

NOTE: This bill has been prepared for the signatures of the appropriate legislative officers and the Governor. To determine whether the Governor has signed the bill or taken other action on it, please consult the legislative status sheet, the legislative history, or the Session Laws.



SENATE BILL 13-266

BY SENATOR(S) Aguilar and Nicholson, Carroll, Giron, Guzman, Jahn, Kefalas, Kerr, Newell, Ulibarri, Todd, Hudak, Roberts, Heath, Hodge, Jones, Schwartz, Steadman, Tochtrop, Morse;
also REPRESENTATIVE(S) Kraft-Tharp and Young, McCann, Fields, Fischer, Ginal, Hamner, Hullinghorst, Labuda, Lebsock, Moreno, Peniston, Primavera, Rosenthal, Salazar, Schafer, Singer, Tyler.

CONCERNING A REQUEST FOR PROPOSALS PROCESS TO CREATE A COORDINATED BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM FOR COMMUNITIES THROUGHOUT THE STATE, AND, IN CONNECTION THEREWITH, MAKING AN APPROPRIATION.

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

SECTION 1. In Colorado Revised Statutes, **add** 27-60-103 as follows:

27-60-103. Behavioral health crisis response system - services - request for proposals - criteria - reporting - rules - definitions.
(1) (a) ON OR BEFORE SEPTEMBER 1, 2013, THE STATE DEPARTMENT SHALL ISSUE A STATEWIDE REQUEST FOR PROPOSALS TO ENTITIES WITH THE CAPACITY TO CREATE A COORDINATED AND SEAMLESS BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM TO PROVIDE CRISIS INTERVENTION SERVICES, AS

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

DEFINED IN SUBSECTION (7) OF THIS SECTION, FOR COMMUNITIES THROUGHOUT THE STATE. THE STATE DEPARTMENT SHALL COLLABORATE WITH THE BEHAVIORAL HEALTH TRANSFORMATION COUNCIL, CREATED IN SECTION 27-61-102, TO ENSURE THAT SERVICES RESULTING FROM THE REQUEST FOR PROPOSALS ARE ALIGNED THROUGHOUT THE SYSTEM, INTEGRATED, AND COMPREHENSIVE. SEPARATE PROPOSALS MAY BE SOLICITED AND ACCEPTED FOR EACH OF THE FIVE COMPONENTS LISTED IN PARAGRAPH (b) OF THIS SUBSECTION (1). THE BEHAVIORAL HEALTH CRISIS SYSTEM CREATED THROUGH THIS REQUEST FOR PROPOSALS PROCESS MUST BE BASED ON THE FOLLOWING PRINCIPLES:

- (I) CULTURAL COMPETENCE;
- (II) STRONG COMMUNITY RELATIONSHIPS;
- (III) THE USE OF PEER SUPPORT;
- (IV) THE USE OF EVIDENCE-BASED PRACTICES;
- (V) BUILDING ON EXISTING FOUNDATIONS WITH AN EYE TOWARD INNOVATION;
- (VI) UTILIZATION OF AN INTEGRATED SYSTEM OF CARE; AND
- (VII) OUTREACH TO STUDENTS THROUGH SCHOOL-BASED CLINICS.

(b) THE COMPONENTS OF THE BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM CREATED THROUGH THIS REQUEST FOR PROPOSAL PROCESS MUST REFLECT A CONTINUUM OF CARE FROM CRISIS RESPONSE THROUGH STABILIZATION AND SAFE RETURN TO THE COMMUNITY, WITH ADEQUATE SUPPORT FOR TRANSITIONS TO EACH STAGE. SPECIFIC COMPONENTS INCLUDE:

(I) A TWENTY-FOUR-HOUR TELEPHONE CRISIS SERVICE THAT IS STAFFED BY SKILLED PROFESSIONALS WHO ARE CAPABLE OF ASSESSING CHILD, ADOLESCENT, AND ADULT CRISIS SITUATIONS AND MAKING THE APPROPRIATE REFERRALS;

(II) WALK-IN CRISIS SERVICES AND CRISIS STABILIZATION UNITS WITH THE CAPACITY FOR IMMEDIATE CLINICAL INTERVENTION, TRIAGE, AND STABILIZATION. THE WALK-IN CRISIS SERVICES AND CRISIS STABILIZATION

UNITS MUST EMPLOY AN INTEGRATED HEALTH MODEL BASED ON EVIDENCE-BASED PRACTICES THAT CONSIDER AN INDIVIDUAL'S PHYSICAL AND EMOTIONAL HEALTH, ARE A PART OF A CONTINUUM OF CARE, AND ARE LINKED TO MOBILE CRISIS SERVICES AND CRISIS RESPITE SERVICES.

