



FY2008 RECOMMENDATION/FY08-GP20 INCREASE IN MENTAL HEALTH AND SUBSTANCE ABUSE TREATMENT

Status: Implementation Complete

Actions/Updates

2013 UPDATE

The Colorado General Assembly and Governor Hickenlooper made substance abuse and mental health treatment and awareness a top priority issue in 2013. The Joint Budget Committee approved \$20 million request by Gov. Hickenlooper for improvements to the state mental health system.

These developments have satisfied the original intent of this recommendation and it is considered complete.

2010 UPDATE

Implementation underway. For the purposes of the Commission performance measures, Recommendations GP-20 and GP-21 have been combined because the impact overlaps. The Behavioral Health Subcommittee continues to work with the Transformation initiative and the Office of Health Care and Policy and Finance to expand access to treatment to individuals statewide and in the justice system. On April 20th, 2010, the Governor signed Executive Order B 2010-006 creating the interagency Health Reform Implementation Board. The Colorado Office of Health Care Policy and Finance (HCPF) is coordination with this new Board and is managing the implementation of the federal Patient Protection and Affordable Care Act (P.L. 111-148, PPACA) and the Health Care and Education Reconciliation Act of 2010 (P.L. 111-152). These reforms expand Medicaid and so will significantly improve access to substance abuse and mental health services for many individuals in the justice system, including young adults and adults without children. Funding for these reforms will become available in future years.

In addition, significant resources were directed toward behavioral health treatment in the FY10 legislative session.

House Bill 10-1347: Among other things, this bill increased the Persistent Drunk Driver Surcharge from \$50 to \$100, and half of the additional revenues will be deposited into the Persistent Drunk Driver Fund (discussed earlier in this section), most of which is directed toward treatment, and half into the newly created court-ordered alcohol treatment fund. This is expected to generate over \$550,000 per year when fully implemented after the first year.

House Bill 10-1352: Modified the penalties for personal use and possession of controlled substances. The bill lowers penalties for certain offenses, but raises surcharges imposed on convictions for many drug-related crimes. It is estimated that the bill will result in a decrease of

\$1,468,196 in revenue to the State's General Fund, but a commensurate increase in revenue to the Drug Offender Surcharge Fund.

House Bill 10-1360: This bill reduced the penalties for technical violations (reducing the number of individuals going to prison) and directed the prison cost savings to community corrections transition offenders and those on parole:

- \$1,545,409 for community corrections treatment beds
 - 30 beds for IRT and follow-up outpatient treatment
 - 20 mental health beds
 - 10 therapeutic community beds
 - 10 sex offender beds
- \$2,057,225 for offenders reentering the community from the Department of Corrections
 - Wrap around services for parolees
 - Outpatient mental health services
 - Another \$500,000 was allocated for job training and employment services

House Bill 10-1284: This bill imposes a sales and use tax on medical marijuana. The first \$2,000,000 is appropriated to the Department of Health Services and Health Care, Policy and Finance to fund substance abuse programs.

2009 ACTION/IMPLEMENTATION

The Commission formed a Behavioral Health Subcommittee to prioritize areas where there exists a critical intersection of the criminal justice system and behavioral health systems. This group is working with stakeholders in the behavioral health communities, including the governor's Behavioral Health Cabinet (cabinet members who have oversight over aspects of behavioral health and criminal justice), and a "Transformation" initiative managed by the Governor's Office that taps local knowledge to develop a comprehensive strategy for reform. The Commission's Subcommittee will develop recommendations for Commission discussion and approval; these will be available in future Commission reports.

2009 IMPACT

National rankings for per capita expenditures on mental health and substance abuse treatment will be included in future Commission reports.

2009 BARRIERS

Extensive problems exist regarding access to services and funding availability for mental health and substance abuse treatment. For example, the Department of Corrections reports a significant lack of treatment staff, stating that 45 new staff are needed to expand substance abuse treatment and 14 new positions are needed for mental health treatment.

Description

The state should invest in community-based, evidence-based mental health and substance abuse treatment for all citizens to prevent the need for incarceration, and to provide such treatment as an alternative to incarceration where appropriate.

Agencies Responsible

Department of Human Services, Department of Public Safety, Department of Healthcare Policy and Financing, Department of Public Health and Environment

Discussion

This recommendation reflects a decisive need for systemic reform. Many entities are committed to the implementation of this recommendation. The Commission's commitment to a collaborative approach to these issues is an effective method of maximizing resources and builds on existing expertise in the community. This collaborative undertaking, and anticipated reforms that are expected to follow, are embedded in the Commission's statutory mandates to "...ensure justice..." and enhance "the cost-effective use of public resources" [C.R.S. 16-11.3-103(1)]. Providing needed behavioral health treatment to avoid incarceration promotes the Commission's mandate to "focus on evidence-based recidivism reduction initiatives...." [C.R.S. 16-11.3-103(1)].