WEST VIRGINIA LEGISLATURE

2018 REGULAR SESSION

Introduced

Senate Bill 469

FISCAL NOTE

BY SENATORS WELD, BOSO, UNGER, FERNS, MARONEY,

CLEMENTS, AND CLINE

[Introduced February 2, 2018; Referred

to the Committee on Health and Human Resources]

- 1 A BILL to amend and reenact §62-15A-1, §62-15A-2, and §62-15A-3 of the Code of West Virginia,
- 2 1931, as amended, relating to converting the Addiction Treatment Pilot Program into a 3
- permanent program.

Be it enacted by the Legislature of West Virginia:

ARTICLE 15A. ADDICTION TREATMENT PILOT PROGRAM.

§62-15A-1. Definitions.

1 As used in this article:

- 2 (1) "Addiction service provider" means a person licensed by this state to provide addiction
- and substance abuse services to persons addicted to opioids. 3
- 4 (2) "Adult drug court judge" means a circuit court judge operating a drug court as defined

5 in subsection (a), section one, article fifteen §62-15-2 of this code.

6 (3) "Adult Drug Court Program" means an adult treatment court established by the 7 Supreme Court of Appeals of West Virginia pursuant to this article and §62-15-1 et seq. of this 8 code.

9 (4) "Authority" means the Regional Jail and Correctional Facility Authority.

10 (5) "Circuit court" means those courts set forth in §51-2-1 et seq. of this code.

(6) "Court" means the Supreme Court of Appeals of West Virginia. 11

12 (7) "Department" means the Department of Health and Human Resources.

13 (8) "Division" means the Division of Corrections.

14 (9) "LS/CMI assessment criteria" means the level of service/case management inventory

15 which is an assessment tool that measures the risk and need factors of adult offenders.

16 (10) "Medication-assisted treatment" means the use of medications, in combination with 17 counseling and behavioral therapies, to provide a whole-patient approach to the treatment of 18 substance use disorders.

19 (11) "Prescriber" means an individual currently licensed and authorized by this state to 20 prescribe and administer prescription drugs in the course of their professional practice.

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§62-15A-2. The Department of Health and Human Resources Pilot Drug Addiction Treatment Program.

(a) The secretary of the department shall conduct a pilot establish a 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.

(b) In the case of the medication-assisted treatment provided under the pilot program, a
drug may be used only if it has been approved by the United States Food and Drug Administration
for use 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.

9 (c) The department may invite the court, the authority and the division to participate in the
10 pilot program.

11 (d) The department may limit the number of participants.

(e) (1) If the Court's Adult Drug Court Program is selected to participate participates in the drug addiction program, it shall select persons who are participants in the Adult Drug Court program, who have been clinically assessed and diagnosed with opioid addiction. Participants must either be eligible for Medicaid, or eligible for a state, federal or private grant or other funding <u>source or combination of</u> sources that provides for the full payment of the treatment necessary to participate in the pilot program. After being enrolled in the pilot program, participants shall comply with all requirements of the Adult Drug Court Program.

(2) Treatment may be provided under this subsection only by a treatment 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 treatment
services provider shall do all of the following:

(A) Provide treatment based on an integrated service delivery model that consists of the
 coordination of care between a prescriber and the addiction services provider;

(B) 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;

(C) Determine, based on the assessments described in paragraph (B), the treatment
 needs of the participants served by the treatment provider;

31 (D) Develop, for the participants served by the treatment provider, individualized goals
32 and objectives;

(E) Provide access to the non-narcotic, long-acting antagonist therapy included in the pilot
 program's medication-assisted treatment; and

35 (F) Provide other types of therapies, including psychosocial therapies, for both substance
36 abuse and any disorders that are considered by the treatment provider to be cooccurring
37 disorders.

(f) (1) If The Division of Corrections is selected to participate, the division shall select persons, within the custody of the Division of Corrections, who are determined to be at high risk using the LS/CMI assessment criteria into the pilot program. Participants must either be eligible for Medicaid, or eligible for a state, federal or private grant or other funding <u>source or combination</u> of sources that provide provides for the full payment of the treatment necessary to participate in the pilot program. After being enrolled in the pilot program, a participant shall comply with all requirements of the treatment program.

