

## MEMORANDUM

TO: Barbara Burgess  
Dave Friedenson, MD  
Eric Olsen, MD  
Andy French, MD

FROM: Suzanne Hamilton

DATE: February 26, 2016

RE: Weekly Legislative Report

New bills this week: HB 1277, 1280, 1294.

### HOUSE BILLS

Bill: [HB16-1007](#)

Title: Offenses Against Unborn Children

Status: House Committee on Business Affairs and Labor Postpone Indefinitely (02/11/2016)

Senate Sponsors

House Sponsors: [J. Joshi](#) (R)

Official Summary: The bill provides that, if the commission of any crime codified in the criminal code or traffic code is the proximate cause of death or injury to an unborn member of the species homo sapiens, the prosecuting attorney, in charging the underlying offense, may also charge the homicide or assault offense that is appropriate to the death or injury.

Position: Monitor

Comment:

Bill: [HB16-1015](#)

Title: Contingent Repeal Health Insurance Laws Aligning With ACA

Status: House Committee on State, Veterans, & Military Affairs Postpone Indefinitely (02/03/2016)

Senate Sponsors

House Sponsors: [G. Klingenschmitt](#) (R)

Official Summary: In 2013, the general assembly enacted House Bill 13-1266 to align state health insurance laws with the requirements of the federal Patient Protection and Affordable Care Act (ACA). The bill adds an automatic

repeal to the following provisions in the state health insurance laws that is triggered if the comparable federal law requirement under the ACA is repealed by congress and approved by the president:

- The requirement that carriers offer health benefit plans that cover an essential health benefits package with bronze, silver, gold, and platinum levels of coverage;
  - The requirement that dependent coverage under a health plan be available to a child under 26 years of age, regardless of dependency or marital status;
  - The requirement that carriers issue or renew a plan to any eligible individual or small employer that agrees to pay the required premiums;
  - The requirements regarding open and special enrollment periods;
  - The prohibition against discriminating with respect to participation under the plan or coverage by any provider acting within the scope of his or her license;
  - The requirement to offer continuation coverage to an employee who is no longer employed by the employer through whom the employee was covered under a health benefit plan;
  - Fair market standards;
  - Procedures for denial of benefits and internal reviews;
  - The prohibition against preexisting condition exclusions;
- and
- The requirements pertaining to grace periods for a newly insured individual to pay premiums for coverage.

Position Monitor

Comment

Bill: [HB16-1034](#)

Title: Emergency Medical Responder Registration Program

Status House Committee on Health, Insurance, & Environment Refer Amended to Appropriations (01/28/2016)

Senate Sponsors [L. Garcia](#) (D)

House Sponsors [L. Sias](#) (R)

Official Summary Current law gives oversight of first responders to the department of public safety. The bill changes the name of first responders to emergency medical responders and creates a registration program for the emergency medical responders in the department of public health and environment (department). The bill requires the department to administer

the registration program beginning July 1, 2017, and authorizes the department to promulgate rules to administer the program. The department is authorized to grant a provisional registration certification for up to 90 days prior to an applicant receiving registration. The department is also authorized to promulgate rules concerning the recognition of training programs and continued competency requirements for emergency medical responders. The department is authorized to investigate complaints against emergency medical responders and to take disciplinary action against emergency medical responders.

Position Monitor

Comment

Bill: [HB16-1040](#)

Title: Auxiliary Emergency Communications

Status House Committee on Local Government Refer Amended to Appropriations (02/11/2016)

Senate Sponsors [C. Holbert](#) (R)

House Sponsors [J. Singer](#) (D)

Official  
Summary

**Wildfire Matters Review Committee. Section 1** of the bill contains a nonstatutory legislative declaration.

**Section 2** of the bill creates the auxiliary emergency communications unit (unit) within the office of emergency management (office) within the division of homeland security and emergency management in the department of public safety. The unit is in the charge of the director of the office. This section specifies the unit's powers and duties and additionally specifies the powers and duties of the director of the office in connection with the powers and duties of the unit.

**Sections 3 through 7** of the bill make modifications to existing statutory provisions governing compensation benefits to volunteer civil defense workers. Specifically:

- Section 3 of the bill expands the definition of emergency volunteer service to include activities undertaken during a training exercise, drill, or class conducted in preparation for a disaster if the exercise, drill, or class is organized or under the direction of the county sheriff, local government, local emergency planning committee, or state agency;
- Section 4 of the bill specifies that any credentialed member of the unit is a qualified volunteer and is eligible to receive accompanying protections and benefits under existing statutory provisions;

- Section 5 of the bill includes the amateur radio emergency service as a specified volunteer organization authorized to provide emergency services to state and local agencies.

This section of the bill also specifies that the amateur radio emergency service is a qualified volunteer.

- Section 6 of the bill expands the activities for which a qualified volunteer may be called to service to include a training exercise, drill, or class conducted in preparation for a disaster if the exercise, drill, or class is organized or under the direction of the county sheriff, local government, local emergency planning committee, or state agency. The statutory provisions protecting qualified volunteers do not apply to a training exercise, drill, or class without the express prior consent and approval of the volunteer's employer.

- Section 7 of the bill expands the list of activities used to verify that a qualified volunteer provided volunteer services to include an organized training exercise, drill, or class.

**Section 8** of the bill increases the size of the public safety communications subcommittee to the homeland security and all-hazards senior advisory committee from 23 to 24 members and makes the section

emergency coordinator for the amateur radio emergency service of the Colorado section of the amateur radio relay league or his or her designee a standing member of the subcommittee.

