

**Final**  
STAFF SUMMARY OF MEETING

TREATMENT OF PERSONS WITH MENTAL ILLNESS IN THE CRIMINAL JUSTICE  
SYSTEM

Date: 10/29/2015

ATTENDANCE

Time: **01:05 PM to 03:35 PM**

Humphrey X

Lee X

Place: HCR 0112

Newell \*

Woods X

This Meeting was called to order by  
Senator Martinez Humenik

Singer X

Martinez Humenik X

This Report was prepared by  
Amanda King

X = Present, E = Excused, A = Absent, \* = Present after roll call

Bills Addressed:	Action Taken:
Call to Order	Witness Testimony and/or Committee Discussion Only
Update from Advisory Task Force	Witness Testimony and/or Committee Discussion Only
Discussion of Advisory Task Force Vacancies	Witness Testimony and/or Committee Discussion Only
Public Comment	Witness Testimony and/or Committee Discussion Only
Bill 1 - Workers Compensation For PTSD	Witness Testimony and/or Committee Discussion Only
Bill 2 - Competency To Proceed For Juveniles	Witness Testimony and/or Committee Discussion Only
Bill 3 - Law Enforcement Mental Health Collaboration Grants	Witness Testimony and/or Committee Discussion Only
Bill 4 - Mental Health and Collaborative Management Teams	Recommendation(s) Approved

**01:06 PM -- Call to Order**

Senator Martinez Humenik called the meeting to order. The meeting agenda (Attachment A) was distributed.

**01:06 PM -- Update from Advisory Task Force**

Susie Walton, Advisory Task Force Chair, and Camille Harding, Advisory Task Force Co-chair, introduced themselves. Senator Martinez Humenik asked whether the minutes from the July and August task force meetings had been prepared, to which Ms. Walton responded affirmatively.

**01:08 PM**

Ms. Walton discussed the September 25, 2015 retreat held by the task force. She referenced the minutes that were compiled from the retreat. She said that there was discussion about the bills the oversight committee proposed at the September 21, 2015 committee meeting. She stated that housing, restoration services, and juvenile competency issues were determined to be the focus points for the task force. Ms. Walton said that the housing subgroup met in October and discussed conducting a Lean event concerning housing. Ms. Harding outlined the Lean event process. Ms. Walton discussed the stakeholders that they hope to be engaged in the Lean event for housing. Senator Martinez Humenik suggesting additional stakeholders to engage in the event, such as people who work in jails and with local organizations that assist with housing issues.

**01:15 PM**

Tariq Sheikh, 17th Judicial District, discussed House Bill 15-1025, concerning juvenile competency. He discussed the need to focus on restoration services for juveniles. Mr. Sheikh discussed situations when competency was an issue in cases involving juveniles in various counties. He discussed looking at who is providing the restoration services. He referenced the use of case management plans for juveniles, and the lack of funding for those plans. Mr. Sheikh answered questions about what types of services and treatments are involved in restoration. Senator Martinez Humenik asked about data collection concerning restoration services. Mr. Sheikh answered questions about restoration services and the treatment of mental health needs. Senator Newell commented on her involvement with previous legislation to address juvenile competency.

**01:33 PM**

Mr. Sheikh discussed establishing a statute outlining restoration services requirements. He reiterated the lack of funding for case management plans. Mr. Sheikh answered questions about the components of a management plan. Senator Martinez Humenik discussed her concerns about juveniles having criminal records for minor offenses. Mr. Sheikh discussed the ability to expunge certain offenses from juveniles' records.

**01:41 PM**

Ms. Walton discussed local jurisdictions that are addressing sexting by juveniles. She discussed restoration services provided at the Colorado Mental Health Institute at Pueblo versus community-based services. Discussion about restoration services and juvenile competency ensued. Ms. Walton discussed the action steps the task force will be taking to address restoration services. There was discussion about the task force's charge and the size of the task force. A copy of the task force's charge was distributed to the committee (Attachment B). Ms. Walton discussed the possibility of adding a representative from the Department of Public Health and Environment to the task force. She discussed the engagement of outside stakeholders with the task force. Mr. Sheikh responded to questions about the sexting program in Adams and Jefferson counties. Senator Newell discussed changes to the task force composition that occurred in 2014. Mr. Sheikh provided further information about the Adams county program to address sexting by juveniles. Committee discussion about the program ensued.

**02:03 PM**

Ms. Walton reiterated the focus by the task force on housing and restoration services. She mentioned possible changes to the task force's charge. Senator Martinez Humenik suggested having quarterly updates from the task force in the future. There was further discussion about the composition of the task force.

**02:09 PM -- Discussion of Advisory Task Force Vacancies**

Ms. Walton discussed the existing task force vacancies. A list of the current task force members and vacancies was distributed (Attachment C). She discussed the current vacancy for the Division of Parole in the Department of Corrections. Amanda King, Legislative Council Staff, provided an update on the status of that vacancy. Senator Martinez Humenik discussed the importance of task force members attending the task force meetings. Ms. Walton discussed the local law enforcement vacancies, and stated that Commander Tom DeLuca from the El Paso County Sheriff's Office and Chris Johnson from the County Sheriffs of Colorado have expressed interest as possible appointees. Commander DeLuca's resume was distributed (Attachment D). Senator Martinez Humenik suggested additional people for the local law enforcement vacancies, including Jim Alderman, retired Larimer County Sheriff; Loveland Police Chief Luke Hecker; and Delta County Sheriff Fred McKee. Ms. Walton discussed the possible appointment of Jagruti Shah to represent the Division of Behavioral Health in the Department of Human Services. Ms. Walton discussed the possible resignation of Michele Manchester from the task force, which would result in a vacancy for the representative for the Colorado Mental Health Institute at Pueblo.

**02:15 PM**

Ms. Walton discussed the pending appointment of Cynthia Kowert to represent the Colorado Attorney General's Office. Ms. Kowert expressed her interest in being appointed to the task force and discussed her professional experience. Ms. Kowert's recommendation letter and resume were distributed (Attachment E).

**02:19 PM**

There was discussion about the appointment process. Ms. King provided information about the the pending appointment of Ms. Shah and the statutory qualification for the local law enforcement representative. Ms. Walton further discussed the local law enforcement candidates. Ms. Walton discussed the resignation of District Attorney Dave Young, who had been the representative of the district attorneys in the state. She discussed Pat Coyle, who represents a person with knowledge of public benefits and public housing within the state, and continues to be absent from task force meetings. Ms. Walton discussed the vacancy for a public member who has an adult family member who has mental illness and has been involved in the criminal justice system. Ms. Walton discussed the potential resignation of Pat Teegarden, who represents the Department of Labor and Employment. She discussed the resignation of Brenidy Rice, who represented the Judicial Department. Ms. King clarified that the Chief Justice of the Colorado Supreme Court makes the appointments for the representative from the Judicial Department.

**02:23 PM**

Senator Martinez Humenik clarified the statutory qualification for the member representing the district attorneys within the state. She announced that Commander DeLuca and Ms. Kowert would be appointed to the task force. She asked for resumes and recommendation letters for the remaining potential candidates before their appointments would be made.

**02:28 PM**

Senator Martinez Humenik discussed the staffing for the task force. Ms. Walton stated that Hannah Tochtrop from Department of Health Care Policy and Financing will be providing staff support to the task force. There was discussion about the collaborative relationship between the task force and committee.

**02:29 PM -- Public Comment**

No one signed up to testify before the committee.

**02:30 PM -- Bill 1 - Workers Compensation For PTSD**

Kristen Forrestal, Office of Legislative Legal Services, provided an overview of Bill 1 (Attachment F). The bill includes post-traumatic stress disorder (PTSD) as a covered workers' compensation disability for certain peace officers, emergency medical service providers, and firefighters (public safety professionals). The bill requires an insurer or employer to pay all authorized medical expenses of a public safety professional alleged to suffer from work-related PTSD. The bill limits the dissemination of health information by health care providers to information directly related to the cause or aggravating factors of the patient's PTSD. The bill creates an expedited review process for the determination of diagnosis of work-related PTSD.

**02:35 PM**

Senator Woods discussed the peace officers who are excluded from the bill. Senator Martinez Humenik discussed the exclusion of victims' advocates from the bill. Ms. Forrestal and Representative Singer addressed questions about the peace officers who are excluded from the bill. Committee discussion about the bill ensued. Ms. Forrestal responded to questions about the bill.

02:45 PM

The committee discussed the bill's components addressing deaths due to suicide. At the request of the committee, Ms. Forrestal read aloud the statutory definitions of peace officer.

<b>BILL:</b>	<b>Bill 1 - Workers Compensation For PTSD</b>	
<b>TIME:</b>	<b>02:49:43 PM</b>	
<b>MOVED:</b>	Lee	
<b>MOTION:</b>	Moved a conceptual amendment to include all Department of Corrections' employees in the draft bill. The motion failed on a 3-3 vote.	
<b>SECONDED:</b>		
		<b>VOTE</b>
	Humphrey	No
	Lee	Yes
	Newell	Yes
	Woods	No
	Singer	Yes
	Martinez Humenik	No
	<b>YES: 3 NO: 3 EXC: 0 ABS: 0 FINAL ACTION: TIE</b>	

02:52 PM

Ms. Forrestal discussed the technical amendment (Attachment G) she prepared for the draft bill to correct a drafting error.

<b>BILL:</b>	<b>Bill 1 - Workers Compensation For PTSD</b>	
<b>TIME:</b>	<b>02:52:58 PM</b>	
<b>MOVED:</b>	Singer	
<b>MOTION:</b>	Moved amendment #1 (Attachment G). The motion passed without objection.	
<b>SECONDED:</b>		
		<b>VOTE</b>
	Humphrey	
	Lee	
	Newell	
	Woods	
	Singer	
	Martinez Humenik	
	<b>YES: 0 NO: 0 EXC: 0 ABS: 0 FINAL ACTION: Pass Without Objection</b>	

**02:53 PM**

Committee discussion occurred about expanding the bill to include victims' advocates.

<b>BILL:</b>	<b>Bill 1 - Workers Compensation For PTSD</b>	
<b>TIME:</b>	<b>02:54:06 PM</b>	
<b>MOVED:</b>	Newell	
<b>MOTION:</b>	Moved a conceptual amendment to include all victims' advocates in the draft bill. The motion failed on a 3-3 vote.	
<b>SECONDED:</b>		
		<b>VOTE</b>
	Humphrey	No
	Lee	Yes
	Newell	Yes
	Woods	No
	Singer	Yes
	Martinez Humenik	No
	<b>YES: 3 NO: 3 EXC: 0 ABS: 0 FINAL ACTION: TIE</b>	

**02:57 PM**

Bill Zepernick, Legislative Council Staff, explained the fiscal note for the bill (Attachment H). Representative Singer, who initially suggested the bill draft, asked to withdraw Bill 1. Committee discussion about the bill ensued. No motion was made to forward the bill to Legislative Council.

**03:02 PM -- Bill 2 - Competency To Proceed For Juveniles**

Senator Newell, who initially suggested the bill draft, asked that Bill 2 (Attachment I) be withdrawn. The bill establishes a juvenile-specific definition of "competent to proceed" and "incompetent to proceed" for juveniles involved in the juvenile justice system, as well as specific definitions for "developmental disability", "mental capacity", and "mental disability" when used in this context. The bill clarifies the procedures for establishing incompetency, as well as for establishing the restoration of competency. No motion was made to forward the bill to Legislative Council.

**03:03 PM -- Bill 3 - Law Enforcement Mental Health Collaboration Grants**

Jane Ritter, Office of Legislative Legal Services, provided an overview of Bill 3 (Attachment J). The bill creates a grant program in the Department of Public Safety (DPS) to provide local law enforcement agencies with funding to hire mental health professionals. These additional mental health staff will provide immediate services and assistance to persons exhibiting signs of mental illness or substance abuse who are involved in an investigation by a law enforcement agency. Grant recipients are required to collect data on the program and provide this to the DPS. The DPS cannot spend more than 5 percent of program funds for administrative purposes. Representative Singer commented on the bill and discussed the handouts he provided on Project EDGE (Attachment K, Attachment L, and Attachment M), which is a similar program to the one outlined in the bill.

**03:10 PM**

The committee discussed the bill and the fiscal note for the bill (Attachment N). Representative Singer answered questions about whether similar programs as the one outlined in the bill exist in other parts of the country or in Colorado. He further discussed the bill.

**03:18 PM**

Mr. Zepernick responded to questions about the bill's fiscal note. Representative Singer outlined how the bill could create cost savings for the state. He responded to questions about the bill and Project EDGE. Committee discussion about the bill ensued.

<b>BILL:</b>	<b>Bill 3 - Law Enforcement Mental Health Collaboration Grants</b>	
<b>TIME:</b>	<b>03:27:33 PM</b>	
<b>MOVED:</b>	Singer	
<b>MOTION:</b>	Moved that Bill 3 (Attachment J) be included as one of the bills forward by the Legislative Oversight Committee Concerning the Treatment of Persons with Mental Illness in the Criminal and Juvenile Justice Systems to Legislative Council. The motion failed on a 3-3 vote.	
<b>SECONDED:</b>		
		<b>VOTE</b>
	Humphrey	No
	Lee	Yes
	Newell	Yes
	Woods	No
	Singer	Yes
	Martinez Humenik	No
<b>Final YES: 3 NO: 3 EXC: 0 ABS: 0 FINAL ACTION: TIE</b>		

**03:28 PM -- Bill 4 - Mental Health and Collaborative Management Teams**

Senator Newell explained Bill 4 (Attachment O) and discussed collaborative management teams. Ms. Ritter provided an overview of the bill. The bill adds mental health professionals to the list of persons that must be included in any memorandum of understanding entered into between county departments of human or social services and other local-level service providers. Lauren Schreier, Legislative Council Staff, explained the fiscal note for the bill (Attachment P).

