1		AN ACT relating to legal proceedings and making an appropriation therefor.
2	Be i	t enacted by the General Assembly of the Commonwealth of Kentucky:
3		→SECTION 1. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
4	REA	AD AS FOLLOWS:
5	<u>(1)</u>	A pilot program shall be established in no less than ten (10) counties selected by
6		the Chief Justice of the Supreme Court to participate in a behavioral health
7		conditional dismissal program. The pilot program shall begin January 1, 2023,
8		and shall last for four (4) years unless extended or limited by the General
9		Assembly.
10	<u>(2)</u>	Each participating county shall have access to:
11		(a) Medication assisted treatment;
12		(b) Recovery services as defined under Section 2 of this Act; and
13		(c) Educational and vocational resources sufficient to provide the training and
14		assistance required under Section 9 of this Act.
15	<u>(3)</u>	(a) Every behavioral health treatment program provider in the pilot program
16		shall collect and maintain data as provided in this subsection relating to
17		program participants under their care, designed to inform the outcomes and
18		effectiveness of the pilot program, to be submitted to the Administrative
19		Office of the Courts as provided under paragraphs (b) to (e) of this
20		subsection.
21		(b) A report shall be made for each program participant no later than fourteen
22		(14) days following the initiation of treatment. The data to be collected and
23		submitted in the report shall include the following information regarding
24		each participant:
25		1. Age, gender, and race or ethnicity;
26		2. Housing history;
27		3. Educational history;

1		4. Employment history;
2		5. Past involvement in addiction recovery and treatment for a substance
3		use disorder;
4		6. Past treatment for a mental health disorder; and
5		7. Criminal history.
6	<u>(c)</u>	A second report shall be made for each program participant identified in
7		paragraph (b) of this subsection no later than twenty-eight (28) days after
8		filing the initial report and shall provide the progression of the program
9		participant including but not limited to:
10		1. Continuation in the program;
11		2. The status and type of recommended treatment;
12		3. Employment or job training;
13		4. The status and type of educational training;
14		5. Housing status;
15		6. Any other information the program provider determines may assist in
16		evaluation of the pilot program; and
17		7. If the participant has been discharged from the program due to an
18		inability or unwillingness to meet the terms and conditions of the
19		treatment program, including the specific reason for the discharge.
20	<u>(d)</u>	Subsequent reports shall be filed on a quarterly basis. The initial quarterly
21		report shall be submitted no later than April 15, 2023, with reports due
22		thereafter on January 15, April 15, July 15, and October 15 of each year of
23		the pilot program. The quarterly reports shall include for the reporting
24		period:
25		1. The information required under paragraph (c) of this subsection as it
26		relates to each program participant, including the length of time the
2.7		individual has heen a program participant

1		2. The number of clinical assessments performed by the program
2		provider;
3		3. The total number of individuals participating in the behavioral health
4		conditional dismissal program with that provider;
5		4. The number of individuals who remain in compliance with the terms
6		and conditions of the treatment program;
7		5. The number of individuals who have been discharged from the
8		program due to an inability or unwillingness to meet the terms and
9		conditions of the treatment program, including the specific reason for
10		the discharge;
11		6. For any individual discharged under subparagraph 5. of this
12		paragraph, the length of time the individual participated in the
13		program;
14		7. The number of individuals who have been discharged from the
15		program upon successful completion of the treatment program
16		requirements;
17		8. The number of individuals who have received medication-assisted
18		treatment and the result of that treatment;
19		9. The number of individuals who have completed a recommended job
20		skills or job training program; and
21		10. The number of individuals who have completed a recommended
22		educational component of the program.
23	<u>(e)</u>	A final report shall be filed for each program participant no later than
24		thirty (30) days following discharge from the program and shall contain, at
25		a minimum, the following information:
26		1. If the discharge from the program was due to an inability or
27		unwillingness to meet the terms and conditions of the treatment

1	program tne:
2	a. Specific reason for the discharge;
3	b. Length of time the individual participated in the program;
4	c. Goals met during the participation period;
5	d. Identified barriers to completion of the program, if known; and
6	e. Recommended adjustments to the behavioral health conditional
7	dismissal program that could provide a greater probability of
8	successful completion to similar participants; and
9	2. If the discharge from the program occurred upon successful
10	completion of the program requirements:
11	a. The length of time the individual participated in the program;
12	b. A summary of the specific programs completed and goals
13	attained by the participant;
14	c. What continued treatment, if any, is recommended; and
15	d. Recommended adjustments to the behavioral health conditional
16	dismissal program that could provide greater benefit to similar
17	participants.
18	(4) The attorneys for the Commonwealth participating in the pilot program shall
19	submit quarterly reports to the Administrative Office of the Courts. The initial
20	quarterly report shall be submitted no later than April 15, 2023, with reports due
21	thereafter on January 15, April 15, July 15, and October 15 of each year of the
22	pilot program. The quarterly reports shall include for the reporting period:
23	(a) The number of eligible defendants, including the defendant's race,
24	ethnicity, and gender, who were offered participation in the behavioral
25	health conditional dismissal program but declined to participate;
26	(b) The number of eligible defendants, including the defendant's race,
27	ethnicity, and gender, who sought to participate in the program but whose

