

# **Summary of Proposed Bills**

## **Opioid and Other Substance Use Disorders Study Committee**

**Prepared for the Substance Abuse Trend and Response Task Force**  
**November 1, 2019**

The Opioid and Other Substance Use Disorders Study Committee of the Colorado General Assembly heard testimony from stakeholders and convened stakeholder meetings to draft five proposed bills to improve services related to prevention, harm reduction and treatment of substance use disorders, as well as supports for criminal justice response and support services for recovery for individuals with an opioid or other substance use disorder.

The summary of the five proposed bills presented here demonstrates a board range of policy actions informed by stakeholders. Each of the draft bills is available on the web page of the [Study Committee](#).

### **Bill 1: Prevention of Substance Use Disorders**

This bill addresses two areas of prevention.

The bulk of this bill focuses on practices in the health care setting aimed at preventing opioid misuse and ensuring that alternatives to opioids with regard to pain management are available to individuals, and expanding continuing education for opioid prescribers. This also includes authorizing the Department of Regulatory Affairs to add or remove non-controlled substances from the Prescription Drug Monitoring Program (PDMP) if those substances have the potential for abuse or if they interact with a controlled substances and granting access to the PDMP to medical examiner and coroners.

The second area of focus of this bill supports the delivery of prevention services through local public health departments, further expansion of screening, brief intervention and referral to treatment (SBIRT) as a standard of health care, and improving the utilization of evidence-based prevention practices and programs in collaboration with institutions of higher learning.

### **Bill 2: Harm Reduction Substance Use Disorders**

This bill supports harm reduction strategies to promote public health safety related to clean syringe access through pharmacies and removing a regulatory barrier to operating clean syringe exchange programs. The bill also provides for ongoing funding of the harm reduction grant program in the Department of Public Health and Department.

The bill includes a measure that extends civil and criminal immunity for a person who acts in good faith to furnish or administer an opiate antagonist to an individual the person believes to be suffering an opiate-related drug overdose when the opiate antagonist is expired and requires a health insurance carrier to reimburse a hospital if the hospital provides a covered person with an opiate antagonist upon discharge.

### **Bill 3: Substance Use Disorders Treatment in the Criminal Justice System**

This bill requires that individuals with an opioid use disorder that are incarcerated receive a form of medication-assisted treatment and the Department of Corrections and jails are required to ensure that continuity of care is provided prior to release of inmates with an opioid or other substance use disorder.

Several state departments and representatives of local service providers are directed to develop resources for post-release inmates with an opioid or other substance use disorder that provide information to help prepare those individuals for release and reintegration into their communities

Stations and offices of law enforcement and fire protection districts are allowed to receive any controlled substance for disposal, and individuals with an opioid use disorder may request assistance in gaining access to treatment for their disorder.

The bill allows for sealing of arrest and criminal records if a person has entered into or successfully completed a substance use disorders treatment program, and appropriates money to for criminal justice diversion programs.

The bill also provides funding for criminal justice diversion programs.

### **Bill 4: Treatment Opioid & Other Substance Use Disorders**

This bill proposes a variety of measures to improve treatment services for individuals with an opioid of other substance use disorder.

The bill requires insurance carriers to:

- Provide coverage for the treatment of substance use disorders in accordance with the American Society of Addiction Medicine.
- 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.

- 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.

The bill authorizes the commissioner of insurance 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.

The bill requires managed care entities to provide coordination of care for the full continuum of substance use disorder treatment and recovery and to update a community assessments every two years on the sufficiency of substance use disorder services from which a draft community action plan will be prepared.

The bill prohibits denying access to medical or substance use disorder treatment services, including recovery services, to persons who are participating in prescribed medication-assisted treatment provided by a recovery residence and by a managed service organizations and entities with which they contract.

This bill updates state statute with the consolidation of Title 27, Articles 81 and 82 regarding civil commitment for persons with alcohol and substance use disorders and updating language in statute.

Other provisions of the bill include:

- Authorization of a pharmacy to receive an enhanced dispensing fee for the administration of all injectable medications for medication-assisted treatment.
- Commissions a study of the state child care and treatment study and a final report with findings and recommendations concerning gaps in family-centered substance use disorder treatment.
- Increases funding to the Colorado Health Service Corps Fund for loan forgiveness and scholarships for individuals serving in health care workforce shortage areas of Colorado.
- Continues the grant writing program 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.

## **Bill 5: Substance Use Disorder Recovery**

This bill improves services for individuals that are in recovery from an opioid or other substance use disorder, including providing assistance with access to recovery residences, expanding the individual employment placement and support program, creating the recovery support services

grant program for recovery community organizations, and providing individuals in recovery with peer coaching or peer specialist training.

The bill authorizes to the Office of Behavioral Health to manage funds for temporary housing assistance for individuals receiving treatment for the individual's substance use disorder or transitioning out of a residential treatment setting and into recovery.

The bill directs the Center for Research into Substance Use Disorder Prevention, Treatment and Recovery to conduct a study of relapse in recovery to inform a state plan for the delivery of treatment services across the continuum of care. Also, within the Center, the statewide perinatal substance use data linkage project related to the incidence of prenatal substance exposure or related infant and family health and human service outcomes is authorized as an ongoing project.

The bill modifies how child abuse, neglect, or dependency is determined in situations involving alcohol or substance exposure.

The bill also continues the opioid and other substance use disorders study committee (committee) for an additional 4 years, meeting every other year beginning in 2021, and requires the State Substance Abuse Trend and Response Task Force to convene stakeholders to review progress on bills introduced by the study committee and passed by the general assembly and generating policy recommendations related to opioid and other substance use disorders.