

WEST VIRGINIA LEGISLATURE

2023 REGULAR SESSION

Committee Substitute

for

Senate Bill 242

By Senators Azinger and Maynard

[Originating in the Committee on Health and Human
Resources; reported on February 1, 2023]

1 A BILL to amend the Code of West Virginia, 1931, as amended, by adding thereto a new section,
2 designated §27-9-2, relating to residential substance use disorder programs; defining
3 terms; requiring the Office of the Inspector General to promulgate amendments to the
4 Behavioral Health Centers Licensure Rule; setting forth stakeholders; setting forth
5 services, supplies, screenings, and education to be made available, or made available by
6 referral; setting forth requirements to better monitor and improve quality outcomes; and
7 providing for effective date.

Be it enacted by the Legislature of West Virginia:

ARTICLE 9. LICENSING OF HOSPITALS.

§27-9-2. Residential Substance Use Disorder Programs.

1 The Office of the Inspector General shall propose rules for legislative approval in
2 accordance with the provisions of §29A-3-1 et seq. of this code and may promulgate
3 emergency rules pursuant to the provisions of §29A-3-15 of this code to amend the
4 Behavioral Health Centers Licensure Rule, W. Va. C.S.R. § 64-11-1 et seq. (hereafter the
5 “rule”), to implement the requirements of this section after consultation with appropriate
6 stakeholders including, but not limited to, the Bureau for Medical Services, the Office of
7 Health Facility Licensure and Certification, the Bureau for Behavioral Health, the West
8 Virginia Behavioral Healthcare Providers Association, the Office of Drug Control Policy,
9 and the West Virginia Municipal League.

10 (1) The Office of the Inspector General shall amend the rule to include a new
11 definition for “Residential Substance Use Disorder Services Program” as specified below:

12 (A) Residential Substance Use Disorder Services Program means a behavioral
13 health center that offers behavioral health services specific to addiction, including, but not
14 limited to, substance use disorder services in a residential setting; and

15 (B) In addition to the specific provisions set forth in the rule which pertain to a
16 residential substance use disorder services program, such residential substance use

17 disorder services programs shall also be subject to any other provision in this rule
18 pertaining generally to behavioral health centers offering behavioral health services.

19 (2) The Office of the Inspector General shall amend the rule to require Residential
20 Substance Use Disorder Services Programs to make available, or to make referrals for the
21 following, if medically necessary and consistent with state and federal laws governing
22 consumer consent, as may be applicable:

23 (A) Substance use disorder treatment services;

24 (B) HIV and hepatitis screening and education;

25 (C) Hepatitis A, B, and C vaccination and testing;

26 (D) Overdose prevention supplies and education; and

27 (E) Educational services related to birth control and disease transmission.

28 (3) The Office of the Inspector General shall amend the rule to require Residential
29 Substance Use Disorder Services Programs to implement certain mechanisms to better
30 monitor and improve quality and consumer outcomes, which shall include, but not be
31 limited to:

32 (A) Identifying metrics to be monitored, including, but not limited to, co-occurring
33 substance use disorders and mental health diagnoses and social determinants of health
34 data to evaluate increased risks for functional impairment, treatment outcomes, morbidity
35 and mortality, treatment costs, homelessness, incarceration, and suicide;

36 (B) Implementing direct communication channels with community leaders to
37 ensure the Residential Substance Use Disorder Services Program is being operated in an
38 appropriate and efficient manner and to ensure it actively works to prevent or mitigate
39 community impact related to the operation of a Residential Substance Use Disorder
40 Services Program through the use of environmental strategies such as regular
41 environmental assessments or meetings with stakeholders and community leaders to
42 receive input as to potential or existing community impact;

43 (C) Implementing mechanisms to identify, prevent, mitigate, and correct any
44 community impact related to the operation of a Residential Substance Use Disorder
45 Services Program after receiving input from community leaders and stakeholders;

46 (D) Ensuring that appropriate referrals are being identified and made to ensure a
47 full continuum of care;

48 (E) Ensuring appropriate methods for transportation are available for consumers,
49 including upon discharge, and ensure this information is tracked by the provider; and

50 (F) Developing benchmarks and metrics to further the purposes of this section.

51 (G) Requiring applicants applying for a new license or for a renewed license to provide a
52 written statement from a majority of the county commission for the county in which it is located or is
53 proposing to locate, that the residential substance use disorder service program is:

54 (i) Is not prohibited by local ordinance; and

55 (ii) That maintain a majority of the county commission supports the program.

56 (H) A recovery residence, as defined in §16-59-1 of this code, is exempt from the
57 requirements of this section.

58 (I) The effective date is July 1, 2023.

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