<b>BILL:</b>	<b>Bill 4 - Mental Health and Collaborative Management Teams</b>	
<b>TIME:</b>	<b>03:32:20 PM</b>	
<b>MOVED:</b>	Newell	
<b>MOTION:</b>	Moved that Bill 4 (Attachment O) be included as one of the bills forwarded by the Legislative Oversight Committee Concerning the Treatment of Persons with Mental Illness in the Criminal and Juvenile Justice Systems to Legislative Council. The motion passed on a vote of 6-0.	
<b>SECONDED:</b>		
		<b>VOTE</b>
	Humphrey	Yes
	Lee	Yes
	Newell	Yes
	Woods	Yes
	Singer	Yes
	Martinez Humenik	Yes
	<b>Final YES: 6 NO: 0 EXC: 0 ABS: 0 FINAL ACTION: PASS</b>	

**03:33 PM**

Senator Martinez Humenik determined that the bill would start in the Senate. The bill sponsors will be Senator Newell and and Senator Martinez Humenik, as co-prime sponsors in the Senate, and Representative Lee in House. Representative Singer will be listed as a co-sponsor on the bill. The bill will not contain a safety clause.

**03:35 PM**

The committee adjourned.

AGENDA

**Legislative Oversight Committee Concerning the  
Treatment of Persons With Mental Illness in the  
Criminal and Juvenile Justice Systems**

Thursday, October 29, 2015  
1:00 p.m.  
House Committee Room 0112  
State Capitol Building

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- 1:00 p.m. Call to Order**
- *Senator Beth Martinez Humenik, Legislative Oversight Committee Chair*
- 1:05 p.m. Update from Advisory Task Force**
- *Susan Walton, Advisory Task Force Chair and Director of Park County Department of Human Services*
- 1:50 p.m. Discussion of Advisory Task Force Vacancies**
- *Susan Walton, Advisory Task Force Chair and Director of Park County Department of Human Services*
- 2:15 p.m. Public Comment**
- 2:30 p.m. Discussion and Votes on Proposed Legislation**
- Bill 1 - Workers Compensation For PTSD
  - Bill 2 - Competency To Proceed For Juveniles
  - Bill 3 - Law Enforcement Mental Health Collaboration Grants
  - Bill 4 - Mental Health and Collaborative Management Teams
- 4:00 p.m. Adjourn**



1 of 1 DOCUMENT

## COLORADO REVISED STATUTES

\*\*\* This document reflects changes current through all laws passed at the First Regular Session of the Seventieth General Assembly of the State of Colorado (2015) \*\*\*

## TITLE 18. CRIMINAL CODE

ARTICLE 1.9. CONTINUING EXAMINATION OF THE TREATMENT OF PERSONS WITH MENTAL ILLNESS WHO ARE INVOLVED IN THE JUSTICE SYSTEM

## GO TO COLORADO STATUTES ARCHIVE DIRECTORY

*C.R.S. 18-1.9-104 (2015)*

18-1.9-104. Task force concerning treatment of persons with mental illness in the criminal and juvenile justice systems - creation - membership - duties

(1) Creation. (a) There is hereby created a task force concerning treatment of persons with mental illness in the criminal and juvenile justice systems in Colorado. The task force shall consist of thirty-two members appointed as provided in paragraphs (b) and (c) of this subsection (1).

(b) The chief justice of the Colorado supreme court shall appoint four members who represent the judicial department, two of whom shall represent the division of probation within the department, one of whom shall have experience handling juvenile justice matters within the department, and one of whom shall have experience handling adult criminal justice matters within the department.

(c) The chair and vice-chair of the committee shall appoint twenty-eight members as follows:

(I) One member who represents the division of criminal justice within the department of public safety;

(II) Two members who represent the department of corrections, one of whom represents the division of parole within the department;

(III) Two members who represent local law enforcement agencies, one of whom shall be in active service and the other one of whom shall have experience dealing with juveniles in the juvenile justice system;

(IV) Five members who represent the department of human services, as follows:

(A) One member who represents the unit within the department of human services that is responsible for mental health and drug and alcohol abuse services;

(B) One member who represents the division of youth corrections;

(C) One member who represents the unit within the department of human services that is responsible for child welfare services;

(D) (Deleted by amendment, L. 2009, p. 140, § 3, effective August 5, 2009.)

(E) One member who represents the Colorado mental health institute at Pueblo; and

(F) One member who represents the mental health planning and advisory committee within the department of human services;

(V) One member who represents the interests of county departments of social services;

- (VI) One member who represents the department of education;
  - (VII) One member who represents the state attorney general's office;
  - (VIII) One member who represents the district attorneys within the state;
  - (IX) Two members who represent the criminal defense bar within the state, one of whom shall have experience representing juveniles in the juvenile justice system;
  - (X) Two members who are licensed mental health professionals practicing within the state, one of whom shall have experience treating juveniles;
  - (XI) One member who represents community mental health centers within the state;
  - (XII) One member who is a person with knowledge of public benefits and public housing within the state;
  - (XIII) One member who is a practicing forensic professional within the state;
  - (XIV) Three members of the public as follows:
    - (A) One member who has mental illness and has been involved in the criminal justice system in this state;
    - (B) One member who has an adult family member who has mental illness and has been involved in the criminal justice system in this state; and
    - (C) One member who is the parent of a child who has mental illness and has been involved in the juvenile justice system in this state;
  - (XV) One member who represents the department of health care policy and financing;
  - (XVI) One member who represents the department of labor and employment;
  - (XVII) One member who represents the office of the child's representative; and
  - (XVIII) One member who represents the office of the alternate defense counsel.
- (d) A vacancy occurring in a position filled by the chief justice of the Colorado supreme court pursuant to paragraph (b) of this subsection (1) shall be filled as soon as possible by the chief justice of the Colorado supreme court in accordance with the limitations specified in paragraph (b) of this subsection (1). In addition, the chief justice of the Colorado supreme court may remove and replace any appointment to the task force made pursuant to paragraph (b) of this subsection (1).
- (e) A vacancy occurring in a position filled by the chair and vice-chair of the committee pursuant to paragraph (c) of this subsection (1) shall be filled as soon as possible by the chair and vice-chair of the committee in accordance with the limitations specified in paragraph (c) of this subsection (1). In addition, the chair and vice-chair of the committee may remove and replace any appointment to the task force made pursuant to paragraph (c) of this subsection (1).
- (f) In making appointments to the task force, the appointing authorities shall ensure that the membership of the task force reflects the ethnic, cultural, and gender diversity of the state and includes representation of all areas of the state.
- (2) Issues for study. The task force shall examine the identification, diagnosis, and treatment of persons with mental illness who are involved in the state criminal and juvenile justice systems, including an examination of liability, safety, and cost as they relate to these issues. The task force shall specifically consider, but need not be limited to, the following issues:
- (a) On or before July 1, 2005:
    - (I) The diagnosis, treatment, and housing of juveniles with mental illness who are involved in the criminal justice system or the juvenile justice system; and
    - (II) The adoption of a common framework for effectively addressing the mental health issues, including competency and co-occurring disorders, of juveniles who are involved in the criminal justice system or the juvenile justice system;
  - (b) On or before July 1, 2006:

(I) The prosecution of and sentencing alternatives for persons with mental illness that may involve treatment and ongoing supervision;

(II) The civil commitment of persons with mental illness who have been criminally convicted, found not guilty by reason of insanity, or found to be incompetent to stand trial; and

(III) The development of a plan to most effectively and collaboratively serve the population of juveniles involved in the criminal justice system or the juvenile justice system;

(b.5) Repealed.

(c) On or before July 1, 2007:

(I) The diagnosis, treatment, and housing of adults with mental illness who are involved in the criminal justice system;

(II) The ongoing treatment, housing, and supervision, especially with regard to medication, of adults and juveniles who are involved in the criminal and juvenile justice systems and who are incarcerated or housed within the community and the availability of public benefits for such persons;

(III) The ongoing assistance and supervision, especially with regard to medication, of persons with mental illness after discharge from sentence; and

(IV) The identification of alternative entities to exercise jurisdiction regarding release for persons found not guilty by reason of insanity, such as the development and use of a psychiatric security review board, including recommendations related to the indeterminate nature of the commitment imposed;

(d) On or before July 1, 2008, the identification, diagnosis, and treatment of minority persons with mental illness, women with mental illness, and persons with co-occurring disorders, in the criminal and juvenile justice systems;

(e) On or before July 1, 2009:

(I) The early identification, diagnosis, and treatment of adults and juveniles with mental illness who are involved in the criminal and juvenile justice systems;

(II) The modification of the criminal and juvenile justice systems to most effectively serve adults and juveniles with mental illness who are involved in these systems;

(III) The implementation of appropriate diagnostic tools to identify persons in the criminal and juvenile justice systems with mental illness; and

(IV) Any other issues concerning persons with mental illness who are involved in the state criminal and juvenile justice systems that arise during the course of the task force study;

(f) Beginning July 1, 2011, through July 1, 2014:

(I) The diagnosis, treatment, and housing of persons with mental illness or co-occurring disorders who are convicted of crimes, or incarcerated or who plead guilty, nolo contendere, or not guilty by reason of insanity or who are found to be incompetent to stand trial;

(II) The diagnosis, treatment, and housing of juveniles with mental illness or co-occurring disorders who are adjudicated, detained, or committed for offenses that would constitute crimes if committed by adults or who plead guilty, nolo contendere, or not guilty by reason of insanity or who are found to be incompetent to stand trial;

(III) The ongoing treatment, housing, and supervision, especially with regard to medication, of adults and juveniles who are involved in the criminal and juvenile justice systems and who are incarcerated or housed within the community and the availability of public benefits for these persons; and

(IV) The safety of the staff who treat or supervise persons with mental illness and the use of force against persons with mental illness;

(g) On or after July 1, 2014:

(I) Housing for a person with mental illness after his or her release from the criminal or juvenile justice system;

(II) Medication consistency, delivery, and availability;

(III) Best practices for suicide prevention, within and outside of correctional facilities;

(IV) Treatment of co-occurring disorders;

(V) Awareness of and training for enhanced staff safety, including expanding training opportunities for providers; and

(VI) Enhanced data collection related to issues affecting persons with mental illness in the criminal and juvenile justice systems.

(3) Additional duties of the task force. The task force shall provide guidance and make findings and recommendations to the committee for its development of reports and legislative recommendations for modification of the criminal and juvenile justice systems, with respect to persons with mental illness who are involved in these systems. In addition, the task force shall:

(a) On or before August 1, 2004, and by each August 1 thereafter, select a chair and a vice-chair from among its members;

(b) Meet at least six times each year, or more often as directed by the chair of the committee;

(c) Communicate with and obtain input from groups throughout the state affected by the issues identified in subsection (2) of this section;

(d) Create subcommittees as needed to carry out the duties of the task force. The subcommittees may consist, in part, of persons who are not members of the task force. Such persons may vote on issues before the subcommittee but shall not be entitled to a vote at meetings of the task force.

(e) Submit a report to the committee by October 1, 2004, and by each October 1 thereafter, that, at a minimum, specifies:

(I) Issues to be studied in upcoming task force meetings and a prioritization of those issues;

(II) Findings and recommendations regarding issues of prior consideration by the task force;

(III) Legislative proposals of the task force that identify the policy issues involved, the agencies responsible for the implementation of the changes, and the funding sources required for implementation.

(4) Flexibility. No requirement set forth in subsection (2) of this section shall prohibit the task force from studying, presenting findings and recommendations on, or requesting permission to draft legislative proposals concerning any issue described in subsection (2) of this section at any time during the existence of the task force.

(5) Compensation. Members of the task force shall serve without compensation. However, members of the task force appointed pursuant to subparagraph (XIV) of paragraph (c) of subsection (1) of this section may receive reimbursement for actual and necessary expenses associated with their duties on the task force.

(6) Coordination. The task force may work with other task forces, committees, or organizations that are pursuing policy initiatives similar to those addressed in subsection (2) of this section. The task force shall consider developing relationships with other task forces, committees, and organizations to leverage efficient policy-making opportunities through collaborative efforts.

**HISTORY:** Source: L. 2004: Entire article added, p. 1870, § 1, effective June 4. L. 2006: (2)(b.5) added, p. 528, § 1, effective April 18. L. 2008: (1)(a) and IP(1)(c) amended and (1)(c)(XV) added, p. 105, § 1, effective March 19. L. 2009: (1)(c)(IV)(A), (1)(c)(IV)(D), (1)(c)(XV), (3), and (4) amended and (1)(c)(XVI), (2)(f), and (6) added, (HB 09-1021), ch. 33, pp. 140, 141, § 3, 4, 5, effective August 5. L. 2010: IP(2)(f), (3)(a), (3)(b), and IP(3)(e) amended, (SB 10-213), ch. 375, p. 1762, § 7, effective June 7. L. 2014: (1)(a), IP(1)(c), IP(1)(c)(IV), (1)(c)(XV), IP(2)(a), IP (2)(b), IP(2)(c), IP(2)(e), IP(2)(f), (3), and (5) amended and (1)(c)(XVII), (1)(c)(XVIII), and (2)(g) added, (SB 14-021), ch. 348, p. 1563, § 3, effective July 1.

Editor's note: Subsection (2)(b.5)(IV) provided for the repeal of subsection (2)(b.5), effective December 30, 2006. (See L. 2006, p. 528.)

