l	Н. В. 2880
2	(By Delegates Stansbury, Rohrbach, Householder, R. Phillips, Arvon, Howell, Moffatt, Shott,
3	Ellington, E. Nelson and Campbell)
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5	(Originating in the House Committee on Health and Human Resources)
6	[February 19, 2015]
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11	A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
12	designated §62-15-14 relating to creating an addiction treatment pilot program.
13	Be it enacted by the Legislature of West Virginia:
14	That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new
15	section, designated §62-15-14, to read as follows:
16	ARTICLE 15. DRUG OFFENDER ACCOUNTABILITY AND TREATMENT ACT.
17	§62-15-14. Addiction Treatment Pilot Program.
18	(a) As used in this section:
19	(1) "Adult Drug Court Program" means an Adult Treatment Court established by the
20	Supreme Court of Appeals of West Virginia pursuant to this article;
21	(2) "Court" means the Supreme Court of Appeals of West Virginia;
22	(3) "Division" means the Division of Corrections;
23	(4) "Parole" means the release of a prisoner by the Division of Corrections temporarily or
24	permanently before the completion of a sentence, on the promise of good behavior.

(5) "Prescriber" means an individual currently licensed and authorized by this state to
prescribe and administer prescription drugs in the course of their professional practice.
(6) "Work Release Program" means a Division of Corrections program which allows a

recidivism.

- working at his or her current place of employment, returning to prison when his/her shift is complete

  (b) Not later than ninety days after the effective date of this section, the Court and the

  Division of Corrections shall select an appropriate mutual research partner or partners, which is to

  be either a state university or a nationally recognized criminal justice research institute with

  extensive experience in the evaluation of criminal justice and substance abuse projects to develop

  an evaluation plan for the pilot program. The evaluation plan shall include performance measures

  that reflect the purpose of the pilot program, which is to assist participants in addressing their
- (c)(1) The Court shall conduct a pilot program to provide addiction treatment, including medication-assisted treatment, to persons who are offenders within the criminal justice system, eligible to participate in a program, and selected under this section to be participants in the pilot program because of their dependence on opioids.

dependence on opioids by maintaining abstinence from the use of those substances and reducing

- (2) The Court may conduct the pilot program in any circuit court that is conducting an Adult Drug Court Program.
- (3) The Court shall conduct the pilot program in up to five Adult Drug Court Programs, where the pilot program is authorized by the program's Adult Drug Court Judge.
- (d) In conducting the pilot program, the Court and its' Division of Probation Services may be assisted by the Department of Health and Human Resources and any other state agency that it determines may be of assistance in accomplishing the objectives of the pilot program.

(e) Before any person may be enrolled as a participant in the pilot program, the evaluation
plan developed by the research institute described in subsection (b) shall be put into place with each
of the Adult Drug Court Program included in the pilot program and the addiction services providers
that will provide treatment to the participants. Where the evaluation plan is authorized by the
program's Adult Drug Court Judge. Once the evaluation plan has been put into place, the Adult Drug
Court Program shall select persons who are participants in the Adult Drug Court program, who have
been clinically assessed and diagnosed with opioid addiction. The total number of persons
participating in the Court pilot program at any one time may not exceed two hundred, except that the
Court may authorize the maximum number to be exceeded. After being enrolled in the pilot program,
a participant shall comply with all requirements of the Adult Drug Court Program.

- (f) Treatment may be provided under the pilot program only by a certified provider who is approved by the Court or Adult Drug Court Program consistent with the policies and procedures for Adult Drug Courts developed by the Court. In serving as a treatment provider, a community addiction services provider shall do all of the following:
- (1) Provide treatment based on an integrated service delivery model that consists of the coordination of care between a prescriber and the addiction services provider;
- (2) Conduct any necessary additional professional, comprehensive substance abuse and mental health diagnostic assessments of persons under consideration for selection as pilot program participants to determine whether they would benefit from substance abuse treatment and monitoring;
- (3) Determine, based on the assessments described in subdivision (2), the treatment needs of the participants served by the treatment provider;
- (4) Develop, for the participants served by the treatment provider, individualized goals and objectives;