(III) MOBILE CRISIS SERVICES AND UNITS THAT ARE LINKED TO THE WALK-IN CRISIS SERVICES AND CRISIS RESPITE SERVICES AND THAT HAVE THE ABILITY TO INITIATE A RESPONSE IN A TIMELY FASHION TO A BEHAVIORAL HEALTH CRISIS;

(IV) RESIDENTIAL AND RESPITE CRISIS SERVICES THAT ARE LINKED TO THE WALK-IN CRISIS SERVICES AND CRISIS RESPITE SERVICES AND THAT INCLUDE A RANGE OF SHORT-TERM CRISIS RESIDENTIAL SERVICES, INCLUDING BUT NOT LIMITED TO COMMUNITY LIVING ARRANGEMENTS; AND

(V) A PUBLIC INFORMATION CAMPAIGN.

(2) THE STATE DEPARTMENT SHALL COLLABORATE WITH THE COMMITTEE OF INTERESTED STAKEHOLDERS ESTABLISHED IN SUBSECTION (3) OF THIS SECTION TO DEVELOP THE REQUEST FOR PROPOSALS, INCLUDING ELIGIBILITY AND AWARD CRITERIA. PRIORITY MAY BE GIVEN TO ENTITIES THAT HAVE DEMONSTRATED PARTNERSHIPS WITH COLORADO-BASED RESOURCES. PROPOSALS WILL BE EVALUATED ON, AT A MINIMUM, AN APPLICANT'S ABILITY, RELATIVE TO THE SPECIFIC COMPONENT INVOLVED, TO:

(a) DEMONSTRATE INNOVATION BASED ON EVIDENCE-BASED PRACTICES THAT SHOW EVIDENCE OF COLLABORATION WITH EXISTING SYSTEMS OF CARE TO BUILD ON CURRENT STRENGTHS AND MAXIMIZE RESOURCES;

(b) COORDINATE CLOSELY WITH COMMUNITY MENTAL HEALTH ORGANIZATIONS THAT PROVIDE SERVICES REGARDLESS OF THE SOURCE OF PAYMENT, SUCH AS BEHAVIORAL HEALTH ORGANIZATIONS, COMMUNITY MENTAL HEALTH CENTERS, REGIONAL CARE COLLABORATIVE ORGANIZATIONS, SUBSTANCE USE TREATMENT PROVIDERS, AND MANAGED SERVICE ORGANIZATIONS;

(c) SERVE INDIVIDUALS REGARDLESS OF THEIR ABILITY TO PAY;

(d) BE PART OF A CONTINUUM OF CARE;

- (e) UTILIZE PEER SUPPORTS;
- (f) INCLUDE KEY COMMUNITY PARTICIPANTS;
- (g) DEMONSTRATE A CAPACITY TO MEET THE DEMAND FOR SERVICES;
- (h) UNDERSTAND AND PROVIDE SERVICES THAT ARE SPECIALIZED FOR THE UNIQUE NEEDS OF CHILD AND ADOLESCENT PATIENTS; AND
- (i) REFLECT AN UNDERSTANDING OF THE DIFFERENT RESPONSE MECHANISMS UTILIZED BETWEEN MENTAL HEALTH AND SUBSTANCE USE DISORDER CRISES.

(3) THE STATE DEPARTMENT SHALL ESTABLISH A COMMITTEE OF INTERESTED STAKEHOLDERS THAT WILL BE RESPONSIBLE FOR REVIEWING THE PROPOSALS AND AWARDED CONTRACTS PURSUANT TO THIS SECTION. REPRESENTATIONS FROM THE STATE DEPARTMENT OF HEALTH CARE POLICY AND FINANCING MUST BE INCLUDED IN THE COMMITTEE OF INTERESTED STAKEHOLDERS. A STAKEHOLDER PARTICIPATING IN THE COMMITTEE MUST NOT HAVE A FINANCIAL OR OTHER CONFLICT OF INTEREST THAT WOULD PREVENT HIM OR HER FROM IMPARTIALLY REVIEWING PROPOSALS.