## MICJS Advisory Task Force Members

State or Private Agency	Representative(s) and Affiliation(s)	
Department of Public Safety (1)	Peggy Heil	Division of Criminal Justice
Department of Corrections (2)	Kerry Pruett	Mental Health Programs Administrator
	vacant	Division of Parole
Local Law Enforcement (2) - one of whom will be in active service and one of whom shall have experience dealing with juveniles in the juvenile justice system	vacant	
	vacant	
Department of Human Services (5)	vacant	Division of Behavioral Health
	Ashley Tunstall	Division of Youth Corrections
	Melinda Cox	Division of Child Welfare
	Michele Manchester	Colorado Mental Health Institute at Pueblo
	Moe Keller	Mental Health Planning and Advisory Council
County Department of Social Services (1)	Susan Walton, chair	Park County Department of Human Services
Department of Education (1)	Michael Ramirez	Teaching and Learning Unit
State Attorney General's Office (1)	vacant	
District Attorneys (1)	Dave Young	17th Judicial District Attorney's Office
Criminal Defense Bar (2)	Karen Knickerbocker	Office of the Colorado State Public Defender
	Gina Shimeall	Criminal Defense Bar
Practicing Mental Health Professionals (2)	Fernando Martinez	San Luis Valley Mental Health Center
	Lisa Thompson	Colorado Coalition for the Homeless
Community Mental Health Centers in Colorado (1)	Harriet Hall	Jefferson Center for Mental Health
Person with Knowledge of Public Benefits and Public Housing in Colorado (1)	Pat Coyle	Colorado Department of Local Affairs, Division of Housing
Colorado Department of Health Care Policy & Financing (1)	Camille Harding, co-chair	Clinical Services Office
Practicing Forensic Professional (1)	Richard Martinez, M.D.	Colorado Office of Behavioral Health/UCDSOM
Members of the Public (3)	Bethe Feltman	Member with a mental illness who has been involved in the Colorado criminal justice system
	Deirdre Parker	Parent of a child who has a mental illness and who has been involved in the Colorado criminal justice system
	vacant	Member with an adult family member who has a mental illness and who has been involved in the Colorado criminal justice system
Office of the Child's Representative (1)	Sheri Danz	Deputy Director
Office of the Alternate Defense Counsel (1)	Kathy McGuire	Private attorney
Colorado Department of Labor and Employment (1)	Patrick Teegarden	Director of Policy and Legislation
Judicial Branch (4)	vacant	
	Judge K.J. Moore	1st Judicial District
	Susan Colling	Juvenile Programs Coordinator, Probation Services
	Tobin Wright	Chief Probation Officer in the 16th Judicial District

Updated: October 28, 2015

# THOMAS G. DELUCA

## EXPERIENCE

### **El Paso County Sheriff's Office January 1, 2015 to Present**

- Operations Division Commander responsible for Intake/Release, Court and Transport/ Special Response Team.

### **Colorado Springs School District #11 Security Coordinator October 15, 2014 to December 31, 2014**

- Supervise all East Side Schools to include Elementary, Middle and High Schools for the East Side of District 11. Respond to any Security concerns for all Schools and supervise the High School and Middle School Security Teams assigned to my Area of Supervision.

### **Colorado Springs School District #11 School Security August 2012 through October 15, 2014**

- Provide Campus Security for Coronado High School.

### **El Paso County Sheriff's Office April 1988 – June 30, 2012**

#### **Criminal Justice Center Division Commander February 2011 to June 30, 2012**

- Detention Security Division Commander responsible for the care and security of all the inmates who in the lawful custody of the Sheriff at the Criminal Justice Center. Retired.

#### **Court Services Lieutenant, January 1, 2007-February 2011**

- Watch Commander for Court Services Section.

#### **CJC Detention Division Lieutenant, January 15, 2003-January 1, 2007**

- Watch Commander for CJC Detention Division Security and Intake. Investigative coordinator for Detention Investigative Team.

#### **Promoted to Rank of Lieutenant January 15, 2003**

#### **Traffic Sergeant, August 01, 2002 – January 15, 2003**

- Supervision of the Traffic Section, Grant Coordinator for LEAF Grant and Aggressive Driving Grant.

#### **Community Support Sergeant, January 02, 2001 – August 01, 2002**

- Supervision of the Community Support Unit, to include SRO's, DARE Deputies, and CRO Deputies. Also supervised the POSSE Unit and P.O.S.T. Reserve Academy Coordinator.

#### **Training Sergeant, January 01, 1998 – January 02, 2001**

- Supervision of the Training Section, to include new recruits, as well as in-service training for Sheriff's office employees. Academy P.O.S.T. Director.

#### **Intake/Release Administrative Sergeant, April 1996 – January 1998**

- Supervised all civilian staff assigned to Intake/Release and supervised the overall Intake/Release Section.

#### **Floor Security Shift Sergeant, September 1994 – April 1996**

- Supervised shift of sworn and civilian staff at the Metro Detentions Training Facility.

#### **Promoted to Rank of Sergeant, September 01, 1994 Intake/Release**

#### **Intake/Release Deputy, January 1992 – September 1994**

- Performed duties of Shift Supervisor, designated Detention Training Officer.

#### **Detention Deputy, April 1988 – January 1992**

- Performed all duties as assigned to a Detention Deputy and maintained safety and security of the facility. Also acted as Lead III in the Supervisors absence. Designated Detention Training Officer.

## EDUCATION

*FBI National Academy Graduate September 26, 2010  
through December 10, 2010 Session 243.*

*Quantico, VA*

*University of Southern Colorado*

*Pueblo, CO*

122 Credits toward Bachelor's Degree in Criminal Justice.

*Colorado Springs Police Department Reserve Class*

*Colorado Springs, CO*

Honors Graduate in 1988

*Pikes Peak Community College, 1993 – 1994*

*Colorado Springs, CO*

## ADDITIONAL ACTIVITIES

- Special Response Team (SRT) member since the team's inception in May, 1993 through April, 1999. SRT Team Leader effective February 2008 to Present
- Law Enforcement Instructor, El Paso County Sheriff's Office
- In Service Instructor, El Paso County Sheriff's Office
- El Paso County Drug Court Steering Committee
- Numerous Community Committees

## PROFESSIONAL TRAINING

- Special Response Team Training
- Board of Peace Officer Standards and Training
- Supervisory Training, "Commitment to Excellence"
- Calibre Press Street Survival
- P.O.S.T. Certified Instructor Development Course
- Colorado regional Community Policing Institute, Middle Management and Organizational Change
- International Association of Chiefs of Police, "Managing the Training Unit"
- Reid Interview and Interrogation Course
- Incident Command Training
- Internet Crimes Against Children
- Penn State University, "Providing Police Leadership for the Next Century"
- ALERT Court Security Seminar
- Objective Pre-Employment Interviewing
- County Sheriff's of Colorado, "First Line Supervisor"
- Key Elements for Effective School / Policing
- Crime Scene Response for New Detectives
- Standardized Field Sobriety Training
- Tactical Risk Management

## AWARDS and RECOGNITION

- Letters of Commendation
- Commanders Commendation from CSPD
- Letters of Appreciation
- Employee of the Month, 1999



RALPH L. CARR  
COLORADO JUDICIAL CENTER  
1300 Broadway, 9th Floor  
Denver, Colorado 80203  
Phone (720) 508-6000

Criminal Justice Section

October 20, 2015

CYNTHIA H. COFFMAN  
Attorney General  
DAVID C. BLAKE  
Chief Deputy Attorney General  
MELANIE J. SNYDER  
Chief of Staff  
FREDERICK R. YARGER  
Solicitor General

STATE OF COLORADO  
DEPARTMENT OF LAW

Susie Walton Chair Person  
Task Force for Mental Illness  
In the Criminal Justice System

Dear Chair Person Walton

I am writing this letter on behalf of Cynthia J. Kowert, who is applying to become a member of the Task Force for Mental Illness in the Criminal Justice System.

Cynthia is the Assistant Deputy for the Criminal Justice Section of the Attorney General's Office. In this capacity, she is the number two person for the Criminal Justice Section and is responsible for supervision of our First Assistant AG's and three Criminal Justice Units. She also participates in and is a member of numerous committees and handles several special projects.

Cynthia has a long and distinguished career as a litigator. She spent almost 19 years with the 17<sup>th</sup> Judicial District as a prosecutor. She was Chief of Felony Units, the Juvenile Unit and Child Victim's Unit at different times during her tenure at the 17<sup>th</sup> Judicial District.

There have been numerous times when Cynthia has dealt with cases involving individuals who were incompetent to stand trial or the issue of sanity was raised. She is very cognizant of the role mental health issues play in our Criminal Justice System and how mental health issues can effect people's lives.

Page 2

Cynthia is a motivated, reliable and responsible attorney who would be a great asset to your team. I highly recommend her for this position.

Sincerely,

A handwritten signature in cursive script, appearing to read "Scott Turner", written over a horizontal line.

Scott Turner, Deputy Attorney General,  
Criminal Justice Section  
Attorney General's Office, State of Colorado  
1300 Broadway, 9<sup>th</sup> Floor Denver, CO 80203

**Resume**  
**Cynthia J. Kowert**  
**Attorney at Law**

**Work Experience**

**June 8, 2015 – Present:** Assistant Deputy AG for the Criminal Justice Section. Number two position in the Criminal Justice Section of the Attorney General's Office. Management and personnel responsibilities along with a small case load.

**July 16, 2012 – June 8, 2015:** Assistant Attorney General in the Financial Fraud Unit of the Colorado Attorney General's Office. Case load included mostly insurance fraud with some securities fraud cases.

**January 1, 2012 to July 15, 2012:** Law Practice, solo practitioner, family and criminal law.

**July 12, 1993 to December 31, 2011:** Served as a prosecutor with the 17<sup>th</sup> Judicial District Attorney's Office, Adams and Broomfield Counties. Positions included:

- County Court Deputy DA
- Juvenile Court Deputy DA
- District Court (felony) Deputy DA
- Child Victim Unit Deputy DA
- Chief Trial Deputy for County Court
- Chief Trial Deputy for District Court
- Chief Trial Deputy for the Child Victim Unit and Juvenile Court
- Assistant District Attorney

**February 1992 to July 1993:** Deputy DA in the 14<sup>th</sup> Judicial District, Grand County, handled felonies, juvenile, and county court cases simultaneously.

**June 1990 to January 1992:** Deputy State Public Defender. Handled a county, juvenile and then felony case load.

**February 1983 to March 1987:** United States Air Force Officer, Military Police.

**Prosecution Experience**

1. As a criminal prosecutor I handled over 100 jury trials including several first and second degree murder cases, physical and sexual assaults on children, financial crimes, drug offenses and many others.
2. I have handled numerous cases involving mental health issues, including competency and insanity.

### **Management Experience**

1. In my experience as a Chief Trial Deputy and Assistant District Attorney I managed attorneys from the county court level to the chief trial deputy level. I was in the 17<sup>th</sup> Judicial District for almost 19 years and spent approximately 10 of those years managing people.
2. Managed a Flight (approximately 40 people) in the United States Military

### **Educational Experience**

1. Webster Groves high School, Webster Groves, MO: 1973 to 1976, graduated - H/S diploma.
2. Lamar University, Beaumont, TX, August 1977 to May 1980.
3. Texas Woman's University, Denton, TX, August 1980 to December 1982, B.S. in Government, Magna Cum Laude.
4. University of Denver School of Law: September, 1987 to December, 1989, Juris Doctor, top 25% class rank.

### **Licenses**

1. Licensed to practice law in Colorado since May 1990
2. Licensed to practice in United States Federal Court in 2015.

### **Teaching/Training**

- Taught a one-hour lecture on the admission of evidence at trial to Insurance Fraud Investigators – February 2015.
- Along with a colleague, taught a 1.5 hour training on worker's compensation law to public and private investigators - July 2014.
- Along with another attorney, taught a four hour constitutional law training session to the Colorado State Patrol, focusing on searches of dwellings and vehicles - February, 2014.
- Taught a two hour training session on custodial interrogation to members of the Division of Insurance (DOI) - 2013
- Six times I taught a two hour class on vehicle searches for the Adams County Sheriff's Police Academy. I did this twice a year for three years - 2008, 2009, 2010.
- Taught a one-hour training on the Victim's rights Act - 2005.
- Taught a one-hour training for prosecutors on closing arguments - 2004.
- Taught a one-hour training for prosecutors on expert witnesses - 2002.
- Taught a two-hour search and seizure class to the Thornton Polic Department - 1999.
- Taught a two-hour session on the legislative up-date to members of the Northglenn Police Department – May 1996.

### **Community Involvement**

1. Access Housing Board of Directors: March 2009 to April 2011.
2. Was on the Board for the Sexual Assault Nurse Examiners (SANE) program though St. Anthony's Hospital from 2004 to 2008.
3. Served on the Adams County Domestic Violence Task Force from 2003 to 2005.
4. Served on the Sexual Assault Task Force for Adams County from 1998 to 2000.
5. Served on the selection committee for the Victim Rights Week Award winners from Adams and Broomfield Counties four times in the 2000's.
6. Organized, directed and facilitated the high School Mock Trail Competition for Adams and Broomfield Counties in February of 2009 and 2010.

## Summary

I would be proud to serve as a member of the Task Force for Mental Illness and would greatly appreciate the opportunity to do so.

Second Regular Session  
Seventieth General Assembly  
STATE OF COLORADO

DRAFT  
10.16.15

Bill 1

LLS NO. 16-0314.01 Kristen Forrestalx4217

COMMITTEE BILL

**Legislative Oversight Committee Concerning the Treatment of Persons  
with Mental Illness in the Criminal and Juvenile Justice Systems**

**BILL TOPIC: "Workers' Compensation For PTSD"**

**A BILL FOR AN ACT**

101 **CONCERNING WORKERS' COMPENSATION COVERAGE FOR**  
102 **POST-TRAUMATIC STRESS DISORDER.**

**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billssummaries>.)*

**Legislative Oversight Committee Concerning the Treatment of Persons with Mental Illness in the Criminal and Juvenile Justice Systems.** The bill includes post-traumatic stress disorder (PTSD) as a covered workers' compensation disability for a peace officer, emergency

*Capital letters indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.*

medical service provider, or firefighter. The bill requires an insurer or employer to pay all authorized medical expenses of a peace officer, emergency medical service provider, or firefighter alleged to suffer from work-related PTSD.

The bill limits the dissemination of health information by health care providers to information directly related to the cause or aggravating factors of the patient's PTSD. The bill creates an expedited review process for the determination of the diagnosis of work-related PTSD.