1	(5) Provide access to the non-narcotic, long-acting antagonist therapy included in the pilot
2	program's medication-assisted treatment.
3	(6) Provide other types of therapies, including psychosocial therapies, for both substance
4	abuse and any disorders that are considered by the treatment provider to be co-occurring
5	disorders.
6	(g) In the case of the medication-assisted treatment provided under the pilot program, a drug
7	may be used only if it has been approved by the United States Food and Drug Administration for use
8	in the prevention of relapse to opioid dependence and in conjunction with psychosocial support,
9	provided as part of the pilot program, appropriate to patient needs.
10	(h)(1) The Division of Corrections shall conduct a pilot program to provide addiction
11	treatment, including medication-assisted treatment, to persons who are offenders within the criminal
12	justice system, eligible for parole or to participate in a Work Release Program, and selected under
13	this section to be participants in the pilot program because of their dependence on opioids, alcohol,
14	or both.
15	(2) The division shall conduct the pilot program in correctional centers selected by the
16	division.
17	(I) In conducting the pilot program, the Division and its' Division of Parole Services shall
18	collaborate with the West Virginia Department of Health and Human Resources and any other state
19	agency that it determines may be of assistance in accomplishing the objectives of the pilot program.
20	(j) Before any person may be enrolled as a participant in the pilot program, the evaluation
21	plan developed by the research institute described in subsection (b) shall be put into place with each
22	of the Correctional Centers included in the pilot program and the addiction services providers that
23	will provide treatment to the participants. Once the evaluation plan has been put into place, the
24	division shall select persons who are offenders within the criminal justice system to be participants

1	in the pilot program. To be selected, a person must be determined to be at high risk using the
2	LS/CMI assessment criteria. The total number of persons participating in the division pilot program
3	at any one time shall not exceed two hundred, except that the division may authorize the maximum
4	number to be exceeded. After being enrolled in the pilot program, a participant shall comply with
5	all requirements of the division treatment program.
6	(k) Treatment may be provided under the pilot program only by a certified provider who
7	is approved by the division. In serving as a treatment provider, a community addiction services
8	provider shall do all of the following:
9	(1) Provide treatment based on an integrated service delivery model that consists of the
10	coordination of care between a prescriber and the addiction services provider;
11	(2) Conduct professional, comprehensive substance abuse and mental health diagnostic
12	assessments of persons under consideration for selection as pilot program participants to determine
13	whether they would benefit from substance abuse treatment and monitoring;
14	(3) Determine, based on the assessments described in subdivision (2), the treatment needs
15	of the participants served by the treatment provider;
16	(4) Develop, for the participants served by the treatment provider, individualized goals and
17	objectives;
18	(5) Provide access to the non-narcotic, long-acting antagonist therapy included in the pilot
19	program's medication-assisted treatment;
20	(6) Provide other types of therapies, including psychosocial therapies, for both substance
21	abuse and any disorders that are considered by the treatment provider to be co-occurring disorders.
22	(1) In the case of the medication-assisted treatment provided under the pilot program, a drug
23	may be used only if it has been approved by the United States Food and Drug Administration for use
24	in the prevention of relapse to opioid dependence, and in conjunction with psychosocial support,

provided as part of the pilot program, appropriate to patient needs.

(m) The research institute selected by the Court and the division under subsection (b) shall prepare a report of the findings obtained from the pilot program. The report shall include data derived from the drug testing and performance measures used in the pilot program, including comparisons to legacy data. In preparing the report, the research institute shall obtain assistance from the division and the Court. Not later than six months after the conclusion of the pilot program, the research institute shall complete its report. On completion, the research institute shall submit the report to the Governor; Chief Justice of the Supreme Court of Appeals of West Virginia; the Joint Committee on Government and Finance; the Secretary of the Department of Health and Human Resources and Commissioner of the Division of Corrections.

NOTE: The purpose of this bill is to create a pilot program to assist participants in addressing their dependence on opioids, by maintaining abstinence from the use of those substances and reducing recidivism.

This section is new and has been completely underscored.