

facilities operated or designated by the Department of Mental Health and Addiction Services prior to conditional release to the community. A portion of this appropriation may be allocated through community alcohol, drug addiction, and mental health services boards to community addiction and/or mental health services providers in accordance with a distribution methodology as determined by the Director of Mental Health and Addiction Services.

Of the foregoing appropriation item 336422, Criminal Justice Services, up to \$1,000,000 in each fiscal year shall be used to support specialty dockets and expand and/or create new certified court programs.

Appropriation item 336422, Criminal Justice Services, may also be used to:

(A) Provide forensic monitoring and tracking of individuals on conditional release;

(B) Provide forensic training;

(C) Support projects that assist courts and law enforcement to identify and develop appropriate alternative services to incarceration for nonviolent mentally ill offenders;

(D) Provide specialized re-entry services to offenders leaving prisons and jails;

(E) Provide specific grants in support of addiction services alternatives to incarceration; and

(F) Support therapeutic communities.

SECTION 331.90. MEDICATION-ASSISTED TREATMENT DRUG COURT PROGRAM FOR SPECIALIZED DOCKET PROGRAMS

(A) As used in this section:

(1) "Medication-assisted treatment (MAT) drug court program" means a session of any of the following that holds initial or final certification from the Supreme Court of Ohio as a specialized docket program for drugs: a common pleas court, municipal court, or county court, or a division of any of those courts.

(2) "Prescriber" has the same meaning as in section 4729.01 of the Revised Code.

(B)(1) The Department of Mental Health and Addiction Services shall conduct a program to provide addiction treatment, including medication-assisted treatment, to persons who are offenders within the Criminal Justice System, eligible to participate in a MAT drug court program, and are selected under this section to be participants in the program because of their dependence on opioids, alcohol, or both.

(2) The Department shall conduct the program in those courts of Allen, Clinton, Crawford, Cuyahoga, Franklin, Gallia, Hamilton, Hardin, Hocking, Jackson, Marion, Mercer, Montgomery, Summit, and Warren counties that are conducting MAT drug court programs. If in any of these counties there is no court conducting a MAT drug court program, the Department shall conduct the program in a court that is conducting a MAT drug court program in another county.

(3) In addition to conducting the program in accordance with division (B)(2) of this section, the Department may conduct the program in any court that is conducting a MAT drug court program.

(C) In conducting the program, the Department shall collaborate with the Supreme Court, the Department of Rehabilitation and Correction, and any agency of the state that the Department determines may be of assistance in accomplishing the objectives of the program. The Department may collaborate with the boards of alcohol, drug addiction, and mental health services and with local law enforcement agencies that serve the counties in which a court participating in the program is located.

(D)(1) A MAT drug court program shall select persons who are criminal offenders to be participants in the program. A person shall not be selected to be a participant unless the person meets the legal and clinical eligibility criteria for the MAT drug court program and is an active participant in the program.

(2) The total number of persons participating in a program at any time shall not exceed one thousand five hundred, subject to available funding, except that the Department of Mental Health and Addiction Services may authorize the maximum number to be exceeded in circumstances that the Department considers to be appropriate.

(3) After being enrolled in a MAT drug court program, a participant shall comply with all requirements of the MAT drug court program.

(E) The treatment provided in a MAT drug court program shall be provided by a community addiction services provider that is certified under section 5119.36 of the Revised Code. In serving as a community addiction services provider, a provider shall do all of the following:

(1) Provide treatment based on an integrated service delivery model that consists of the coordination of care between a prescriber and the community addiction services provider;

(2) Conduct professional, comprehensive substance abuse and mental health diagnostic assessments of a person under consideration for selection as a program participant to determine whether the person would benefit from substance abuse treatment and monitoring;

(3) Determine, based on the assessment described in division (E)(2) of this section, the treatment needs of the participants served by the treatment provider;

(4) Develop, for participants served by the treatment provider, individualized goals and objectives;

(5) Provide access to the long-acting antagonist therapies, partial agonist therapies, or both, that are included in the program's medication-assisted treatment;

(6) Provide other types of therapies, including psychosocial therapies, for both substance abuse and any disorders that are considered by the treatment provider to be co-occurring disorders;

(7) Monitor program compliance through the use of regular drug testing, including urinalysis, of the participants being served by the community addiction services provider.

(F) In the case of medication-assisted treatment provided under the program, all of the following conditions apply:

(1) A drug may be used only if the drug has been approved by the United States Food and Drug Administration for use in treating dependence on opioids, alcohol, or both, or for preventing relapse into the use of opioids, alcohol, or both.

(2) One or more drugs may be used, but each drug that is used must constitute long-acting antagonist therapy or partial agonist therapy.

(3) If a drug constituting partial agonist therapy is used, the program shall provide safeguards to minimize abuse and diversion of the drug, including such safeguards as routine drug testing of program participants.

