

Second Regular Session
Seventy-fourth General Assembly
STATE OF COLORADO

INTRODUCED

LLS NO. 24-0334.01 Chelsea Princell x4335

HOUSE BILL 24-1406

HOUSE SPONSORSHIP

Bird and Taggart, Sirota

SENATE SPONSORSHIP

Bridges and Kirkmeyer, Zenzinger

House Committees
Appropriations

Senate Committees

A BILL FOR AN ACT

101 **CONCERNING THE CREATION OF THE SCHOOL-BASED MENTAL HEALTH**
102 **SUPPORT 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 <http://leg.colorado.gov>.)

Joint Budget Committee. The bill creates the school-based mental health support program (program) in the behavioral health administration (BHA) to provide high-quality training, resources, and implementation and sustainment support for the existing public school educator workforce to provide evidence-based mental health services to students through a contract with an external provider. The program

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

emphasizes supporting schools in rural areas and schools with students who do not have equitable access to mental health care.

No later than January 1, 2025, the bill requires the BHA to contract with an external provider to implement the program no later than the start of the 2025-26 school year.

The bill requires the BHA to collaborate with the external provider to determine the cost of implementing the program in at least 400 public schools by the start of the 2027-28 school year.

The bill requires the general assembly to appropriate \$2.5 million from the general fund to the department of human services for use by the BHA to administer the program. The bill allows the BHA to use up to \$100,000 of the funds to select the external provider.

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

2 **SECTION 1. Legislative declaration.** (1) The general assembly
3 finds and declares that:

4 (a) Young people are experiencing historic levels of mental
5 distress, with suicide reported as the second leading cause of death among
6 youth ages 10 to 24 in 2021, and there are consistently disproportionate
7 rates of suicide among youth in rural areas, youth of color, and other
8 underserved youth. In 2021, Colorado health-care practitioners also
9 declared a state of emergency for youth mental health.

10 (b) Public schools are a natural congregation point and de facto
11 provider of mental health services for many young people, but public
12 schools are often under-resourced and under-equipped to provide
13 high-quality, evidence-based mental health support;

14 (c) While hiring additional mental health practitioners is crucial,
15 Colorado must also better utilize the expertise and relationships of the
16 existing educator workforce currently providing mental health support to
17 youth;

18 (d) Educators and school-based mental health professionals have
19 high rates of attrition because they often do not receive sufficient training

1 and resources to provide suitable care to youth who need mental health
2 support, and, as a result, public schools are often unable to provide
3 adequate mental health support;

4 (e) With the implementation of the sixth through twelfth grade
5 mental health screening program, public schools must be equipped with
6 the appropriate resources to help youth who are in need of mental health
7 support but who are either unable to access, or have exhausted, available
8 resources and external support services and need additional school-based
9 services;

10 (f) In order to better equip the existing public school workforce
11 with evidence-based practices, increase educator efficacy, and reduce
12 burnout, educators must be supported and trained in how to promote
13 mental wellness for youth; provide cognitive behavioral skill-building and
14 mindfulness skill-building for youth who demonstrate additional need for
15 mental health support; provide resources to manage suicide risk; and
16 coordinate care among families, schools, and external providers for youth
17 who have suicidal ideation; and

18 (g) Colorado's rapidly growing youth mental health crisis impacts
19 the state's health-care and education systems and therefore requires a
20 state-funded public health response.

21 (2) (a) Therefore, the general assembly declares that assisting
22 public schools in implementing and sustaining mental health multi-tiered
23 systems of mental health support would greatly benefit Colorado youth.

24 (b) To assist public schools, the general assembly intends to scale
25 a school-based mental health support program to 400 schools by the
26 2027-28 school year.

27 **SECTION 2.** In Colorado Revised Statutes, **add** 27-50-804 as

1 follows:

2 **27-50-804. School-based mental health support program -**
3 **creation - appropriation - definitions - repeal.** (1) AS USED IN THIS
4 SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

5 (a) "COGNITIVE BEHAVIORAL SKILL-BUILDING" MEANS A
6 THEORETICAL FRAMEWORK UNDERLYING A SET OF SKILLS THAT MAY BE
7 TAUGHT TO HELP AN INDIVIDUAL IMPROVE EMOTIONAL DIFFICULTIES
8 RANGING FROM MILD WORRY OR DISAPPOINTMENT TO SEVERE DEPRESSION,
9 ANXIETY, OR OTHER MENTAL ILLNESSES.

10 (b) "EVIDENCE-BASED" MEANS PRACTICES, INTERVENTIONS, OR
11 PROGRAMS THAT ARE SUPPORTED BY EXTENSIVE EMPIRICAL DATA,
12 INCLUDING RANDOMIZED CONTROLLED TRIALS, SUPPORTING THEIR
13 EFFICACY FOR THEIR INTENDED PURPOSE.

