

PUBLIC POLICY REPORT 2017

MAY 2017

For more than six decades, Mental Health Colorado has led the fight to prevent and treat mental health and substance use disorders. In 2017 we continued that mission by taking our cause to the State Capitol.

Courting the Capitol

Mental Health Colorado tracked 58 bills in this year's legislative session. We supported 36 bills, all but ___ of which passed; and opposed two bills, one of which was defeated. We monitored the remaining 20.

We opposed legislation that would have curtailed Coloradan's right to bring complaints against mental health professionals ([HB17-1011](#)). We also opposed a bill that would have repealed the Colorado Health Exchange ([SB17-003](#)). Fortunately, SB – 003 was laid over in the Senate due to lack of support by the Senators and is dead for this year.

Mental Health Colorado supported legislation expanding access to care, including proposals to:

- Provide money to teachers for professional development on student discipline ([HB17-1211](#))
- Create a medication assisted treatment pilot program at the University of Colorado for opioid-dependent patients ([SB17-074](#))
- Strengthen Colorado's behavioral health crisis system ([SB17-207](#))
- Clarify that the marijuana tax cash fund may be used on behavioral services ([SB17-264](#))
- Allow elementary schools to apply for grants to hire behavioral health providers ([SB17-068](#))
- Create a program to provide vouchers and supportive persons with a mental illness who are being released from the Department of Corrections ([SB17-021](#))
- Create a donation fund to aid youth experiencing homelessness ([HB17-1055](#))
- Add psychologically traumatic events and serious bodily injury to the workers' compensation statutes ([HB17-1229](#))
- Allow sexual assault and stalking victims may break leases ([HB17-1035](#))
- Increase mental health support for peace officers ([HB17-1215](#))
- Require transfer of student records when a student changes schools.

Some of the proposals we supported fell short, including a ban on so-called gay conversion therapy ([HB17-1156](#)); prohibiting the corporal punishment of children in certain public areas ([HB17-1038](#)); lowering the age of consent for psychotherapy to 12 ([HB17-1320](#)); and stopping insurers from implementing “step therapy” ([SB17-203](#)).

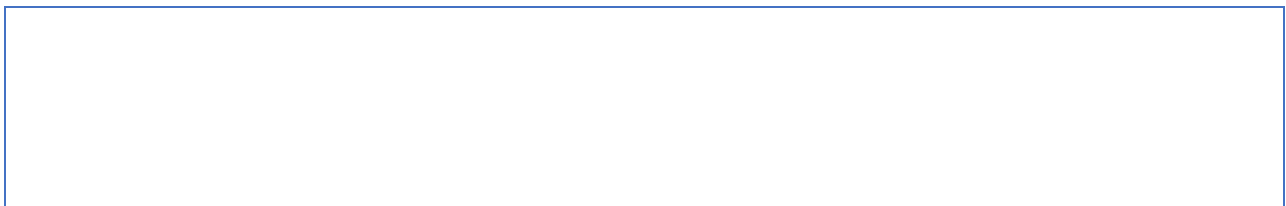
Ending Use of Involuntary Holds

If you thought that Coloradans experiencing a mental health crisis were taken to a therapeutic environment for treatment you would be wrong. Often, especially in the rural areas of our state, persons gravely disabled or considered an imminent risk of danger to themselves or others are taken to jail. They have committed no crime, but are housed in a jail cell due to the lack of a hospital bed, mental health center or crisis center in the community where they live.

Last year, county sheriffs approached the state legislature to end this practice. Legislators of both parties and both legislative chambers agreed. Governor Hickenlooper appointed a Mental Health Hold Task Force to study the issue and make recommendations on how best to change the current practice of housing individuals with mental illness in jails who have not committed a crime. (a person, for example, who is suicidal or so ill his life is in danger). Mental Health Colorado was an active participant in this task force.

The result of these recommendations was **SB 17 – 207, Strengthening Colorado’s Statewide Response to Behavioral Health Crises**. Supported by sheriffs, police, counties, mental health centers, public health officials, state agencies and advocacy organizations, the bill will end the use of jails for individuals in a mental health crisis who have not committed a crime.

The bill allows for counties to share resources and work together for creative, local solutions that meet the needs of their area. The bill also allocates \$7M of marijuana monies to enhance county partnerships, create crisis centers and mobile crisis response units throughout the rural areas of our state. With enactment of SB17-207, the policy change from incarceration to treatment will begin.



Mental Health Colorado seeks to improve conditions in the juvenile and criminal justice systems and to promote alternatives. A major effort in the legislature this session was HB 17 – 1329, Concerning the Treatment of Youths within the Division of Youth Corrections.

Support for People Released by DOC ([SB17-021](#))

Community supports—such as housing, employment assistance, and mental health treatment—help prevent recidivism of persons with mental illness who are being released from the department of corrections (DOC) or jails. In Colorado, such supports have been sorely lacking, resulting in millions of dollars in local and state costs for mental health treatments in the prison system, and little hope for success for those with mental illnesses who are transferring out the criminal justice system. This is why we strongly supported SB17-021, which appropriates \$3M to the department of local affairs to establish a housing and supportive services program to persons with a mental illness who are being released from the DOC or jails. The bill also directs the department of human services, in conjunction with the DOC, to implement reentry programs to assist in the transition out of incarceration and into the community.

Grant Money for Elementary Schools ([SB17-68](#))

In half of all lifetime cases of mental illness, symptoms appear by age 14. In the absence of early and effective intervention, mental health and substance use disorders can impose catastrophic costs on children, their families and our state. An important bill we supported in the legislature this session was SB 17 – 68, Concerning Early Support for Student Success Through Access to School Counselors. Schools are well-situated to host prevention, early intervention and treatment programs for children with mental health needs. This bill adds elementary schools to the list of public schools eligible to receive grants through the school counselor and behavioral health care professionals grant programs, and commits an additional \$9M towards the grants. As a result, more children will receive the help they need early—to ensure a greater chance for success later on.