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Position Monitor

Comment

Bill: [HB16-1047](#)

Title: Interstate Medical Licensure Compact

Status House Committee on Health, Insurance, & Environment Refer  
Amended to Finance (02/04/2016)

Senate Sponsors [L. Newell](#) (D)  
[E. Roberts](#) (R)

House Sponsors [P. Buck](#) (R)  
[F. Winter](#) (D)

Official Summary The bill enacts and authorizes the governor to enter into an interstate compact with other states to recognize and allow physicians licensed in a compact member state to obtain an expedited license, enabling them to practice medicine in Colorado or another member

	state.
Position	Monitor
Comment	
Bill:	<a href="#">HB16-1054</a>
Title:	End-of-life Options For Terminally Ill Individuals
Status	House Committee on Judiciary Refer Amended to House Committee of the Whole (02/04/2016)
Senate Sponsors	<a href="#">M. Merrifield</a> (D)
House Sponsors	<a href="#">L. Court</a> (D) <a href="#">J. Ginal</a> (D)
Official Summary	<p>The bill enacts the Colorado End-of-life Options Act (act), which authorizes an individual with a terminal illness to request, and the individual's attending physician to prescribe to the individual, medication to hasten the individual's death. To be qualified to request aid-in-dying medication, an individual must be a capable adult resident of Colorado who has a terminal illness and has voluntarily expressed the wish to receive a prescription for aid-in-dying medication by making 2 oral requests and a written request to his or her attending physician. An individual who requests aid-in-dying medication may rescind the request at any time, regardless of his or her mental state. The act outlines the responsibilities of the attending physician, including:</p> <ul style="list-style-type: none"> <li>• Determining whether the requesting individual has a terminal illness, is capable of making an informed decision, and is making the request for aid-in-dying medication voluntarily;</li> <li>• Requesting the individual to demonstrate proof of Colorado residency;</li> <li>• Referring the individual to a consulting physician to confirm that the individual is qualified to request aid-in-dying medication;</li> <li>• Providing full disclosures to ensure that the individual is making an informed decision; and</li> <li>• Informing the individual of the right to rescind the request at any time.</li> </ul> <p>An attending physician cannot write a prescription for aid-in-dying medication unless at least 2 health care providers determine that the individual is capable of making an informed decision. The attending or consulting physician is to refer the individual to a licensed mental health</p>

professional if he or she believes the individual's ability to make an informed decision is compromised. The attending physician cannot write a prescription unless the mental health professional communicates, in writing, that the individual is capable.

The bill grants immunity from civil and criminal liability and from professional discipline to a person who participates in good faith under the act. The bill also specifies that actions taken in accordance with the act do not constitute suicide, assisted suicide, mercy killing, homicide, or elder abuse.

A health care provider is not obligated to prescribe aid-in-dying medication, and a health care facility may prohibit a physician from writing a prescription for a resident of the facility who intends to use aid-in-dying medication on the facility's premises.

A person commits a class 2 felony if the person purposely or knowingly:

- Alters or forges an aid-in-dying medication request without the terminally ill individual's authorization;
- Conceals or destroys a rescission of a request for aid-in-dying medication; or
- Coerces or exerts undue influence to get a terminally ill individual to request, or to destroy a rescission of a request for, aid-in-dying medication.

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Position Monitor

Comment

Bill: [HB16-1062](#)

Title: Limitation On Mental Health Disciplinary Actions

Status House Committee on Judiciary Postpone Indefinitely (02/02/2016)

Senate Sponsors

House Sponsors [J. Melton](#) (D)

Official Summary The bill requires that any complaint filed with the division of professions and occupations in the department of regulatory agencies against a mental health professional alleging a maintenance of records violation must be commenced within 7 years after the alleged act or failure to act giving rise to the complaint.

Position Monitor

Comment

Bill: [HB16-1063](#)

Title: Mental Health Professional Disclosure School Safety

Status: House Third Reading Passed - No Amendments (02/23/2016)

Senate Sponsors: [B. Cadman](#) (R)  
[M. Scheffel](#) (R)

House Sponsors: [C. Duran](#) (D)  
[M. Foote](#) (D)

Official  
Summary: Except under limited circumstances, current law prohibits a licensed, registered, or certified mental health professional from disclosing, without the client's consent, confidential communications made by, or advice given to, the client in the course of the professional relationship.

The bill grants an exception to the prohibition against disclosure when the mental health professional's client either:

- Makes a direct threat against a school or its occupants; or
- Exhibits behavior that, in the mental health professional's

Official  
Summary:

reasonable judgment, creates a dangerous environment in a school that may jeopardize the safety or well being of students, faculty, staff, parents, or the general public.

The mental health professional must limit the disclosure to appropriate school district personnel and maintain confidentiality of the disclosure.

A mental health professional is not liable for disclosing or failing to disclose a confidential communication, except to the extent the mental

health professional has a duty under current law to warn and protect.

Position: Monitor

Comment:

Bill: [HB16-1065](#)

Title: Income Tax Credit For Home Health Care

Status: House Committee on Finance Postpone Indefinitely (02/24/2016)

Senate Sponsors:

House Sponsors: [K. Conti](#) (R)

Official  
Summary: The bill creates an income tax credit to assist a qualifying senior with seeking health care in his or her home. In the first 2-years, the tax credit is for a percentage of the costs incurred by the qualifying senior for home modifications in each income tax year. In the next 2-years, the tax credit is for a percentage of the costs incurred by the qualifying senior

for home modifications or home health care services in each income tax year.

In the following 2-years, the tax credit is for a percentage of the costs incurred by the qualifying senior for home modifications, home health care services, durable medical equipment, or telehealth equipment in each income tax year. In each year the income tax credit is subject to a maximum amount.