14 (c) "HIGH-QUALITY TRAINING" MEANS IN-PERSON OR VIRTUAL
15 TRAINING THAT INCLUDES CONTENT ON THEORY, RATIONALE, AND
16 CONCRETE SKILLS; LEVERAGES DEMONSTRATIONS AND SKILLS PRACTICE
17 WITH FEEDBACK; IS GROUNDED IN THE FIELD OF IMPLEMENTATION
18 SCIENCE; AND TAKES INTO ACCOUNT THE CLINICAL AND ENVIRONMENTAL
19 BARRIERS TO IMPLEMENTATION.

20 (d) "IMPLEMENTATION AND SUSTAINMENT SUPPORT" MEANS
21 PROVIDING IN-PERSON OR VIRTUAL COACHING TO ASSIST PUBLIC SCHOOLS
22 IN PLANNING, EXECUTING, AND REFLECTING, AND IN BUILDING SYSTEMS TO
23 EMBED, PROGRAM PRACTICES IN SCHOOL OPERATIONS, PREFERABLY IN
24 PARTNERSHIP WITH COMMUNITY-BASED OR HOSPITAL-BASED LICENSED
25 MENTAL HEALTH PROVIDERS.

26 (e) "MINDFULNESS" MEANS A FRAMEWORK AND SET OF PRACTICES
27 FOR HELPING AN INDIVIDUAL IMPROVE AWARENESS OF THE INDIVIDUAL'S

1 OWN THOUGHTS, EMOTIONS, PHYSICAL FEELINGS, AND BEHAVIORS TO
2 INCREASE THE INDIVIDUAL'S RESILIENCY IN RESPONSE TO COMMON LIFE
3 EVENTS.

4 (f) "MULTI-TIERED SYSTEMS OF SUPPORT" MEANS A FRAMEWORK
5 FOR ENHANCING THE IMPLEMENTATION OF EVIDENCE-BASED PRACTICES TO
6 ACHIEVE POSITIVE OUTCOMES FOR EVERY STUDENT BY ORGANIZING THE
7 EFFORTS OF EDUCATORS WITHIN SYSTEMS TO BE MORE EFFECTIVE.

8 (g) "PROGRAM" MEANS THE SCHOOL-BASED MENTAL HEALTH
9 SUPPORT PROGRAM CREATED IN SUBSECTION (2) OF THIS SECTION.

10 (2) THERE IS CREATED IN THE BEHAVIORAL HEALTH
11 ADMINISTRATION THE SCHOOL-BASED MENTAL HEALTH SUPPORT PROGRAM
12 TO PROVIDE HIGH-QUALITY TRAINING, RESOURCES, AND IMPLEMENTATION
13 AND SUSTAINMENT SUPPORT FOR THE EXISTING PUBLIC SCHOOL EDUCATOR
14 WORKFORCE TO PROVIDE EVIDENCE-BASED MENTAL HEALTH SERVICES FOR
15 STUDENTS THROUGH A CONTRACT WITH AN EXTERNAL PROVIDER. THE
16 PROGRAM SHALL EMPHASIZE SUPPORTING SCHOOLS IN RURAL AREAS AND
17 SCHOOLS WITH STUDENTS WHO DO NOT HAVE EQUITABLE ACCESS TO
18 MENTAL HEALTH CARE.

19 (3) (a) NO LATER THAN JANUARY 1, 2025, THE BHA SHALL
20 CONTRACT WITH AN EXTERNAL PROVIDER TO BEGIN IMPLEMENTING THE
21 PROGRAM NO LATER THAN THE START OF THE 2025-26 SCHOOL YEAR.

22 (b) IN CONTRACTING WITH AN EXTERNAL PROVIDER, THE BHA
23 SHALL:

24 (I) ESTABLISH A TIMELINE THAT THE EXTERNAL PROVIDER SHALL
25 FOLLOW IN IMPLEMENTING THE PROGRAM;

26 (II) ESTABLISH A PLAN TO EVALUATE THE EFFICACY OF THE
27 PROGRAM ACROSS SCHOOL TYPES AND STUDENT POPULATIONS;

1 (III) DETERMINE, IN CONSULTATION WITH THE EXTERNAL
2 PROVIDER, PERIODIC DATES ON WHICH TO PROVIDE FUNDING TO THE
3 EXTERNAL PROVIDER IN ORDER FOR THE EXTERNAL PROVIDER TO MAKE
4 NECESSARY PURCHASES AND INVESTMENTS TO IMPLEMENT THE PROGRAM;
5 AND

6 (IV) COLLABORATE WITH THE EXTERNAL PROVIDER TO DETERMINE
7 THE COST OF IMPLEMENTING THE PROGRAM IN AT LEAST FOUR HUNDRED
8 PUBLIC SCHOOLS BY THE START OF THE 2027-28 SCHOOL YEAR.

9 (4) (a) AN INTERESTED EXTERNAL PROVIDER MUST APPLY FOR THE
10 CONTRACT IN THE MANNER PRESCRIBED BY THE BHA.

