

# SB20-007 Concerning Treatment for Substance Use Disorders

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This bill addresses a variety of measures to improve treatment services for individuals with an opioid or other substance use disorder.

This bill requires insurance carriers to:

- Provide coverage for the treatment of substance use disorders in accordance with the American Society of Addiction Medicine or most current criteria.
- Provide coverage for naloxone, without prior authorization and without imposing any deductible, copayment, coinsurance, or other cost-sharing requirement.
- Report to the commissioner of insurance on the number of in-network providers who are licensed to prescribe medication-assisted treatment for substance use disorders.

This bill increases access to treatment:

- Authorizes the commissioner of insurance to review and revise the essential health benefits package for medication-assisted treatment.
- Prohibits denying access to medical or substance use disorder treatment services, including recovery services, to persons who are participating in prescribed medication-assisted treatment in the following settings: recovery residences, courts, judicial programs, community corrections and in entities contracting with OBH.
- Authorizes pharmacies to receive an enhanced dispensing fee for the administration of all injectable medications for medication-assisted treatment approved by the FDA.
- Requires regular community assessments to be compiled by an independent entity for the development of community action plans by managed service organizations.

This bill increases capacity for treatment providers and agencies:

- Increases funding to the Colorado Health Service Corps Fund for loan forgiveness and scholarships for individuals serving in health care workforce shortage areas.
- Continues the grant writing program to aid local communities in need of assistance to access federal and state money to address opioid and other substance use disorders in their communities.

This bill addresses transparency and improved quality of care:

- Requires managed care entities to provide coordination of care for the full continuum of substance use disorder treatment and recovery and requires managed service organizations to update community assessments every two years.
- Commissions a study of the state childcare and treatment study and a final report with findings and recommendations concerning gaps in family-centered substance use disorder treatment.

This bill consolidates and modernizes part 1 of article 82 of title 27 into the existing article 81 of title 27, C.R.S., aligning the voluntary, emergency, and involuntary commitment statutes for alcohol misuse and substance misuse and funds community outreach on the availability of civil commitment.



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