant to ARPA and subsequent federal regulations, when providing behavioral health-care services, government recipients may presume that the general public was impacted by the pandemic, and they can therefore use ARPA funds to provide a broad range of behavioral health-care services to the public.

(c) The expenditures for the community behavioral health-care continuum gap grant program, which provides grants for programs and services along the behavioral health-care continuum, are considered an allowable use under ARPA and are necessary to respond to the COVID-19 public health emergency; and

(d) The behavioral health-care services and programs and funding for behavioral health facilities and equipment described in this act are important government services.

**SECTION 2.** In Colorado Revised Statutes, **add** part 5 to article 60 of title 27 as follows:

PART 5  
COMMUNITY BEHAVIORAL HEALTH-CARE CONTINUUM  
GAP GRANT PROGRAM

**27-60-501. Definitions.** AS USED IN THIS PART 5, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(1) "BEHAVIORAL HEALTH ADMINISTRATION" OR "BHA" MEANS THE BEHAVIORAL HEALTH ADMINISTRATION ESTABLISHED IN SECTION 27-60-203.

(2) "BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION" MEANS A BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION DESIGNATED BY THE BHA COMMISSIONER AFTER CONSULTATION WITH THE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING AND CONSIDERATION OF THE REGIONAL STRUCTURE THAT SERVES THE MEDICAID POPULATION.

(3) "BEHAVIORAL HEALTH-CARE SERVICES ASSESSMENT TOOL" MEANS THE ASSESSMENT TOOL DESCRIBED IN SECTION 27-60-502 (1)(c) DEVELOPED BY THE BHA TO IDENTIFY REGIONAL GAPS IN BEHAVIORAL HEALTH-CARE SERVICES.

(4) "CARE ACCESS POINT" MEANS A LOCATION AT WHICH A PERSON SEEKING BEHAVIORAL HEALTH CARE CAN RECEIVE CARE COORDINATION.

(5) "COMMUNITY-BASED ORGANIZATION" MEANS A NONPROFIT OR FOR-PROFIT ORGANIZATION THAT PROVIDES BEHAVIORAL HEALTH-CARE SERVICES.

(6) "GRANT PROGRAM" MEANS THE COMMUNITY BEHAVIORAL HEALTH-CARE CONTINUUM GAP GRANT PROGRAM ESTABLISHED IN SECTION 27-60-502.

(7) "LOCAL EDUCATION PROVIDER" MEANS A SCHOOL DISTRICT, A CHARTER SCHOOL AUTHORIZED PURSUANT TO PART 1 OF ARTICLE 30.5 OF TITLE 22, AN INSTITUTE CHARTER SCHOOL AUTHORIZED PURSUANT TO PART 5 OF ARTICLE 30.5 OF TITLE 22, OR A BOARD OF COOPERATIVE SERVICES AS DEFINED IN SECTION 22-5-103.

(8) "LOCAL GOVERNMENT" MEANS A COUNTY, MUNICIPALITY, CITY AND COUNTY, OR LOCAL EDUCATION PROVIDER.

(9) "MEDICATION-ASSISTED TREATMENT" OR "MAT" HAS THE SAME MEANING AS SET FORTH IN SECTION 23-21-803.

(10) "NONPROFIT ORGANIZATION" MEANS AN ORGANIZATION THAT IS EXEMPT FROM TAXATION UNDER SECTION 501 (c)(3) OF THE FEDERAL "INTERNAL REVENUE CODE OF 1986", AS AMENDED.

**27-60-502. Behavioral health-care continuum gap grant program - established - rules.** (1) (a) THERE IS ESTABLISHED IN THE BEHAVIORAL HEALTH ADMINISTRATION THE BEHAVIORAL HEALTH-CARE CONTINUUM GAP GRANT PROGRAM TO PROVIDE GRANTS TO LOCAL GOVERNMENTS, COMMUNITY-BASED ORGANIZATIONS, AND NONPROFIT ORGANIZATIONS FOR PROGRAMS AND SERVICES ALONG THE BEHAVIORAL HEALTH-CARE CONTINUUM IN AREAS OF HIGHEST NEED, INCLUDING CHILDREN-ORIENTED, YOUTH-ORIENTED, AND FAMILY-ORIENTED BEHAVIORAL HEALTH-CARE SERVICES.