The bill also specifies that if the revenue estimate prepared by the staff of the legislative council in December 2015 and each December thereafter indicates that the amount of the total general fund revenues, including the impact of the tax credit allowed in this bill and including the impact of any other tax expenditures that have the same trigger, for that particular fiscal year will not be sufficient to grow the total state general fund appropriations by 6% over such appropriations for the previous fiscal year, then the credit is not allowed for any income tax year commencing during the calendar year following the year in which the estimate is prepared; except that any taxpayer who would have been eligible to claim a credit in the income tax year in which the credit is not allowed is allowed to claim the credit earned in such income tax year in the next income tax year in which the estimate indicates that the amount of the total general fund revenues will be sufficient to grow the total state general fund appropriations by 6% over such appropriations for the previous fiscal year.

Position Monitor

Comment

Bill: [HB16-1068](#)

Title: Regulation Of Methadone Treatment Facilities

Status House Committee on State, Veterans, & Military Affairs Postpone Indefinitely (01/27/2016)

Senate Sponsors [K. Lambert](#) (R)

House Sponsors [P. Lundeen](#) (R)

Official Summary Current law requires the unit within the department of human services that administers behavioral health programs and services (unit) to establish standards for facilities that treat drug abusers or dispense controlled substances to drug abusers. The bill requires additional standards for methadone treatment facilities, including minimum distances for such facilities from schools, colleges, and residential child



care facilities and a disclosure of infractions by the owner of the facility, its holding company, or other facilities under the holding company. If infractions are disclosed, the unit shall determine whether the public interest requires denial of an application or other remedial action. The bill also specifies that a methadone treatment facility is not a medical clinic for zoning purposes.

Position Monitor

Comment

Bill: [HB16-1080](#)

Title: Assault By Strangulation

Status House Committee on Judiciary Refer Amended to Appropriations (02/18/2016)

Senate Sponsors [M. Johnston](#) (D)  
[J. Cooke](#) (R)

House Sponsors [M. Foote](#) (D)  
[L. Landgraf](#) (R)

Official Summary The bill adds intentionally causing serious bodily injury through strangulation as a means of committing the crime of first degree assault and intentionally causing bodily injury through strangulation as a means of committing second degree assault. The bill designates the new means of second degree assault as an extraordinary risk crime increasing the maximum presumptive sentence range.

Position Monitor

Comment

Bill: [HB16-1095](#)

Title: Health Insurance For Prescription Eye Drop Refills

Status Senate Third Reading Passed - No Amendments (02/24/2016)

Senate Sponsors [L. Crowder](#) (R)

House Sponsors [E. McCann](#) (D)

Official Summary The bill requires health benefit plans, except for supplemental policies, to provide coverage for the renewal of prescription eye drops if:

- The renewal is requested within a specified amount of time, depending on how many days the prescription is for; and
- The original prescription states that additional quantities are needed and the renewal does not exceed the number of

quantities needed.

The bill also requires coverage for an additional bottle of prescription eye drops if the bottle is requested at the time of the original prescription and the bottle is needed for use in a day care center or school.

Position Monitor

Comment

Bill: [HB16-1101](#)

Title: Medical Decisions For Unrepresented Patients

Status Introduced In House - Assigned to Health, Insurance, & Environment (01/19/2016)

Senate Sponsors

House Sponsors [D. Young](#) (D)

An attending physician or his or her designee (physician) may make health care treatment decisions as a patient's proxy decision-maker if:

- After making reasonable efforts, the physician cannot locate any interested persons, or none of the interested persons are willing and able to serve as proxy decision-maker;

- The attending physician has obtained an independent assessment of decisional capacity by another health care provider; and

Official Summary

- The physician has consulted with and obtained an agreement with the medical ethics committee of the health care facility where the patient is receiving care. If the health care facility does not have a medical ethics committee, the facility shall refer the physician to a party that can provide consultation and recommendations.

The authority of the physician to act as proxy decision-maker terminates in the event an interested person is willing to serve as proxy decision-maker or a guardian is appointed.

When acting in good faith as the proxy decision-maker, an attending physician or his or her designee is not subject to civil or criminal liability or regulatory sanction.

Position Monitor

Comment

Bill: [HB16-1102](#)

Title:	Drug Production Costs Transparency Requirements
Status	House Committee on Health, Insurance, & Environment Witness Testimony and/or Committee Discussion Only (02/18/2016)
Senate Sponsors	<a href="#">L. Newell</a> (D) <a href="#">E. Roberts</a> (R)
House Sponsors	<a href="#">J. Ginal</a> (D)
Official Summary	<p>The bill requires a drug manufacturer that produces a prescription drug made available in Colorado and for which the wholesale acquisition cost equals or exceeds \$50,000 per year or per course of treatment to submit a report to the Colorado commission on affordable health care (commission) detailing the production costs for the drug. The report is to include:</p> <ul style="list-style-type: none"> <li>• Costs for research and development;</li> <li>• Clinical trials and regulatory costs;</li> <li>• Costs for materials, manufacturing, and administration attributable to the drug;</li> <li>• Costs paid by another entity, including grants, subsidies, or other support;</li> <li>• Acquisition costs, including patents and licensing costs;</li> <li>• Marketing and advertising costs.</li> </ul> <p>Additionally, a manufacturer must report the cumulative annual history of increases in the average wholesale price and wholesale acquisition cost of the drug, the total company profits attributable to the drug, and the total amount of financial assistance the manufacturer has provided through patient prescription assistance programs. Manufacturers must submit the report to the commission by August 1, 2016.</p> <p>By June 1, 2016, the commission must develop a form for manufacturers to use to submit the report. Additionally, the commission is to submit a report to the general assembly by December 1, 2016, that outlines the information reported by drug manufacturers and contains any recommendations the commission may have regarding legislative, administrative, or other policy changes based on the data received from drug manufacturers.</p>
Position	Monitor
Comment	
Bill:	<a href="#">HB16-1103</a>
Title:	License Pathways For Mental Health Workforce

