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Behavioral Health

ISSUE BRIEF | Senate Bills 24-001 and 24-047; House Bills 24-1038, 24-1045, 24-1079, and 24-1217

Background

As behavioral health needs continue to intensify across Colorado and the nation, addressing the state's behavioral health system continues to be a perennial issue at the capitol. This year, the General Assembly took several steps to address program extensions and procedural adjustments affecting specific aspects of behavioral health without undertaking major systemic reform seen in prior years.

Senate Bill (SB) 24-001: Continue Youth Mental Health Services Program

What You Need to Know

This legislation permanently extends the "I Matter" program, which was scheduled to expire on June 30, 2024.

Additional Resources

- <u>SB 24-001 final bill text</u>
- SB 24-001 fiscal note

SB 24-047: Prevention of Substance Use Disorders

What You Need to Know

This legislation takes several actions to prevent substance use disorders. The measures that impact hospitals include:

- Adds gabapentinoids to the Prescription Drug Monitoring Program (PDMP);
- Allows the medical director of a hospital to appoint designees to access the PDMP on behalf of the practitioner; and,
- Establishes processes for optional local public health multidisciplinary overdose fatality review teams. These teams can request medical records from hospitals that hospitals must provide in 10 days. Records subject to the Health Insurance Portability Act (HIPAA) can be shared with these committees. However, substance use disorder records governed by 42 CFR Part 2 require consent from the patient's personal representative.

Additional Resources

- SB 24-047 final bill text
- SB 24-047 fiscal note

For questions or more information, contact Megan Axelrod, CHA director of regulatory policy and federal affairs, at <u>megan.axelrod@cha.com</u>.



House Bill (HB) 24-1038: High Acuity Crisis for Children and Youth

What You Need to Know

The bill requires HCPF and the BHA to develop a system of care for children and youth with complex behavioral needs. The system must include:

- Implementation of a standardized assessment tool;
- Intensive care coordination;
- Expanded supportive services; and,
- Expanded access to foster care

Additional Resources

- HB 24-1038 final bill text
- HB 24-1038 fiscal note

HB 24-1045: Treatment for Substance Use Disorders

What You Need to Know

This legislation:

- Prohibits carriers regulated by the DOI from requiring prior authorization for substance use disorder treatment drugs based solely on their dosage amount;
- Adds substance use disorder treatment to the list of health care or mental health care services that are required to be reimbursed at the same rate for telemedicine as a comparable in person service; and,
- Requires HCPF to seek federal authorization to provide partial hospitalization for substance use disorder with full federal financial participation.

Additional Resources

- HB 24-1045 final bill text
- HB 24-1045 fiscal note



HB 24-1079: Persons Detained in Jail on Emergency Commitment

What You Need to Know

Starting July 1, 2024, the bill prohibits the use of jails for emergency commitments of juveniles. Local law enforcement will now transport those individuals to approved treatment facilities or emergency medical services (EMS) facilities. Each EMS facility that detains a person under protective custody or detains a person on an emergency commitment must provide a quarterly report to the BHA with:

- The total number of persons detained under protective custody and the total number of persons held in the EMS facility on an emergency commitment;
- The total number of days each person was detained or held;
- Whether each person was transferred to another facility, released, or placed on an involuntary commitment; and,
- Whether the EMS facility transferred each person to the local jail to be detained under protective custody or for an emergency commitment and the reason for the transfer.

Additional Resources

- HB 24-1079 final bill text
- HB 24-1079 fiscal note

HB 24-1217: Sharing of Patient Health Care Information

What You Need to Know

- The Office of e-Health Innovation will convene a working group to determine the most effective way to create a centralized digital content repository that allows patients to provide, extend, deny, and revoke consent from sharing their medical data and information between health care providers and family members. There will be a hospital member of the working group.
- By July 1, 2025, the BHA will create a friends and family input form to provide behavioral health providers with information related to a patient receiving mental health or substance use services.
 - Hospitals will be able to share this form if required pursuant to other information blocking requirements.
 - The provider is required to acknowledge receipt of the form, but is not required to disclose additional information.

Additional Resources

- HB 24-1217 final bill text
- HB 24-1217 fiscal note