(b) (I) THE BEHAVIORAL HEALTH ADMINISTRATION SHALL ADMINISTER THE GRANT PROGRAM. THE BHA SHALL CREATE A GRANT APPLICATION PROCESS AND MAKE THE PROCESS PUBLICLY AVAILABLE ON ITS WEBSITE PRIOR TO ACCEPTING APPLICATIONS. THE BHA SHALL BEGIN ACCEPTING GRANT APPLICATIONS NO LATER THAN DECEMBER 31, 2022.

(II) THE BHA SHALL PROVIDE GRANT APPLICATION SUPPORT TO AN APPLICANT, UPON REQUEST, FROM A GRANT APPLICATION WRITING PROFESSIONAL WHO IS INDEPENDENT FROM THE GRANT PROGRAM.

(III) IN CONNECTION WITH THE REVIEW OF GRANT APPLICATIONS AND AWARDS, THE BHA SHALL SOLICIT INPUT FROM A DIVERSE STAKEHOLDER GROUP THAT REFLECTS THE GEOGRAPHIC AND DEMOGRAPHIC DIVERSITY OF THE ENTIRE STATE, INCLUDING MEMBERS FROM RURAL AND URBAN AREAS, AND MEMBERS OF DIVERSE RACIAL, DISABILITY, AND CULTURAL GROUPS AND OF DIVERSE SEXUAL ORIENTATIONS AND GENDERS.

(c) THE BHA SHALL DEVELOP A BEHAVIORAL HEALTH-CARE SERVICES ASSESSMENT TOOL TO IDENTIFY REGIONAL GAPS IN BEHAVIORAL HEALTH AND SUBSTANCE USE DISORDER SERVICES, UNDERSERVED POPULATIONS, AND UNMET BEHAVIORAL HEALTH NEEDS ON THE BEHAVIORAL HEALTH-CARE SERVICE CONTINUUM. THE BHA SHALL MAKE THE ASSESSMENT TOOL PUBLICLY AVAILABLE ON ITS WEBSITE PRIOR TO ACCEPTING APPLICATIONS FOR A GRANT PURSUANT TO THIS PART 5. THE BHA SHALL MAKE TECHNICAL ASSISTANCE AVAILABLE TO ELIGIBLE

ENTITIES THAT NEED ASSISTANCE USING THE ASSESSMENT TOOL.

(d) IN ADMINISTERING THE GRANT PROGRAM, THE BHA MAY AWARD THE FOLLOWING TYPES OF GRANTS:

(I) COMMUNITY INVESTMENT GRANTS, AS DESCRIBED IN SUBSECTION (2) OF THIS SECTION, TO ADDRESS IDENTIFIED LOCAL BEHAVIORAL HEALTH-CARE NEEDS ALONG THE CONTINUUM OF BEHAVIORAL HEALTH CARE, INCLUDING SERVICES FOR ADULTS OR FAMILIES WITH ACUTE, COMPLEX, OR SEVERE CONDITIONS AND NEEDS; AND

(II) CHILDREN, YOUTH, AND FAMILY SERVICES GRANTS, AS DESCRIBED IN SUBSECTION (3) OF THIS SECTION, TO EXPAND CHILDREN-ORIENTED, YOUTH-ORIENTED, AND FAMILY-ORIENTED BEHAVIORAL HEALTH-CARE SERVICES TO ADDRESS IDENTIFIED LOCAL BEHAVIORAL HEALTH-CARE NEEDS ALONG THE CONTINUUM OF BEHAVIORAL HEALTH CARE, INCLUDING SERVICES FOR CHILDREN, YOUTH, AND FAMILIES WITH ACUTE, COMPLEX, OR SEVERE CONDITIONS AND NEEDS.

**(2) Community investment grants.** (a) AS PART OF THE GRANT PROGRAM, THE BHA SHALL AWARD GRANTS TO INVEST IN AND ADDRESS IDENTIFIED BEHAVIORAL HEALTH-CARE NEEDS IN THE GRANT APPLICANT'S COMMUNITY.

(b) A COMMUNITY-BASED ORGANIZATION, LOCAL GOVERNMENT, FEDERALLY RECOGNIZED INDIAN TRIBE, OR NONPROFIT ORGANIZATION IS ELIGIBLE FOR A COMMUNITY INVESTMENT GRANT.

