



General Assembly

**Substitute Bill No. 6320**

January Session, 2009

\* \_\_\_\_\_ HB06320PH \_\_\_\_\_ 032709 \_\_\_\_\_ \*

**AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE  
LEGISLATIVE PROGRAM REVIEW AND INVESTIGATIONS  
COMMITTEE CONCERNING SUBSTANCE ABUSE TREATMENT FOR  
ADULTS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Subsection (j) of section 17a-451 of the general statutes is  
2 repealed and the following is substituted in lieu thereof (*Effective July*  
3 *1, 2009*):

4 (j) The commissioner shall be responsible for developing and  
5 implementing the Connecticut comprehensive plan for prevention,  
6 treatment and reduction of alcohol and drug abuse problems to be  
7 known as the state substance abuse plan. Such plan shall include a  
8 mission statement, a vision statement and goals for providing  
9 treatment and recovery support services to adults with substance use  
10 disorders. The plan shall [include state-wide, long-term planning goals  
11 and objectives and annual revisions of objectives. In the development  
12 of the substance abuse plan the commissioner shall solicit and consider  
13 the recommendations of the subregional planning and action councils  
14 established under section 17a-671] be developed by July 1, 2010, and  
15 thereafter shall be triennially updated by July first of the respective  
16 year. The commissioner shall develop such plan, mission statement, a  
17 vision statement and goals after consultation with: (1) The Connecticut  
18 Alcohol and Drug Policy Council established pursuant to section 17a-

19 667; (2) the Criminal Justice Policy Advisory Commission established  
20 pursuant to section 18-87j; (3) the subregional planning and action  
21 councils established pursuant to section 17a-671; (4) clients and their  
22 families, including those involved with the criminal justice system; (5)  
23 treatment providers; and (6) other interested stakeholders. The  
24 commissioner shall submit a final draft of the plan to the Connecticut  
25 Alcohol and Drug Policy Council for review and comment. The plan  
26 shall outline the action steps, time frames and resources needed to  
27 meet specified goals and shall minimally address: (A) Access to  
28 services, both prior to and following admission to treatment; (B) the  
29 provision of comprehensive assessments to those requesting treatment,  
30 including individuals with co-occurring conditions; (C) quality of  
31 treatment services and promotion of research-based and evidence-  
32 based best practices and models; (D) an appropriate array of treatment  
33 and recovery services along with a sustained continuum of care; (E)  
34 outcome measures of specific treatment and recovery services in the  
35 overall system of care; (F) department policies and guidelines  
36 concerning recovery oriented care; and (G) provisions of the  
37 community reentry strategy concerning substance abuse treatment and  
38 recovery services needed by the offender population as developed by  
39 the Criminal Justice Policy and Planning Division within the Office of  
40 Policy and Management. The plan shall define measures and set  
41 benchmarks for the overall treatment system and for each state-  
42 operated program. Measures and benchmarks specified in the plan  
43 shall include, but not be limited to, the time required to receive  
44 substance abuse assessments and treatment services either from state  
45 agencies directly or through the private provider network funded by  
46 state agencies, the percentage of clients who should receive a treatment  
47 episode of ninety days or greater, treatment provision rates with  
48 respect to those requesting treatment, connection to the appropriate  
49 level of care rates, treatment completion rates and treatment success  
50 rates as measured by improved client outcomes in the areas of  
51 substance use, employment, housing and involvement with the  
52 criminal justice system.

53       Sec. 2. Subsection (o) of section 17a-451 of the general statutes is  
54 repealed and the following is substituted in lieu thereof (*Effective*  
55 *October 1, 2009*):

56       (o) The commissioner shall establish uniform policies and  
57 procedures for collecting, standardizing, managing and evaluating  
58 data related to substance use, abuse and addiction programs  
59 administered by state agencies, state-funded community-based  
60 programs and the Judicial Branch, including, but not limited to: (1) The  
61 use of prevention, education, treatment and criminal justice services  
62 related to substance use, abuse and addiction; (2) client demographic  
63 and substance use, abuse and addiction information; and (3) the  
64 quality and cost effectiveness of substance use, abuse and addiction  
65 services. The commissioner shall, in consultation with the Secretary of  
66 the Office of Policy and Management, ensure that the Judicial Branch,  
67 all state agencies and state-funded community-based programs with  
68 substance use, abuse and addiction programs or services comply with  
69 such policies and procedures. Notwithstanding any other provision of  
70 the general statutes concerning confidentiality, the commissioner,  
71 within available appropriations, shall establish and maintain a central  
72 repository for such substance use, abuse and addiction program and  
73 service data from the Judicial Branch, state agencies and state-funded  
74 community-based programs administering substance use, abuse and  
75 addiction programs and services. The central repository shall not  
76 disclose any data that reveals the personal identification of any  
77 individual. The Connecticut Alcohol and Drug Policy Council  
78 established pursuant to section 17a-667 shall have access to the central  
79 repository for aggregate analysis. The commissioner shall submit a  
80 biennial report to the General Assembly, [in accordance with the  
81 provisions of section 11-4a,] the Office of Policy and Management and  
82 the Connecticut Alcohol and Drug Policy Council in accordance with  
83 the provisions of section 11-4a. The report shall include, but need not  
84 be limited to, a summary of: (A) Client and patient demographic  
85 information; (B) trends and risks factors associated with alcohol and  
86 drug use, abuse and dependence; (C) effectiveness of services based on

