

WEST VIRGINIA LEGISLATURE

2025 REGULAR SESSION

Introduced

Senate Bill 723

By Senator Helton

[Introduced March 7, 2025; referred
to the Select Committee on Substance Use Disorder
and Mental Health; and then to the Committee on
Finance]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding a new section,
2 designated §9-5-29b, relating to clinical inpatient medical treatment centers for substance
3 use disorder; defining terms; setting forth requirements for clinical inpatient medical
4 treatment centers for substance use disorder; setting forth reporting requirements; and
5 providing for revocation of license for non-compliance.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

§9-5-29b. Requirements for residential medical treatment centers.

1 (a) Definitions — As used in this section, unless the context otherwise requires:

2 (1) "Clinical inpatient medical treatment centers for substance use disorder" means a
3 facility that provides medical treatment and support services in an inpatient setting for individuals
4 with drug, alcohol, or other substance use disorders.

5 (2) "Recovery residence" means a single-family, drug-free, and alcohol-free residential
6 dwelling unit, or other form of group housing, that is offered or advertised by any person or entity
7 as a residence that provides a drug-free and alcohol-free living environment for the purposes of
8 promoting sustained, long-term recovery from substance use disorder.

9 (2) "Resident of West Virginia" means an individual who resided in West Virginia 60 days
10 prior to admission in the clinical inpatient medical treatment center for substance use disorder.

11 (b) Requirements for clinical inpatient medical treatment centers for substance use
12 disorder —

13 (1) All clinical inpatient medical treatment centers for substance use disorder operating in
14 West Virginia shall require that a minimum of 85% of their patients are residents of West Virginia.
15 This percentage shall be evaluated on a quarterly basis.

16 (2) Each center shall provide a quarterly report to the West Virginia Office of the Inspector
17 General detailing the percentage of patients who are residents of the West Virginia.

18 (3) The clinical inpatient medical treatment centers for substance use disorder shall

transition at least 70% of their graduates into a placement in a recovery residence immediately upon completion of their program.

(4) Each clinical inpatient medical treatment centers for substance use disorder shall submit a quarterly report to the Office of the Inspector General on the following items:

(A) The state of residence of each resident in order for the Inspector General to calculate the percentage of state residents being treated in each facility. The name of each resident shall be redacted prior to submission but should be retained in unredacted form for auditing purposes for seven years.

(A) Placement rates of graduates every quarter;

(B) The total number of graduates;

(C) The average length of stay;

(D) The number of graduates successfully placed into recovery residences or another level of care; and

(E) The number of graduates returning to the clinical inpatient medical treatment centers for substance use disorder within a 12-month period.

(c) The Office of the Inspector General shall determine if the clinical inpatient medical treatment centers are in in compliance with the provisions of this section after a review of the data submitted and any other information needed to evaluation compliance with this section.

(d) If the Office of the Inspector General determines that the clinical inpatient medical treatment center is not in compliance then, the Office of the Inspector General shall provide the clinical inpatient medical treatment center with a written a six-month improvement period to come into compliance. If the center remains out of compliance after the improvement period ends, then a hearing shall be held to revoke the provider's behavioral health license.

NOTE: The purpose of this bill is to require residential medical treatment centers to treat people satisfying certain residency requirements. The bill requires the centers to have a percentage of patients that graduate from their program and are placed into a recovery residence. The bill requires reporting.

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