

California Comprehensive Addiction Recovery Act; Physical Capacity Expansion for Addiction Treatment

(a) The Legislature finds and declares all of the following:

- 1. There are only 25 hospitals in California licensed to provide SUD services; of these, only nine are chemical dependency (CD) recovery hospitals. The latter equals approximately 1,200 total beds for those who are chemically dependent needing hospitalization.*
- 2. Regionally there are only 97 CD beds for Alameda, Contra Costa and San Joaquin counties combined; 95 CD beds for San Diego County; and 659 for Los Angeles County.*
- 3. An estimated 23 million Americans needed treatment (7% of the population) for an alcohol or drug problem in 2012, but only about 11% received treatment; this equates to approximately 260,000 Californians needing some level of assistance.*
- 4. It is estimated that hospitals across the state treat roughly one opioid overdose victim every forty-five minutes.*
- 5. Emergency room visits for nonmedical opioid use doubled from 2004 to 2008.*
- 6. Stigma based views about addiction have led to “NIMBY” responses at the local government level where anti-treatment and sober living ordinances are being launched throughout the state.*
- 7. Local ordinances make siting facilities nearly impossible thereby reducing local access to treatment and alcohol and drug free recovery residences.*
- 8. Waiting for treatment is associated with many negative outcomes including decline in general health, impacts on public safety, stress on other public assistance programs and deaths of citizens from lack of access to treatment.. It is estimated addiction costs Californians \$3 billion in direct costs and lost productivity annually.*

(b) Therefore, it is the intent of the Legislature in enacting this act to make California the first state in the nation to implement “treatment on demand” for addiction by establishing grant funding for capacity expansion and to provide relief for communities and licenses seeking to create additional access to care by establishing the following:

- (1) Funding dedicated to construction of new addiction treatment facilities*
- (2) Funding dedicated to hospital expansion for dedicated chemical dependency treatment beds and standalone detoxification units.*
- (3) Funding dedicated to the purchase and maintenance of alcohol and drug free recovery residences.*
- (4) Inclusion of addiction treatment and recovery residences in incentives offered in housing element bonus programs.*
- (5) Waiving of license “per bed” fees for non-profit addiction treatment programs.*
- (6) Alignment of State anti-discrimination laws with federal statute that protects addicts in treatment or recovery from local zoning discrimination.*
- (7) Parameters for voluntary certification of Recovery Residences (sober living) to assist local government in protecting residents while achieving harmony with neighborhoods.*
- (8) Mandatory certification of all outpatient treatment centers.*
- (9) Technical assistance to local governments in the areas of facility siting and continuum of care aspects.*
- (10) Statewide stigma reduction education campaign.*

CHAPTER 9.7. This Act shall be known as the California Comprehensive Addiction Recovery Act; Physical Capacity Expansion

SECTION 1. Addiction Continuum of Care Physical Capacity Financing

Section 11755.2 of the Health and Safety Code is amended to read:

(a) The department may implement a program for the establishment of *addiction treatment facilities and addiction recovery residences.* ~~group homes for alcohol and other drug abusers as provided for in Section 300x 4a of Title 42 of the United States Code.~~

(b) The department ~~may~~ *shall* establish the ~~Resident Run Housing~~ *Addiction Treatment and Recovery Residence Capacity Expansion* Revolving Fund for the purpose of making loans *and grants to increase the number of addiction treatment programs and recovery residences* ~~group resident run homes in conformance with federal statutes and regulations.~~ Any program for the purpose of making loans *or grants to addiction treatment programs and recovery residences* ~~group resident run homes~~ shall be a part of the *Addiction Treatment and Recovery Residence Capacity Expansion* ~~Resident Run Housing~~ Revolving Fund. ~~Any unexpended balances in a current program shall be transferred to the Resident Run Housing Revolving Fund and be available for expenditure during the following fiscal year.~~

Appropriations for subsequent fiscal years shall be provided in the annual Budget Act. All loan payments received from previous loans shall be deposited in the *Addiction Treatment and Recovery Residence Capacity Expansion* ~~Resident Run Housing~~ Revolving Fund, as well as all future collections. The *Addiction Treatment and Recovery Residence Capacity Expansion* ~~Resident Run Housing~~ Revolving Fund shall ~~be~~ *be* ~~appropriate proceeds from 34018. (e), (1), (i) sufficient to meet the requirements of (d),(e),and (f) and shall commence grants and loans when the fund balance reaches \$10 million.~~ ~~invested in the Pooled Money Investment Fund. Interest earned shall accrue to the Resident Run Housing Revolving Fund and may be made available for future group resident run home loans.~~

(c) The department may adopt regulations as are necessary to implement this section.