11 (b) THE BHA SHALL SELECT AN EXTERNAL PROVIDER THAT:

12 (I) DOES NOT HAVE LICENSING AGREEMENTS THAT PROHIBIT THE
13 USE OF CURRICULA OR RESOURCES THAT A SCHOOL DISTRICT ALREADY
14 USES OR INTENDS TO USE IN THE FUTURE; AND

15 (II) HAS BEEN SUBJECT TO EXTERNAL, THIRD-PARTY EVALUATIONS
16 THAT INDICATE ITS EFFICACY AMONG SEVERAL DIFFERENT SCHOOL TYPES
17 AND WITH SEVERAL DIFFERENT STUDENT SUBPOPULATIONS.

18 (c) WHEN SELECTING AN EXTERNAL PROVIDER, THE BHA SHALL
19 CONSIDER WHETHER AN APPLICANT IS ABLE TO:

20 (I) PROVIDE HIGH-QUALITY TRAINING, RESOURCES, AND
21 IMPLEMENTATION AND SUSTAINMENT SUPPORT ACROSS ALL THREE TIERS
22 OF THE MULTI-TIERED SYSTEMS OF SUPPORT, WHICH INCLUDE:

23 (A) CLASSROOM-BASED MENTAL WELLNESS AND RESILIENCY
24 SKILLS FOR STUDENTS;

25 (B) COGNITIVE BEHAVIORAL SKILL-BUILDING AND MINDFULNESS
26 SKILL-BUILDING FOR ANXIETY OR DEPRESSION FOR YOUTH WHO
27 DEMONSTRATE AN ADDITIONAL NEED FOR MENTAL HEALTH SUPPORT; AND

1 (C) RESOURCES AND TRAINING TO MANAGE SUICIDE RISK AND
2 COORDINATE CARE AMONG FAMILIES, SCHOOLS, AND EXTERNAL
3 PROVIDERS FOR YOUTH WHO ARE AT RISK OF SUICIDE; AND

4 (II) IN CONSIDERATION OF LOCAL CONTROL, FLEXIBLY PARTNER
5 WITH SCHOOL DISTRICTS TO ENABLE SCHOOL DISTRICTS TO DECIDE WHICH
6 TIERS FROM AMONG THE MENTAL HEALTH MULTI-TIERED SYSTEMS OF
7 SUPPORT TO IMPLEMENT; AND

8 (III) USE EVIDENCE-BASED MENTAL HEALTH PRACTICES THAT
9 HAVE BEEN SUBJECT TO EXTERNAL EVALUATION, RANDOMIZED
10 CONTROLLED TRIALS, AND PEER REVIEW.

11 (5) IN SELECTING THE EXTERNAL PROVIDER, THE BHA SHALL
12 PRIORITIZE APPLICANTS THAT:

13 (a) ARE A NOT-FOR-PROFIT ENTITY;

14 (b) INCUR ONE-TIME COSTS AND DO NOT REQUIRE RECURRING OR
15 ADDITIONAL EXPENSES PAID FOR BY THE BHA BEYOND THE FIRST YEAR OF
16 IMPLEMENTATION;

17 (c) HAVE A DEMONSTRATED HISTORY OF PARTNERSHIPS, AND A
18 CLEAR STRATEGY FOR BUILDING FUTURE PARTNERSHIPS, WITH COMMUNITY
19 OR HOSPITAL-BASED PROVIDERS TO ASSIST PUBLIC SCHOOLS IN
20 IMPLEMENTING MENTAL HEALTH SUPPORTS FOR STUDENTS; AND

21 (d) HAVE A DEMONSTRATED HISTORY OF FUNDING INTERNAL AND
22 EXTERNAL EVALUATIONS OF THE EFFICACY OF THE EXTERNAL PROVIDER'S
23 PROGRAM IN PARTNERSHIP WITH INSTITUTIONS OF HIGHER EDUCATION OR
24 ORGANIZATIONS THAT HAVE SIMILAR SKILLS IN CONDUCTING RANDOMIZED
25 CONTROLLED TRIALS AND OTHER QUANTITATIVE AND QUALITATIVE
26 EVALUATION TECHNIQUES.

27 (6) (a) FOR THE 2024-25 STATE FISCAL YEAR, THE GENERAL

1 ASSEMBLY SHALL APPROPRIATE TWO MILLION FIVE HUNDRED THOUSAND
2 DOLLARS FROM THE GENERAL FUND TO THE DEPARTMENT OF HUMAN
3 SERVICES FOR USE BY THE BHA TO ADMINISTER THE PROGRAM.

4 (b) THE BHA MAY USE UP TO ONE HUNDRED THOUSAND DOLLARS
5 OF THE TOTAL APPROPRIATION TO ADMINISTER THE APPLICATION AND
6 SELECTION PROCESS DESCRIBED IN SUBSECTIONS (4) AND (5) OF THIS
7 SECTION.

8 (7) THIS SECTION IS REPEALED, EFFECTIVE JULY 1, 2028.

9 **SECTION 3. Safety clause.** The general assembly finds,
10 determines, and declares that this act is necessary for the immediate
11 preservation of the public peace, health, or safety or for appropriations for
12 the support and maintenance of the departments of the state and state
13 institutions.