

REFERENCE TITLE: substance use disorder treatment; committee

State of Arizona
Senate
Fifty-seventh Legislature
Second Regular Session
2026

SB 1814

Introduced by
Senators Werner: Angius, Dunn

AN ACT

ESTABLISHING THE SUBSTANCE USE DISORDER TREATMENT STANDARDS AND OVERSIGHT
STUDY COMMITTEE.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Substance use disorder treatment standards and
3 oversight study committee; membership; duties;
4 report; delayed repeal

5 A. The substance use disorder treatment standards and oversight
6 study committee is established consisting of the following members:

7 1. Two members of the senate who are from different political
8 parties and who are appointed by the president of the senate. The
9 president of the senate shall designate one of these members to serve as
10 cochairperson of the study committee. One member shall be the chairperson
11 of the senate health and human services committee, or its successor
12 committee.

13 2. Two members of the house of representatives who are from
14 different political parties and who are appointed by the speaker of the
15 house of representatives. The speaker of the house of representatives
16 shall designate one of these members to serve as cochairperson of the
17 study committee. One member shall be the chairperson of the house of
18 representatives health and human services committee, or its successor
19 committee.

20 3. The governor or the governor's designee.

21 4. The director of the Arizona health care cost containment system
22 or the director's designee.

23 5. The director of the department of health services or the
24 director's designee.

25 6. The attorney general or the attorney general's designee.

26 7. Two members who are licensed clinical behavioral health
27 specialists, one of whom practices in a county with a population of less
28 than five hundred thousand persons, and who are appointed by the president
29 of the senate.

30 8. Two physicians who are board-certified in either addiction
31 medicine or addiction psychiatry, one of whom practices in a county with a
32 population of less than five hundred thousand persons, and who provide
33 medical care to individuals with substance use disorder and who are
34 appointed by the speaker of the house of representatives.

35 9. One member who represents leadership from a medical society or a
36 physician organization that specializes in treating substance use disorder
37 and who is appointed by the president of the senate.

38 10. One member with substance use disorder who has direct
39 experience with navigating treatment for substance use disorder in this
40 state, who lives in a county with a population of less than five hundred
41 thousand persons and who is appointed by the speaker of the house of
42 representatives.

1 11. One member who represents a membership-based advocacy
2 organization that represents health care providers who specialize in
3 substance use disorder treatment and who is appointed by the president of
4 the senate.

5 12. One member who represents a behavioral health accrediting
6 organization and who is appointed by the speaker of the house of
7 representatives.

8 13. One peer recovery support specialist who is appointed by the
9 speaker of the house of representatives.

10 14. The director of the joint legislative budget committee or the
11 director's designee.

12 B. The study committee shall meet at the call of the
13 cochairpersons.

14 C. Members of the study committee are not eligible to receive
15 compensation but are eligible for reimbursement of expenses pursuant to
16 title 38, chapter 4, article 2, Arizona Revised Statutes.

17 D. The study committee shall:

18 1. Conduct a comprehensive survey and research study to assess the
19 availability, capacity and geographic distribution of licensed and
20 unlicensed programs that offer substance use disorder specialty care in
21 this state and evaluate the economic impact, effectiveness and value of
22 implementing statewide minimum standards for evidence-based care.

23 2. Identify gaps in access to and implementation of evidence-based
24 biopsychosocial treatments, workforce capacity needs and resources
25 necessary to support high-quality care delivery across urban and rural
26 settings, including medically supported withdrawal services, medications
27 for opioid use disorder, licensed clinical providers, care coordination
28 and recovery supports.

29 3. Review state laws, rules and oversight structures governing
30 substance use disorder treatment programs, identify regulatory loopholes
31 that allow unlicensed or nonstandard programs to operate without
32 sufficient clinical oversight and processes that enable fraud, waste and
33 abuse, and recommend statutory and administrative changes to close these
34 gaps and align oversight systems.

35 4. Establish minimum clinical quality standards, staff scope of
36 practice expectations, safety and outcome reporting requirements and
37 public transparency mechanisms to ensure accountability, protect patients
38 and provide families and referring providers with clear information to
39 support treatment decision-making.

40 5. Investigate funding needs, reimbursement structures and licensed
41 workforce models required to implement these reforms, including strategies
42 to build and sustain a professional clinical workforce capable of meeting
43 statewide treatment demand and ensuring timely access to evidence-based
44 care.

1 E. On or before December 31, 2027, the substance use disorder
2 treatment standards and oversight study committee shall submit a report
3 regarding the committee's activities, findings and recommendations,
4 including proposed statutory and regulatory changes, funding
5 considerations and implementation timelines, to the governor, the
6 president of the senate and the speaker of the house of representatives
7 and shall provide a copy of this report to the secretary of state.

8 F. This section is repealed from and after June 30, 2028.