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

# **REREVISED**

This Version Includes All Amendments Adopted in the Second House

LLS NO. 17-0148.01 Jane Ritter x4342

SENATE BILL 17-019

#### SENATE SPONSORSHIP

Martinez Humenik,

## **HOUSE SPONSORSHIP**

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#### **Senate Committees**

Judiciary Appropriations

#### **House Committees**

Health, Insurance, & Environment Appropriations

### A BILL FOR AN ACT

101	CONCERNING INCREASING MEDICATION CONSISTENCY FOR PERSONS
102	WITH MENTAL ILLNESS IN THE CRIMINAL AND JUVENILE JUSTICE
103	SYSTEMS, AND, IN CONNECTION THEREWITH, MAKING AN
104	APPROPRIATION.

# **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/.)

Legislative Oversight Committee Concerning the Treatment of Persons with Mental Illness in the Criminal and Juvenile Justice Systems. The bill implements recommendations from the task force

HOUSE Amended 3rd Reading May 10, 2017

HOUSE Amended 2nd Reading May 9, 2017

SENATE Amended 3rd Reading May 8, 2017

SENATE Amended 2nd Reading May 5, 2017 concerning the treatment of persons with mental illness in the criminal and juvenile justice systems and the medication consistency work group of the behavioral health transformation council to promote increased medication consistency for persons with mental illness in the criminal and juvenile justice systems. The recommendations include:

- Requiring the unit and office within the department of human services that administers behavioral health programs (OBH), including those related to mental health and substance use, and the department of corrections to promulgate rules that require providers under each department's authority to use an agreed upon medication formulary (formulary) by mental health providers and justice system providers (providers);
- ! Requiring OBH to conduct annual and biannual reviews of the formulary to address any urgent concerns related to the formulary, update the formulary, and ensure compliance with the medicaid formulary;
- ! Requiring the department of corrections, county jails, community mental health centers, the division of youth corrections, and other providers to share patient-specific mental health care and treatment information, provided federal and state confidentiality requirements are met;
- ! Requiring OBH and relevant providers to develop a plan for electronically sharing patient-specific mental health care and treatment information across systems;
- ! Requiring OBH to encourage providers to utilize cooperative purchasing for the formulary to maximize statewide cost savings;
- ! Encouraging the pharmaceutical cooperative purchasing entity to include an ongoing drug utilization review process;
- ! Requiring OBH to investigate and develop options for collaboration with local county jails to coordinate medication purchasing. Based on that information, the behavioral health transformation council shall develop a medication purchasing plan on or before July 1, 2017; and
- Requiring the department of human services and the department of corrections to report progress on the implementation and use of the medication formulary and cooperative purchasing as part of each department's "State Measurement for Accountable, Responsive, and Transparent (SMART) Government Act" hearing, beginning in January 2018 and annually thereafter.

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1	Be it enacted by the General Assembly of the State of Colorado:
2	SECTION 1. In Colorado Revised Statutes, add article 70 to title
3	27 as follows:
4	ARTICLE 70
5	Medication Consistency for <b>Individuals with</b>
6	<b>Behavioral or Mental Health Disorders</b> in
7	the Criminal and Juvenile Justice Systems
8	<b>27-70-101.</b> Legislative declaration. (1) The General Assembly
9	FINDS AND DECLARES THAT:
10	(a) THE LACK OF MEDICATION CONSISTENCY FOR INDIVIDUALS
11	WITH BEHAVIORAL OR MENTAL HEALTH DISORDERS WHO ARE INVOLVED
12	IN THE CRIMINAL AND JUVENILE JUSTICE SYSTEMS CREATES ADDITIONAL,
13	OFTEN SERIOUS, PROBLEMS FOR THESE INDIVIDUALS;
14	(b) It is critical that the state increase the likelihood
15	THAT A BROAD SPECTRUM OF EFFECTIVE MEDICATIONS, INCLUDING
16	PSYCHOTROPIC MEDICATIONS, ARE AVAILABLE TO THESE INDIVIDUALS,
17	REGARDLESS OF SETTING OR SERVICE PROVIDER;
18	(c) By working cooperatively with the criminal and
19	JUVENILE JUSTICE SYSTEMS AND MENTAL HEALTH SERVICE PROVIDERS,
20	THE STATE CAN HELP ENSURE MEDICATION CONSISTENCY AND ALSO
21	DECREASE OVERALL STATE COSTS THROUGH THE USE OF A COMMON AND
22	AGREED UPON MEDICATION FORMULARY AND COOPERATIVE PURCHASING;
23	(d) THE MEDICATION CONSISTENCY WORK GROUP OF THE
24	BEHAVIORAL HEALTH TRANSFORMATION COUNCIL IDENTIFIED MENTAL
25	HEALTH MEDICATIONS THAT ARE ESSENTIAL AND PREFERRED FOR A BASIC
26	MEDICATION FORMULARY THAT COULD BE USED ACROSS ALL PUBLIC
2.7	SYSTEMS TO INCREASE MEDICATION CONTINUITY FOR INDIVIDUALS WITH