~~(d) This section shall become inoperative on July 1, 2013.~~

(d) The Department shall award grants and loans for the purpose of increasing physical capacity for addiction treatment until it determines that available beds are 150% of available beds on January 1, 2017. Priority will be given for the following applicants:

- 1. Applicant demonstrates current ownership of addiction treatment facilities.*
- 2. Applicant is a registered nonprofit company in California.*
- 3. Applicant demonstrates, with the submission of a detailed strategy, an ability to respond to opiate addiction and to use appropriate medication assisted treatment for opiate addiction cases.*
- 4. Applicant dedicates at least 51% of beds to youth or transition aged youth treatment (capacity may be used for adults when not occupied by youth transition aged youth).*
- 5. Applicant demonstrates the use of evidenced based practices and adherence to ASAM placement criteria.*

(e) The Department shall award grants and loans for the purpose of increasing physical capacity for detoxification and emergency room treatment to respond to emergency and life threatening overdose and withdrawal from substances until the Department determines that available beds are 150% of available beds on January 1, 2017. Priority will be given for the following applicants:

- 1. Applicant demonstrates current ownership of chemical dependency detoxification or withdrawal management facilities.*

2. Applicant is a registered nonprofit company in California.
3. Applicant demonstrates, with the submission of a detailed strategy, an ability to respond to opiate overdose and to use appropriate medication assisted treatment for opiate addiction cases.
4. Applicant dedicates at least 51% of beds to youth or transition aged youth overdose and detoxification (capacity may be used for adults when not occupied by youth or transition aged youth).
5. Applicant demonstrates the use of evidenced based practices and adherence to ASAM placement criteria.

(f) The Department shall award grants and loans for the purpose of increasing the number of addiction recovery residences until the Department determines that available beds are 150% of available beds on January 1, 2017. Priority will be given for the following applicants:

1. Applicant agrees to abide by certification standards in 11834.19.
2. Applicant dedicates at least 51% of beds to transition aged youth (capacity may be used for adults when not occupied by transition aged youth).

(g) For a period not to exceed ten years, or until bed capacity reach 150% of January 1, 2017 levels, whichever is first, per bed licensing fees for inpatient residential treatment will be \$0 and a \$500 per bed incentive will be granted for each additional bed a licensee adds to its capacity as compared to January 1, 2017.

SECTION 2. Addiction Continuum of Care Physical Capacity Incentives

Section 65915 of the Government Code is amended to read:

(a) When an applicant seeks a density bonus for a housing development within, or for the donation of land for housing within, the jurisdiction of a city, county, or city and county, that local government shall provide the applicant with incentives or concessions for the production of housing units, *addiction recovery residences*, and child care facilities as prescribed in this section. All cities, counties, or cities and counties shall adopt an ordinance that specifies how compliance with this section will be implemented. Failure to adopt an ordinance shall not relieve a city, county, or city and county from complying with this section.

(b) 65915.x (1) When an applicant proposes to construct a housing development that conforms to the requirements of subdivision (b) and includes an addiction recovery residence(s) that will be located on the premises of, as part of, or adjacent to, the project, the city, county, or city and county shall grant either of the following:

(A) An additional density bonus that is an amount of square feet of residential space that is equal to or greater than the amount of square feet of the addiction recovery residences(s).

(B) An additional concession or incentive that contributes significantly to the economic feasibility of the construction of the addiction recovery residences(s).

(2) The city, county, or city and county shall require, as a condition of approving the housing development, that the following occur:

(A) The addiction recovery residences(s) shall remain in operation for a period of time that is as long as or longer than the period of time during which the density bonus units are required to remain affordable pursuant to subdivision (c).

(1) Notwithstanding any requirement of this subdivision, a city, county, or city and county shall not be required to provide a density bonus or concession for addiction recovery residences(s) if it finds, based upon substantial evidence, that the community has adequate addiction recovery residences.

(2) "Addiction recovery residences," as used in this section, means an addiction recovery residence as defined by Section 11834.19.

