WEST virginia legislature

2025 regular session

Committee Substitute

for

Senate Bill 739

By Senator Helton

[Reported March 26, 2025, from the Select Committee on Substance Use Disorder and Mental Health]

A BILL to amend and reenact §16-59-1, §16-62-1, and §16-62-2 of the Code of West Virginia, 1931, as amended; and to amend the code by adding a new section, designated §16-59-1a, relating to recovery residences; setting forth legislative findings; reorganizing definitions section; and correcting internal citations in other sections of code referencing the definitions section.

Be it enacted by the Legislature of West Virginia:

ARTICLE 59. Certification of Recovery Residences.

§16-59-1. ~~Definitions~~ Legislative findings.

~~Definitions —~~

~~As used in this article, the term:~~

~~"Certificate of compliance" means a certificate that is issued to a recovery residence by the department’s appointed certifying agency.~~

~~"Certified recovery residence" means a recovery residence that holds a valid certificate of compliance.~~

~~"Director" means the Director of the Office of Health Facility Licensure and Certification, or his or her designee.~~

~~"Department" means the Department of Human Services.~~

~~"Immediate jeopardy" means an issue of non-compliance that places the health and safety of residents of the recovery residence at risk for serious injury, serious harm, serious impairment, or death.~~

~~"Inspector General" means the Inspector General of the Office of the Inspector General as described in §16B-2-1 of this code.~~

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

*Legislative Findings*. —

(1) The Legislature hereby finds that substance use disorder constitutes a serious threat to the health and welfare of the citizens of West Virginia.

(2) Certified, long-term recovery residences support the recovery of individuals with substance use disorder and help prevent relapse, criminal justice system involvement, and overdose.

(3) Certified, long-term recovery residences are designed to address the needs of individuals in recovery from substance use disorder through the provision of a safe and healthy living environment and a community of supportive recovering peers to which residents are accountable.

(4) Multiple peer reviewed studies show that well-run recovery residences have a long lasting, positive impact on individuals in or seeking recovery from substance use disorders.

(5) Residents are more likely to stay in recovery, become or stay employed, and interact less with the criminal justice system than similarly situated non-residents.

(6) It is in the best interests of individuals in recovery from substance use disorder and of the communities in which recovery residences are situated that recovery residences be certified with nationally recognized standards in order to protect recovery residence residents and communities from harm caused by poorly managed or fraudulent recovery residences.

§16-59-1a. Definitions.

*Definitions*. —

As used in this article, the term:

"Certificate of compliance" means a certificate that is issued to a recovery residence by the department’s appointed certifying agency.

"Certified recovery residence" means a recovery residence that holds a valid certificate of compliance.

"Director" means the Director of the Office of Health Facility Licensure and Certification, or his or her designee.

"Department" means the Department of Human Services.

"Immediate jeopardy" means an issue of non-compliance that places the health and safety of residents of the recovery residence at risk for serious injury, serious harm, serious impairment, or death.

"Inspector General" means the Inspector General of the Office of the Inspector General as described in §16B-2-1 of this code.

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

Article 62. The Patient Brokering Act.

§16-62-1. Definitions.

For the purposes of this article:

"Department" means the Department of Human Services.

"Health care provider or health care facility" means any person or entity licensed, certified, or authorized by law to provide professional health care service in this state to a patient during that patient's medical, remedial, or behavioral health care, treatment, or confinement.

"Health care provider network entity" means a corporation, partnership, or limited liability company owned or operated by two or more health care providers and organized for the purpose of entering into agreements with health insurers, health care purchasing groups, or the Medicare or Medicaid program.

"Health insurer" means any insurance company authorized to transact health insurance in the state, any insurance company authorized to transact health insurance or casualty insurance in the state that is offering a minimum premium plan or stop-loss coverage for any person or entity providing health care benefits, any self-insurance plan, any health maintenance organization, any prepaid health clinic, any prepaid limited health service organization, any multiple-employer welfare arrangement, or any fraternal benefit society providing health benefits to its members.

"Recovery residence" has the same meaning as set forth in ~~§16-59-1~~ §16-59-1a of this code.

§16-62-2. Patient brokering prohibited.

(a) It is unlawful for any person, including any health care provider, health care facility, or recovery residence to:

(1) Offer or pay a commission, benefit, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form whatsoever, to induce the referral of a patient or patronage to or from a health care provider, health care facility or recovery residence;

(2) Solicit or receive a commission, benefit, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form whatsoever, in return for referring a patient or patronage to or from a health care provider, health care facility, or recovery residence;

(3) Solicit or receive a commission, benefit, bonus, rebate, kickback, or bribe, directly or indirectly, in cash or in kind, or engage in any split-fee arrangement, in any form whatsoever, in return for the acceptance or acknowledgment of treatment from a health care provider, health care facility, or recovery residence;

(4) Aid, abet, advise, or otherwise participate in the conduct prohibited under this subsection; or

(5) Engage in any of the unlawful acts provided for in this subsection in regard to a recovery residence as defined in ~~§16-59-1~~ §16-59-1a of this code;

(b) *Penalties*. –

(1) Any person who violates the provisions of subsection (a) of this section is guilty of a felony and, upon conviction thereof, shall be fined not more than $50,000, or imprisoned in a state correctional facility for not less than one year nor more than five years, or both fined and imprisoned.

(2) Notwithstanding the provisions of subdivision (1) of this subsection, any person who violates subsection (a) of this section, where the prohibited conduct involves 10 or more patients, is guilty of a felony and, upon conviction thereof, shall be fined not more than $100,000, or imprisoned in a state correctional facility not less than two years nor more than five years, or both fined and imprisoned.

(c) The Office of the Inspector General shall develop a tool that facilitates the submission of complaints. The Office of the Inspector General shall investigate complaints, review data for violations of this article, and shall refer matters to state, or local law-enforcement authorities to coordinate, investigate, or prosecute violations of this article.

(d) Law enforcement shall investigate each referral upon receipt for violation this article.

(e) The Office of the Inspector General shall receive data from the department related to recovery residences based upon intervals determined by the department, but not less than annually. This data may contain personally identifiable health information. It shall be transmitted and stored in conformity with applicable Health Insurance and Portability and Accountability Act standards.

(f) The Office of the Inspector General and the certifying agency set forth in §16-59-2 *et seq.* of this code may coordinate investigations as further set forth in legislative rule.