Status	House Committee on Public Health Care & Human Services Refer Amended to Appropriations (02/09/2016)
Senate Sponsors	<a href="#">N. Todd</a> (D) <a href="#">B. Martinez Humenik</a> (R)
House Sponsors	<a href="#">T. Kraft-Tharp</a> (D) <a href="#">L. Landgraf</a> (R)
Official Summary	<p>The bill clarifies that licensed psychologists, licensed clinical social workers, licensed marriage and family therapists, and licensed professional counselors (occupations collectively referred to as mental health professions); candidates for licensure in a mental health profession, including licensed social workers; and individuals enrolled in</p> <p>an appropriate professional program of study for a mental health profession at an approved school or college may register with the database of registered psychotherapists; however, if they do register with</p> <p>such database, the hours accrued will not count toward licensure requirements. The bill also clarifies that a candidate in a mental health profession, including a licensed social worker, need only have completed</p> <p>his or her degree to satisfy the educational component of the licensing process.</p> <p>The individual boards for the mental health professions are authorized to promulgate rules related to the requirements for hours accrued toward licensure.</p>
Position	Monitor
Comment	
Bill:	<a href="#">HB16-1110</a>
Title:	Parent's Bill Of Rights
Status	Introduced In House - Assigned to State, Veterans, & Military Affairs (01/20/2016)
Senate Sponsors	<a href="#">T. Neville</a> (R)
House Sponsors	<a href="#">P. Neville</a> (R)
Official Summary	<p>The bill establishes a liberty interest and fundamental right for parents in the care, custody, and control of a parent's child, restricting governmental entities from infringing on such interests and rights without</p> <p>demonstrating a compelling governmental interest that cannot be accomplished through less restrictive means.</p>

Position Monitor

Comment

Bill: [HB16-1113](#)

Title: Protect Human Life At Conception

Status House Committee on Health, Insurance, & Environment Postpone Indefinitely (02/11/2016)

Senate Sponsors [K. Lundberg](#) (R)

House Sponsors [S. Humphrey](#) (R)

Official Summary

The bill prohibits terminating the life of an unborn child and makes a violation a class 1 felony. The following are exceptions to the prohibition:

- A licensed physician performs a medical procedure designed or intended to prevent the death of a pregnant mother, if the physician makes reasonable medical efforts under the circumstances to preserve both the life of the mother and the life of her unborn child in a manner consistent with conventional medical practice; and
- A licensed physician provides medical treatment to the mother that results in the accidental or unintentional injury to or death of the unborn child.

The pregnant mother upon whom termination of the life of an unborn child is performed or attempted is not subject to a criminal penalty. The sale and use of contraception is not prohibited by the bill.

A conviction related to the termination of the life of an unborn child prohibition constitutes unprofessional conduct for purposes of physician licensing.

Position Monitor

Comment

Bill: [HB16-1137](#)

Title: Nicotine Products Warning Label

Status House Committee on Health, Insurance, & Environment Postpone Indefinitely (02/11/2016)

Senate Sponsors [K. Lundberg](#) (R)

House Sponsors [G. Klingenschmitt](#) (R)

Official Summary

The bill requires any packaged nicotine product that does not contain tobacco and is offered for sale in this state on or after January 1,

2017, to have a conspicuously placed warning label on the package stating that the product contains addictive nicotine. The labeling requirement expressly applies to nicotine-containing dissolvables, lotions, gels, and drinks and to liquid nicotine and nicotine-containing e-liquids that are used with electronic nicotine delivery systems such as electronic cigarettes. The penalty scheme for violations of the warning label requirement is the same as for violations of the prohibition against selling nicotine products to a minor.

Position Monitor

Comment

Bill: [HB16-1146](#)

Title: Born Alive Infant Protection Act

Status Introduced In House - Assigned to State, Veterans, & Military Affairs (01/21/2016)

Senate Sponsors

House Sponsors [L. Landgraf](#) (R)  
[L. Sias](#) (R)

Official Summary The bill defines, for the purposes of all statutes, child, human being, individual, and person as every infant human being who is born alive at any stage of development. The bill defines born alive as, with respect to a human being, the complete expulsion or extraction from its mother a member of the species homo sapiens, at any stage of development, who after such expulsion or extraction breathes or has a beating heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, regardless of whether the umbilical cord has been cut and regardless of whether the expulsion or extraction occurs as a result of natural or induced labor, cesarean section, or induced abortion.

Position Monitor

Comment

Bill: [HB16-1148](#)

Title: Health Benefit Exchange Rules and Policies

Status Senate Committee on Health & Human Services Refer Amended to Senate Committee of the Whole (02/25/2016)

Senate Sponsors [J. Kefalas](#) (D)

[E. Roberts](#) (R)

House Sponsors [L. Sias](#) (R)

Official  
Summary

The bill gives the health insurance exchange oversight committee (committee) oversight over rules and policies proposed by the health benefit exchange that affect bidding and awarding contracts, carrier and regulating carrier participation, regulating broker participation and compensation, interacting with other state agencies, managing and compensating the assistance network, or the handling of any type of appeal. The exchange is required to hold a public meeting for a proposed rule or policy and allow for public participation and comment. A committee member may request that the exchange present a rule or policy to the committee, and the committee may repeal the rule or policy by a majority vote. The committee has the authority to review rules and policies implemented and contracts entered into on or after January 1, 2015.