(c) (I) A COMMUNITY INVESTMENT GRANT AWARD MAY BE USED FOR EVIDENCE-BASED OR EVIDENCE-INFORMED SERVICES ALONG THE BEHAVIORAL HEALTH-CARE CONTINUUM, INCLUDING PREVENTION, TREATMENT, CRISIS SERVICES, RECOVERY, HARM REDUCTION, CARE NAVIGATION AND COORDINATION, TRAUMA RECOVERY, TRAUMA-INFORMED TRAINING, TRAINING ON PROVIDING SERVICES IN A CULTURALLY RESPONSIVE MANNER, TRANSITIONAL HOUSING, SUPPORTIVE HOUSING, AND RECOVERY HOMES. A COMMUNITY INVESTMENT GRANT AWARD MAY ALSO BE USED FOR CAPITAL EXPENDITURES RELATED TO PROVIDING THESE SERVICES, WHICH MAY INCLUDE THE CREATION OR REDESIGN OF MENTAL HEALTH INPATIENT BEDS, EMERGENCY ROOM BEDS FOR MENTAL HEALTH CRISIS PATIENTS, OUTPATIENT MENTAL HEALTH BEDS, AND STEP-DOWN FACILITIES CONNECTED WITH A HOSPITAL. A COMMUNITY INVESTMENT GRANT AWARD MAY ALSO BE USED TO EXPAND CAPACITY FOR EXISTING TREATMENT, PROGRAMS, OR SERVICES WITHIN THE GRANT RECIPIENT'S JURISDICTION OR SERVICE AREA.

(II) A GRANT RECIPIENT THAT IS A PRIMARY CARE PROVIDER, WITHDRAWAL MANAGEMENT PROVIDER, OUTPATIENT SUBSTANCE USE TREATMENT PROVIDER, OR HOSPITAL MAY USE A GRANT AWARD TO CREATE A PROGRAM COMMONLY KNOWN AS "TREATMENT ON DEMAND" TO PREPARE PROVIDERS TO OFFER SAME-DAY ACCESS TO INITIATE MEDICATION-ASSISTED TREATMENT, SUBSTANCE USE COUNSELING, PEER SUPPORT, AND NAVIGATION SERVICES. AS PART OF A TREATMENT-ON-DEMAND PROGRAM, A GRANT AWARD MAY BE USED FOR:

(A) TECHNICAL ASSISTANCE TO REDESIGN ACCESS AND IMPROVE EFFICIENCIES THAT WOULD MAKE TREATMENT ACCESSIBLE ON A SAME-DAY BASIS, INCLUDING EDUCATION OF PROVIDERS ON DETERMINATION OF LEVELS OF CARE AS DESCRIBED

BY THE AMERICAN SOCIETY OF ADDICTION MEDICINE;

(B) DEVELOPING PROTOCOLS AND CREDENTIALING PROVIDERS TO INITIATE PSYCHOPHARMACOLOGICAL TREATMENTS; OR

(C) RECRUITING AND TRAINING PEER SUPPORT PROFESSIONALS TO ACT AS NAVIGATORS AND ADVOCATES FOR INDIVIDUALS AND DEVELOPING PARTNERSHIPS ACROSS LEVELS OF CARE TO FACILITATE TRANSFERS OF CARE FROM HOSPITAL AND WITHDRAWAL MANAGEMENT PROGRAMS TO ONGOING TREATMENT.

**(3) Children, youth, and family services grants.** (a) AS PART OF THE GRANT PROGRAM, THE BHA SHALL AWARD CHILDREN, YOUTH, AND FAMILY SERVICES GRANTS TO EXPAND CHILDREN-ORIENTED, YOUTH-ORIENTED, AND FAMILY-ORIENTED BEHAVIORAL HEALTH-CARE SERVICES WITH THE GOAL OF ESTABLISHING A CARE ACCESS POINT IN EACH BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION.