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1	BEHAVIORAL OR MENTAL HEALTH DISORDERS IN THE CRIMINAL AND
2	JUVENILE JUSTICE SYSTEMS; AND
3	(e) INCREASING INFORMATION SHARING ACROSS SYSTEMS AND
4	SERVICE PROVIDERS ABOUT THE IMPORTANCE OF MEDICATION
5	CONSISTENCY AND THE USE OF A COMMON AND AGREED UPON MEDICATION
6	FORMULARY AND COOPERATIVE PURCHASING WILL RESULT IN LONG-TERM
7	BENEFITS FOR THE STATE AND FOR <u>INDIVIDUALS WITH BEHAVIORAL OR</u>
8	MENTAL HEALTH DISORDERS WHO ARE INVOLVED IN THE CRIMINAL AND
9	JUVENILE JUSTICE SYSTEMS.
10	<b>27-70-102. Definitions.</b> As used in this <u>article 70,</u> unless the
11	CONTEXT OTHERWISE REQUIRES:
12	(1) "DEPARTMENT" MEANS THE DEPARTMENT OF HUMAN SERVICES
13	CREATED IN SECTION 26-1-105.
14	(2) "FACILITY" MEANS A FEDERALLY QUALIFIED HEALTH CARE
15	CENTER, CLINIC, COMMUNITY MENTAL HEALTH CENTER OR CLINIC,
16	INSTITUTION, ACUTE TREATMENT UNIT, JAIL, FACILITY OPERATED BY THE
17	DEPARTMENT OF CORRECTIONS, OR A FACILITY OPERATED BY THE DIVISION
18	OF YOUTH CORRECTIONS.
19	(3) "MEDICATION FORMULARY" MEANS THE MEDICATION
20	FORMULARY ESTABLISHED PURSUANT TO SECTION 27-70-103 FOR USE BY
21	PROVIDERS.
22	(4) "OFFICE" MEANS THE OFFICE OF BEHAVIORAL HEALTH IN THE
23	DEPARTMENT OF HUMAN SERVICES.
24	(5) "PROVIDER" MEANS ANY PERSON, FACILITY, OR GOVERNMENT
25	ENTITY RESPONSIBLE FOR PROVIDING MENTAL HEALTH SERVICES RELATED
26	TO THE CARE AND TREATMENT OF <u>AN INDIVIDUAL WITH BEHAVIORAL OR</u>
27	MENTAL HEALTH DISORDERS WHO IS OR WAS INVOLVED WITH THE

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2	<del></del>
3	27-70-103. Medication consistency for individuals with
4	behavioral or mental health disorders in the criminal and juvenile
5	justice systems - medication formulary - cooperative purchasing -
6	reporting - rules. (1) (a) Beginning December 1, 2017, the
7	DEPARTMENT OF HUMAN SERVICES IN CONSULTATION WITH THE
8	DEPARTMENT OF CORRECTIONS SHALL PROMULGATE RULES THAT REQUIRE
9	PROVIDERS UNDER EACH DEPARTMENT'S AUTHORITY TO USE A
10	MEDICATION FORMULARY THAT HAS BEEN DEVELOPED COLLABORATIVELY
11	BY DEPARTMENTS, AGENCIES, AND PROVIDERS. PUBLIC HOSPITALS AND
12	LICENSED PRIVATE HOSPITALS MAY ALSO, AT THEIR DISCRETION.
13	PARTICIPATE IN THE MEDICATION FORMULARY. USING CONSULTING
14	SERVICES AS NECESSARY, THE DEPARTMENTS SHALL ALSO DEVELOP
15	PROCESSES FOR EDUCATION AND MARKETING RELATED TO INFORMATION
16	REGARDING THE MEDICATION FORMULARY AND COOPERATIVE
17	PURCHASING OPPORTUNITIES FOR FACILITIES AND PROVIDERS. THE
18	PROCESSES FOR EDUCATION AND MARKETING REQUIRED PURSUANT TO
19	THIS SUBSECTION (1) SHALL BE COMPLETED ON OR BEFORE DECEMBER 1.
20	<u>2017.</u>
21	(b) For the sole purpose of ensuring medication
22	CONSISTENCY FOR PERSONS WITH MENTAL HEALTH DISORDERS IN THE
23	CRIMINAL AND JUVENILE JUSTICE SYSTEMS, THE DEPARTMENT OF
24	CORRECTIONS, COUNTIES, THE DIVISION OF YOUTH CORRECTIONS,
25	COMMUNITY MENTAL HEALTH CENTERS, AND OTHER PROVIDERS SHALL
26	SHARE PATIENT-SPECIFIC MENTAL HEALTH AND TREATMENT INFORMATION.
27	ALL SUCH INFORMATION SHARING MUST COMPLY WITH CONFIDENTIALITY

