

115TH CONGRESS
2D SESSION

S. 2609

To amend the Public Health Service Act to provide grants for State alcohol and drug agencies to use recovery coaches in hospital emergency departments, and for other purposes.

IN THE SENATE OF THE UNITED STATES

MARCH 22, 2018

Mr. MURPHY (for himself and Mrs. CAPITO) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend the Public Health Service Act to provide grants for State alcohol and drug agencies to use recovery coaches in hospital emergency departments, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Recovery Coaches
5 Offer Addiction Counseling and Healing Act” or the “Re-
6 covery COACH Act”.

1 **SEC. 2. GRANTS TO EXPAND ACCESS TO RECOVERY COACH-**
 2 **ES.**

3 Part D of title V of the Public Health Service Act
 4 (42 U.S.C. 290dd et seq.) is amended by adding at the
 5 end the following:

6 **“SEC. 550. GRANTS TO EXPAND ACCESS TO RECOVERY**
 7 **COACHES.**

8 “(a) DEFINITIONS.—In this section:

9 “(1) RECOVERY COACHES.—The term ‘recovery
 10 coach’ means a person eligible to serve as a recovery
 11 coach under subsection (e)(2) that provides recovery
 12 coach services.

13 “(2) RECOVERY COACH SERVICES.—The term
 14 ‘recovery coach services’ includes the following ac-
 15 tivities provided by a recovery coach in a hospital
 16 emergency department:

17 “(A) Connecting patients in hospital emer-
 18 gency departments who have been identified as
 19 having a substance use disorder with substance
 20 use disorder treatment and other recovery sup-
 21 port services.

22 “(B) Serving as a role model for recovery
 23 from substance use disorders for hospital staff
 24 and such patients.

25 “(C) Providing hope and encouragement to
 26 such patients.

1 “(D) Providing education on overdose pre-
2 vention to such patients.

3 “(E) Linking family members of such pa-
4 tients to recovery support resources.

5 “(F) Following up with such patients for a
6 minimum of 14 days following discharge from
7 the hospital emergency department to ensure
8 continued connection to recovery support serv-
9 ices.

10 “(3) RECOVERY COMMUNITY ORGANIZATION.—
11 The term ‘recovery community organization’ has the
12 meaning given such term in section 547(a).

13 “(4) STATE ALCOHOL AND DRUG AGENCY.—
14 The term ‘State alcohol and drug agency’ means the
15 principal agency of a State that is responsible for
16 carrying out the block grant for prevention and
17 treatment of substance abuse under subpart II of
18 part B of title XIX within the State.

19 “(b) GRANTS.—The Secretary, acting through the
20 Assistant Secretary for Substance Use and Mental Health,
21 shall award grants to State alcohol and drug agencies for
22 the purpose of—

23 “(1) developing, expanding, and enhancing the
24 use of recovery coaches to perform recovery coach

1 services in hospital emergency departments through
2 a recovery community organization; and

3 “(2) supporting recovery community organiza-
4 tions to recruit, train, hire, mentor, and supervise
5 recovery coaches to perform recovery coach services
6 in hospital emergency departments.

7 “(c) PERIOD OF GRANTS.—Each grant awarded
8 under this section shall be awarded for a period of 3 years.

9 “(d) APPLICATIONS.—

10 “(1) IN GENERAL.—A State alcohol and drug
11 agency seeking a grant under this section shall sub-
12 mit an application to the Secretary, in such form
13 and manner as specified by the Secretary.

14 “(2) CONTENTS.—Each application submitted
15 under this subsection shall include each of the fol-
16 lowing:

17 “(A) A description of the ability of the ap-
18 plicant to partner with an appropriate recovery
19 community organization to carry out the grant
20 activities.

21 “(B) A plan the applicant will use to
22 evaluate the success of recovery coaches funded
23 through the grant.

24 “(C) A description of the need of the appli-
25 cant for recovery coaches.

1 “(D) Evidence of local support for recovery
2 coaches.

3 “(E) A plan for sustaining the use of re-
4 covery coaches in hospital emergency depart-
5 ments after the termination of the grant period.

6 “(F) Information on the source and
7 amount of non-Federal funds that the applicant
8 will provide for recovery coaches.

9 “(e) USE OF GRANTS.—

10 “(1) IN GENERAL.—Each grant awarded under
11 this section shall be used only for the purpose de-
12 scribed in subsection (b).

13 “(2) RECOVERY COACH ELIGIBILITY CRI-
14 TERIA.—Each recovery coach performing recovery
15 coach services through a grant under this section
16 shall—

17 “(A) have knowledge of or experience with
18 recovery from a substance use disorder; and

19 “(B) have completed training from and be
20 vetted by a recovery community organization
21 that has knowledge and skills necessary to con-
22 duct such training and vetting.

23 “(3) HOSPITAL EMERGENCY DEPARTMENT SET-
24 TINGS.—

1 “(A) IN GENERAL.—Recovery coach serv-
 2 ices provided through a grant under this section
 3 shall be provided only in hospital emergency de-
 4 partments, and not in any other setting.

5 “(B) MEMORANDUM OF AGREEMENT.—A
 6 memorandum of agreement shall be signed by
 7 the recovery community organization and each
 8 hospital that the recovery community organiza-
 9 tion will support.

10 “(4) GEOGRAPHIC DISTRIBUTION.—A State al-
 11 cohol and drug agency receiving a grant under this
 12 section shall ensure that recovery coach services are
 13 prioritized at those hospitals across the State in
 14 rural, urban, and suburban areas most affected by
 15 the use of heroin or other opioids or substances of
 16 abuse.

17 “(5) REQUIREMENTS.—A State alcohol and
 18 drug agency receiving a grant under this section
 19 shall ensure that any recovery community organiza-
 20 tion receiving funding through such grant—

21 “(A) is a member of the Association of Re-
 22 covery Community Organizations or accredited
 23 by the Council on Accreditation of Peer Recov-
 24 ery Support Services; or

1 “(B) has a long standing, collaborative re-
 2 lationship with the State alcohol and drug agen-
 3 cy.

4 “(f) EVALUATION.—

5 “(1) IN GENERAL.—The Secretary shall direct
 6 the Center for Behavioral Health Statistics and
 7 Quality to evaluate the effectiveness of recovery
 8 coaches serving in hospital emergency departments
 9 through a grant under this section. Each State alco-
 10 hol and drug agency receiving a grant under this
 11 section shall provide the Center with aggregate data
 12 and other information determined necessary by the
 13 Secretary.

14 “(2) CONTENTS.—An evaluation under this
 15 subsection shall include—

16 “(A) the number of times recovery coaches
 17 are called in States served by a grant under
 18 this section;

19 “(B) the utilization of substance use dis-
 20 order services through recovery coaches funded
 21 under this section;

22 “(C) the number of individuals admitted,
 23 as a result of substance use disorders, to hos-
 24 pital emergency departments in States served
 25 by a grant under this section;

1 “(D) the number of individuals who re-
2 turn, as a result of substance use disorders, to
3 hospital emergency departments in such States;
4 and

5 “(E) the likelihood of patients entering
6 treatment programs in such States.

7 “(3) SUBMISSION.—Not later than 2 years
8 after the date on which amounts are first appro-
9 priated for the grants under this section, the Sec-
10 retary shall submit a report on the evaluation under
11 this subsection to Congress.

12 “(g) AUTHORIZATION OF APPROPRIATIONS.—There
13 are authorized to be appropriated such sums as may be
14 necessary to carry out this section.”.

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