Position Monitor

Comment

Bill: [HB16-1150](#)

Title: Counties Prohibit Underage Nicotine Possession

Status House Committee on Local Government Refer Amended to House Committee of the Whole (02/17/2016)

Senate Sponsors

House Sponsors [K. Conti](#) (R)

Official  
Summary

The bill clarifies that a county may enact an ordinance or resolution prohibiting a person who is under 18 years of age from possessing cigarettes, tobacco products, or nicotine products.

Position Monitor

Comment

Bill: [HB16-1157](#)

Title: Sunset Review Skolnik Medical Transparency Act

Status House Third Reading Passed - No Amendments (02/19/2016)

Senate Sponsors [J. Tate](#) (R)

House Sponsors [T. Kraft-Tharp](#) (D)  
[A. Garnett](#) (D)

**Sunset Process - House Business Affairs and Labor**

**Committee.** In accordance with the recommendation of the department of regulatory agencies contained in its sunset review, the bill establishes a separate, periodic sunset review for the health care professions profile program, established in the Michael Skolnik Medical Transparency Act of 2010. The initial sunset review will occur in 2020, with a termination date of September 1, 2021, if the program is not extended.

Official  
Summary

Position Monitor

Comment

Bill: [HB16-1160](#)

Title: Sunset Surgical Assistants Surgical Technicians

Status Introduced In House - Assigned to Health, Insurance, & Environment  
(01/28/2016)

Senate Sponsors [T. Neville](#) (R)  
[J. Tate](#) (R)

House Sponsors [J. Ginal](#) (D)  
[S. Lontine](#) (D)

**Sunset Process - House Health, Insurance, and Environment**

**Committee.** The bill continues the requirement that surgical technicians and surgical assistants register with the director of the division of professions and occupations in the department of regulatory agencies.

Position Monitor

Comment

Bill: [HB16-1164](#)

Title: Transfer Immunization Exemption Duties To CDPHE

Status Introduced In House - Assigned to Health, Insurance, & Environment  
(01/28/2016)

Senate Sponsors [I. Aguilar](#) (D)  
[B. Martinez Humenik](#) (R)

House Sponsors [D. Pabon](#) (D)

Official  
Summary Under current law, parents or students seeking an exemption from immunization requirements are to submit the required documentation in support of the exemption to the student's school.  
The bill will require parents or students to submit the documentation to the department of public health and environment instead of the school. The department is responsible for determining the



form by which the exemption is to be submitted and for posting on its website exemption rates for each school.

Position Monitor

Comment

Bill: [HB16-1168](#)

Title: Sunset Rural Alcohol & Substance Abuse Treatment Program

Status House Committee on Public Health Care & Human Services Refer  
Unamended to House Committee of the Whole (02/23/2016)

Senate Sponsors [R. Scott](#) (R)

House Sponsors [J. Ginal](#) (D)  
[J. Danielson](#) (D)

Official **Sunset Process - House Public Health Care and Human**  
Summary **Services Committee.** The bill extends the rural alcohol and substance  
abuse prevention and treatment program (program) through September  
1,  
2025.

Position Monitor

Comment

Bill: [HB16-1180](#)

Title: Free Exercise Of Religion

Status Introduced In House - Assigned to State, Veterans, & Military Affairs  
(02/02/2016)

Senate Sponsors [T. Neville](#) (R)

House Sponsors [S. Humphrey](#) (R)

Official The bill:  
Summary

- Specifies that no state action may burden a person's exercise of religion, even if the burden results from a rule of general applicability, unless it is demonstrated that applying the burden to a person's exercise of religion is essential to further a compelling governmental interest and the least restrictive means of furthering that compelling governmental interest;
- Defines exercise of religion as the practice or observance of religion. The bill specifies that exercise of religion includes the ability to act or refuse to act in a manner substantially motivated by a person's sincerely held

religious beliefs, whether or not the exercise is compulsory or central to a larger system of religious belief; except that it does not include the ability to act or refuse to act based on race or ethnicity.

- Provides a claim or defense to a person whose exercise of religion is burdened by state action; and
- Specifies that nothing in the bill creates any rights by an employee against an employer unless the employer is a government employer.

Position Monitor

Comment

Bill: [HB16-1200](#)

Title: AG Authority Over Fetal Tissue Transfers

Status Introduced In House - Assigned to State, Veterans, & Military Affairs (02/04/2016)

Senate Sponsors [K. Lundberg](#) (R)

House Sponsors [K. Ransom](#) (R)

Official Summary Under current law, it is unlawful to transfer fetal tissue from an induced termination of pregnancy for valuable consideration to an institution that conducts fetal tissue research. The department of public health and environment and state registrar are tasked with enforcement of the prohibition. The bill gives the attorney general the authority to investigation violations and punish any violation.

Position Monitor

Comment

Bill: [HB16-1201](#)

Title: Health Professionals Companion Animals

Status Introduced In House - Assigned to Health, Insurance, & Environment (02/04/2016)

Senate Sponsors

House Sponsors [Y. Willett](#) (R)

Official Summary The bill requires the following medical professionals, when approached by a patient seeking a companion or emotional support animal, to make a finding regarding whether the patient has a disability or a finding that there is insufficient evidence to make a disability

determination:

- Physicians, physician assistants, and anesthesiologist assistants (**section 1** of the bill);
- Nurses (**section 2**); and
- Psychologists, social workers, clinical social workers, marriage and family therapists, licensed professional counselors, and addiction counselors (**section 3**).