(4) (a) THE DEPARTMENT SHALL ISSUE THE INITIAL REQUEST FOR PROPOSALS ON OR BEFORE SEPTEMBER 1, 2013, SUBJECT TO AVAILABLE APPROPRIATIONS. PURSUANT TO THE STATE PROCUREMENT CODE, ARTICLES 101 AND 102 OF TITLE 24, C.R.S., THE DEPARTMENT SHALL MAKE AWARDS ON OR BEFORE JANUARY 1, 2014. IF ADDITIONAL MONEYS ARE APPROPRIATED, THE DEPARTMENT MAY ISSUE ADDITIONAL REQUESTS FOR PROPOSALS CONSISTENT WITH THIS SECTION AND THE STATE PROCUREMENT CODE, ARTICLES 101 AND 102 OF TITLE 24, C.R.S.

(b) IF THE FULL APPROPRIATION BY THE GENERAL ASSEMBLY FOR THE IMPLEMENTATION OF THIS SECTION IS NOT DISPERSED AS SPECIFIED IN PARAGRAPH (a) OF THIS SUBSECTION (4), THE COMMITTEE SHALL ACCEPT AND REVIEW PROPOSALS AND AWARD CONTRACTS AS THE PROPOSALS ARE RECEIVED AND NOT REQUIRE AN APPLICATION BE HELD UNTIL A SUBSEQUENT REQUEST FOR PROPOSALS.

(5) IF NECESSARY, THE STATE BOARD MAY PROMULGATE RULES TO IMPLEMENT THE PROVISIONS OF THIS SECTION OR THE SERVICES TO BE

SUPPLIED PURSUANT TO THIS SECTION.

(6) BEGINNING IN JANUARY 2014, AND EVERY JANUARY THEREAFTER, THE STATE DEPARTMENT SHALL REPORT PROGRESS ON THE IMPLEMENTATION OF A COMPREHENSIVE STATEWIDE BEHAVIORAL HEALTH CRISIS RESPONSE SYSTEM AS PART OF ITS "STATE MEASUREMENT FOR ACCOUNTABLE, RESPONSIVE, AND TRANSPARENT (SMART) GOVERNMENT ACT" HEARING REQUIRED BY SECTION 2-7-203, C.R.S.

(7) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(a) "CRISIS INTERVENTION SERVICES" MEANS AN ARRAY OF INTEGRATED SERVICES THAT ARE AVAILABLE TWENTY-FOUR HOURS A DAY, SEVEN DAYS A WEEK, TO RESPOND TO AND ASSIST INDIVIDUALS WHO ARE IN A BEHAVIORAL HEALTH EMERGENCY.

(b) "STATE BOARD" MEANS THE STATE BOARD OF HUMAN SERVICES CREATED AND AUTHORIZED PURSUANT TO SECTION 26-1-107, C.R.S.

(c) "STATE DEPARTMENT" MEANS THE STATE DEPARTMENT OF HUMAN SERVICES CREATED PURSUANT TO SECTION 26-1-105, C.R.S.

SECTION 2. Appropriation. (1) In addition to any other appropriation, there is hereby appropriated, out of any moneys in the general fund, not otherwise appropriated, to the department of human services, for the fiscal year beginning July 1, 2013, the sum of \$19,792,028 and 0.9 FTE, or so much thereof as may be necessary, to be allocated to behavioral health services for the implementation of this act as follows:

(a) \$17,672,420 for co-occurring behavioral health services, crisis response system—crisis stabilization units, mobile crisis response, respite services, and marketing;

(b) \$2,046,675 for co-occurring behavioral health services, crisis response system—telephone hotlines;

(c) \$67,280 and 0.9 FTE for administration, personal services; and

(d) \$5,653 for administration, operating expenses.

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, and safety.

John P. Morse
PRESIDENT OF
THE SENATE

Mark Ferrandino
SPEAKER OF THE HOUSE
OF REPRESENTATIVES

Cindi L. Markwell
SECRETARY OF
THE SENATE

Marilyn Eddins
CHIEF CLERK OF THE HOUSE
OF REPRESENTATIVES

APPROVED _____

John W. Hickenlooper
GOVERNOR OF THE STATE OF COLORADO