1	participation was not agreed to by the attorney for the Commonwealth;
2	(c) The number of victims, if there is an identified victim, who did no
3	participate in the process; and
4	(d) The number of victims, if there is an identified victim, who did not agree to
5	the defendant's participation in the program.
6	(5) If the attorney for the Commonwealth did not agree to an eligible defendant
7	participation in the behavioral health conditional dismissal program, he or sh
8	shall include in each quarterly report to the Administrative Office of the Court
9	the specific offenses charged for that defendant, and the substantial and
10	compelling reasons, based upon delineated facts specific to the defendant, wh
11	the defendant was denied participation in the program.
12	(6) The Chief Justice of the Supreme Court shall submit an annual report to the
13	Legislative Research Commission, the chair of the Senate Standing Committee
14	on Judiciary, the chair of the House Standing Committee on Judiciary, and the
15	Governor by January 31 of each year that includes the information received from
16	the attorneys for the Commonwealth and the providers for the countie
17	participating in the behavioral health conditional dismissal program. The repor
18	shall include the information reported under subsections (3) to (5) of this section
19	and shall also include:
20	(a) The number of defendants assessed who did not meet the eligibilit
21	requirements for the program following the clinical assessment;
22	(b) The specific offenses charged for each defendant and the classification of
23	offenses charged;
24	(c) The percentage of defendants participating in the program who successfull
25	completed the program;
26	(d) The percentage of defendants discharged from the program fo
27	noncompliance; and

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1	(e) The percentage of defendants who are arrested, convicted, and incarcerated
2	within six (6) months, one (1) year, and two (2) years of successfu
3	completion of the program.
4	→SECTION 2. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
5	READ AS FOLLOWS:
6	As used in Sections 1 to 11 of this Act:
7	(1) "Behavioral health conditional dismissal program" means a program designed
8	to provide an eligible person who has a behavioral health disorder and who ha
9	been charged with a qualifying offense an alternative to receive treatment and
10	recovery support services addressing the behavioral health disorder instead of
11	incarceration, resulting in dismissal of the charges upon successful completion;
12	(2) "Behavioral health disorder" means a mental health disorder or substance use
13	disorder, or both;
14	(3) "Behavioral health treatment program" means a plan or recovery program
15	based upon a clinical assessment, that:
16	(a) Identifies and incorporates recovery services to meet the specific treatmen
17	and recovery goals and the needs of the individual served;
18	(b) Addresses the social determinants of health to include housing
19	transportation, access to medical care, and meaningful employment; and
20	(c) Considers a full continuum of care;
21	(4) "Clinical assessment" means an assessment that is performed by a qualified
22	mental health professional in accordance with the most recent American Societ
23	of Addiction Medicine criteria for a substance use disorder, and the most recen
24	edition of the American Psychiatric Association's Diagnostic and Statistica
25	Manual of Mental Disorders for a mental health disorder;
26	(5) "Eligible applicant" or "eligible person" means an individual:
27	(a) Who has completed a clinical assessment and been referred to care: and

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1		(b) Who meets the requirements of Section 3 of this Act;
2	<u>(6)</u>	"Mental health disorder" is a diagnostic term that covers many clinical
3		categories typically including behavioral or psychological symptoms, or both,
4		along with impairment of personal and social function, and specifically defined
5		and clinically interpreted through reference to criteria contained in the most
6		recent edition of the American Psychiatric Association's Diagnostic and
7		Statistical Manual of Mental Disorders;
8	<u>(7)</u>	"Qualified mental health professional" means the same as in KRS 202A.011 and
9		shall include a licensed clinical alcohol and drug counselor under KRS Chapter
10		<u>309;</u>
11	<u>(8)</u>	"Qualifying offense" means a misdemeanor or Class D felony that is not:
12		(a) An offense that would qualify the person as a violent offender under KRS
13		<u>439.3401;</u>
14		(b) A sex crime as defined by KRS 17.500;
15		(c) An offense under KRS 189A.010;
16		(d) An offense against a victim who has a protective order as defined in KRS
17		508.130 against the defendant at the time the offense is charged;
18		(e) An act of domestic violence and abuse as defined in KRS 403.720, or an act
19		of dating violence and abuse as defined in KRS 456.010, against the
20		defendant at the time the offense is charged; or
21		(f) An offense against a victim who has an interpersonal protective order
22		issued under KRS 456.060.
23	<u>(9)</u>	"Recovery services" means rehabilitative treatment services that shall include but
24		not be limited to any or all of the following:
25		(a) Outpatient treatment;
26		(b) National Alliance of Recovery Residences or the Council on Accreditation
27		of Rehabilitation Facilities certified housing:

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1	(c) Medication treatment;
2	(d) Personal and family counseling;
3	(e) Substance abuse education and prevention classes or counseling;
4	(f) Vocational training;
5	(g) Literacy training;
6	(h) Community service;
7	(i) Inpatient or residential behavioral health treatment as needed to address:
8	1. Impaired capacity to use self-control, judgment, or discretion related
9	to behavior;
10	2. Severe dependence;
11	3. Special detoxification;
12	4. Relapse; or
13	5. Other treatments recommended by a qualified mental health
14	professional;
15	(j) Restorative practices designed to make the participant accountable to the
16	victim when there is an identified victim, and it is safe to do so; and
17	(k) Recovery housing assistance; and
18	(l) Recovery housing programs that have an established third party outcome
19	evaluation; and
20	(10) "Substance use disorder" has the same meaning as in KRS 222.005.
21	→ SECTION 3. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
22	READ AS FOLLOWS:
23	(1) In addition to the pretrial diversion program established under KRS 533.250 to
24	533.260, and the deferred prosecution program established under KRS
25	218A.14151, a behavioral health conditional dismissal program shall be operated
26	in each county participating in the pilot program established under Section 1 of
2.7	this Act. The hehavioral health conditional dismissal program shall:

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1	(a) Provide eligible persons, on an equal basis, an alternative to ordinar
2	prosecution for qualifying offenses arising from a behavioral health
3	disorder by receiving early recovery services and treatment reasonabl
4	expected to deter future criminal behavior; and
5	(b) Provide an expedited alternative to prosecution for eligible persons who
6	may be harmed by the imposition of criminal sanctions in the absence of the
7	alternative when the alternative is reasonably expected to serve as
8	sufficient deterrent to criminal conduct.
9	(2) The program may be utilized by any person:
10	(a) Who is a resident of the Commonwealth and who is at least eighteen (18
11	years of age;
12	(b) Whose clinical assessment indicates the presence of a behavioral health
13	<u>disorder;</u>
14	(c) Charged with a qualifying offense;
15	(d) Who does not have a previous conviction for a Class A, B, or C felony, or a
16	Class D felony or misdemeanor that is not a qualifying offense; and
17	(e) Who has been assessed by pre-trial services as a low-risk, low-leve
18	offender, or has been otherwise determined by the attorney for th
19	Commonwealth or the attorney for the defendant as a viable participant in
20	the program.
21	(3) Other factors that may be considered for admission into the behavioral health
22	conditional dismissal program include but are not limited to:
23	(a) The likelihood that the applicant's offense is related to a behavioral health
24	disorder that would be conducive to change through his or her participation
25	in a behavioral health treatment program;
26	(b) The availability of behavioral health treatment programs in the defendant
27	county of residence if different from the county of arrest;