(b) A COMMUNITY-BASED ORGANIZATION; LOCAL GOVERNMENT; FEDERALLY RECOGNIZED INDIAN TRIBE; LOCAL COLLABORATIVE MANAGEMENT PROGRAMS, AS DESCRIBED IN SECTION 24-1.9-102; LOCAL JUVENILE SERVICES PLANNING COMMITTEE CREATED PURSUANT TO SECTION 19-2.5-302; OR NONPROFIT ORGANIZATION IS ELIGIBLE FOR A CHILDREN, YOUTH, AND FAMILY SERVICES GRANT.

(c) A CHILDREN, YOUTH, AND FAMILY SERVICES GRANT AWARD MAY BE USED FOR:

(I) ESTABLISHING AND OPERATING A CHILDREN-ORIENTED, YOUTH-ORIENTED, AND FAMILY-ORIENTED CARE ACCESS POINT THAT IS PHYSICALLY CONNECTED TO A FAMILY RESOURCE CENTER, AS DEFINED IN SECTION 26-18-102, OR A FACILITY THAT PROVIDES BEHAVIORAL HEALTH-CARE TREATMENT;

(II) CHILDREN-ORIENTED, YOUTH-ORIENTED, AND FAMILY-ORIENTED BEHAVIORAL HEALTH-CARE NAVIGATION AND COORDINATION SERVICES;

(III) EXPANDING EVIDENCE-BASED OR EVIDENCE-INFORMED BEHAVIORAL HEALTH-CARE TREATMENT, INCLUDING SUBSTANCE USE DISORDER TREATMENT, FOR CHILDREN, YOUTH, AND FAMILIES;

(IV) INTENSIVE OUTPATIENT SERVICES, INCLUDING HIGH-FIDELITY WRAPAROUND YOUTH MOBILE RESPONSE AND EXPANDED CAREGIVER INTERVENTIONS; AND

(V) CAPITAL EXPENDITURES RELATED TO PROVIDING THE TREATMENT AND SERVICES DESCRIBED IN THIS SUBSECTION (3)(c).

**27-60-503. Grant program application - criteria - contributing resources - award - rules.** (1) IN ORDER TO RECEIVE A GRANT, AN ENTITY MUST USE THE BEHAVIORAL HEALTH-CARE SERVICES ASSESSMENT TOOL OR A COUNTY, REGIONAL, OR COMMUNITY ASSESSMENT TOOL TO IDENTIFY GAPS IN BEHAVIORAL HEALTH-CARE SERVICES IN THE BEHAVIORAL HEALTH ADMINISTRATIVE SERVICES REGION SERVED BY THE GRANT AWARD AND SUBMIT AN APPLICATION TO THE BHA. AT A MINIMUM, THE APPLICATION MUST INCLUDE:

(a) WHETHER THE GRANT IS A COMMUNITY INVESTMENT GRANT, AS DESCRIBED IN SECTION 27-60-502 (2), OR A CHILDREN, YOUTH, AND FAMILY SERVICES GRANT, AS DESCRIBED IN SECTION 27-60-502 (3);

(b) THE REQUESTED AMOUNT OF THE GRANT AWARD AND A DESCRIPTION OF THE SERVICE THAT WILL BE PROVIDED WITH THE GRANT AWARD;

(c) A DEMONSTRATION OF THE NEED FOR THE SERVICE THAT WILL BE PROVIDED, INCLUDING WHETHER THE SERVICE ADDRESSES A GAP IN SERVICES IDENTIFIED BY THE APPLICANT;

(d) A DEMONSTRATION THAT THE APPLICANT HAS COLLABORATED OR COMMUNICATED WITH RELEVANT COMMUNITY-BASED ORGANIZATIONS AND WITH A LOCAL GOVERNMENT IN WHICH SERVICES WILL BE OFFERED;

(e) THE SOURCE OF CONTRIBUTING FUNDS OR IN-KIND CONTRIBUTING RESOURCES, AS DESCRIBED IN SUBSECTION (3) OF THIS SECTION, OR WHETHER THE APPLICANT IS REQUESTING A WAIVER FROM THE CONTRIBUTING FUNDS OR IN-KIND CONTRIBUTING RESOURCES REQUIREMENT;

(f) WHETHER THE INTENDED USE OF THE GRANT AWARD ALIGNS WITH A REGIONAL OPIOID SETTLEMENT PLAN, IF APPLICABLE, OR A LOCAL PUBLIC HEALTH NEEDS ASSESSMENT FOR THE AREA IN WHICH THE SERVICES WILL BE PROVIDED;

