# First Regular Session Seventy-third General Assembly STATE OF COLORADO

## **REREVISED**

This Version Includes All Amendments Adopted in the Second House

LLS NO. 21-0261.01 Jane Ritter x4342

**HOUSE BILL 21-1130** 

## **HOUSE SPONSORSHIP**

**Michaelson Jenet and Bradfield,** Amabile, Benavidez, Bernett, Bird, Cutter, Hooton, Jackson, Kipp, Lontine, McLachlan, Mullica, Sirota, Titone, Valdez A., Van Beber, Woodrow, Young

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#### **House Committees**

Public & Behavioral Health & Human Services

### **Senate Committees**

Health & Human Services

## A BILL FOR AN ACT

101 CONCERNING EXPANDING THE COMMUNITY TRANSITION SPECIALIST

102 PROGRAM.

## **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 <a href="http://leg.colorado.gov">http://leg.colorado.gov</a>.)

The bill expands the community transition specialist program (program) by redefining "high-risk individual" to allow more individuals to access program services. The bill also expands facilities that can access program services.

SENATE rd Reading Unamended

SENATE and Reading Unamended April 6, 2021

> HOUSE 3rd Reading Unamended March 16, 2021

HOUSE 2nd Reading Unamended March 12, 2021

1	Be it enacted by the General Assembly of the State of Colorado:
2	SECTION 1. In Colorado Revised Statutes, 27-66.5-102, amend
3	(3)(a) introductory portion, (3)(a)(IV), (3)(a)(V), (3)(c), and (5); repeal
4	(3)(b); and <b>add</b> (3)(a)(VI) and (4.5) as follows:
5	27-66.5-102. Definitions. As used in this article 66.5, unless the
6	context otherwise requires:
7	(3) "High-risk individual" means a person who:
8	(a) Is under Has a significant mental health or substance
9	USE DISORDER, AS EVIDENCED BY:
10	(IV) An emergency commitment pursuant to section 27-81-111;
11	or
12	(V) An involuntary commitment pursuant to section 27-81-112;
13	OR
14	(VI) RECEIVING VOLUNTARY BEHAVIORAL HEALTH SERVICES
15	PURSUANT TO SECTION 27-65-103, 27-81-109, OR 27-81-110; AND
16	(b) Has a significant mental health or substance use disorder; and
17	(c) Is not currently engaged OR ACTIVELY ENROLLED in consistent
18	COMMUNITY-BASED behavioral health treatment.
19	(4.5) "Transition services" include, but are not limited to
20	ONE OR MORE OF THE FOLLOWING SERVICES:
21	(a) ACCESS TO HOUSING OR RESIDENTIAL PROGRAM PLACEMENT;
22	(b) ACCESS TO BEHAVIORAL HEALTH TREATMENT OR BENEFITS;
23	(c) ADVOCACY TO INSURANCE COMPANIES AND PROVIDERS FOR
24	THE APPROPRIATE TYPE AND INTENSITY OF MENTAL HEALTH OR
25	SUBSTANCE USE DISORDER SERVICES;
26	(d) Planning for follow-up services and coordination
7	WITHIN THE REHAVIODAL HEALTH SYSTEM AFTED HOSDITALIZATION OF

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1	DISCHARGE FROM A WITHDRAWAL MANAGEMENT FACILITY, ACUTE
2	TREATMENT SERVICE FACILITY, CRISIS STABILIZATION SERVICE FACILITY,
3	OR A HOSPITAL OR AN EMERGENCY DEPARTMENT FOLLOWING A VISIT FOR
4	BEHAVIORAL HEALTH REASONS;
5	(e) ASSISTANCE WITH PREPARING ADVANCE DIRECTIVES;
6	(f) OBTAINING A REPRESENTATIVE PAYEE OR GUARDIAN;
7	(g) FAMILY SUPPORTIVE SERVICES; OR
8	(h) COMPLIANCE WITH COURT APPEARANCES OR PROBATION.
9	(5) "Transition specialist" means a person who assists high-risk
10	individuals with one or more of the following TRANSITION services.
11	(a) Access to housing or residential program placement;
12	(b) Access to behavioral health treatment or benefits;
13	(c) Advocacy to insurance companies and providers for the
14	appropriate type and intensity of mental health or substance use disorder
15	services;
16	(d) Planning for follow-up services and coordination within the
17	behavioral health system after hospitalization or discharge from a
18	withdrawal management facility or an emergency room following a visit
19	for behavioral health reasons;
20	(e) Assistance with preparing advance directives;
21	(f) Obtaining a representative payee or guardian;
22	(g) Family supportive services; or
23	(h) Compliance with court appearances or probation.
24	SECTION 2. In Colorado Revised Statutes, 27-66.5-103, amend
25	(1), (2), (3), and (6) as follows:
26	27-66.5-103. Community transition specialist program -
27	program requirements - acceptance of referrals - contract for

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services - rules. (1) The community transition specialist program is established in the office of behavioral health. The program must coordinate COORDINATES referrals of high-risk individuals from withdrawal management facilities, FACILITIES PROVIDING ACUTE TREATMENT SERVICES, FACILITIES PROVIDING CRISIS STABILIZATION SERVICES, and hospitals OR EMERGENCY DEPARTMENTS to appropriate transition specialists.

- (2) On or before January 1, 2019, the program must be available statewide, SUBJECT TO AVAILABLE APPROPRIATIONS. The program must have a process to accept referrals for high-risk individuals and coordinate contact between referred high-risk individuals and appropriate transition specialists. To the extent possible, the coordinated contact must take place prior to the release or discharge of the high-risk individual from a facility.
- (3) The program must encourage, but cannot require, withdrawal management facilities, FACILITIES PROVIDING ACUTE TREATMENT SERVICES, FACILITIES PROVIDING CRISIS STABILIZATION SERVICES, and hospitals OR EMERGENCY DEPARTMENTS to contact the program before releasing or discharging a high-risk individual.
- (6) On or before October 1, 2018, The department shall MAY promulgate rules necessary for the implementation of this article 66.5.

**SECTION 3. 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.

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