I	(c) The history of any physical violence toward others as documented through
2	judicial or law enforcement records;
3	(d) Any involvement of the applicant with organized crime under KRS 506.120;
4	<u>and</u>
5	(e) Whether or not the applicant's participation in a behavioral health
6	treatment program would adversely affect the prosecution of codefendants.
7	(4) Eligible defendants in pretrial confinement shall be given preference for
8	participation in the behavioral health conditional dismissal program.
9	(5) Eligible defendants who have charges pending but are not in custody shall be
10	assessed for participation in the behavioral health conditional dismissal program
11	as provided under subsection (1)(d) of Section 4 of this Act.
12	→ SECTION 4. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
13	READ AS FOLLOWS:
14	(1) (a) Following arrest, and within seventy-two (72) hours after being booked into
15	a jail or detention facility, any person who has been charged with a
16	qualifying offense shall undergo a clinical assessment to determine if he or
17	she may have a behavioral health disorder;
18	(b) The Cabinet for Health and Family Services shall provide a list of approved
19	assessors in accordance with Section 8 of this Act for each county
20	participating in the pilot program;
21	(c) The jailer or his or her designee shall contact a qualified mental health
22	professional from the list of approved assessors for the county provided
23	under paragraph (b) of this subsection, and shall advise the qualified
24	mental health professional that a clinical assessment is needed;
25	(d) If a person has been charged with a qualifying offense and has been
26	released prior to receiving a clinical assessment, he or she individually, or
27	through his or her counsel, if any, may request a clinical assessment by a

1		qualified mental health professional at any time during the proceedings
2		from the list of approved assessors provided under paragraph (b) of this
3		subsection;
4	<u>(e)</u>	Notwithstanding any other provision to the contrary, the clinical assessment
5		may be conducted through telehealth or in person, whether the person
6		charged is in the custody of the jail or has been released;
7	<u>(f)</u>	If the qualified mental health professional determines that the person being
8		assessed is physically or psychologically impaired to the extent that he or
9		she cannot provide sufficient information or responses to conduct or
10		complete the assessment, the assessment may be delayed but only for the
11		time required for the person to adequately respond;
12	<u>(g)</u>	No statement or other disclosure made by the person charged in the course
13		of the clinical assessment shall be admissible in a criminal trial unless the
14		trial is for a crime committed during the assessment; however, nothing in
15		this subsection shall be interpreted to prevent any reporting required by law,
16		or as an implied waiver of applicable privacy laws and professional
17		standards regarding confidentiality;
18	<u>(h)</u>	Any referral for treatment shall be based upon the clinical assessment and a
19		finding by the qualified mental health professional that treatment is
20		medically necessary;
21	(i)	The treatment referral shall be forwarded to the attorney for the
22		Commonwealth and the attorney for the person charged, if any, within
23		forty-eight (48) hours of the assessment;
24	<u>(j)</u>	The failure of the assessor to forward the referral to the attorney for the
25		Commonwealth or the attorney for the person charged, if any, within forty-
26		eight (48) hours shall not result in automatic release of the person charged;
27		<u>and</u>

1		(k) Nothing in this subsection shall be interpreted to create a duty of the jailer
2		to pay for any costs associated with the clinical assessment.
3	<u>(2)</u>	At any time following arrest the Commonwealth's attorney if the underlying
4		charge includes a felony, or the county attorney if the underlying charge only
5		includes a misdemeanor, and the person charged may agree to the individual's
6		participation in the behavioral health conditional dismissal program.
7	<u>(3)</u>	When an individual is being considered for the behavioral health conditional
8		dismissal program, the attorney for the Commonwealth shall:
9		(a) Have a criminal record check made to ascertain if the person is eligible for
10		the program;
11		(b) Consult with the victim of the crime, if there is an identified victim;
12		(c) Explain the behavioral health conditional dismissal program to the victim,
13		including potential terms and conditions, and any other matter the attorney
14		for the Commonwealth deems to be appropriate, including the right of the
15		victim to submit a written statement that shall be included in the record
16		placed under seal under Section 6 of this Act; and
17		(d) Conduct any other investigation that the attorney for the Commonwealth
18		determines may be necessary to assist him or her in agreeing to the referral
19		for treatment by the qualified mental health professional and the
20		defendant's participation in the behavioral health conditional dismissal
21		program.
22	<u>(4)</u>	If the defendant agrees to the terms of the individualized treatment plan, which
23		shall include restitution, and the attorney for the Commonwealth agrees to the
24		defendant's participation in the program, the defendant and the attorney for the
25		Commonwealth shall sign an agreement specifying the terms and conditions. If
26		the defendant is represented by counsel, defense counsel shall also sign the
27		agreement.