---

1 *Be it enacted by the General Assembly of the State of Colorado:*

2           **SECTION 1.** In Colorado Revised Statutes, **add** 8-41-212 as  
3 follows:

4           **8-41-212. Coverage for post-traumatic stress disorder - peace**  
5 **officers, emergency medical service providers, firefighters -**  
6 **legislative declaration - definitions. (1) Legislative declaration. THE**

7 GENERAL ASSEMBLY HEREBY FINDS AND DECLARES THAT:

8           (a) PEACE OFFICERS, EMERGENCY MEDICAL SERVICE PROVIDERS,  
9 AND FIREFIGHTERS ARE EXPOSED IN THE LINE OF DUTY TO CERTAIN  
10 TRAUMATIC WORK-RELATED EVENTS THAT CAN LEAD TO A DIAGNOSIS OF  
11 POST-TRAUMATIC STRESS DISORDER;

12           (b) A PEACE OFFICER, EMERGENCY MEDICAL SERVICE PROVIDER,  
13 OR FIREFIGHTER SHOULD NOT BE DISCOURAGED FROM SEEKING  
14 TREATMENT FOR PTSD. THEREFORE, IT IS IMPORTANT THAT:

15           (I) LIMITATIONS BE PLACED ON INFORMATION GIVEN TO THIRD  
16 PARTIES BY HEALTH CARE PROVIDERS AND OTHER PERSONS OR ENTITIES  
17 REGARDING PTSD; AND

18           (II) JUDICIAL REVIEW FOR A PTSD CLAIM SHOULD BE EXPEDITED;  
19 AND

20           (c) PTSD IS A WORKPLACE INJURY THAT SHOULD BE COVERED BY  
21 THE "WORKERS' COMPENSATION ACT OF COLORADO" FOR PEACE

1 OFFICERS, EMERGENCY MEDICAL SERVICE PROVIDERS, AND FIREFIGHTERS,  
2 AND THIS ISSUE IS A MATTER OF STATEWIDE CONCERN.

3 (2) **Definitions.** AS USED IN THIS SECTION:

4 (a) "EMERGENCY MEDICAL SERVICE PROVIDER" MEANS A PERSON  
5 CERTIFIED PURSUANT TO PART 2 OF ARTICLE 3.5 OF TITLE 25, C.R.S.

6 (b) "FIREFIGHTER" MEANS AN OFFICER OR MEMBER OF A FIRE  
7 DEPARTMENT OR FIRE PROTECTION OR FIRE-FIGHTING AGENCY OF THE  
8 STATE, OR OF ANY MUNICIPAL OR QUASI-MUNICIPAL CORPORATION IN THIS  
9 STATE, WHO RECEIVES COMPENSATION FOR SERVICES RENDERED AS A  
10 FIREFIGHTER.

11 (c) "HEALTH CARE PROVIDER" MEANS A PHYSICIAN OR  
12 PSYCHIATRIST LICENSED PURSUANT TO ARTICLE 36 OF TITLE 12, C.R.S., A  
13 PSYCHOLOGIST LICENSED PURSUANT TO PART 3 OF ARTICLE 43 OF TITLE 12,  
14 C.R.S., OR A PERSON WORKING UNDER THE SUPERVISION OF A LICENSED  
15 PHYSICIAN, PSYCHIATRIST, OR PSYCHOLOGIST.

16 (d) "LINE OF DUTY" MEANS AN ACTION OR ACTIVITY THAT A PEACE  
17 OFFICER, EMERGENCY MEDICAL SERVICE PROVIDER, OR FIREFIGHTER IS  
18 NORMALLY REQUIRED TO PERFORM IN THE COURSE OF HIS OR HER  
19 EMPLOYMENT. THE LINE OF DUTY INCLUDES CRIME CONTROL OR  
20 REDUCTION; ENFORCEMENT OF CRIMINAL LAW; PROVISION OF MEDICAL  
21 SERVICES; EMERGENCY RESPONSE; RESCUE; FIREFIGHTING; AND ACTIONS  
22 THAT A PEACE OFFICER, EMERGENCY MEDICAL SERVICE PROVIDER, OR  
23 FIREFIGHTER IS AUTHORIZED OR OBLIGATED BY LAW, RULE, OR CONDITION  
24 OF EMPLOYMENT OR SERVICE TO PERFORM OR FOR WHICH THE PERSON IS  
25 COMPENSATED BY THE PUBLIC OR PRIVATE AGENCY HE OR SHE SERVES.

26 (e) "PEACE OFFICER" MEANS A PEACE OFFICER AS DESCRIBED IN  
27 SECTIONS 16-2.5-102, 16-2.5-103, 16-2.5-105, 16-2.5-108, 16-2.5-114,

1 16-2.5-146, AND 16-2.5-148, C.R.S.

2 (f) "POST-TRAUMATIC STRESS DISORDER" OR "PTSD" HAS THE  
3 SAME MEANING AS SET FORTH IN THE MOST RECENT EDITION OF THE  
4 DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS (DSM)  
5 PROVIDED BY THE AMERICAN PSYCHIATRIC ASSOCIATION.

6 (g) "SERIOUS BODILY INJURY" MEANS AN INJURY THAT INVOLVES  
7 A RISK OF:

- 8 (I) DEATH;
- 9 (II) SERIOUS PERMANENT DISFIGUREMENT; OR
- 10 (III) PROTRACTED LOSS OR IMPAIRMENT OF THE FUNCTION OF ANY  
11 PART OR ORGAN OF THE BODY.

12 (3) **Benefits.** IF A PEACE OFFICER, EMERGENCY MEDICAL SERVICE  
13 PROVIDER, OR FIREFIGHTER SEEKS TREATMENT FOR PTSD, THE EMPLOYER  
14 OR WORKERS' COMPENSATION INSURER SHALL PAY ALL AUTHORIZED  
15 MEDICAL EXPENSES EVEN IF IT IS SUBSEQUENTLY DETERMINED THAT THE  
16 OFFICER, PROVIDER, OR FIREFIGHTER WAS NOT DIAGNOSED WITH PTSD.

17 (4) **Reporting of information.** NOTWITHSTANDING ANY OTHER  
18 PROVISION OF LAW, A HEALTH CARE PROVIDER OR OTHER PERSON OR  
19 ENTITY SHALL REPORT INFORMATION ABOUT A PEACE OFFICER'S,  
20 EMERGENCY MEDICAL SERVICE PROVIDER'S, OR FIREFIGHTER'S CLAIM FOR  
21 PTSD BENEFITS TO THE EMPLOYER OR INSURER, SUBJECT TO THE  
22 FOLLOWING LIMITATIONS:

23 (a) THE INFORMATION REPORTED MUST ENCOMPASS SPECIFIC  
24 EVENTS AND CIRCUMSTANCES DIRECTLY RELATED TO THE SOLE CAUSE OF  
25 PTSD IN THE LINE OF DUTY OR A SUBSTANTIAL AGGRAVATION OF A  
26 PREEXISTING CONDITION WHERE THE AGGRAVATING CONDITION IS THE  
27 CAUSE OF PTSD. THE HEALTH CARE PROVIDER SHALL USE THE MOST

1 RECENT EDITION OF THE DIAGNOSTIC AND STATISTICAL MANUAL OF  
2 MENTAL DISORDERS (DSM) PROVIDED BY THE AMERICAN PSYCHIATRIC  
3 ASSOCIATION FOR THE DIAGNOSIS AND TREATMENT OF PTSD. A HEALTH  
4 CARE PROVIDER OR OTHER PERSON OR ENTITY SHALL NOT INCLUDE  
5 ADDITIONAL MEDICAL INFORMATION IN THE DIAGNOSIS, TREATMENT, AND  
6 REPORTING OF PTSD UNLESS THE INCLUSION IS NECESSARY FOR PROPER  
7 DIAGNOSIS OR TREATMENT.

8 (b) A HEALTH CARE PROVIDER SHALL NOT REPORT THE PERSONAL  
9 HISTORY OF A PEACE OFFICER, EMERGENCY MEDICAL SERVICE PROVIDER,  
10 OR FIREFIGHTER EXCEPT IN THE CIRCUMSTANCES DESCRIBED IN  
11 SUBSECTION (5) OF THIS SECTION.

12 (5) **Hearing.** (a) AN EMPLOYER, INSURER, OR A MAJORITY OF THE  
13 MENTAL HEALTH PANEL MEMBERS SELECTED IN ACCORDANCE WITH  
14 SUBSECTION (6) OF THIS SECTION MAY PETITION A DISTRICT OR CIRCUIT  
15 COURT FOR AN IN CAMERA HEARING FOR THE PURPOSE OF REQUESTING AN  
16 ORDER FOR THE RELEASE OF INFORMATION BEYOND THE SCOPE PERMITTED  
17 BY SUBSECTION (4) OF THIS SECTION. THE HEARING MUST BE HELD WITHIN  
18 THIRTY CALENDAR DAYS AFTER THE DATE THE PETITION IS FILED. NO  
19 CONTINUANCE OF THE HEARING IS PERMITTED EXCEPT FOR GOOD CAUSE  
20 SHOWN. THE COURT MAY ORDER AND REVIEW MEDICAL RECORDS AND  
21 REPORTS BEFORE AND DURING THE IN CAMERA HEARING. COUNSEL OF  
22 RECORD MUST HAVE THE OPPORTUNITY TO PRESENT OPENING AND  
23 CLOSING STATEMENTS.

24 (b) A HEALTH CARE PROVIDER SHALL NOT PROVIDE AN EMPLOYER,  
25 INSURER, OR MENTAL HEALTH PANEL MEMBER ANY PERSONAL HISTORY OF  
26 A PEACE OFFICER, EMERGENCY MEDICAL SERVICE PROVIDER, OR  
27 FIREFIGHTER OR INFORMATION REQUIRING A COURT ORDER FROM OTHER

1 PERSONS OR ENTITIES UNLESS THE COURT FINDS THAT THERE IS CLEAR AND  
2 CONVINCING EVIDENCE THAT THE DISCLOSURE OF INFORMATION IS  
3 NECESSARY.

4 (c) THE COURT SHALL RULE ON THE PETITION NO LATER THAN TEN  
5 CALENDAR DAYS AFTER THE CLOSE OF EVIDENCE. THE ORDER MUST  
6 DESIGNATE THE SPECIFIC PERSONS, INCLUDING COUNSEL OF RECORD, WHO  
7 ARE PERMITTED TO VIEW INFORMATION RELEASED UNDER THIS  
8 SUBSECTION (5). A PERSON WHO IS PERMITTED TO VIEW THE INFORMATION  
9 DESIGNATED IN THE ORDER IS SUBJECT TO CONTEMPT PROCEEDINGS IF THE  
10 PERSON RELEASES ALL OR PART OF THE INFORMATION TO A THIRD PARTY  
11 NOT DESIGNATED BY THE COURT. THE ORDER IS FINAL AND NOT SUBJECT  
12 TO APPEAL.

13 (d) COUNSEL OF RECORD ARE PERMITTED TO SHARE THE CONTENTS  
14 OF THE RELEASED INFORMATION WITH THE TRIAL COURT JUDGE AND THE  
15 HEALTH CARE PROVIDERS WHO ARE LICENSED PHYSICIANS, PSYCHIATRISTS,  
16 AND PSYCHOLOGISTS. THE SELECTED HEALTH CARE PROVIDERS MAY  
17 COMMENT ON THE RELEASED INFORMATION IN A SEALED, WRITTEN  
18 REPORT. THE HEALTH CARE PROVIDERS SHALL PROVIDE A COPY OF ANY  
19 SEALED, WRITTEN REPORT THAT IS SUBMITTED AS EVIDENCE TO THE  
20 COUNSEL OF RECORD AND THE TRIAL COURT JUDGE. ALL OPEN COURT  
21 REFERENCES TO THE RELEASED INFORMATION AND THE CONTENT OF THE  
22 SEALED REPORTS MUST BE REFERRED TO BY THE EXHIBIT DESIGNATION.  
23 THE DECISION OF THE COURT MUST REFERENCE THE RELEASED  
24 INFORMATION AND THE CONTENT OF THE SEALED REPORTS IN GENERAL  
25 TERMS WHEN PAYING BENEFITS PURSUANT TO SUBSECTION (3) OF THIS  
26 SECTION.

27 (6) **Rights of dependents - mental health panel.** (a) A

1 DEPENDENT ENTITLED TO WORKERS' COMPENSATION BENEFITS MAY FILE  
2 A CLAIM IF A PEACE OFFICER, EMERGENCY MEDICAL SERVICE PROVIDER, OR  
3 FIREFIGHTER COMMITS SUICIDE AS A RESULT OF PTSD.

4 (b) THE CHIEF ADMINISTRATIVE LAW JUDGE EMPLOYED BY THE  
5 OFFICE OF ADMINISTRATIVE COURTS IN THE DEPARTMENT OF PERSONNEL  
6 SHALL RANDOMLY SELECT A PANEL CONSISTING OF TWO LICENSED  
7 PSYCHIATRISTS AND ONE LICENSED MENTAL HEALTH CARE PROVIDER  
8 QUALIFIED TO DIAGNOSE PTSD FROM A LIST OF VOLUNTEERS.

9 (c) THE PANEL SHALL ISSUE A WRITTEN DECISION DETERMINING  
10 WHETHER THE PEACE OFFICER'S, EMERGENCY MEDICAL SERVICE  
11 PROVIDER'S, OR FIREFIGHTER'S DEATH IS A SUICIDE CAUSED BY PTSD  
12 WITHIN ONE HUNDRED TWENTY DAYS AFTER THE CLAIM IS FILED. THE  
13 DECISION OF THE PANEL IS FINAL AND NOT SUBJECT TO APPEAL.

14 (d) THE PANEL MAY SUBPOENA WITNESSES AND HEAR TESTIMONY,  
15 SUBPOENA AND RECEIVE RECORDS AND REPORTS AS EVIDENCE, AND  
16 ALLOW COUNSEL THE OPPORTUNITY TO PRESENT OPENING AND CLOSING  
17 STATEMENTS.

18 (7) A PEACE OFFICER, EMERGENCY MEDICAL SERVICE PROVIDER,  
19 OR FIREFIGHTER MUST FILE A CLAIM FOR WORKERS' COMPENSATION  
20 BENEFITS WITHIN TWENTY-FOUR MONTHS AFTER THE DATE OF THE EVENT  
21 OR CIRCUMSTANCES ALLEGED TO HAVE CAUSED POST-TRAUMATIC STRESS  
22 DISORDER IN THE LINE OF DUTY IN ORDER TO BE ELIGIBLE FOR THE  
23 BENEFITS.