(g) A PLAN TO SUSTAIN THE SERVICES PROVIDED WITH A GRANT AWARD BEYOND THE DURATION OF THE GRANT, IF APPLICABLE;

(h) A DESCRIPTION OF THE APPLICANT'S EXPERIENCE IN PROVIDING CULTURALLY COMPETENT AND GENDER RESPONSIVE SERVICES, AND WHETHER THE APPLICANT IS REPRESENTATIVE OF THE INDIVIDUALS THE APPLICANT SEEKS TO SERVE WITH THE GRANT; AND

(i) ANY OTHER INFORMATION REQUIRED BY THE STATE DEPARTMENT.

(2) THE BHA SHALL ACCEPT AND REVIEW GRANT APPLICATIONS AND AWARD GRANTS. IN AWARDING GRANTS, THE BHA SHALL CONSIDER THE CRITERIA DESCRIBED IN SUBSECTION (1) OF THIS SECTION AND SHALL GIVE PREFERENCE TO APPLICANTS PROVIDING A SERVICE THAT ADDRESSES A GAP IN BEHAVIORAL HEALTH OR SUBSTANCE USE DISORDER SERVICES IDENTIFIED BY THE APPLICANT WITH THE BEHAVIORAL HEALTH-CARE SERVICES ASSESSMENT TOOL.

(3) (a) THE BHA SHALL ONLY AWARD GRANTS TO APPLICANTS THAT OFFER A MONETARY CONTRIBUTION OR IN-KIND CONTRIBUTIONS THAT DIRECTLY SUPPORT THE SERVICES PROVIDED WITH A GRANT AWARD. IN DETERMINING THE AMOUNT OF CONTRIBUTING RESOURCES REQUIRED FOR AN APPLICANT, THE BHA SHALL CONSIDER THE SIZE OF THE APPLICANT ORGANIZATION, INCLUDING AVAILABLE STAFF AND ANNUAL OPERATING BUDGET. THE BHA MAY WAIVE THE CONTRIBUTING RESOURCES REQUIREMENT FOR AN APPLICANT THAT IS REQUESTING A GRANT AWARD OF LESS THAN FIFTY THOUSAND DOLLARS.

(b) IN DETERMINING WHETHER AN APPLICANT HAS IDENTIFIED A GAP IN SERVICES

ON THE BEHAVIORAL HEALTH-CARE SERVICE CONTINUUM, THE BHA SHALL ACCEPT THE RESULTS OF AN ASSESSMENT CONDUCTED BY THE APPLICANT WITH THE BEHAVIORAL HEALTH-CARE SERVICES ASSESSMENT TOOL DEVELOPED BY THE BHA OR A COUNTY, REGIONAL, OR COMMUNITY ASSESSMENT TOOL THAT DEMONSTRATES GAPS IN SERVICES.

(c) A PROGRAM FUNDED BY A GRANT AWARD MUST COMPLY WITH THE FEDERAL "AMERICANS WITH DISABILITIES ACT OF 1990", 42 U.S.C. SEC.12101 ET SEQ., AS AMENDED, AND SERVE INDIVIDUALS WITH A DISABILITY, AS DEFINED IN THE FEDERAL ACT, REGARDLESS OF PRIMARY DIAGNOSIS, CO-OCCURRING CONDITIONS, OR IF THE INDIVIDUAL REQUIRES ASSISTANCE WITH ACTIVITIES OF DAILY LIVING, AS DEFINED IN SECTION 12-270-104.

(4) (a) A GRANT RECIPIENT SHALL SPEND OR OBLIGATE ANY GRANT MONEY BY DECEMBER 31, 2024. ANY MONEY OBLIGATED BY DECEMBER 31, 2024, MUST BE EXPENDED BY DECEMBER 31, 2026.

(b) A GRANT RECIPIENT MAY USE NO MORE THAN TEN PERCENT OF A GRANT AWARD FOR ADMINISTRATIVE COSTS ASSOCIATED WITH RECEIPT OF THE GRANT AWARD.