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1	<u>(5)</u>	The length of the program shall be determined by the qualified mental health
2		professional in collaboration with the provider and the type of program based
3		upon the assessment and shall not:
4		(a) Be less than one (1) year in duration unless discharged earlier by the
5		provider upon satisfactory completion of the recommended treatment plan
6		with agreement of the attorney for the Commonwealth after consultation
7		with the victim, and with agreement of the defendant; or
8		(b) Exceed a period of time longer than the defendant's maximum potential
9		period of incarceration if found guilty of the offenses charged unless the
10		defendant agrees in writing to an extension of the treatment period.
11	<u>(6)</u>	A defendant participating in the behavioral health conditional dismissal program
12		shall not be required to:
13		(a) Plead guilty or enter an Alford plea as a condition for participation in the
14		program; or
15		(b) Make any statement or stipulate to any statement relating to evidence in the
16		underlying case as a condition for participation in the program.
17	<u>(7)</u>	Execution of the agreement by the defendant shall toll all further proceedings
18		against the defendant relating to the agreement, except the matter may be set for
19		a status review at the discretion of the court.
20	<u>(8)</u>	Upon execution of the agreement as provided in subsection (4) of this section, the
21		defendant shall present himself or herself for treatment no later than three (3)
22		days after the agreement is signed. The attorney for the Commonwealth shall:
23		(a) Notify the treatment provider of the agreement and the effective date; and
24		(b) Provide the victim, if there is an identified victim, with notice that an
25		agreement has been reached for the defendant's participation in the
26		behavioral health conditional dismissal program, and the terms of the
27		agreement that are applicable to the victim.

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(9) If the defendant remains in custody at the time of the agreement, the court shall
order release of the defendant which shall not include a requirement of cash bail.
(10) The charges against the defendant shall proceed with ordinary prosecution upon
dismissal of the defendant from the treatment program by the provider for
noncompliance.
→SECTION 5. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
READ AS FOLLOWS:
(1) Upon initiation of treatment, the designated behavioral health treatment provider
may assign a case manager in accordance with criteria established by the Cabinet
of Health and Family Services in administrative regulations promulgated under
KRS Chapter 13A. The case manager, or the treatment provider if no case
manager has been assigned, shall notify the Office of Adult Education within the
Department of Workforce Investment of the Education and Workforce
Development Cabinet of the individual's participation in a behavioral health
conditional dismissal program.
(2) Any assigned case manager, working in collaboration with the individual
referred for treatment and the treatment team and provider, or the treatment
provider if there is no case manager shall:
(a) Obtain all releases from the individual served that may be required to
confirm compliance with the program requirements;
(b) Coordinate all services and testing required under the program, including
transportation if needed and available;
(c) Receive and maintain copies of all necessary documentation to ensure
compliance with the program requirements, including but not limited to:
1. Treatment records;
2. Drug tests;
3. Educational assessments and advancements, if applicable;

1		4. Employment status and employment training;
2		5. Community service, if applicable; and
3		6. Housing status;
4	<u>(d)</u>	Meet or conference with providers of any program requirements on a
5		regular basis to address the participant's progress, including restitution,
6		and any required adjustment that may be needed to the participant's
7		program; and
8	<u>(e)</u>	Provide periodic progress reports to the attorney for the Commonwealth and
9		the attorney for the participant according to the following schedule:
10		1. An initial report within fourteen (14) days of the initiation of
11		<u>treatment;</u>
12		2. A follow-up report within twenty-eight (28) days after submission of
13		the initial fourteen (14) day report;
14		3. Subsequent reports on a quarterly basis throughout the course of
15		treatment beginning April 15, 2023, with reports due thereafter on
16		January 15, April 15, July 15, and October 15 of each year of the
17		participation in the pilot program; and
18		4. A final report within thirty (30) days of the successful completion of
19		the program.
20	(3) Any	assigned case manager, treatment provider, or member of the treatment
21	team	n, is encouraged to:
22	<u>(a)</u>	Utilize digital notification or reminder services for participants throughout
23		the treatment program period; and
24	<u>(b)</u>	If digital services under paragraph (a) of this subsection are utilized,
25		include in each quarterly report required under subsection (2)(e) of this
26		section the following data:
27		1. The number of participants;

I	2. The type of digital services provided;
2	3. The costs of providing the digital services;
3	4. Health and social outcomes from the use of the digital services; and
4	5. Any other information pertaining to outcomes related to the use of the
5	digital services.
6	(4) The treatment provider shall:
7	(a) Recommend modifications to the treatment program to the attorney for the
8	Commonwealth, and the attorney for the participant;
9	(b) Review the individual's progress and recommend continued participation in
10	the program or dismissal from the program due to an inability or
11	unwillingness to meet the terms and conditions of the program;
12	(c) Immediately report dismissal from the treatment program based upon lack
13	of compliance with the terms and conditions of the program to the attorney
14	for the Commonwealth, the court, and the attorney for the participant; and
15	(d) Advise the attorney for the Commonwealth, the court, the attorney for the
16	participant, and the victim, if there is an identified victim, of the
17	participant's successful completion of the program requirements.
18	→SECTION 6. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
19	READ AS FOLLOWS:
20	(1) Upon successful completion of the behavioral health conditional dismissal
21	program:
22	(a) The court shall dismiss the charged offense or offenses with prejudice and
23	discharge the defendant;
24	(b) All records relating to the case, including but not limited to arrest records
25	and records relating to the charges, shall be sealed, except as provided in
26	<u>KRS 27A.099;</u>
27	(c) The offense shall be accessible for review for the sole purpose of