24 **SECTION 2. Act subject to petition - effective date.** This act  
25 takes effect at 12:01 a.m. on the day following the expiration of the  
26 ninety-day period after final adjournment of the general assembly (August  
27 10, 2016, if adjournment sine die is on May 11, 2016); except that, if a

1 referendum petition is filed pursuant to section 1 (3) of article V of the  
2 state constitution against this act or an item, section, or part of this act  
3 within such period, then the act, item, section, or part will not take effect  
4 unless approved by the people at the general election to be held in  
5 November 2016 and, in such case, will take effect on the date of the  
6 official declaration of the vote thereon by the governor.

LLS NO. 16-0314 AMENDMENT # 1

INTERIM COMMITTEE AMENDMENT

Legislative Oversight Committee Concerning the Treatment of Persons  
with Mental Illness in the Criminal and Juvenile Justice Systems.

BY REPRESENTATIVE SINGER

LLS No. 16-0314 be amended as follows:

1 Amend LLS No. 16-0314, page 4, strike lines 6 through 11.

\*\* \*\* \*\* \*\* \*\*



**Colorado  
Legislative  
Council  
Staff**

**Bill 1**

**FISCAL NOTE**

**FISCAL IMPACT:**  State  Local  Statutory Public Entity  Conditional  No Fiscal Impact

**Drafting Number:** LLS 16-0314  
**Prime Sponsor(s):**

**Date:** October 26, 2015  
**Bill Status:** Legislative Oversight Committee  
Concerning the Treatment of Persons  
with Mental Illness in the Criminal and  
Juvenile Justice Systems Bill Request

**Fiscal Analyst:** Bill Zepernick (303-866-4777)

**BILLTOPIC:** WORKERS' COMPENSATION FOR PTSD

Fiscal Impact Summary	FY 2016-2017	FY 2017-2018
State Revenue General Fund		
State Expenditures General Fund / Cash Funds / Federal Funds	Increased state expenditures. See State Expenditures section.	
TABOR Impact		
FTE Position Change		
<b>Appropriation Required:</b> None.		
<b>Future Year Impacts:</b> Ongoing state expenditure impact.		

**Summary of Legislation**

Under current law, post-traumatic stress disorder (PTSD) is not covered by workers' compensation insurance for peace officers, emergency medical service providers, and firefighters (public safety professionals) unless the PTSD was caused by an event outside of the employee's typical job responsibilities. The bill removes this restriction and includes PTSD as a covered workers' compensation disability for these public safety professionals.

Under the bill, eligible public safety professionals must file a workers' compensation claim within 24 months of the event. For the claim to be considered compensable, the healthcare provider must submit specific information to the employer or insurer. The health care provider must use the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders to substantiate the claim. If the claim is approved, the employer or insurer of the public safety professional must cover all medical costs related to PTSD treatment, even if it is later determined the public safety professional was not diagnosed with PTSD.

Under the bill, a dependent of an public safety professional entitled to workers' compensation benefits may file a claim if the covered employee commits suicide as a result of PTSD. In this situation, the Chief Administrative Law Judge employed by the Department of Personnel (DPA) must randomly select a panel of volunteer licensed mental health professionals,

as specified in the bill. Within 120 days of the claim's filing, the panel will issue a written decision determining whether the suicide was a result of PTSD. The panel may subpoena records, witnesses, and testimony as deemed necessary. The decision is final and not subject to appeal.

The bill permits an employer, insurer, or the majority of mental health panel members to petition a district court for an in camera hearing in order to receive additional information beyond the scope of what is required to consider a claim. The hearing must occur within 30 days of the petition filing. The court may also require and review medical records prior to and during the in camera hearing. The court must rule on the petition within 10 calendar days after the closing of evidence. Counsel of record may share released information with the judge and the licensed health care providers. The decision of the court must reference the released information.

### **Background**

Worker's compensation for state employees is self funded, with state agencies paying into the Workers' Compensation Fund based on risk and actuarial analyses. The Workers' Compensation Fund is managed by the Division of Risk Management in the DPA and employee claims are processed by a third-party administrator. The Workers' Compensation Fund currently insures more than 2,000 peace officers and firefighters. State institutions of higher education, local governments, special districts, and other public jurisdictions may choose to self fund their workers' compensation obligations or obtain private workers' compensation insurance.

### **State Expenditures**

The bill will increase expenditures and workload for certain state agencies, as discussed below.

***Department of Personnel and Administration.*** The DPA will have increased costs to process and pay for workers' compensation claims for state employees under the bill. The bill creates a new condition for workers' compensation claims to be filed for those suffering from PTSD as a result of a trauma experienced while on the job. While the exact number of cases and costs may vary, the following costs may be incurred by the DPA:

- ***Medical claims costs.*** Medical costs are anticipated to average \$10,000 per claim for medication and counseling expenses;
- ***Death benefit claims by dependents.*** The cost per death benefit payment is anticipated to be \$1.7 million;
- ***Legal services.*** The bill allows for claims to be challenged in district courts. Legal service costs are dependent on the number of claims challenged, and cannot be estimated at this time; and
- ***Mental health panel per diems.*** The bill requires the Chief Administrative Law Judge in Office of Administrative Courts within the DPA to convene a panel of three volunteer licensed mental health professionals as needed. The DPA maintains similar programs for other fields and provides per diem to the volunteers.

At this time, the number of potential PTSD-related claims by state public safety employees is not known. As claims are incurred, assessments on state agencies to fund the Workers' Compensation Fund likely will increase. If a significant number of claims are filed in the first year, additional appropriations may be required through the annual budget process to ensure solvency of the Workers' Compensation Fund.

**Department of Labor and Employment.** The department may need to conduct rulemaking to expand workers' compensation eligibility materials and communicate about changes to state law under the bill. This workload is expected to be minimal and does not require new appropriations.

**Institutions of higher education.** State institutions of higher education employ peace officers and generally self fund their workers' compensation obligations. If eligible peace officers file PTSD claims, the university systems may experience an increase in insurance premiums. Given the unknown number of individuals who may file a PTSD claim and be approved, the potential fiscal impact of the bill cannot be estimated at this time.

**Judicial Branch.** The bill permits employers, insurers, or mental health panel members to petition a district court for a hearing. As a result, the Judicial Branch may see an increase in workload to the courts. However, the fiscal note assumes any workload increase can be absorbed within existing resources and no new appropriations are required.

**Other state agencies.** Various state agencies that employ eligible public safety professionals may experience increased costs under the bill. For example, the Department of Natural Resources (DNR) employs about 360 peace officers. Although the potential number of PTSD claims is not known at this time, the bill will increase costs for the DNR, the Department of Human Services, and other state agencies that employ public safety professional through increased risk management assessments to the DPA.

### **Local Government Impact**

The bill will likely increase expenditures for local governments that employ covered public safety professionals, as they will be liable for any costs associated with increased workers' compensation disability claims resulting from PTSD. Local governments will likely experience an increase in workers compensation claims, which will result in increased insurance premiums and court-related costs.

### **Effective Date**

The bill takes effect August 10, 2016, if the General Assembly adjourns on May 11, 2016, as scheduled, and no referendum petition is filed.

### **State and Local Government Contacts**

Personnel	Labor	Military and Veterans Affairs
Law	Public Safety	Corrections
Natural Resources	Higher Education	Judicial
Revenue	Counties	Municipalities
Special Districts	Sheriffs	

Second Regular Session  
Seventieth General Assembly  
STATE OF COLORADO

DRAFT  
10.14.15

BILL 2

LLS NO. 16-0312.02 Jane Ritter x4342

INTERIM COMMITTEE BILL

**Legislative Oversight Committee Concerning the Treatment of Persons  
With Mental Illness in the Criminal and Juvenile Justice Systems**

**BILL TOPIC: "Competency To Proceed For Juveniles"**

**A BILL FOR AN ACT**

101 **CONCERNING COMPETENCY TO PROCEED FOR JUVENILES INVOLVED IN**  
102 **THE JUVENILE JUSTICE SYSTEM.**

**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)*

**Legislative Oversight Committee Concerning the Treatment of Persons With Mental Illness in the Criminal and Juvenile Justice Systems.** The bill establishes a juvenile-specific definition of "competent to proceed" and "incompetent to proceed" for juveniles involved in the

*Capital letters indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.*

juvenile justice system, as well as specific definitions for "developmental disability", "mental capacity", and "mental disability" when used in this context. The bill clarifies the procedures for establishing incompetency, as well as for establishing the restoration of competency.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2       **SECTION 1.** In Colorado Revised Statutes, 19-2-103, add (3.3),  
3 (5.5), (9.5), (12.3), (12.4), and (14.3) as follows:

4       **19-2-103. Definitions.** For purposes of this article:

5       (3.3) "COMPETENT TO PROCEED" MEANS THAT A JUVENILE HAS  
6 SUFFICIENT PRESENT ABILITY TO CONSULT WITH HIS OR HER ATTORNEY  
7 WITH A REASONABLE DEGREE OF RATIONAL UNDERSTANDING IN ORDER TO  
8 ASSIST IN THE DEFENSE AND THAT HE OR SHE HAS A RATIONAL AS WELL AS  
9 A FACTUAL UNDERSTANDING OF THE PROCEEDINGS AGAINST HIM OR HER.

10       (5.5) "DEVELOPMENTAL DISABILITY" MEANS A DISABILITY THAT  
11 IS MANIFESTED BEFORE THE PERSON REACHES HIS OR HER TWENTY-FIRST  
12 BIRTHDAY, THAT CONSTITUTES A SUBSTANTIAL DISABILITY TO THE  
13 AFFECTED INDIVIDUAL, AND THAT IS ATTRIBUTABLE TO AN INTELLECTUAL  
14 DISABILITY OR OTHER NEUROLOGICAL CONDITIONS WHEN THOSE  
15 CONDITIONS RESULT IN IMPAIRMENT OF GENERAL INTELLECTUAL  
16 FUNCTIONING OR ADAPTIVE BEHAVIOR SIMILAR TO THAT OF A PERSON  
17 WITH AN INTELLECTUAL DISABILITY. UNLESS OTHERWISE SPECIFICALLY  
18 STATED, THE FEDERAL DEFINITION OF "DEVELOPMENTAL DISABILITY", 42  
19 U.S.C. SEC. 15001 ET SEQ., SHALL NOT APPLY.

20       (9.5) "INCOMPETENT TO PROCEED" MEANS THAT, BASED ON A  
21 DEVELOPMENTAL DISABILITY, MENTAL DISABILITY, OR LACK OF MENTAL  
22 CAPACITY, A JUVENILE DOES NOT HAVE SUFFICIENT PRESENT ABILITY TO  
23 CONSULT WITH HIS OR HER ATTORNEY WITH A REASONABLE DEGREE OF

1 RATIONAL UNDERSTANDING IN ORDER TO ASSIST IN THE DEFENSE OR THAT  
2 HE OR SHE DOES NOT HAVE A RATIONAL AS WELL AS A FACTUAL  
3 UNDERSTANDING OF THE PROCEEDINGS AGAINST HIM OR HER.

4 (12.3) "MENTAL CAPACITY" MEANS A JUVENILE'S CAPACITY TO  
5 MEET ALL OF THE FOLLOWING CRITERIA:

6 (a) APPRECIATE THE CHARGES OR ALLEGATIONS AGAINST HIM OR  
7 HER;

8 (b) APPRECIATE THE NATURE OF THE ADVERSARIAL PROCESS AND  
9 PROCEEDINGS, INCLUDING:

10 (I) HAVING A FACTUAL UNDERSTANDING OF THE PARTICIPANTS IN  
11 THE PROCEEDING, INCLUDING THE JUDGE; DEFENSE COUNSEL; ATTORNEY  
12 FOR THE STATE; MENTAL HEALTH EXPERT; AND GUARDIAN AD LITEM,  
13 WHEN APPLICABLE; AND

14 (II) HAVING A RATIONAL UNDERSTANDING OF THE ROLE OF EACH  
15 PARTICIPANT IN THE PROCEEDINGS;

16 (c) APPRECIATE THE RANGE AND NATURE OF ALLOWABLE  
17 DISPOSITIONS THAT MAY BE IMPOSED AGAINST THE JUVENILE IN THE  
18 PROCEEDINGS;

19 (d) DISCLOSE TO COUNSEL FACTS PERTINENT TO THE PROCEEDINGS  
20 AT ISSUE;

21 (e) GENERALLY DISPLAY APPROPRIATE COURTROOM BEHAVIOR;  
22 AND

23 (f) TESTIFY RELEVANTLY.

24 (12.4) "MENTAL DISABILITY" MEANS A SUBSTANTIAL DISORDER OF  
25 THOUGHT, MOOD, PERCEPTION, OR COGNITIVE ABILITY THAT RESULTS IN  
26 MARKED FUNCTIONAL DISABILITY AND SIGNIFICANTLY INTERFERES WITH  
27 ADAPTIVE BEHAVIOR. "MENTAL DISABILITY" DOES NOT INCLUDE ACUTE

1 INTOXICATION FROM ALCOHOL OR OTHER SUBSTANCES, ANY CONDITION  
2 MANIFESTED ONLY BY ANTISOCIAL BEHAVIOR, OR ANY SUBSTANCE ABUSE  
3 IMPAIRMENT RESULTING FROM RECENT USE OR WITHDRAWAL. HOWEVER,  
4 SUBSTANCE ABUSE THAT RESULTS IN A LONG-TERM, SUBSTANTIAL  
5 DISORDER OF THOUGHT, MOOD, OR COGNITIVE ABILITY MAY CONSTITUTE  
6 A MENTAL DISABILITY.

7 (14.3) "RESTORATION TO COMPETENCY HEARING" MEANS A  
8 HEARING TO DETERMINE WHETHER A JUVENILE WHO HAS PREVIOUSLY  
9 BEEN DETERMINED TO BE INCOMPETENT TO PROCEED HAS ACHIEVED OR IS  
10 RESTORED TO COMPETENCY.