Position Monitor

Comment

Bill: [HB16-1203](#)

Title: Women's Health Protection Act

Status Introduced In House - Assigned to Health, Insurance, & Environment (02/04/2016)

Senate Sponsors

House Sponsors [P. Neville](#) (R)

The bill requires all abortion clinics to be licensed by the attorney general. Licensure is valid for one year. Prior to licensure or relicensure, the attorney general shall conduct an on-site inspection of the abortion clinic. The bill requires the attorney general to promulgate rules regarding:

- The abortion clinic's physical facilities;
- The abortion clinic's supply and equipment standards;
- The abortion clinic's personnel, including requiring that the clinic employ at least one doctor with admitting privileges at a hospital within the state within 30 miles of the abortion clinic;
- Medical screening and evaluation of each patient;
- The abortion procedure;
- Minimum recovery room standards;
- Follow-up care for abortion patients; and
- Minimum incident reporting.

The bill creates criminal and civil penalties for violations of the requirements of the bill.

Official  
Summary

Position Monitor

Comment

Bill: [HB16-1210](#)

Title: Prohibit Conversion Therapy Mental Health Provider

Status Introduced In House - Assigned to Public Health Care & Human

Services (02/04/2016)

Senate Sponsors [P. Steadman](#) (D)

House Sponsors [P. Rosenthal](#) (D)

Official  
Summary

The bill prohibits a licensed physician specializing in psychiatry or a licensed or registered mental health care provider from engaging in conversion therapy with a patient under 18 years of age. A licensee who engages in these efforts is subject to disciplinary action by the appropriate licensing board. Conversion therapy means efforts that seek to change an individual's sexual orientation, including efforts to change behaviors or gender expressions or to eliminate or reduce sexual or romantic attraction or feelings toward individuals of the same sex.

Position Monitor

Comment

Bill: [HB16-1218](#)

Title: A Woman's Right To Accurate Health Care Info

Status Introduced In House - Assigned to Health, Insurance, & Environment (02/04/2016)

Senate Sponsors [T. Neville](#) (R)

House Sponsors [L. Saine](#) (R)

Official  
Summary

The bill ensures that women are fully and accurately informed about their personal medical conditions regarding their pregnancies and health care options. Current medical procedures already use ultrasound technology to provide information regarding the gestational age of child in utero. The bill ensures that women have the opportunity to see or forego the opportunity to see the ultrasound. The bill allows women the opportunity to find a provider of ultrasound technology that will provide the service free of charge. The bill requires that a woman provide voluntary and informed consent to an abortion. The bill describes the information that constitutes voluntary and informed consent that the physician performing the abortion provides to the woman. The bill requires the abortion provider to provide certain information to the woman at least 24 hours prior to performing an abortion. The bill creates a civil right of action for noncompliance with the requirements, making a physician's noncompliance with the requirements unprofessional conduct and a violation of the requirements a crime.

Position Monitor

Comment

Bill: [HB16-1221](#)

Title: Budget Cuts To Increase Medicaid Provider Rates

Status: Introduced In House - Assigned to State, Veterans, & Military Affairs (02/04/2016)

Senate Sponsors

House Sponsors [J. Joshi](#) (R)

The bill requires the general assembly to separately appropriate money to a state agency in the executive branch for lobbying expenses and for costs associated with memberships to professional, subject matter, trade, or other organizations. For fiscal year 2016-17, and each fiscal year thereafter, the amount the general assembly appropriates to a state agency for:

Official Summary

- Lobbying expenses shall not exceed an amount equal to 50% of the amount that the state agency spent on lobbying expenses for the 2015-16 fiscal year; and
- Membership costs shall not exceed an amount equal to 50% of the amount that the state agency spent on membership costs for the 2015-16 fiscal year.

The general assembly is required to appropriate an amount equal to the savings from the cuts to the executive agencies for lobbying expenses and membership costs to the department of health care policy and financing to increase the provider rates paid under the Colorado Medical Assistance Act.

Position: Monitor

Comment

Bill: [HB16-1236](#)

Title: Sunset Infection Control Advisory Committee

Status: House Committee on Health, Insurance, & Environment Refer Amended to House Committee of the Whole (02/23/2016)

Senate Sponsors [L. Crowder](#) (R)

House Sponsors [D. Primavera](#) (D)

Official Summary

**Sunset Process - Health, Insurance, and Environment Committee.** The bill continues the infection control advisory committee until July 1, 2021.

Position Monitor

Comment

Bill: [HB16-1277](#)

Title: Appeal Process For Changes To Medicaid Benefits

Status Introduced In House - Assigned to Public Health Care & Human Services (02/19/2016)

Senate Sponsors [J. Kefalas](#) (D)  
[E. Roberts](#) (R)

House Sponsors [L. Landgraf](#) (R)  
[S. Lontine](#) (D)

Official  
Summary

The bill requires the department of health care policy and financing (state department) to give a Medicaid recipient a 20-day advance notice if medical assistance benefits are being suspended, terminated, or modified, (intended action) unless certain conditions are met.

Under current law, the state department allows an applicant or recipient to file an appeal within 30 days after the date of notice of the intended action. The bill extends the time for appeal to 60 days after the effective date of the intended action. If the recipient files an appeal prior to the effective date of the intended action, the recipient's medical assistance benefits will continue unchanged until the completion of the appeal process. If authorized under federal law, the state department may

permit a recipient's medical benefits to continue even though the appeal is filed after the effective date of the intended action.

The bill permits an applicant or recipient to request the county dispute resolution process either prior to appeal to the state department or

as part of the filing of the appeal.

The county's dispute resolution process must be completed within 30 days of the filing of a request to the county or no later than 10 days before the date of the hearing on the appeal to the state department, whichever is earlier. If the dispute is resolved, the county will assist the applicant or recipient in requesting the dismissal of the state-level appeal.

Except as provided in the bill, the bill requires the person or persons involved in making the decision relating to the intended action to

be available for cross-examination if requested by the appellant.