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1	determining the defendant's eligibility for deferred prosecution und	<u>ler KRS</u>
2	218A.1415; and	
3	(d) The defendant shall not be required to disclose the arrest of	r other
4	information relating to the charges or participation in the program	n on an
5	application for employment, credit, or other type of application	<u>unless</u>
6	required to do so by state or federal law.	
7	(2) If a defendant who is participating in the behavioral health conditional d	<u>ismissal</u>
8	program is convicted of or enters a plea of guilty to a felony offense other	<u>r than a</u>
9	qualifying offense under any law of the United States, this state, or an	ny other
10	state, that was committed while participating in the program, the defende	ınt shall
11	be discharged from the behavioral health conditional dismissal prog	ram for
12	failure to comply with the terms and conditions.	
13	(3) If the defendant is discharged from the behavioral health conditional d	<u>ismissal</u>
14	program by the treatment provider under Section 5 of this Act, all states	nents or
15	other disclosures made by the defendant to any provider while participating	ig in the
16	program shall be protected by all applicable privacy laws and prof	<u>essional</u>
17	standards regarding confidentiality and shall not be admissible in a crimi	nal trial
18	relating to the offenses covered by the agreement executed under Section	4 of this
19	Act.	
20	(4) The attorney for the Commonwealth shall notify the victim, if ther	<u>e is an</u>
21	identified victim, of the defendant's dismissal from the progra	am for
22	noncompliance or discharge from the program following successful con	<u>npletion</u>
23	of the program.	
24	→SECTION 7. A NEW SECTION OF KRS CHAPTER 533 IS CREAT	ΓED TO
25	READ AS FOLLOWS:	
26	(1) In establishing a specific behavioral health disorder treatment plan, the p	<u> program</u>
27	provider formulating the plan shall consider the following:	

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1	(a) The existence of programs and resources within the community;
2	(b) Available treatment providers;
3	(c) Available recovery housing;
4	(d) Accessible public and private agencies;
5	(e) The benefit of keeping the participant in his or her community or relocation
6	for purposes of treatment, housing, and other supportive services;
7	(f) The safety of the victim of the offense, if there is an identified victim; and
8	(g) The specific and personalized needs of the participant, including the choice
9	of the participant.
10	(2) A program shall be designed to provide the participant with the skills, training,
11	and resources needed to maintain recovery and prevent the person from engaging
12	in criminal activity arising from a behavioral health disorder upon release from
13	the program.
14	(3) A behavioral health treatment program under Sections 1 to 8 of this Act shall be
15	evidence-based, and may be a behavioral treatment plan, or a medically assisted
16	treatment plan, or both, with recovery services or a Substance Abuse and Mental
17	Health Services Administration evidence-based recovery housing program. The
18	program shall provide at a minimum access, as needed, to:
19	(a) Inpatient detoxification and treatment, that may include a faith-based
20	residential treatment program;
21	(b) Outpatient treatment;
22	(c) Drug testing;
23	(d) Addiction counseling;
24	(e) Cognitive and behavioral therapies;
25	(f) Medication assisted treatment including:
26	1. At least one (1) federal Food and Drug Administration approved
27	agonist medication for the treatment of opioid or alcohol dependence;

1	2. Partial agonist medication;
2	3. Antagonist medication; and
3	4. Any other approved medication for the mitigation of opioid
4	withdrawal symptoms;
5	(g) Educational services;
6	(h) Vocational services;
7	(i) Housing assistance;
8	(j) Peer support services; and
9	(k) Community support services, that may include faith-based services.
10	(4) Except for recovery housing providers, all treatment providers shall:
11	(a) Meet the licensure requirements and standards established by the Cabinet
12	for Health and Family Services under KRS Chapter 222;
13	(b) Qualify as a Medicaid approved provider; and
14	(c) Be accredited by at least one (1) of the following:
15	1. American Society of Addiction Medicine;
16	2. Joint Commission on the Accreditation of Healthcare Organizations;
17	<u>or</u>
18	3. Commission on Accreditation of Rehabilitation Facilities.
19	(5) All recovery housing service providers shall:
20	(a) Be certified using the National Alliance for Recovery Residences standards;
21	(b) Provide evidence-based services;
22	(c) Provide a record of outcomes;
23	(d) Provide peer support services; and
24	(e) Address the social determinants of health.
25	(6) (a) The Department for Medicaid Services, in conjunction with the program
26	provider, shall assist any program participant who qualifies for Medicaid
2.7	services to obtain or access Medicaid services for his or her behavioral

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1	health disorder treatment or recovery program;
2	(b) The Department for Medicaid Services and its contractors shall provide an
3	individual participating in the behavioral health conditional dismissal
4	program with the substance use disorder benefit as provided under KRS
5	205.6311; and
6	(c) A Medicaid managed care organization shall treat any referral for
7	treatment under Sections 1 to 8 of this Act as an "expedited authorization
8	request" as provided under KRS 205.534(2)(a)2.b.
9	(7) Recovery housing services provided under this pilot program shall:
10	(a) Be paid utilizing a value-based payment system developed and established
11	by the medical managed care organizations in conjunction with the
12	Department for Medicaid Services and recovery housing providers. The
13	value-based payment system shall be established no later than January 1,
14	2023, and shall include the following for recovery housing programs:
15	1. The development of a qualified recovery housing provider network;
16	<u>and</u>
17	2. Establishment and implementation of a value-based payment system
18	that shall include the regular collection of outcomes data within
19	existing Medicaid reimbursement regulations; and
20	(b) Be limited to two hundred (200) individuals unless additional funding
21	designated for recovery housing is available through the Cabinet for Health
22	and Family Services.
23	→SECTION 8. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
24	READ AS FOLLOWS:
25	(1) The Cabinet for Health and Family Services shall establish and maintain a list of
26	approved assessors for each county participating in the pilot program established
27	under Section 1 of this Act to perform clinical assessments: and

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1	<u>(2)</u>	No as	ssessor shall be approved unless he or she is a:
2		<u>(a)</u>	Qualified mental health professional as defined under Section 2 of this Act;
3			<u>and</u>
4		<u>(b)</u>	Medicaid approved provider or employed by a Medicaid approved provider.
5		→ SE	ECTION 9. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
6	REA	AD AS	FOLLOWS:
7	<u>(1)</u>	(a)	The Office of Adult Education within the Department of Workforce
8			Investment of the Education and Workforce Development Cabinet in
9			conjunction with a community rehabilitation provider shall conduct an in-
10			person initial screening of any individual participating in a behavioral
11			health conditional dismissal program within thirty (30) days of a participant
12			beginning the program under Section 4 of this Act.
13		<u>(b)</u>	Nothing in this section shall prohibit any department, office, or division of
14			the Education and Workforce Development Cabinet from entering into an
15			agreement with a third party in each county participating in the pilot
16			program to provide the services required under this section.
17	<u>(2)</u>	The i	nitial screening shall include:
18		<u>(a)</u>	Educational history including highest school grade completed, and when;
19		<u>(b)</u>	Employment history including types and lengths of employments;
20		<u>(c)</u>	Military history, if any;
21		<u>(d)</u>	The participant's physical, mental, and emotional abilities and limitations;
22		<u>(e)</u>	Aptitude, skill level, and interest testing;
23		<u>(f)</u>	An assessment of language skills; and
24		<u>(g)</u>	A determination of whether further assessment is needed to develop the
25			vocational component of the recovery treatment program. If further
26			assessment is required, it shall be completed within the first ninety (90) days
27			following entry into the recovery treatment program unless additional time