(G) It is anticipated and expected that drug courts will expand their ability to serve more drug court participants as a result of increased access to commercial or publicly funded health insurance. In order to ensure that funds appropriated to support this MAT drug court program are used in the most efficient manner with a goal of enrolling the maximum number of participants, the Medicaid Director with major Ohio healthcare plans, shall develop plans consistent with this division. There shall be no prior authorizations or step therapy for medication-assisted treatment for participants in the MAT drug court program. The plans developed under this division shall ensure all of the following:

(1) The development of an efficient and timely process for review of eligibility for health benefits for all offenders selected to participate in the MAT drug court program;

(2) A rapid conversion to reimbursement for all healthcare services by the participant's health insurance company following approval for coverage

of healthcare benefits;

(3) The development of a consistent benefit package that provides ready access to and reimbursement for essential healthcare services including, but not limited to, primary healthcare, alcohol and opiate detoxification services, appropriate psychosocial services, and medication for long-acting injectable antagonist therapies and partial agonist therapies;

(4) The development of guidelines that require the provision of all treatment services, including medication, with minimal administrative barriers and within a timeframe that meets the requirements of individual patient care plans.

(H) A report of the findings obtained from the addiction treatment pilot program established by Section 327.120 of Am. Sub. H.B. 59 of the 130th General Assembly shall be prepared by a research institution and include data derived from the drug testing and performance measures used in the program. The research institution shall complete its report not later than December 31, 2015. Upon completion, the institution shall submit the report to the Governor, Chief Justice of the Supreme Court, President of the Senate, Speaker of the House of Representatives, Department of Mental Health and Addiction Services, Department of Rehabilitation and Correction, and any other state agency that the Department of Mental Health and Addiction Services collaborates with in conducting the program.

(I) Within 90 days after the effective date of this section, the Department shall select a research institution with experience in evaluating multiple court systems across jurisdictions in both rural and urban regions. The research institution shall have demonstrated experience evaluating the use of agonist and antagonist medication assisted treatment in drug courts, a track record of scientific publications, experience in health economics, and ethical and patient selection and consent issues. The institution shall also have an internal institutional review board. The institution shall prepare the report described in division (J) of this section.

(J) A report of the findings obtained from the MAT drug court program established under this section shall be prepared by a research institution and include data derived from the drug testing and performance measures used in the program. The research institution shall complete its report not later than June 30, 2017. Upon completion, the institution shall submit the report to the Governor, Chief Justice of the Supreme Court, President of the Senate, Speaker of the House of Representatives, Department of Mental Health and Addiction Services, Department of Rehabilitation and Correction, and any other state agency that the Department of Mental Health and Addiction Services collaborates with in conducting the program.

(K) Of the foregoing appropriation item 336422, Criminal Justice Services, not more than \$5.5 million in each fiscal year shall be used to support the Medication-Assisted Treatment Drug Court Program for Specialized Docket Programs.

SECTION 331.100. ADDICTION SERVICES PARTNERSHIP WITH CORRECTIONS

On the effective date of this section, the Bureau of Recovery Services within the Department of Rehabilitation and Correction is abolished and all of its functions, assets, and liabilities, regardless of form or medium, agreements and contracts of the program are transferred to the Department of Mental Health and Addiction Services. The Department of Mental Health and Addiction Services is thereupon and thereafter successor to, assumes the obligations of, and otherwise constitutes the continuation of the Bureau of Recovery Services.

Any business commenced but not completed by the effective date of this section by the Department of Rehabilitation and Correction regarding recovery services shall be completed by the Department of Mental Health and Addiction Services. No validation, cure, right, privilege, remedy, obligation, or liability is lost or impaired by reason of the transfer required by this section and shall be administered by the Department of Mental Health and Addiction Services. Any rules, orders, and determinations pertaining to the Bureau of Recovery Services continue in effect as rules, orders, and determinations of the Department of Mental Health and Addiction Services until modified or rescinded by the Department of Mental Health and Addiction Services. If necessary to ensure the integrity of the numbering of the Administrative Code, the Director of the Legislative Service Commission shall renumber the numbers to reflect their transfer to the Department of Mental Health and Addiction Services.

Subject to the lay-off provisions of sections 124.321 to 124.382 of the Revised Code, all employees of the Bureau of Recovery Services are hereby transferred to the Department of Mental Health and Addiction Services and retain their positions and all of their benefits.

Wherever the Bureau of Recovery Services is referred to in any law, contract, or other document, the reference shall be deemed to refer to the Department of Mental Health and Addiction Services or its director, as appropriate.

No action or proceeding pending on the effective date of this act, is affected by the transfer, and shall be prosecuted or defended in the name of the Department of Mental Health and Addiction Services or its director. In