11 **SECTION 2.** In Colorado Revised Statutes, add 19-2-1300.2 as  
12 follows:

13 **19-2-1300.2. Legislative declaration.** (1) THE GENERAL  
14 ASSEMBLY FINDS AND DECLARES THAT:

15 (a) THE JUVENILE JUSTICE SYSTEM IS CIVIL IN NATURE AND  
16 FOCUSED ON TREATMENT RATHER THAN PUNISHMENT;

17 (b) JUVENILES DIFFER IN SIGNIFICANT AND SUBSTANTIVE WAYS  
18 FROM ADULTS; THEREFORE, DIFFERENT STANDARDS FOR COMPETENCY ARE  
19 NECESSARY FOR JUVENILES AND ADULTS;

20 (c) JUVENILES, LIKE ADULTS, ARE PRESUMED COMPETENT TO  
21 PROCEED UNTIL SUCH TIME AS THEY ARE FOUND INCOMPETENT TO  
22 PROCEED THROUGH A DECISION BY THE COURT; AND

23 (d) AGE ALONE IS NOT DETERMINATIVE OF INCOMPETENCE  
24 WITHOUT A FINDING THAT THE YOUTH ACTUALLY LACKS THE RELEVANT  
25 CAPACITIES FOR COMPETENCE.

26 **SECTION 3.** In Colorado Revised Statutes, 19-2-1301, amend  
27 (2) as follows:

1           **19-2-1301. Incompetency to proceed - effect - how and when**  
2 **raised.** (2) A juvenile shall not be tried or sentenced if the juvenile is  
3 incompetent to proceed, as defined in ~~section 16-8.5-101 (11), C.R.S.~~  
4 SECTION 19-2-103 (9.5), at that stage of the proceedings against him or  
5 her. A DETERMINATION OF COMPETENCY MUST INCLUDE AN EVALUATION  
6 OF DEVELOPMENTAL DISABILITIES, MENTAL DISABILITIES, AND MENTAL  
7 CAPACITY.

8           **SECTION 4.** In Colorado Revised Statutes, 19-2-1302, **amend**  
9 (3), (4) (a), and (4) (c) as follows:

10           **19-2-1302. Determination of incompetency to proceed.** (3) If  
11 the question of a juvenile's incompetency to proceed is raised after a jury  
12 is impaneled to try the issues raised by a plea of not guilty or after the  
13 court as the finder of fact begins to hear evidence and the court  
14 determines that the juvenile is incompetent to proceed or orders the  
15 juvenile referred for a competency examination, the court may declare a  
16 mistrial. If the court declares a mistrial under these circumstances, the  
17 juvenile ~~shall~~ MUST not be deemed to have been placed in jeopardy with  
18 regard to the charges at issue. The juvenile may be tried on, and sentenced  
19 if adjudicated for, the same charges after he or she has ACHIEVED OR BEEN  
20 ~~found to be~~ restored to competency.

21           (4) (a) If the court orders a competency evaluation, the court shall  
22 order that the competency evaluation be conducted in the least-restrictive  
23 environment, INCLUDING HOME OR COMMUNITY PLACEMENT IF  
24 APPROPRIATE, taking into account the public safety and the best interests  
25 of the juvenile.

26           (c) The competency evaluation ~~shall~~ MUST, at a minimum, include  
27 an opinion regarding whether the juvenile is ~~competent~~ INCOMPETENT to

1 proceed as defined in ~~section 16-8.5-101 (4), C.R.S.~~ SECTION 19-2-103  
2 (9.5). If the evaluation concludes the juvenile is incompetent to proceed,  
3 the evaluation ~~shall~~ MUST include a recommendation as to whether THERE  
4 IS A LIKELIHOOD THAT the juvenile may ACHIEVE OR be restored to  
5 competency and identify appropriate services to restore the juvenile to  
6 competency.

7 **SECTION 5.** In Colorado Revised Statutes, 19-2-1304, **amend**  
8 (1) and (3) as follows:

9 **19-2-1304. Restoration to competency hearing.** (1) The court  
10 may order a restoration TO COMPETENCY hearing, as defined in ~~section~~  
11 ~~16-8.5-101 (13), C.R.S.~~ SECTION 19-2-103 (14.3), at any time on its own  
12 motion, on motion of the prosecuting attorney, or on motion of the  
13 juvenile. The court shall order a RESTORATION OF COMPETENCY hearing  
14 if a mental health professional who has been treating the juvenile files a  
15 report certifying that the juvenile is **mentally** competent to proceed.

16 (3) At the RESTORATION TO COMPETENCY hearing, the court shall  
17 determine whether the juvenile HAS ACHIEVED OR is restored to  
18 competency.

19 **SECTION 6.** In Colorado Revised Statutes, 19-2-1305, **amend**  
20 (1) and (2) as follows:

21 **19-2-1305. Procedure after restoration to competency hearing.**  
22 (1) If a juvenile is found to ~~be~~ HAVE ACHIEVED OR BEEN restored to  
23 competency after a RESTORATION TO COMPETENCY hearing, as provided  
24 in section 19-2-1304, or by the court during a review, as provided in  
25 section 19-2-1303 (2), the court shall resume or recommence the trial or  
26 sentencing proceeding or order the sentence carried out. The court may  
27 credit any time the juvenile spent in confinement or detention while

1 incompetent TO PROCEED against any term of commitment imposed after  
2 ACHIEVEMENT OF OR restoration to competency.

3 (2) If the court determines that the juvenile remains **mentally**  
4 incompetent to proceed and the delinquency petition is not dismissed, the  
5 court may continue or modify any orders entered at the time of the  
6 original determination of incompetency or enter any new order necessary  
7 to facilitate the juvenile's ACHIEVEMENT OF OR restoration to **mental**  
8 competency.

9 **SECTION 7. Effective date.** This act takes effect July 1, 2016.

10 **SECTION 8. Safety clause.** The general assembly hereby finds,  
11 determines, and declares that this act is necessary for the immediate  
12 preservation of the public peace, health, and safety. <{Safety clause  
13 OK?}>

Second Regular Session  
Seventieth General Assembly  
STATE OF COLORADO

DRAFT  
10.19.15

BILL 3

LLS NO. 16-0315.01 Jane Ritter x4342

INTERIM COMMITTEE BILL

**Legislative Oversight Committee Concerning the Treatment of Persons  
With Mental Illness in the Criminal and Juvenile Justice Systems**

**BILL TOPIC: "Law Enforcement Mental Health Collaboration Grants"**

**A BILL FOR AN ACT**

101 **CONCERNING THE CREATION OF THE LAW ENFORCEMENT AND MENTAL**  
102 **HEALTH COLLABORATION GRANT PROGRAM.**

**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)*

**Legislative Oversight Committee Concerning the Treatment of Persons With Mental Illness in the Criminal and Juvenile Justice Systems.** The bill creates the law enforcement and mental health collaboration grant program (grant program) in the division of criminal

*Capital letters indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.*



1 24-33.5-1903.

2 (4) "LOCAL LAW ENFORCEMENT AGENCY" MEANS A POLICE  
3 DEPARTMENT IN INCORPORATED MUNICIPALITIES, THE OFFICE OF THE  
4 COUNTY SHERIFF, OR A CAMPUS POLICE AGENCY.

5 (5) "MENTAL HEALTH PROFESSIONAL" MEANS ANY ONE OF THE  
6 FOLLOWING PERSONS:

7 (a) A PERSON LICENSED TO PRACTICE MEDICINE IN THIS STATE OR  
8 LICENSED AND IN GOOD STANDING TO PRACTICE MEDICINE IN ANOTHER  
9 STATE AND WHO IS PROVIDING MEDICAL OR CLINICAL SERVICES IN THIS  
10 STATE;

11 (b) A PSYCHOLOGIST CERTIFIED TO PRACTICE IN THIS STATE OR  
12 CERTIFIED TO PRACTICE AND IN GOOD STANDING IN ANOTHER STATE AND  
13 WHO IS PROVIDING CLINICAL SERVICES IN THIS STATE;

14 (c) A REGISTERED PROFESSIONAL NURSE AS DEFINED IN SECTION  
15 12-38-103 (11), C.R.S., WHO BY REASON OF POSTGRADUATE EDUCATION  
16 AND ADDITIONAL NURSING PREPARATION HAS GAINED KNOWLEDGE,  
17 JUDGMENT, AND SKILL IN PSYCHIATRIC OR MENTAL HEALTH NURSING;

18 (d) A LICENSED MARRIAGE AND FAMILY THERAPIST, LICENSED  
19 PROFESSIONAL COUNSELOR, OR ADDICTION COUNSELOR LICENSED UNDER  
20 PART 5, 6, OR 8 OF ARTICLE 43 OF TITLE 12, C.R.S., WHO BY REASON OF  
21 POSTGRADUATE EDUCATION AND ADDITIONAL PREPARATION HAS GAINED  
22 KNOWLEDGE, JUDGMENT, AND SKILL IN PSYCHIATRIC OR MENTAL HEALTH  
23 THERAPY, FORENSIC PSYCHOTHERAPY, OR THE EVALUATION OF MENTAL  
24 DISORDERS; OR

25 (e) A LICENSED CLINICAL SOCIAL WORKER LICENSED UNDER THE  
26 PROVISIONS OF PART 4 OF ARTICLE 43 OF TITLE 12, C.R.S.

27 **24-33.5-1903. Law enforcement and mental health**

1 **collaboration grant program - created - administration.** (1) THE LAW  
2 ENFORCEMENT AND MENTAL HEALTH COLLABORATION GRANT PROGRAM  
3 IS CREATED IN THE DIVISION OF CRIMINAL JUSTICE FOR THE PURPOSE OF  
4 PROVIDING GRANTS TO ANY LOCAL LAW ENFORCEMENT AGENCY SEEKING  
5 TO INCLUDE ONE OR MORE MENTAL HEALTH PROFESSIONALS ON THE  
6 AGENCY'S PERMANENT STAFF. THE GOAL OF THE GRANT PROGRAM IS TO  
7 PROVIDE IMMEDIATE SERVICES AND ASSISTANCE IN SITUATIONS WHERE AN  
8 INDIVIDUAL INVOLVED IN AN INVESTIGATION BY THE LOCAL LAW  
9 ENFORCEMENT AGENCY EXHIBITS SIGNS OF A MENTAL ILLNESS OR  
10 SUBSTANCE ABUSE ISSUE.

11 (2) THE DIVISION SHALL ADMINISTER THE GRANT PROGRAM. THE  
12 DIVISION SHALL ESTABLISH PROCEDURES, TIMELINES, AND GUIDELINES FOR  
13 AWARDS FOR GRANT APPLICATIONS BY LOCAL LAW ENFORCEMENT  
14 AGENCIES SEEKING TO BEGIN OR CONTINUE A LAW ENFORCEMENT AND  
15 MENTAL HEALTH COLLABORATION. AT A MINIMUM, THE PROCEDURES AND  
16 GUIDELINES MUST REQUIRE THE GRANT APPLICANT TO PROVIDE A  
17 COLLABORATION PLAN FOR THE USE OF ANY GRANT DOLLARS, LENGTH OF  
18 THE PROPOSED COLLABORATION WITH THE MENTAL HEALTH  
19 PROFESSIONAL, AND AN ESTIMATE OF THE NUMBER OF INDIVIDUALS THE  
20 LOCAL LAW ENFORCEMENT AGENCY HOPES TO SERVE THROUGH THE  
21 GRANT AND COLLABORATION.

22 (3) ALL LOCAL LAW ENFORCEMENT AGENCIES THAT RECEIVE A  
23 GRANT SHALL AGREE TO KEEP DATA ON:

24 (a) THE NUMBER OF CALLS ON WHICH THE MENTAL HEALTH  
25 PROFESSIONAL ASSISTED;

26 (b) THE NUMBER OF INDIVIDUALS REACHED THROUGH THE  
27 COLLABORATION;

1 (c) A BREAKDOWN OF THE GENERAL TYPES OF INCIDENTS  
2 INVOLVED;

3 (d) A BREAKDOWN OF THE GENERAL TYPES OF MENTAL HEALTH OR  
4 SUBSTANCE ABUSE ISSUES INVOLVED; AND

5 (e) AN AGGREGATE SUMMARY OF OUTCOMES. THE SUMMARY MAY  
6 NOT INCLUDE ANY TYPE OF CONFIDENTIAL OR IDENTIFYING INFORMATION.

7 (4) SUBJECT TO AVAILABLE APPROPRIATIONS, THE DIVISION SHALL  
8 SELECT THOSE LOCAL LAW ENFORCEMENT AGENCIES THAT WILL RECEIVE  
9 GRANTS THROUGH THE GRANT PROGRAM AND THE AMOUNT OF EACH  
10 GRANT.

11 **24-33.5-1904. Law enforcement and mental health**  
12 **collaboration grant program fund - creation.** (1) (a) THE LAW  
13 ENFORCEMENT AND MENTAL HEALTH COLLABORATION GRANT PROGRAM  
14 FUND IS CREATED IN THE STATE TREASURY. THE PRINCIPAL OF THE FUND  
15 CONSISTS OF MONEYS APPROPRIATED OR TRANSFERRED TO THE FUND BY  
16 THE GENERAL ASSEMBLY. THE PURPOSE OF THE FUND IS TO PROVIDE  
17 GRANTS TO SUCCESSFUL APPLICANTS PURSUANT TO SECTION 24-33.5-1903.

18 (b) THE DIVISION OF CRIMINAL JUSTICE IS AUTHORIZED TO SEEK,  
19 ACCEPT, AND EXPEND GIFTS, GRANTS, OR DONATIONS FROM PRIVATE OR  
20 PUBLIC SOURCES FOR THE PURPOSES OF THE GRANT PROGRAM; EXCEPT  
21 THAT THE DIVISION MAY NOT ACCEPT A GIFT, GRANT, OR DONATION THAT  
22 IS SUBJECT TO CONDITIONS THAT ARE INCONSISTENT WITH THIS SECTION  
23 OR ANY OTHER LAW OF THE STATE. THE DIVISION SHALL TRANSMIT ALL  
24 PRIVATE AND PUBLIC MONEYS RECEIVED THROUGH GIFTS, GRANTS, OR  
25 DONATIONS TO THE STATE TREASURER, WHO SHALL CREDIT THE SAME TO  
26 THE FUND.