1			is needed to provide for physical recovery from the effects of a severe
2			behavioral health disorder.
3	<u>(3)</u>	With	nin ten (10) days of completion of the vocational assessment, the Office of
4		<u>Adu</u>	lt Education, in consultation with the behavioral health conditional dismissal
5		prog	ram provider, shall establish an individualized plan designed to attain a
6		spec	ific employment outcome to include:
7		<u>(a)</u>	Specific educational goals with identification of institutions from which the
8			participant will receive educational credits or training;
9		<u>(b)</u>	Specific job-skills training, and the facility or institution from which the
10			participant will receive the job skills training, to include:
11			1. A holistic education curriculum that includes but is not limited to
12			problem solving, communication skills, and interpersonal skills; and
13			2. Sector specific employers as designated by the Kentucky Workforce
14			Innovation Board;
15		<u>(c)</u>	The required number of hours per week the participant will be engaged in
16			educational or vocational training, including anticipated study time or
17			assigned projects completion time outside of the classroom or training
18			facility;
19		<u>(d)</u>	The specific services that will be provided through the Department of
20			Workforce Investment to achieve the employment outcome, overcome or
21			minimize any identified obstacles to employment, and the frequency with
22			which those services will be provided, including but not limited to access to
23			services during non-traditional business hours and support;
24		<u>(e)</u>	The beginning and projected completion date of each service;
25		<u>(f)</u>	If supported employment training or services are to be provided outside of
26			the Education and Workforce Development Cabinet, the identification of
27			the provider of the extended services and the reporting and accountability

1		<u>requirements established with the program provider;</u>
2		(g) The criteria established for evaluating progress and success;
3		(h) The attendance and reporting requirements established for the participant
4		and for the institution or facility providing the service, including to whom
5		and with what frequency reports are to be made;
6		(i) The date the employment plan is estimated to be completed;
7		(j) The job-placement assistance plan that will be provided to the participant by
8		the department;
9		(k) The need for ongoing or future training following completion of the
10		employment plan and the availability of that training to the participant; and
11		(l) The continuum of care to be provided by a community rehabilitation
12		provider.
13	<u>(4)</u>	The Department of Workforce Investment, in consultation with the Kentucky
14		Higher Education Assistance Authority, shall provide the participant with
15		assistance in securing all scholarships, grants, or other available financial
16		assistance to ensure access to the educational or training requirements needed to
17		achieve the specific employment outcome.
18	<u>(5)</u>	The Department of Workforce Investment may establish an electronic registry to
19		be used by participants in the behavioral conditional dismissal program,
20		treatment plan providers, and prospective employers to assist in matching
21		program participants with employment opportunities.
22		→ SECTION 10. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
23	REA	D AS FOLLOWS:
24	<u>(1)</u>	The Behavioral Health Conditional Dismissal Program Implementation Council
25		is created for the purpose of assisting with the implementation of the behavioral
26		health conditional dismissal pilot program created under Section 1 of this Act.
27	(2)	The membership of the council shall include the following:

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1		(a)	The executive director of the Office of Drug Control Policy, or his or her
2			designee, who shall serve as chair of the council;
3		<u>(b)</u>	The director of the Administrative Office of the Courts, or his or her
4			designee;
5		<u>(c)</u>	The commissioner of the Department for Behavioral Health, Developmental
6			and Intellectual Disabilities, or his or her designee;
7		<u>(d)</u>	The commissioner of the Kentucky Department for Medicaid Services, or
8			his or her designee;
9		<u>(e)</u>	The public advocate, or his or her designee;
10		<u>(f)</u>	A member of the Kentucky Commonwealth's Attorneys' Association, elected
11			by its membership;
12		<u>(g)</u>	A member of the Kentucky County Attorneys Association;
13		<u>(h)</u>	One (1) Circuit Judge, elected by the Circuit Judges Association of
14			Kentucky;
15		<u>(i)</u>	One (1) District Judge, elected by the District Judges Association of
16			Kentucky;
17		<u>(j)</u>	The executive director of the Kentucky Jailers Association, or his or her
18			designee; and
19		<u>(k)</u>	Two (2) individuals selected by the Kentucky Association of Regional
20			Programs, one (1) of whom shall be in recovery from a substance use
21			disorder and one (1) of whom is being treated or has been treated for a
22			mental health disorder as defined in Section 2 of this Act.
23	<u>(3)</u>	The	council shall meet at least quarterly. Meetings shall be held at the call of the
24		<u>chair</u>	r, or upon the written request of two (2) members to the chair.
25	<u>(4)</u>	The	council shall:
26		<u>(a)</u>	Oversee the implementation of the behavioral health conditional dismissal
27			program pilot project;

