

WEST VIRGINIA LEGISLATURE

2018 REGULAR SESSION

Introduced

House Bill 4611

BY DELEGATES KESSINGER, HILL, PACK, ROBINSON AND

GRAVES

[Introduced February 13, 2018; Referred
to the Committee on Prevention and Treatment of
Substance Abuse then 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 and §16-2A-4, all relating to creating the Ryan
 3 Brown Addiction Prevention and Recovery Fund Act; providing legislative findings,
 4 purpose, rules proposed by the Director of the West Virginia Department of Health and
 5 Human Resources; and establishing the Ryan Brown Addiction Prevention and Recovery
 6 Fund to be administered by the West Virginia Department of Health and Human
 7 Resources.

Be it enacted by the Legislature of West Virginia:

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; purpose.

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. Nationally, the Center for Disease Control reports
 3 that in 2015 an average of 144 individuals died from an overdose in the country of any kind. One
 4 hundred forty-four a day are suffering due to the loss of this preventable problem, overdose. The
 5 trend continues to increase year after year. Opioids, including prescription opioids and heroin,
 6 have killed more than 33,000 people in 2015, more than any year on record. Ninety-one
 7 Americans die every day from an opioid overdose. From 2000 to 2015 more than 500,000 people
 8 died from drug overdoses. In relation to the cause of death, overdose deaths have now surpassed
 9 automobile deaths.

10 Drug abuse contributes to lost productivity in private jobs and industry, decreased hiring
 11 capacity due to inability to pass drug screens, increased cost of medical treatment, increased

12 need for foster care, and increased court costs in criminal procedures.

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

§16-2A-3. Rules.

1 The Director of the West Virginia Department of Health and Human Resources shall
2 propose rules for legislative approval in accordance with §29A-3-1 et seq. of this code, which
3 rules shall include pertinent definitions for addiction and prevention and treatment of drug and
4 alcohol addiction and dependency applicable to the purposes of this article.

§16-2A-4. Ryan Brown Addiction Prevention and Recovery Fund; administration of fund.

1 (a) There is 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, health care providers for
7 inpatient or outpatient addiction treatment and sober living homes. At least 20 percent of the
8 fund’s resources must be spent on prevention. The special revenue account shall consist of funds
9 from federal Substance Abuse Prevention and Treatment Block Grants (SABG), gifts, income
10 from the investment of moneys held in the special revenue account, and all other sums available
11 for deposit to the special revenue account from any source, public or private.

12 (b) The West Virginia Department of Health and Human Resources shall:

13 (1) Administer the Ryan Brown Addiction Prevention and Recovery Fund and allocate
14 moneys for prevention education and treatment, with at least 20 percent going towards
15 prevention.

16 (2) Establish guidelines for eligibility for funding consistent with this article, promote the

17 availability of the funding statewide, provide technical assistance to applicants, evaluate
18 applicants, determine allowable expenses, and disburse funding.

19 (3) Establish monitoring and accountability mechanisms for programs and individuals
20 receiving assistance.

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

23 (5) Annually post on its website and report to the Legislature on the expenditure of the
24 program fund, including the total amount distributed, the types of programs and individuals that
25 received funding and the amount each received.

26 (c) The department shall create eligibility guidelines consistent with this article. To qualify
27 for prevention education funding, the applicant may be a nonprofit trained and certified to provide
28 addiction prevention education. Funds qualify only for addiction recovery not otherwise covered
29 by Medicare, Medicaid, private insurance or any other state or federal funding sources.

30 (d) Addiction recovery funds will be paid directly to the treatment provider on behalf of the
31 individual receiving treatment.

32 (e) For-profit treatment facilities are not eligible for addiction recovery funds.

33 (f) Medication assisted treatment will only qualify for recovery funds if the planned course
34 of treatment is 24 months or less. Recovery funds are only available for three months of the
35 medication assisted treatment.

36 (g) Priority for funding will be given to:

37 (1) Intravenous drug users;

38 (2). HIV+, AIDS or HCV+ individuals;

39 (3) Pregnant women and women with dependent children;

40 (4) Veterans;

41 (5) Persons with criminal justice involvement; and

42 (6) Sober Living Entry fees for individuals.

43 (7) Cost of transportation to recovery centers, sober living homes, or other facilities used
44 for addiction recovery.

45 (8) Naloxone and other similar medications or similar overdose reversal pharmaceuticals
46 that are used to block or reverse the effects of opioid medication, including extreme drowsiness,
47 slowed breathing, or loss of consciousness or used to treat a narcotic overdose in an emergency,
48 to be distributed by addiction awareness facilities, nonprofit recovery programs, sober living
49 homes, prevention agencies or county health departments. This is limited to payment for naloxone
50 or similar overdose reversal pharmaceuticals only.

NOTE: The purpose of this bill is to create the Ryan Brown Addiction Prevention and Recovery Fund Act. The bill provides legislative findings and purpose, requiring the Director of the West Virginia Department of Health and Human Resources to propose rules and definitions relating to the purpose of this article. The bill establishes the Ryan Brown Addiction Prevention and Recovery Fund to be administered by the West Virginia Department of Health and Human Resources which is to be funded from federal Substance Abuse Prevention and Treatment Block Grants (SABG), gifts, and income from the investment of moneys. The bill also provides how these funds are to be used.

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