Position Monitor

Comment

Bill: [HB16-1280](#)

Title: Update Air Ambulance Regulation

Status Introduced In House - Assigned to Transportation & Energy  
(02/19/2016)

Senate Sponsors [K. Lambert](#) (R)

House Sponsors [F. Winter](#) (D)

Under current law, Colorado requires air ambulance services to be accredited by the Commission on Accreditation of Medical Transport Systems (CAMTS) in order to operate legally in the state. However, some of the CAMTS standards relate to an air carrier's rates, routes, and service, which are matters that have been determined to be exclusively subject to federal, not state, regulation. The bill removes direct references to CAMTS accreditation as the necessary and sufficient condition for Colorado licensure and substitutes a regulatory structure in which CAMTS accreditation is one of a number of factors considered by the department of public health and environment in its licensing decisions. Other factors relate to patient care and the health, safety, and welfare of the general public, which are matters subject to state jurisdiction. The state board of health is granted rule-making authority to set minimum standards for licensure of air ambulance services; issue provisional licenses and recognize licenses issued by other states; waive certain requirements if health and safety are not adversely affected; establish fees; and take disciplinary action, including the assessment of civil penalties, for violation of the rules.

Official  
Summary

Position Monitor

Comment

Bill: [HB16-1294](#)

Title: Contraception Coverage Public & Private Insurance

Status Introduced In House - Assigned to Health, Insurance, & Environment  
(02/24/2016)

Senate Sponsors [L. Guzman](#) (D)

House Sponsors [S. Lontine](#) (D)  
[D. Esgar](#) (D)

Official Starting January 1, 2018, the bill requires Medicaid managed care

Summary plans and health benefit plans that are required under the federal Patient Protection and Affordable Care Act to provide contraceptive coverage as a preventive health service to cover, at no cost to the woman covered by the plan:

- All FDA-approved contraceptive drugs, devices, and other products for women, including those prescribed by the covered person's health care provider or otherwise authorized under state or federal law;
- Voluntary sterilization procedures;
- Patient education and counseling on contraception; and
- Follow-up services related to the covered contraceptive drugs, devices, products, or procedures, including management of side effects, counseling for continued adherence, and device insertion and removal.

Health insurers and Medicaid managed care entities are prohibited from restricting or delaying coverage for contraceptives and must make the coverage available to all persons covered under the health plan or Medicaid managed care plan, respectively.

Position Monitor

Comment

## SENATE BILLS

Bill: [SB16-002](#)

Title: Health Exchange Voter Approval To Impose Tax

Status Senate Committee on Health & Human Services Refer Unamended to Appropriations (01/28/2016)

Senate Sponsors [K. Lundberg](#) (R)

House Sponsors [L. Sias](#) (R)

Official Summary The bill directs the secretary of state to submit to the voters, at the November 2016 statewide election, the question of whether the Colorado health benefit exchange can impose a tax to support its ongoing operations.

Position Monitor

Comment

Bill: [SB16-009](#)

Title: Prohibit Referral Fees When Dividing Dental Fees

Status House Third Reading Passed - No Amendments (02/18/2016)



Senate Sponsors [K. Grantham](#) (R)

House Sponsors [D. Primavera](#) (D)

Official Summary Current law prohibits dentists from sharing fees in a way that could be interpreted to make fee-sharing within a dental service organization grounds for disciplinary action. The bill repeals this prohibition and substitutes language derived from the fee-sharing prohibitions that apply to physicians.

Position Monitor

Comment

Bill: [SB16-019](#)

Title: Videotape Mental Condition Evaluations

Status Introduced In Senate - Assigned to Judiciary (01/13/2016)

Senate Sponsors [J. Cooke](#) (R)

House Sponsors [M. Foote](#) (D)  
[L. Saine](#) (R)

Official Summary The bill requires a court-ordered mental condition examination to be video and audio recorded. A copy of the recording must be included with the evaluator's report.

Position Monitor

Comment

Bill: [SB16-024](#)

Title: Private Student Loan Cap Act

Status Senate Committee on State, Veterans, & Military Affairs Postpone Indefinitely (02/10/2016)

Senate Sponsors [M. Jones](#) (D)

House Sponsors [D. Moreno](#) (D)

Official Summary The bill establishes a cap on the annual interest rate that a nongovernmental lender may charge for a student loan taken for the purpose of financing undergraduate, graduate, or professional education and related expenses of 2 percentage points over the rate that the federal government would charge the student for a direct unsubsidized student loan made for the same purpose.

Position Monitor

Comment

Bill: [SB16-025](#)

Title: End-of-life Options For Terminally Ill Individuals

Status: Senate Committee on State, Veterans, & Military Affairs Postpone Indefinitely (02/03/2016)

Senate Sponsors: [M. Merrifield](#) (D)

House Sponsors: [L. Court](#) (D)  
[J. Ginal](#) (D)

Official  
Summary

The bill enacts the Colorado End-of-life Options Act (act), which authorizes an individual with a terminal illness to request, and the individual's attending physician to prescribe to the individual, medication

to hasten the individual's death. To be qualified to request aid-in-dying medication, an individual must be a capable adult resident of Colorado who has a terminal illness and has voluntarily expressed the wish to receive a prescription for aid-in-dying medication by making 2 oral requests and a written request to his or her attending physician. An individual who requests aid-in-dying medication may rescind the request

at any time, regardless of his or her mental state.

The act outlines the responsibilities of the attending physician, including:

- Determining whether the requesting individual has a terminal illness, is capable of making an informed decision, and is making the request for aid-in-dying medication voluntarily;
- Requesting the individual to demonstrate proof of Colorado residency;
- Referring the individual to a consulting physician to confirm that the individual is qualified to request aid-in-dying medication;
- Providing full disclosures to ensure that the individual is making an informed decision; and
- Informing the individual of the right to rescind the request at any time.

