

WEST VIRGINIA LEGISLATURE

2017 REGULAR SESSION

Introduced

Senate Bill 387

BY SENATORS WELD, FERNS AND MARONEY

[Introduced February 22, 2017; Referred
to the Committee on Health and Human Resources; and
then to the Committee on Finance]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new article,
 2 designated §16-2A-1, §16-2A-2, §16-2A-3, §16-2A-4, §16-2A-5 and §16-2A-6, all relating
 3 to creating the Ryan Brown Addiction Prevention and Recovery Fund Act; providing
 4 funding for drug addiction prevention and treatment not otherwise covered by legislative
 5 appropriations, Medicare, Medicaid or private insurance; and requiring West Virginia
 6 Department of Health and Human Resources to administer the fund.

Be it enacted by the Legislature of West Virginia:

1 That the Code of West Virginia, 1931, as amended, be amended by adding thereto a new
 2 article, designated §16-2A-1, §16-2A-2, §16-2A-3, §16-2A-4, §16-2A-5 and §16-2A-6, all to read
 3 as follows:

ARTICLE 2A. THE RYAN BROWN ADDICTION PREVENTION AND RECOVERY
FUND ACT.

§16-2A-1. Short title.

1 This article shall be known as the Ryan Brown Addiction Prevention and Recovery Fund
 2 Act.

§16-2A-2. Legislative findings.

1 The Legislature finds that substance abuse is at a crisis stage in West Virginia, with this
 2 state leading the nation in overdose deaths. Most of these fatalities have resulted from
 3 prescription drugs and outnumber deaths related to heroin and cocaine combined. Opioid
 4 prescribing rates in West Virginia are among the highest in the United States. West Virginia has
 5 almost three times the rate for the rest of the nation. Cocaine and crack cocaine contribute to the
 6 state’s drug abuse problem, but are not as pronounced as the abuse involving the clandestine
 7 manufacture of methamphetamine, which has tripled over the last several years, and the
 8 cultivation and consumption of marihuana. Drug abuse contributes to cause lost productivity in
 9 private jobs and industry, increased cost of medical treatment and increased court costs in

10 criminal procedures.

§16-2A-3. Purpose.

1 The purpose of this article is to establish a fund to provide for drug addiction prevention
2 and treatment not otherwise covered by legislative appropriations, Medicare, Medicaid or private
3 insurance.

§16-2A-4. Rules; definitions.

1 The Director of the West Virginia Department of Health and Human Resources shall
2 propose rules for legislative approval in accordance with article three, chapter twenty-nine of this
3 code, which rules shall include pertinent definitions for addiction and prevention and treatment of
4 drug and alcohol addiction and dependency applicable to the purposes of this article.

§16-2A-5. Ryan Brown Addiction Prevention and Recovery Fund.

1 There is hereby established in the Treasury a separate, interest bearing, special revenue
2 account to be known as “The Ryan Brown Addiction Prevention and Recovery Fund” to make
3 available resources for prevention and recovery programs not otherwise covered under current
4 state or federal addiction prevention and recovery programs. Resources shall be made available
5 to nonprofit organizations for adult and child addiction prevention programs. Resources shall also
6 be made available to private and public addiction treatment facilities and health care providers for
7 inpatient or outpatient addiction treatment. At least twenty percent of the fund’s resources must
8 be spent on prevention. The special revenue account shall consist of funds from federal
9 Substance Abuse Prevention and Treatment Block Grants (SABG), gifts, income from the
10 investment of moneys held in the special revenue account, and all other sums available for deposit
11 to the special revenue account from any source, public or private.

§16-2A-6. Administration of the Ryan Brown Addiction Prevention and Recovery Fund.

1 (a) The West Virginia Department of Health and Human Resources shall:
2 (1) Administer the Ryan Brown Addiction Prevention and Recovery Fund and allocate
3 moneys for prevention education and treatment, with at least twenty percent going towards

4 prevention. The department shall ensure that at least \$1 million is contributed to the fund annually
5 through a combination of grants, gifts and reallocation of other department moneys.

6 (2) Be responsible for all SABG and other federal block grant applications necessary to
7 maintain the annual \$1 million contribution.

8 (3) Establish guidelines for eligibility for funding consistent with this article, promote the
9 availability of the funding statewide, provide technical assistance to applicants, evaluate
10 applicants, determine allowable expenses and disburse funding.

11 (4) Establish monitoring and accountability mechanisms for programs and individuals
12 receiving assistance.

13 (5) Ensure that funds are disbursed in accordance with the rules set out by Substance
14 Abuse and Mental Health Services Administration for receiving SABG.

15 (6) Annually post on its website and report to the Legislature on the expenditure of the
16 program fund, including the total amount distributed, the types of programs and individuals that
17 received funding, the amount each received and the results achieved.

18 (b) The department shall create eligibility guidelines consistent with this article. To qualify
19 for prevention education funding, the applicant may be a nonprofit trained and certified to provide
20 addiction prevention education. To qualify for addiction recovery funding, the applicant may not
21 be eligible for Medicare, Medicaid, private insurance or any other state or federal funding sources.

22 (c) Addiction recovery funds will be paid directly to the treatment provider on behalf of the
23 individual receiving treatment.

24 (d) For-profit methadone treatment facilities are not eligible for addiction recovery funds.

25 (e) Medication assisted treatment will only qualify for recovery funds if the planned course
26 of treatment is twenty-four months or less. Recovery funds are not available for indefinite
27 medication assisted treatment.

28 (f) Priority for funding will be given to:

29 (1) Intravenous drug users;

- 30 (2). HIV+, AIDS or HCV+ individuals;
31 (3) Pregnant women and women with dependent children;
32 (4) Veterans;
33 (5) Persons with criminal justice involvement; and
34 (6) Short-term grants to established nonprofit recovery programs for the purchase and
35 rehabilitation of properties to be used as recovery centers, sober living homes or other facilities
36 used for addiction prevention, education and addiction recovery.

NOTE: The purpose of this bill is to create “The Ryan Brown Addiction Prevention and Recovery Fund Act” to provide funding for drug addiction prevention and treatment not otherwise covered by legislative appropriations, Medicare, Medicaid or private insurance. The bill provides that the West Virginia Department of Health and Human Resources administer the fund and be responsible for creating guidelines for the operation of the fund.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.