27 (c) (1) THE MONEYS IN THE FUND ARE CONTINUOUSLY

1 APPROPRIATED TO THE DIVISION FOR THE PURPOSE OF AWARDING GRANTS  
2 AS ALLOWED BY THIS PART 19 AND FOR ANY ADMINISTRATIVE COSTS  
3 ASSOCIATED WITH THE GRANT PROGRAM. THE DIVISION'S ADMINISTRATIVE  
4 EXPENSES FOR THE GRANT PROGRAM IN A FISCAL YEAR MUST NOT EXCEED  
5 FIVE PERCENT OF THE MONEYS TRANSFERRED OR APPROPRIATED IN THAT  
6 FISCAL YEAR.

7 (II) ALL INTEREST AND INCOME DERIVED FROM THE DEPOSIT AND  
8 INVESTMENT OF THE FUND AND ALL UNEXPENDED AND UNENCUMBERED  
9 MONEYS REMAINING IN THE FUND AT THE END OF ANY FISCAL YEAR  
10 REMAIN IN THE FUND AND SHALL NOT BE TRANSFERRED OR REVERT TO THE  
11 GENERAL FUND.

12 **SECTION 2. Safety clause.** The general assembly hereby finds,  
13 determines, and declares that this act is necessary for the immediate  
14 preservation of the public peace, health, and safety.

# Mental Health PARTNERS

*Healthy Minds, Healthy Communities*

## **Project EARLY DIVERSION, GET ENGAGED (EDGE)**

### **Overview:**

- Initially funded as three-year, \$966,666 federal grant from the Substance Abuse and Mental Health Administration (SAMHSA)
- Boulder County one of three sites nationwide to receive this early diversion grant award
- SAMHSA's goal/program design to divert individuals with mental health and/or substance use disorders from the criminal justice system before arrest
- Clinicians accompany law enforcement officers to respond to calls in the community which involve an individual with suspected or diagnosed behavioral health conditions

### **Collaborative Partners:**

- Mental Health Partners
- Boulder County Sheriff's Office
- City of Boulder Policy Department
- City of Longmont Police Department

### **EDGE Team Response:**

- 6 behavioral health clinicians and 2 part-time peer support specialists
- Provides coverage in the cities of Boulder and Longmont, as well as county-wide response with Sheriff's Office; hours 8am-10pm/7 days/week
- Assists client in accessing behavioral health services including psychotherapy/counseling, substance use & detoxification treatment, case management, housing & employment support
- Assists client and law enforcement in accessing other community-based services

### **Additional Project Goals:**

- Reduce ED visits and 72-hour holds
- Increase law enforcement capacity in crisis intervention

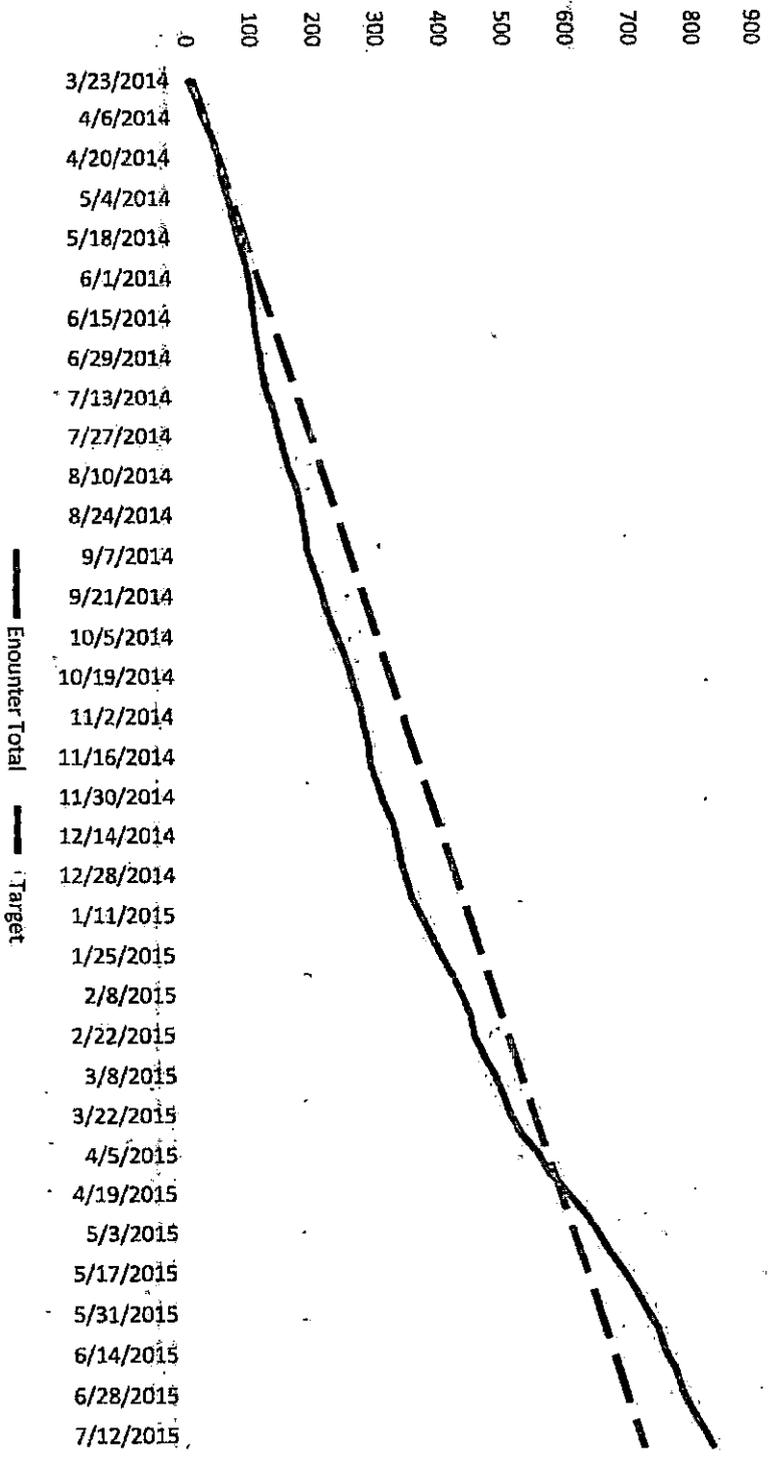
### **Demographic Experience to Date:**

- > 800 encounters from 3/2014 – 7/2015; avg: 70 encounters/month (40 Longmont, 30 Boulder)
- Approx. 23% are 18-29 years; range from 14 to 60+; genders roughly equal in total
- Nearly 44% of encounters complete at least one visit with behavioral health provider

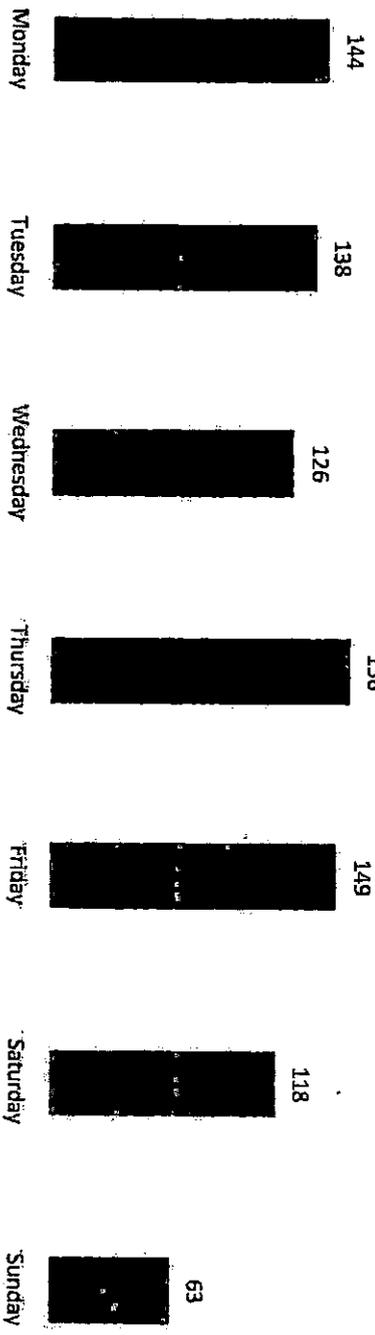
### **For More Information Contact:**

Bill Myers, Chief Community Engagement Officer  
 Mental Health Partners, 1333 Iris Avenue, Boulder, CO 80304  
 720.737.8024 or bmyers@mhpcolorado.org

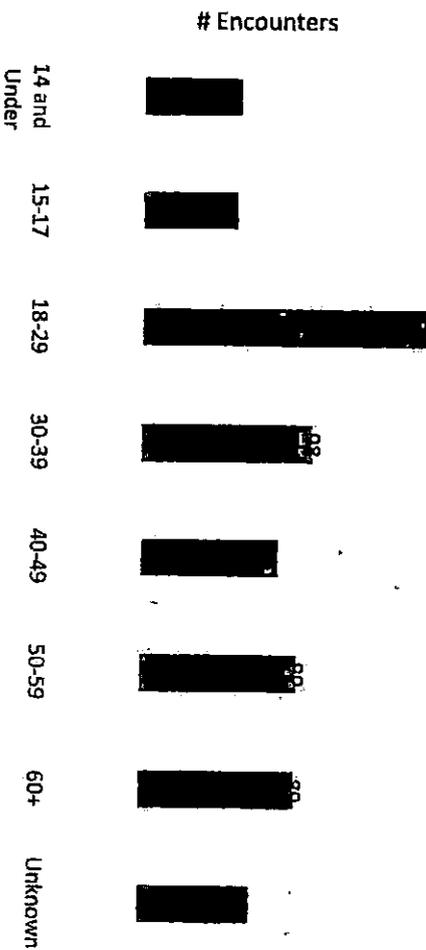
Encounters: Project to Date



Encounter by Day of the Week



Encounters by Age Group





**Mental Health  
PARTNERS**  
*Healthy Minds, Healthy Communities*

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## Project EDGE Outcomes Data

### **Precipitating Event for Call to Law Enforcement**

- EDGE is often called out to respond to situations where there is no criminal activity, but where law enforcement needs assistance deescalating a situation with a mentally ill individual. Despite the lack of clear criminal activity, these cases are difficult and time consuming for law enforcement staff to find a way to help the person in crisis.
- When there is the possibility of a low-level criminal charge resulting from the individual's symptom presentation in the situation, the most common precipitating events are: trespassing, assault, harassment, disturbance, theft, criminal mischief, domestic violence, destruction of property, child neglect, obstruction. Other charges include public indecency, prohibited occupancy and disorderly conduct.
- EDGE is also called out for situations in which law enforcement would previously have sent the individual to the emergency room or put them on a 72-hour M1 Hold for Evaluation in which behavioral health treatment may be mandated. EDGE clinicians can work to connect the client to community-based, rather than institutional, behavioral healthcare.

### **Presenting Status**

Project EDGE is a crisis response initiative, intended to function as a referral program in partnership with law enforcement. EDGE clinicians conduct a brief assessment of the individual's situation to determine their needs, but do not make a diagnosis of a behavioral health condition in the field. Anecdotally, the most common

symptom presentations in the field are suicidality and delusions.

### **Trend in Number of Arrests**

- Once a client is contacted by EDGE there are several possible outcomes depending on whether or not the charges can be diverted, and whether or not the individual agrees to participate in the EDGE program. EDGE participation and use of referral to treatment is voluntary.
- Overall, the number of EDGE encounters continues to increase, and the majority of individuals contacted agree to EDGE and are diverted from criminal charges.

Key: LPD (Longmont Police Department); BPD (Boulder Police Department); BCSO (Boulder County Sheriff's Office)

- Most individuals have one EDGE contact *and then have no further documented law enforcement contact*; however, some individuals receive repeat contacts. The program has anecdotal evidence that the number of these “frequent flyer” or high utilizers has decreased with EDGE contacts, resulting in an overall decrease in repeat calls.
- EDGE also responds to a high number of youth under age 18 and has an important impact in prevention of law enforcement contacts early on.

### **Hospital Diversion**

- To date, of the 98 instances where a M1 hold was considered, EDGE was able to divert 68 individuals (69%) into community-based treatment instead of hospitalization. This results in significant savings for the hospital system.

### **Emergency Department Diversion**

- Approximately 20% of all individuals contacted by EDGE have at least one emergency department visit before or after EDGE contact. Of those individuals, each individual averages 1 fewer emergency department visit post EDGE contact.

### **Trend in Number of Suicides**

- EDGE is often called to respond to situations where the person presents with suicidality or active suicide ideation. Of the limited number of clients with trackable data regarding suicide, zero individuals contacted by EDGE have committed suicide.

### **Trends in Substances Used**

- EDGE does not track the type of substance an individual may have used at the time of the encounter. This information may be included in the narrative of the clinical notes but is not in a reportable field.
- As evidenced above, 10.6% of individuals contacted by EDGE are sent to detoxification.

### **Homeless Individuals**

EDGE additionally serves a significant number of homeless individuals who receive law enforcement contact due to lack of shelter (e.g., trespassing, unlawful camping) or symptom presentation. Approximately 16% of the 1,046 EDGE clients to date reported they are homeless.

### **For More Information Contact:**

**Bill Myers, Chief Community Engagement Officer**  
**Mental Health Partners, 1333 Iris Avenue, Boulder, CO 80304**  
**720.737.8024 or [bmyers@mhpcolorado.org](mailto:bmyers@mhpcolorado.org)**



Colorado  
Legislative  
Council  
Staff

Bill 3

# FISCAL NOTE

**FISCAL IMPACT:**  State  Local  Statutory Public Entity  Conditional  No Fiscal Impact

**Drafting Number:** LLS 16-0315  
**Prime Sponsor(s):**

**Date:** October 26, 2015  
**Bill Status:** Legislative Oversight Committee  
Concerning the Treatment of Persons  
with Mental Illness in the Criminal and  
Juvenile Justice Systems Bill Request  
**Fiscal Analyst:** Bill Zepernick (303-866-4777)

**BILL TOPIC:** LAW ENFORCEMENT MENTAL HEALTH COLLABORATION GRANTS

Fiscal Impact Summary	FY 2016-2017	FY 2017-2018
<b>State Revenue</b> Cash Funds	Potential increase - gifts, grants, and donations.	
<b>State Expenditures</b>	<u>at least \$500,000</u>	<u>at least \$500,000</u>
General Fund	495,901	495,821
Centrally Appropriated Costs	4,099	4,179
<b>TABOR Impact</b>	Potential increase.	
<b>FTE Position Change</b>	at least 0.3 FTE	at least 0.3 FTE
<b>Appropriation Required:</b> at least \$500,000 - Department of Public Safety (FY 2016-17)		
<b>Future Year Impacts:</b> Ongoing state expenditure impact and potential state revenue impact.		