SECTION 3. Facility Siting Assurance

Section 1566.3 of the Health and Safety Code is amended to read:

(e) No conditional use permit, zoning variance, or other zoning clearance shall be required of a residential facility that serves six or fewer persons that is not required of a family dwelling of the same type in the same zone.

(f) Use of a family dwelling for purposes of a residential facility that serves six or fewer persons, shall not constitute a change of occupancy for purposes of Part 1. 5 (commencing with Section 17910) of Division 13 or local building codes. However, nothing in this section is intended to supersede Section 13143 or 13143.6, to the extent such sections are applicable to residential facilities providing care for six or fewer residents.

(x) The Department or any group of five treatment programs or recovery residences may seek injunctive relief from the Attorney General when a local government is in violation of (e), commencing with the passage of any ordinance, that requires special zoning or permitting of Addiction Recovery Residences as defined in 11834.19, or certified alcohol drug treatment program, or licensed alcohol drug treatment facilities.

(h) For the purposes of this section, “family dwelling,” includes, but is not limited to, single-family dwellings, units in multifamily dwellings, including units in duplexes and units in apartment dwellings, mobilehomes, including mobilehomes located in mobilehome parks, units in cooperatives, units in condominiums, units in townhouses, and units in planned unit developments.

(i) *The department shall provide technical assistance, including the production of a “Local Government Guide for Addiction Treatment and Recovery Residence Siting,” to local governments for the purpose of complying with this section.*

(j) *The Department shall conduct a statewide campaign to inform and educate communities about the value of treatment programs and recovery residences in communities.*

SECTION 4. Licensure of all Treatment Programs

11834.02 (a) As used in this chapter, “alcoholism or drug abuse recovery or treatment facility” or “facility” means any premises, place, or building that provides ~~24-hour residential nonmedical~~ services to adults who are recovering from problems related to alcohol, drug, or alcohol and drug misuse or abuse, and who need alcohol, drug, or alcohol and drug recovery treatment or detoxification services.

11834.03 It is the intent of the legislature that all addiction treatment services provided in California, in exchange for payment or in-kind payment, be performed at licensed facilities or by appropriately licensed professionals.

11834.09 (a) Upon receipt of a completed written application, fire clearance, and licensing fee from the prospective licensee, and subject to the department's review and determination that the prospective licensee can comply with this chapter and regulations adopted pursuant to this chapter, the department may issue a single license to the following types of alcoholism or drug abuse recovery or treatment facilities:

- (1) A residential facility.
 - (2) A facility wherein separate buildings or portions of a residential facility are integral components of a single alcoholism or drug abuse recovery or treatment facility and all of the components of the facility are managed by the same licensee.
 - (3) *An outpatient treatment program.*
 - (4) *A small outpatient program.*
- (b) Failure to submit a completed written application, fire clearance, and payment of the required licensing fee in a timely manner shall result in termination of the department's licensure review and shall require submission of a new application by the prospective licensee.
- (c) Failure of the prospective licensee to demonstrate the ability to comply with this chapter or the regulations adopted pursuant to this chapter shall result in departmental denial of the prospective licensee's application for licensure.

11834.11 Requirements for small outpatient program licensure

- (a) *The department shall create a license for small outpatient providers for counselors operating in a private practice environment. To apply for small outpatient program license an applicant must meet the following conditions:*
- (1) *The counselor holds a current, valid advanced certification.*
 - (2) *The counselor has submitted a criminal background check with continual notification "wrap back", via LiveScan, identifying the department as the recipient. The department may use the information contained in the report to determine eligibility to receive licensure as a small outpatient program.*
 - (3) *The counselor has not been disciplined by the Department or a certifying agency for ethical violations.*
 - (4) *The counselor has provided its certifying organization with proof of professional liability insurance.*
- (b) *A small outpatient program may not consist of more than two certified counselors. Each certified counselor may supervise not more than five certified or registered individuals, who are working toward advanced certification.*
- (c) *A small outpatient program may not provide services to more than 50 clients per each counselor (100 total) at any one time.*
- (d) *A small outpatient program may not provide residential services.*

(e) Should the state begin licensing alcohol and drug counselors this section shall cease to exist when the licensing authority has determined that a sufficient number of licensed counselors exist to provide services in a private practice environment in each county.

11834.19 On or before January 1, 2019 the Department shall include certification requirements in effect on January 1, 2018 as requirements for licensure of facilities in 11834.09.