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1	(b) Review the data collected by the Administrative Office of the Courts and
2	report to the Interim Joint Committee on Judiciary and the Governor by
3	October 1 of each year of the pilot project regarding:
4	1. Recommendations for any additional performance measures needed to
5	promote the success of the program;
6	2. Whether any action is necessary, including funding or legislation;
7	3. Recommendations for resolving any matters that reduce the
8	effectiveness of the program; and
9	4. Any additional information the council deems appropriate.
10	(5) Members shall not receive any additional compensation for their service on the
11	council but shall be reimbursed for all necessary expenses.
12	(6) The council shall be attached to the Justice and Public Safety Cabinet for
13	administrative purposes.
14	(7) The council shall terminate December 31, 2027, unless extended by the General
15	Assembly.
16	→SECTION 11. A NEW SECTION OF KRS CHAPTER 533 IS CREATED TO
17	READ AS FOLLOWS:
18	(1) There is hereby created a trust and agency account to be known as the
19	Behavioral Health Conditional Dismissal Program trust fund to be administered
20	by the Department for Behavioral Health, Developmental and Intellectual
21	Disabilities within the Cabinet for Health and Family Services.
22	(2) The fund may contain:
23	(a) Appropriations by the General Assembly for the purpose of the behavioral
24	health conditional dismissal program;
25	(b) State and federal grants, including but not limited to treatment related to
26	substance abuse disorder or a mental health disorder;
27	(c) Opioid settlement moneys made available for the purposes of the fund;

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1		(d) Devises, bequests, gifts, and donations, including philanthropic
2		organizations; and
3		(e) Any other contributions from public agencies or other entities made
4		available for the purposes of the fund.
5	<u>(3)</u>	Moneys deposited in the fund shall be used to administer and support the
6		purposes of Sections 1 to 11 of this Act, and may include payments for services
7		rendered by a qualified mental health provider as defined under Section 2 of this
8		Act and treatment program providers upon exhaustion of payments from other
9		payment providers, including but not limited to Medicaid and private insurance.
10	<u>(4)</u>	The department may, in accordance with KRS Chapter 45A, select and contract
11		with a third-party administrator to serve as the benefit manager for the program.
12		The contract between the department and the benefit manager shall be submitted
13		to the Government Contract Review Committee of the Legislative Research
14		Commission for comment and review.
15	<u>(5)</u>	Notwithstanding KRS 45.229, any moneys remaining in the fund at the close of
16		the fiscal year shall not lapse but shall be carried forward into the succeeding
17		fiscal year to be used for the purposes established in Sections 1 to 11 of this Act.
18	<u>(6)</u>	Any interest earned on moneys in the fund shall accrue to the fund and shall not
19		lapse.
20	<u>(7)</u>	Moneys deposited in the fund are hereby appropriated for the purposes set forth
21		in this section and shall not be appropriated or transferred by the General
22		Assembly for any other purposes.
23		→ Section 12. KRS 197.020 is amended to read as follows:
24	(1)	The Department of Corrections shall:
25		(a) Promulgate administrative regulations for the government and discipline of
26		the penitentiary, for the government and official conduct of all officials
27		connected with the penitentiary, and for the government of the prisoners in

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1			their deportment and conduct;
2		(b)	Promulgate administrative regulations for the character of food and diet of the
3			prisoners; the preservation of the health of the prisoners; the daily cleansing of
4			the penitentiary; the cleanliness of the persons of the prisoners; the general
5			sanitary government of the penitentiary and prisoners; the character of the
6			labor; the quantity of food and clothing; and the length of time during which
7			the prisoners shall be employed daily;
8		(c)	Promulgate administrative regulations, as the department deems necessary, for
9			the disposition of abandoned, lost, or confiscated property of prisoners;
10		(d)	Promulgate administrative regulations for the administration of a validated
11			risk and needs assessment to assess the criminal risk factors and correctional
12			needs of all inmates upon commitment to the department;
13		(e)	Promulgate administrative regulations to:
14			1. Create a certification process for county jails that may house female
15			state inmates. The administrative regulations shall include a requirement
16			of a physical barrier between male and female inmates; and
17			2. Require telehealth services in county jails; and
18		(f)	Cause the administrative regulations promulgated by the department, together
19			with the law allowing commutation of time to prisoners for good conduct, to
20			be printed and posted in conspicuous places in the cell houses and workshops.
21	(2)	The	department may impose a reasonable fee for the use of medical facilities by a
22		priso	oner who has the ability to pay for the medical and dental care. These funds may
23		be d	leducted from the prisoner's inmate account. A prisoner shall not be denied
24		med	ical or dental treatment because he or she has insufficient funds in his or her
25		inma	ate account.
26	(3)	The	department may promulgate administrative regulations in accordance with KRS

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Chapter 13A to implement a program that provides for reimbursement of telehealth

27

- 1 consultations.
- 2 (4) Fees for the use of medical facilities by a state prisoner who is confined in a jail
- pursuant to KRS 532.100 or other statute shall be governed by KRS 441.045.
- 4 → Section 13. Notwithstanding KRS 15.291 and 15.293(5), there is hereby
- 5 appropriated Restricted Funds in the amount of \$10,500,000 in each fiscal year from the
- 6 Opioid Abatement Trust Fund to the Behavioral Health, Developmental and Intellectual
- 7 Disabilities budget unit for the behavioral health conditional dismissal program described
- 8 in Sections 1 to 8 of this Act. The department shall reimburse the Administrative Office
- 9 of the Courts for administrative costs related to the program up to \$500,000 per year.
- → Section 14. 2022 RS HB 214/EN is hereby amended as follows:
- On page 10, line 3, delete "January 1, 2027" and insert in lieu thereof "January 1,
- 12 2031"; and
- On page 10, line 10, after "November 2026 regular election" insert "or the
- November 2030 regular election"; and
- 15 On page 10, line 18, after "November 2026 regular election" insert "or the
- 16 November 2030 regular election"; and
- On page 11, line 3, delete "November 2026" and insert in lieu thereof "November
- 18 2030".
- → Section 15. KRS 625.090 is amended to read as follows:
- 20 (1) The Circuit Court may involuntarily terminate all parental rights of a parent of a
- 21 named child, if the Circuit Court finds from the pleadings and by clear and
- 22 convincing evidence that:
- 23 (a) 1. The child has been adjudged to be an abused or neglected child, as
- defined in KRS 600.020(1), by a court of competent jurisdiction;
- 25 2. The child is found to be an abused or neglected child, as defined in KRS
- 26 600.020(1), by the Circuit Court in this proceeding;
- 27 3. The child is found to have been diagnosed with neonatal abstinence