**27-60-504. Grant program reporting requirements.** (1) EACH GRANT RECIPIENT SHALL SUBMIT A REPORT TO THE BHA FOLLOWING THE EXPIRATION OF THE GRANT TERM. THE REPORT MUST INCLUDE:

(a) INFORMATION ABOUT THE USE OF THE GRANT AWARD, INCLUDING THE SERVICES PROVIDED WITH A GRANT AWARD AND WHERE THOSE SERVICES WERE PROVIDED;

(b) THE AMOUNT OF CONTRIBUTING FUNDS OR IN-KIND CONTRIBUTING RESOURCES THAT SUPPORTED THE SERVICES;

(c) AGGREGATED DEMOGRAPHIC INFORMATION OF THE INDIVIDUALS WHO RECEIVE SERVICES FUNDED WITH A GRANT AWARD;

(d) WHETHER THE RECIPIENT IS CONTINUING TO PROVIDE THE SERVICES, AND ANY OTHER INFORMATION REQUESTED BY THE STATE DEPARTMENT.

(2) (a) IN ITS ANNUAL REPORT TO THE COMMITTEES OF REFERENCE PURSUANT TO THE "STATE MEASUREMENT FOR ACCOUNTABLE, RESPONSIVE, AND TRANSPARENT (SMART) GOVERNMENT ACT" REQUIRED BY SECTION 2-7-203, THE STATE DEPARTMENT SHALL PROVIDE INFORMATION ABOUT THE GRANT PROGRAM, INCLUDING INFORMATION ON THE TYPE OF SERVICES FUNDED WITH A GRANT AWARD AND WHERE THOSE SERVICES WERE PROVIDED.

(b) NOTWITHSTANDING SECTION 24-1-136 (11)(a)(I), THE REPORTING REQUIREMENT IN THIS SUBSECTION (2) CONTINUES INDEFINITELY.

**27-60-505. Grant program funding - requirements - reports.** (1) THE GENERAL ASSEMBLY SHALL APPROPRIATE TO THE STATE DEPARTMENT SEVENTY-FIVE MILLION DOLLARS FROM THE BEHAVIORAL AND MENTAL HEALTH CASH FUND

CREATED IN SECTION 24-75-230 TO IMPLEMENT THE GRANT PROGRAM.

(2) OF THE MONEY APPROPRIATED TO THE STATE DEPARTMENT, THE BHA SHALL AWARD GRANTS IN THE FOLLOWING MANNER:

(a) THIRTY-FIVE MILLION DOLLARS FOR COMMUNITY INVESTMENT GRANTS, AS DESCRIBED IN SECTION 27-60-502 (2); AND

(b) FORTY MILLION DOLLARS FOR CHILDREN, YOUTH, AND FAMILY SERVICES GRANTS, AS DESCRIBED IN SECTION 27-60-502 (3).

(3) (a) THE STATE DEPARTMENT, BHA, AND ANY PERSON WHO RECEIVES MONEY FROM THE BHA, INCLUDING EACH GRANT RECIPIENT, SHALL COMPLY WITH THE COMPLIANCE, REPORTING, RECORD-KEEPING, AND PROGRAM EVALUATION REQUIREMENTS ESTABLISHED BY THE OFFICE OF STATE PLANNING AND BUDGETING AND THE STATE CONTROLLER IN ACCORDANCE WITH SECTION 24-75-226 (5).

(b) TO BE ELIGIBLE TO RECEIVE GRANT MONEY FOR A CAPITAL EXPENDITURE, THE GRANT APPLICANT MUST SUBMIT TO THE BHA A WRITTEN JUSTIFICATION AS SET FORTH IN 31 CFR 35.6 (b)(4) FOR THE CAPITAL EXPENDITURE; EXCEPT THAT THIS REQUIREMENT DOES NOT APPLY IF THE BHA DETERMINES THAT THE WRITTEN JUSTIFICATION IS NOT REQUIRED BASED ON HOW THE EXPENDITURES AUTHORIZED PURSUANT TO THIS PART 5 WILL BE REPORTED TO THE UNITED STATES DEPARTMENT OF THE TREASURY.