CRIMINAL OR JUVENILE JUSTICE SYSTEM.

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2	UNDERSTANDING BETWEEN PROVIDERS, SET FORTH IN THE FEDERAL
3	"HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996",
4	45 CFR PARTS 2, 160, 162, AND 164.
5	(2) Beginning July 1, 2018, the office shall have the
6	FOLLOWING DUTIES AND RESPONSIBILITIES, SUBJECT TO AVAILABLE
7	APPROPRIATIONS:
8	(a) On or before <u>September</u> 1, 2018, and every <u>September</u> 1
9	OF EVERY EVEN-NUMBERED YEAR THEREAFTER, THE OFFICE SHALL
10	CONDUCT A REVIEW OF THE MEDICATION FORMULARY TO ADDRESS ANY
11	URGENT CONCERNS RELATED TO THE FORMULARY AND TO PROPOSE
12	UPDATES TO THE FORMULARY. DURING THIS REVIEW, THE OFFICE SHALL
13	ALSO CREATE THE APPROPRIATE NOTIFICATION PROCESS FOR UPDATES TO
14	THE FORMULARY.
15	(b) On or before July 1, 2019, and every two years
16	THEREAFTER AS NECESSARY, THE OFFICE SHALL CONDUCT A REVIEW OF
17	THE MEDICATION FORMULARY TO UPDATE THE MEDICATION FORMULARY
18	AND ENSURE COMPLIANCE WITH THE MEDICAID FORMULARY USED BY THE
19	DEPARTMENT OF HEALTH CARE POLICY AND FINANCING.
20	<b></b>
21	(c) On or before <u>September 1, 2018</u> , the <u>office</u> , in
22	COLLABORATION WITH THE OFFICE OF INFORMATION TECHNOLOGY, THE
23	OFFICE OF E-HEALTH INNOVATION, THE DEPARTMENT OF HEALTH CARE
24	POLICY AND FINANCING, THE DEPARTMENT OF PUBLIC SAFETY, THE
25	DEPARTMENT OF CORRECTIONS, AND OTHER AGENCIES AS APPROPRIATE,
26	SHALL DEVELOP A PLAN BY WHICH THE PATIENT-SPECIFIC INFORMATION
27	REQUIRED BY SUBSECTION (1)(b) OF THIS SECTION CAN BE SHARED