1				sync	frome at the time of birth, unless his or her birth mother:
2				a.	Was prescribed and properly using medication for a legitimate
3					medical condition as directed by a health care practitioner that may
4					have led to the neonatal abstinence syndrome; or
5				b.	Is currently, or within ninety (90) days after the birth, enrolled in
6					and maintaining substantial compliance with both a substance
7					abuse treatment or recovery program and a regimen of prenatal
8					care or postnatal care as recommended by her health care
9					practitioner throughout the remaining term of her pregnancy or the
10					appropriate time after her pregnancy; or
11			4.	The	parent has been convicted of a criminal charge relating to the
12				phys	sical or sexual abuse or neglect of any child and that physical or
13				sexu	al abuse, neglect, or emotional injury to the child named in the
14				pres	ent termination action is likely to occur if the parental rights are not
15				term	ninated;
16		(b)	<u>1.</u>	The	Cabinet for Health and Family Services has filed a petition with the
17				cour	rt pursuant to KRS 620.180 or 625.050; or
18			<u>2.</u>	A c	hild-placing agency licensed by the cabinet, any county or
19				Con	amonwealth's attorney, or a parent has filed a petition with the
20				cour	rt under KRS 625.050; and
21		(c)	Terr	ninati	on would be in the best interest of the child.
22	(2)	No t	termin	nation	of parental rights shall be ordered unless the Circuit Court also finds
23		by c	lear a	nd co	nvincing evidence the existence of one (1) or more of the following
24		grou	ınds:		
25		(a)	That	t the 1	parent has abandoned the child for a period of not less than ninety
26			(90)	days;	
27		(b)	That	t the p	parent has inflicted or allowed to be inflicted upon the child, by other

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1		than accidental means, serious physical injury;
2	(c)	That the parent has continuously or repeatedly inflicted or allowed to be
3		inflicted upon the child, by other than accidental means, physical injury or
4		emotional harm;
5	(d)	That the parent has been convicted of a felony that involved the infliction of
6		serious physical injury to any child;
7	(e)	That the parent, for a period of not less than six (6) months, has continuously
8		or repeatedly failed or refused to provide or has been substantially incapable
9		of providing essential parental care and protection for the child and that there
10		is no reasonable expectation of improvement in parental care and protection,
11		considering the age of the child;
12	(f)	That the parent has caused or allowed the child to be sexually abused or
13		exploited;
14	(g)	That the parent, for reasons other than poverty alone, has continuously or
15		repeatedly failed to provide or is incapable of providing essential food,
16		clothing, shelter, medical care, or education reasonably necessary and
17		available for the child's well-being and that there is no reasonable expectation
18		of significant improvement in the parent's conduct in the immediately
19		foreseeable future, considering the age of the child;
20	(h)	That:
21		1. The parent's parental rights to another child have been involuntarily
22		terminated;
23		2. The child named in the present termination action was born subsequent
24		to or during the pendency of the previous termination; and
25		3. The conditions or factors which were the basis for the previous
26		termination finding have not been corrected;

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That the parent has been convicted in a criminal proceeding of having caused

27

(i)

1			or contributed to the death of another child as a result of physical or sexual
2			abuse or neglect;
3		(j)	That the child has been in foster care under the responsibility of the cabinet
4			for fifteen (15) cumulative months out of forty-eight (48) months preceding
5			the filing of the petition to terminate parental rights; or
6		(k)	That the child has been removed from the biological or legal parents more
7			than two (2) times in a twenty-four (24) month period by the cabinet or a
8			court.
9	(3)	In d	etermining the best interest of the child and the existence of a ground for
10		term	ination, the Circuit Court shall consider the following factors:
11		(a)	Mental illness as defined by KRS 202A.011(9), or an intellectual disability as
12			defined by KRS 202B.010(9) of the parent as certified by a qualified mental
13			health professional, which renders the parent consistently unable to care for
14			the immediate and ongoing physical or psychological needs of the child for
15			extended periods of time;
16		(b)	Acts of abuse or neglect as defined in KRS 600.020(1) toward any child in the
17			family;
18		(c)	If the child has been placed with the cabinet, whether the cabinet has, prior to
19			the filing of the petition made reasonable efforts as defined in KRS 620.020 to
20			reunite the child with the parents unless one or more of the circumstances
21			enumerated in KRS 610.127 for not requiring reasonable efforts have been
22			substantiated in a written finding by the District Court;
23		(d)	The efforts and adjustments the parent has made in his circumstances,
24			conduct, or conditions to make it in the child's best interest to return him to his
25			home within a reasonable period of time, considering the age of the child;
26		(e)	The physical, emotional, and mental health of the child and the prospects for
27			the improvement of the child's welfare if termination is ordered; and

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1		(f) The payment or the failure to pay a reasonable portion of substitute physical
2		care and maintenance if financially able to do so.
3	(4)	If the child has been placed with the cabinet, the parent may present testimony
4		concerning the reunification services offered by the cabinet and whether additional
5		services would be likely to bring about lasting parental adjustment enabling a return
6		of the child to the parent.
7	(5)	If the parent proves by a preponderance of the evidence that the child will not
8		continue to be an abused or neglected child as defined in KRS 600.020(1) if
9		returned to the parent the court in its discretion may determine not to terminate
10		parental rights.
11	(6)	Upon the conclusion of proof and argument of counsel, the Circuit Court shall enter
12		findings of fact, conclusions of law, and a decision as to each parent-respondent
13		within thirty (30) days either:
14		(a) Terminating the right of the parent; or
15		(b) Dismissing the petition and stating whether the child shall be returned to the

parent or shall remain in the custody of the state.

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