## Summary of Legislation

This bill, **requested by the Legislative Oversight Committee Concerning the Treatment of Persons with Mental Illness in the Criminal and Juvenile Justice Systems**, creates a grant program in the Department of Public Safety (DPS) to provide local law enforcement agencies with funding to hire mental health professionals. These additional mental health staff will provide immediate services and assistance to persons exhibiting signs of mental illness or substance abuse who are involved in an investigation by a law enforcement agency. Grant recipients are required to collect data on the program and provide this to the DPS. The DPS cannot spend more than 5 percent of program funds for administrative purposes.

## State Revenue

The bill potentially increases cash fund revenue to the DPS from gifts, grants, and donations beginning in FY 2016-17. At this time, no source of such revenue has been identified. Revenue received or transferred to the grant program cash fund are continuously appropriated to the DPS.

**TABOR Impact**

This bill potentially increases state revenue from gifts, grants, and donations, which may increase the amount of money required to be refunded under TABOR. TABOR refunds are paid out of the General Fund.

**State Expenditures**

The costs to implement the grant program depend on the intended scope of the program. The fiscal note provides two cost scenarios in the DPS to implement the grant program:

- **Scenario 1 - \$500,000 and 0.3 FTE** per year beginning in FY 2016-17 for a viable grant program with limited scope; and
- **Scenario 2 - \$2.2 million and 1.5 FTE** per year beginning in FY 2016-17 for a grant program with a wider statewide impact.

The exact funding level for the grant program may be set at the discretion of the General Assembly. Depending on the intended level of grant funding, program administration costs should be adjusted accordingly. Assuming no sources of gifts, grants, or donations are identified, grant program costs must be paid using General Fund. The costs of both a limited grant program and a broader statewide program are shown in Table 1 and discussed below.

<b>Table 1. Expenditures Under LLS 16-0315</b>		
<b>Cost Components</b>	<b>FY 2016-17</b>	<b>FY 2017-18</b>
<b>Scenario 1 - Limited Grant Program</b>	<b>\$500,000</b>	<b>\$500,000</b>
Personal Services	\$19,714	\$19,714
FTE	0.3 FTE	0.3 FTE
Operating Expenses	285	285
Grants to Local Law Enforcement Agencies	475,902	475,822
Centrally Appropriated Costs*	4,099	4,179
<b>Scenario 2 - Statewide Grant Program</b>	<b>\$2,216,858</b>	<b>\$2,210,161</b>
Personal Services	\$88,742	\$88,742
FTE	1.5 FTE	1.5 FTE
Operating Expenses and Capital Outlay	8,480	1,425
Grants to Local Law Enforcement Agencies	2,100,000	2,100,000
Centrally Appropriated Costs*	19,636	19,994

\* Centrally appropriated costs are not included in the bill's appropriation.

**Assumptions.** For both funding scenarios the fiscal note assumes the following:

- an appropriation of General Fund is required for the program to begin operating in FY 2016-17; and
- the grant program begins operating on July 1, 2016.

**Grant administration.** To implement a limited grant program, \$19,999 and 0.3 FTE per year beginning in FY 2016-17 is required for administration. To support a broader statewide grant program, \$97,222 and 1.5 FTE is required in the first year and \$90,167 and 1.5 FTE in future years.

Grant administration costs, which include personal services, operating expenses, and capital outlay costs, are shown in Table 1 on the previous page. To the extent the General Assembly provides a different level of funding than the scenarios contemplated in this fiscal note, the required staffing and grant administration costs will need to scale accordingly. These administrative costs cannot exceed 5 percent of total program funding.

**Grants to local law enforcement agencies.** In the limited program scenario, approximately \$475,000 per year is required for grants to local law enforcement agencies. For the broader program, the fiscal note estimates that \$2.1 million per year will be required. The exact number and amount of grants will vary depending on the amount appropriated and the priorities of the grant program and local agencies. The potential number of grants under each funding scenario are discussed below.

**Limited grant program.** For a limited grant program, the fiscal note anticipates between 6 and 10 grants ranging between \$50,000 and \$75,000 per year. Under this scenario, most grants will primarily cover the cost of hiring a single mental health professional and some grants could include funding for planning and training.

**Statewide grant program.** For a broader grant program, the fiscal note estimates that between 15 and 25 grants, ranging between \$75,000 and \$250,000 per year, will be disbursed. This funding will allow larger jurisdictions to hire multiple mental health professionals and for grant awards to address planning and training costs.

**Centrally appropriated costs.** Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. The centrally appropriated costs subject to this policy are estimated in the fiscal note for informational purposes and summarized in Table 2.

<b>Table 2. Centrally Appropriated Costs Under LLS 16-0315</b>		
<b>Cost Components</b>	<b>FY 2016-17</b>	<b>FY 2017-18</b>
<b>Scenario 1 - Limited Grant Program</b>	<b>\$4,099</b>	<b>\$4,179</b>
Employee Insurance (Health, Life, Dental, and Short-term Disability)	\$2,412	\$2,412
Supplemental Employee Retirement Payments	1,687	1,767
<b>Scenario 2 - Statewide Grant Program</b>	<b>\$19,636</b>	<b>\$19,994</b>
Employee Insurance (Health, Life, Dental, and Short-term Disability)	\$12,042	\$12,042
Supplemental Employee Retirement Payments	7,594	7,952

**Local Government Impact**

The bill potentially increases revenue to local law enforcement agencies to pay for mental health professionals on their staffs. Participation in the grant program is voluntary and the decision on which local agencies receive funding is at the discretion of the DPS. Participating local law enforcement agencies will have a minimal increase in workload to apply for grant funding and to collect and report data to the DPS if a grant is received.

**Effective Date**

The bill takes effect upon signature of the Governor, or upon becoming law without his signature.

**State Appropriations**

At a minimum, the bill requires an appropriation of at least \$500,000 General Fund to the Law Enforcement and Mental Health Collaboration Grant Program Fund in the DPS in FY 2016-17. Moneys in the fund are continuously appropriated to the DPS. The DPS also requires an allocation of at least 0.3 FTE.

**Departmental Difference**

The DPS estimates that the cost of the bill is \$2.1 million and 2.0 FTE per year beginning in FY 2016-17. The fiscal note concurs that this level of funding would allow for implementation of an effective grant program. However, fiscal note policy is to provide an estimate of the least cost alternative for implementing legislation. Thus, the fiscal note estimates minimum costs of the grant program at \$500,000 and 0.3 FTE, which would allow for a limited, but functional, grant program. As discussed in the State Expenditures section, the fiscal note includes an estimate similar to the DPS estimate as an option for the General Assembly to consider, with certain technical adjustments and slightly reduced staff in order to conform to the bill's 5 percent limit on administrative costs.

**State and Local Government Contacts**

Public Safety      Municipalities      Counties      Sheriffs

Second Regular Session  
Seventieth General Assembly  
STATE OF COLORADO

DRAFT  
10.14.15

BILL 4

LLS NO. 16-0313.01 Jane Ritter x4342

INTERIM COMMITTEE BILL

Legislative Oversight Committee Concerning the Treatment of Persons  
With Mental Illness in the Criminal and Juvenile Justice Systems

BILL TOPIC: "Mental Health And Collaborative Management Teams"

A BILL FOR AN ACT

101 CONCERNING INCLUDING A MENTAL HEALTH PROFESSIONAL IN THE  
102 MEMORANDUM OF UNDERSTANDING RELATING TO A  
103 LOCAL-LEVEL COLLABORATIVE MANAGEMENT PROCESS FOR  
104 CHILDREN AND FAMILIES.

Bill Summary

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)*

Legislative Oversight Committee Concerning the Treatment  
of Persons With Mental Illness in the Criminal and Juvenile Justice

*Capital letters indicate new material to be added to existing statute.  
Dashes through the words indicate deletions from existing statute.*

**Systems.** The bill adds a mental health professional to the list of persons to be included in any memorandum of understanding entered into between interested county departments of social or human services and other local-level service providers when the memorandum of understanding is established as a means of promoting a collaborative system of local-level interagency oversight and services to children and families.

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1 *Be it enacted by the General Assembly of the State of Colorado:*

2           **SECTION 1.** In Colorado Revised Statutes, 24-1.9-102, **amend**  
3 (1) (a) and (1) (c) as follows:

4           **24-1.9-102. Memorandum of understanding - local-level**  
5 **interagency oversight groups - individualized service and support**  
6 **teams - coordination of services for children and families -**  
7 **requirements - waiver.** (1) (a) INDIVIDUALS, local representatives of  
8 each of the agencies specified in this paragraph (a) AND PARAGRAPH (a.5)  
9 OF THIS SUBSECTION (1), IF APPLICABLE, and county departments of  
10 HUMAN OR social services may enter into memorandums of understanding  
11 that are designed to promote a collaborative system of local-level  
12 interagency oversight groups and individualized service and support  
13 teams to coordinate and manage the provision of services to children and  
14 families who would benefit from integrated multi-agency services. The  
15 memorandums of understanding entered into pursuant to this subsection  
16 (1) shall be between interested county departments of HUMAN OR social  
17 services and ~~local representatives of each of the following: agencies or~~  
18 ~~entities:~~

19           (I) A REPRESENTATIVE OF the local judicial districts, including  
20 probation services;

21           (II) A REPRESENTATIVE OF the health department, whether a  
22 county or district public health agency;

1 (III) A REPRESENTATIVE OF the local school district or school  
2 districts;

3 (IV) ~~Each~~ A REPRESENTATIVE FROM THE LOCAL community  
4 mental health center OR A MENTAL HEALTH PROFESSIONAL DESIGNATED BY  
5 THE PERSON OR ENTITY THAT CONVENES THE GROUP. For purposes of this  
6 subsection (1), a "mental health professional" may include any person  
7 licensed by the state of Colorado as a psychiatrist, psychologist, mental  
8 health counselor, or clinical social worker.

9 (V) ~~Each~~ A REPRESENTATIVE FROM THE LOCAL behavioral health  
10 organization;

11 (VI) A REPRESENTATIVE FROM the division of youth corrections;

12 (VII) A REPRESENTATIVE FROM a designated managed service  
13 organization for the provision of treatment services for alcohol and drug  
14 abuse pursuant to section 27-80-107, C.R.S.; and

15 (VIII) A REPRESENTATIVE FROM a domestic abuse program as  
16 defined in section 26-7.5-102, C.R.S., if representation from such a  
17 program is available.

18 (c) Notwithstanding the provisions of paragraph (b) of this  
19 subsection (1), the INDIVIDUALS AND agencies specified in paragraphs (a)  
20 and (a.5) of this subsection (1) may enter into memorandums of  
21 understanding involving only one or more county departments of HUMAN  
22 OR social services, not necessarily by region, as may be appropriate to  
23 ensure the effectiveness of local-level interagency oversight groups and  
24 individualized service and support teams in the county or counties.

25 **SECTION 2. Act subject to petition - effective date.** This act  
26 takes effect at 12:01 a.m. on the day following the expiration of the  
27 ninety-day period after final adjournment of the general assembly (August

1 10, 2016, if adjournment sine die is on May 11, 2016); except that, if a  
2 referendum petition is filed pursuant to section 1 (3) of article V of the  
3 state constitution against this act or an item, section, or part of this act  
4 within such period, then the act, item, section, or part will not take effect  
5 unless approved by the people at the general election to be held in  
6 November 2016 and, in such case, will take effect on the date of the  
7 official declaration of the vote thereon by the governor. <{Or safety  
8 clause?}>



Colorado  
Legislative  
Council  
Staff

Bill 4

FISCAL NOTE

FISCAL IMPACT:  State  Local  Statutory Public Entity  Conditional  No Fiscal Impact

Drafting Number: LLS 16-0313  
Prime Sponsor(s):

Date: October 21, 2015  
Bill Status: Legislative Oversight Committee  
Concerning the Treatment of  
Persons with Mental Illness in the  
Criminal and Juvenile Justice  
Systems Interim Committee Bill  
Request

Fiscal Analyst: Lauren Schreier, 303-866-3523

BILL TOPIC: MENTAL HEALTH AND COLLABORATIVE MANAGEMENT TEAMS

Fiscal Impact Summary	FY 2016-2017	FY 2017-2018
State Revenue General Fund		
State Expenditures General Fund	Minimal workload increase.	
TABOR Impact		
FTE Position Change		
Appropriation Required: None.		
Future Year Impacts: None.		

Summary of Legislation

This bill, requested by the *Legislative Oversight Committee Concerning the Treatment of Persons with Mental Illness in the Criminal and Juvenile Justice Systems*, adds mental health professionals to the list of persons that must be included in any memorandum of understanding entered into between county departments of human or social services and other local-level service providers.

Background

State law specifies a uniform collaborative management process that integrates the oversight of services from multiple state and county agencies. These voluntary agreements are initiated to improve the quality and efficiency of care provided to Colorado children and families.

**State Expenditures**

The bill may increase workload in the Department of Human Services (DHS) by a minimal amount, beginning in FY 2016-17. The DHS must share information concerning the collaborative management process with mental health professionals. Any increase in workload in the DHS is anticipated to be minimal and will not require new appropriations.

**Local Government Impact**

The bill may increase workload for counties by a minimal amount. Under the bill, county departments of human or social services and other local-level service providers must incorporate the relevant mental health professionals when entering into memorandums of understanding.

**Effective Date**

The bill takes effect August 10, 2016, if the General Assembly adjourns on May 11, 2016, as scheduled, and no referendum petition is filed.

**State and Local Government Contacts**

Human Services  
Public Health and Environment

Judicial  
Education