REQUIREMENTS, INCLUDING ANY NECESSARY MEMORANDUMS OF

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1	ELECTRONICALLY, WHILE STILL IN COMPLIANCE WITH CONFIDENTIALITY
2	REQUIREMENTS, INCLUDING ANY NECESSARY MEMORANDUMS OF
3	UNDERSTANDING BETWEEN PROVIDERS, SET FORTH IN THE FEDERAL
4	"HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996",
5	45 CFR parts 2, 160, 162, and 164.
6	(c) (I) The office shall encourage providers that have
7	BEEN GRANTED PURCHASING AUTHORITY BY THE DEPARTMENT OF
8	PERSONNEL PURSUANT TO SECTION 24-102-204 TO UTILIZE COOPERATIVE
9	PURCHASING FOR THE MEDICATION FORMULARY, AS AUTHORIZED
10	PURSUANT TO SECTION 24-110-201, UNLESS THE PROVIDER CAN OBTAIN
11	THE MEDICATION ELSEWHERE AT A LOWER COST. THE USE OF
12	COOPERATIVE PURCHASING MAY, AND IS ENCOURAGED TO, INCLUDE
13	EXTERNAL PROCUREMENT ACTIVITY, AS DEFINED IN SECTION 24-110-101
14	(2), IF THE EXTERNAL PROCUREMENT ACTIVITY AGGREGATES PURCHASING
15	VOLUME TO NEGOTIATE DISCOUNTS WITH MANUFACTURERS,
16	DISTRIBUTORS, AND OTHER VENDORS.
17	(II) ANY EXTERNAL PROCUREMENT ACTIVITY, AS DEFINED IN
18	SECTION 24-110-101 (2), USED BY PROVIDERS FOR PURPOSES OF THIS
19	$\underline{\text{ARTICLE } 70} \text{ is encouraged to include an ongoing drug utilization}$
20	REVIEW PROCESS. THE PURPOSE OF THE REVIEW PROCESS IS TO HELP
21	ENSURE A STRUCTURED, ONGOING REVIEW OF HEALTH CARE PROVIDER
22	PRESCRIBING, PHARMACIST  DISPENSING, AND  PATIENT  USE  OF  MEDICATION.
23	THE REVIEW MUST INCLUDE A COMPREHENSIVE ANALYSIS OF PATIENTS'
24	PRESCRIPTION AND MEDICATION DATA TO HELP ENSURE APPROPRIATE
25	MEDICATION DECISION-MAKING AND POSITIVE PATIENT OUTCOMES BY
26	PROVIDING EDUCATIONAL FEEDBACK TO PROVIDERS ON APPROPRIATE
27	MEDICATION UTILIZATION.

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1	(d) The <u>office</u> shall investigate and develop options for
2	COLLABORATION WITH LOCAL COUNTY JAILS TO COORDINATE MEDICATION
3	PURCHASING. BASED ON THE INFORMATION FROM THE OFFICE, THE
4	BEHAVIORAL HEALTH TRANSFORMATION COUNCIL, ESTABLISHED IN
5	SECTION 27-61-102, SHALL DEVELOP A MEDICATION PURCHASING PLAN ON
6	OR BEFORE <u>September 1, 2018.</u>
7	(3) (a) Beginning in January 2019, and every January
8	THEREAFTER, THE DEPARTMENT OF HUMAN SERVICES AND THE
9	DEPARTMENT OF CORRECTIONS SHALL REPORT PROGRESS ON THE
10	IMPLEMENTATION AND USE OF THE MEDICATION FORMULARY AND
11	COOPERATIVE PURCHASING AS PART OF EACH DEPARTMENT'S "STATE
12	MEASUREMENT FOR ACCOUNTABLE, RESPONSIVE, AND TRANSPARENT
13	(SMART) GOVERNMENT ACT" HEARING REQUIRED BY SECTION 2-7-203.
14	EACH DEPARTMENT SHALL MAKE SUCH REPORTS TO THE JOINT HEALTH
15	AND HUMAN SERVICES COMMITTEE AND THE JOINT JUDICIARY COMMITTEE,
16	OR ANY SUCCESSOR COMMITTEES.
17	(b) This section is exempt from the provisions of section
18	24-1-136 (11), AND THE PERIODIC REPORTING REQUIREMENT OF THAT
19	SECTION SHALL REMAIN IN EFFECT UNTIL CHANGED BY THE GENERAL
20	ASSEMBLY ACTING BY BILL.
21	<b>SECTION 2.</b> Appropriation. (1) For the 2017-18 state fiscal
22	year, \$26,000 is appropriated to the department of human services. This
23	appropriation is from the general fund. To implement this act, the
24	department may use this appropriation as follows:
25	(a) \$24,000 for use by the office of behavioral health for personal
26	services; and
27	(b) \$2,000 for use by the office of behavioral health for operating

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### expenses.

section <u>3.</u> Act subject to petition - effective date. This act takes effect at 12:01 a.m. on the day following the expiration of the ninety-day period after final adjournment of the general assembly (August 9, 2017, if adjournment sine die is on May 10, 2017); except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within such period, then the act, item, section, or part will not take effect unless approved by the people at the general election to be held in November 2018 and, in such case, will take effect on the date of the official declaration of the vote thereon by the governor.

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