45 (2) A participant shall:

46 (A) Receive treatment based on an integrated service delivery model that consists of the
47 coordination of care between a prescriber and the addiction services provider;

(B) Submit to professional, comprehensive substance abuse and mental health diagnostic
 assessments of persons under consideration for selection as pilot program participants to
 determine whether they the participant would benefit from substance abuse treatment and

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51 monitoring;

(C) Receive, based on the assessments described in paragraph (B) of this subsection, the
 treatment needs of the participants served by the treatment provider;

54 (D) Submit to the treatment provider, individualized goals and objectives;

(E) Receive the nonnarcotic, long-acting antagonist therapy included in the pilot program's
 medication-assisted treatment; and

57 (F) Participate in other types of therapies, including psychosocial therapies, for both 58 substance abuse and any disorders that are considered by the treatment provider to be co-59 occurring disorders

(g) (1) If The Regional Jail and Correctional Facility Authority is selected to participate, the
authority shall select only persons who are serving a sentence for a felony or misdemeanor who
are determined to be at high risk using the LS/CMI assessment criteria for the pilot program.
Participants must either be eligible for Medicaid, or eligible for a state, federal or private grant or
other funding source or combination of sources that provides for the full payment of the treatment
necessary to participate in the pilot program. After being enrolled in the pilot program, a
participant shall comply with all requirements of the treatment program.

67 (2) A participant shall:

(A) Receive treatment based on an integrated service delivery model that consists of the
 coordination of care between a prescriber and the addiction services provider;

(B) Submit to professional, comprehensive substance abuse and mental health diagnostic
 assessments of persons under consideration for selection as pilot program participants to
 determine whether they the person would benefit from substance abuse treatment and
 monitoring;

(C) Receive, based on the assessments described in paragraph (B), the treatment needs
of the participants served by the treatment provider;

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(D) Submit to the treatment provider, individualized goals and objectives;

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(E) Receive the nonnarcotic, long-acting antagonist therapy included in the pilot program's
 medication-assisted treatment; and

(F) Participate in other types of therapies, including psychosocial therapies, for both
 substance abuse and any disorders that are considered by the treatment provider to be co occurring disorders.

(3) A participant who is incarcerated pursuant to a misdemeanor conviction or convictions
and successfully completes this treatment pilot program may, at the discretion of the authority,
receive up to five days off of his or her sentence.

85 (4) If a participant begins participation in the treatment pilot program while in the custody

86 of the Commissioner of Corrections, but is confined in a regional jail, and transferred to a

87 Division of Corrections facility before completing the pilot treatment program the Division of

88 Corrections shall ensure that the participant's treatment under the program will continue and

that upon successful completion the participant shall receive credit off his or her sentence as

90 would have occurred had he or she remained in the authority facility until successful completion.

§62-15A-3. Report Annual Reports.

1	(a) The department shall prepare a report annually.
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- 2 (b) The report shall include:
- 3 (1) Number of participants;
- 4 (2) Number of participants successfully completing the program;
- 5 (3) Offenses committed or offense convicted of;
- 6 (4) Recidivism Rate;
- 7 (5) Potential cost saving or expenditures;
- 8 (6) A statistical analysis which determines the effectiveness of the program; and
- 9 (7) Any other information the reporting entity finds pertinent.
- 10 (c) The Court and the division should provide any information necessary to the department
- 11 to complete the report.

- 12 (d) The department shall submit the report to:
- 13 (1) The Governor;
- 14 (2) The Chief Justice of the Supreme Court of Appeals of West Virginia;
- 15 (3) The Joint Committee on Government and Finance;
- 16 (4) The Commissioner of the Division of Corrections;
- 17 (5) The Director of the Regional Jail and Correctional Facility Authority; and
- 18 (6) The Secretary of the Department of Military Affairs and Public Safety.
- 19 (e) The report shall be submitted by July 1, 2017 and shall include twelve months of data

20 from the beginning of the administration of the program 2019 and annually thereafter.

NOTE: The purpose of this bill is to convert the Addiction Treatment Pilot Program to a permanent program.

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