**27-60-506. Repeal of part.** THIS PART 5 IS REPEALED, EFFECTIVE JANUARY 31, 2027.

**SECTION 3.** In Colorado Revised Statutes, **add** 27-60-206 as follows:

**27-60-206. Substance use workforce stability grant program - repeal.**

(1) THERE IS ESTABLISHED IN THE BHA THE SUBSTANCE USE WORKFORCE STABILITY GRANT PROGRAM, REFERRED TO IN THIS SECTION AS THE "GRANT PROGRAM". THE BHA SHALL ADMINISTER THE GRANT PROGRAM AND SHALL DEVELOP POLICIES AND PROCEDURES FOR THE GRANT PROGRAM, WHICH MUST INCLUDE A GRANT APPLICATION PROCESS, CRITERIA FOR AWARDING GRANTS AND DETERMINING THE AMOUNT OF A GRANT AWARD, AND THE TIMELINE FOR AWARDING GRANTS AND DISTRIBUTING GRANT MONEY.

(2) A SUBSTANCE USE DISORDER TREATMENT PROVIDER OR A RECOVERY PROVIDER, INCLUDING PROVIDERS THAT SERVE CHILDREN, AND A LOCAL GOVERNMENT, AS DEFINED IN SECTION 27-60-501, IS ELIGIBLE FOR A GRANT. IN ORDER TO RECEIVE A GRANT, A PROVIDER MUST SUBMIT AN APPLICATION TO THE BHA AND MUST PRIORITIZE PROVIDING SERVICES TO VOLUNTARY AND CIVIL CLIENTS.

(3) THE BHA SHALL ACCEPT AND REVIEW GRANT APPLICATIONS AND AWARD GRANTS. THE BHA SHALL PRIORITIZE AWARDING GRANTS TO PROVIDERS THAT OFFER SAME-DAY OR NEXT-DAY APPOINTMENTS, SERVE LOW-INCOME AND MARGINALIZED POPULATIONS, OR INTEND TO EXPAND THE NUMBER OF INDIVIDUALS THEY SERVE.



(4) A GRANT RECIPIENT SHALL USE A GRANT AWARD TO SUPPORT DIRECT CARE STAFF WHO SPEND FIFTY PERCENT OR MORE OF THEIR TIME WORKING WITH CLIENTS. SUPPORTING DIRECT CARE STAFF MAY INCLUDE TEMPORARY SALARY INCREASES, RECRUITMENT AND RETENTION BONUSES, AND OTHER TACTICS THAT SUPPORT STAFF.

(5)(a) THE GENERAL ASSEMBLY SHALL APPROPRIATE TO THE STATE DEPARTMENT FIFTEEN MILLION DOLLARS FROM THE BEHAVIORAL AND MENTAL HEALTH CASH FUND CREATED IN SECTION 24-75-230 FOR THE GRANT PROGRAM.

(b) THE STATE DEPARTMENT, BHA, AND ANY PERSON WHO RECEIVES MONEY FROM THE BHA, INCLUDING EACH GRANT RECIPIENT, SHALL COMPLY WITH THE COMPLIANCE, REPORTING, RECORD-KEEPING, AND PROGRAM EVALUATION REQUIREMENTS ESTABLISHED BY THE OFFICE OF STATE PLANNING AND BUDGETING AND THE STATE CONTROLLER IN ACCORDANCE WITH SECTION 24-75-226 (5).

(6) THIS SECTION IS REPEALED, EFFECTIVE JUNE 30, 2027.

**SECTION 4. Appropriation.** (1) For the 2022-23 state fiscal year, \$90,000,000 is appropriated to the department of human services for use by the behavioral health administration. This appropriation is from the behavioral and mental health cash fund created in section 24-75-230 (2)(a), C.R.S., and is of money the state received from the federal coronavirus state fiscal recovery fund. Any amount appropriated in this section not expended prior to July 1, 2023, is further appropriated to the administration from July 1, 2023, through December 30, 2024, for the same purpose. To implement this act, the administration may use this appropriation as follows:

(a) \$75,000,000 for the behavioral health-care continuum gap grant program, which amount is based on an assumption that the department will require 4.2 FTE in the 2022-23 state fiscal year and 3.8 FTE in the 2023-24 state fiscal year; and

(b) \$15,000,000 for the substance use workforce stability grant program, which amount is based on an assumption that the department will require 0.8 FTE in the 2022-23 state fiscal year and 0.7 FTE in the 2023-24 state fiscal year.

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

Approved: May 18, 2022