An attending physician cannot write a prescription for aid-in-dying medication unless at least 2 health care providers determine that the individual is capable of making an informed decision. The attending or consulting physician is to refer the individual to a licensed mental health professional if he or she believes the individual's ability to make an informed decision is compromised. The attending physician cannot write

a prescription unless the mental health professional communicates, in writing, that the individual is capable.

The bill grants immunity from civil and criminal liability and from professional discipline to a person who participates in good faith under the act. The bill also specifies that actions taken in accordance with the act do not constitute suicide, assisted suicide, mercy killing, homicide, or

elder abuse.

A health care provider is not obligated to prescribe aid-in-dying medication, and a health care facility may prohibit a physician from writing a prescription for a resident of the facility who intends to use aid-in-dying medication on the facility's premises.

A person commits a class 2 felony if the person purposely or knowingly:

- Alters or forges an aid-in-dying medication request without the terminally ill individual's authorization;
- Conceals or destroys a rescission of a request for aid-in-dying medication; or
- Coerces or exerts undue influence to get a terminally ill individual to request, or to destroy a rescission of a request for, aid-in-dying medication.

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Position Monitor

Comment

Bill: [SB16-034](#)

Title: Tampering With A Deceased Human Body

Status Introduced In House - Assigned to State, Veterans, & Military Affairs (02/25/2016)

Senate Sponsors [J. Sonnenberg](#) (R)

House Sponsors [R. Fields](#) (D)  
[P. Lawrence](#) (R)

Official  
Summary

The bill creates the crime of tampering with a deceased human body by making it a crime for a person to:

- Tamper with human remains with the intent to impair or alter its appearance or availability for an official proceeding; or

- Observe human remains with reason to believe that a crime has been committed and intentionally fail to notify law enforcement.

Tampering with a deceased human body is:

- A class 3 felony if the remains relate to a class 1 or class 2 felony;
- A class 4 felony if the remains relate to a class 3 or class 4

felony;  
• A class 5 felony if the remains relate to a class 5 or class 6 felony; or  
• A class 1 misdemeanor if the remains relate to any class of misdemeanor.

Position Monitor

Comment

Bill: [SB16-042](#)

Title: Immunity For Persons Involved In Overdose Events

Status Senate Committee on Judiciary Postpone Indefinitely (02/17/2016)

Senate Sponsors [I. Aguilar](#) (D)

House Sponsors [D. Moreno](#) (D)

Official  
Summary

Under current law, a person who reports an emergency drug or alcohol overdose event is immune from criminal prosecution for certain drug-related offenses if certain conditions are satisfied. The bill amends these circumstances and extends this immunity to (1) apply to one or 2 other persons who also satisfy the reporting conditions and (2) immunize

the reporters from arrests as well as from prosecutions.

Under current law, an underage person who calls 911 and reports that another underage person is in need of medical assistance due to alcohol or marijuana consumption is immune from criminal prosecution for certain offenses if certain conditions are satisfied. The bill amends these circumstances and extends this immunity to (1) apply to one or 2 other persons who also satisfy the reporting conditions and (2) immunize

the reporters from arrests as well as from prosecutions. The bill also extends this immunity to the underage person who was in need of medical assistance.

A person who reports an emergency drug or alcohol overdose event and who meets the requirements for immunity is not subject to a violation of any condition of pretrial release, probation, or parole if the violation arises from the same course of events from which the emergency drug or alcohol overdose event arose.

If a person reports an emergency drug or alcohol overdose event, and the person meets the requirements for immunity, and the person is subject to an arrest warrant, a law enforcement officer responding to the emergency drug or alcohol overdose event, in lieu of making an arrest, shall issue a summons to the person if:

- The warrant involves a failure to appear, a failure to pay a

fine, or any misdemeanor, petty offense, or traffic offense;  
and

- The warrant does not involve a felony alleged to have been committed by the person.

If a person suffers an emergency drug or alcohol overdose event, the event is reported in good faith, and the person is subject to an arrest warrant, a law enforcement officer responding to the emergency drug or alcohol overdose event, in lieu of making an arrest, shall issue a summons

to the person if:

- The warrant involves a failure to appear, a failure to pay a fine, or any misdemeanor, petty offense, or traffic offense;  
and

- The warrant does not involve a felony alleged to have been committed by the person.

Position Monitor

Comment

Bill: [SB16-069](#)

Title: Community Paramedicine Regulation

Status Senate Committee on Finance Refer Unamended to Appropriations  
(02/04/2016)

Senate Sponsors [L. Garcia](#) (D)

House Sponsors [D. Pabon](#) (D)

Official  
Summary

Community paramedics are certified emergency medical service providers who provide community-based, out-of-hospital medical services to medically underserved and medically served, yet vulnerable, populations. Under current law, community paramedics and community paramedicine agencies are not subject to regulation by any state agency.

**Section 1** of the bill defines the terms community paramedic and community paramedicine. **Section 2** authorizes the executive director of the Colorado department of public health and environment (department) to adopt rules for the endorsement of emergency medical service providers as community paramedics.

Part 11 in **section 3** authorizes a licensed ambulance service, fire department, or fire protection district to establish a community outreach and health education program in its community. The emergency medical and trauma services advisory council (council) may establish guidelines for the development and implementation of such programs. Part 11 also requires a program operator to report annually to the council on the progress of the program.

Part 12 in section 3 authorizes the department to issue licenses to

community paramedicine agencies and authorizes the state board of health to promulgate rules concerning the minimum standards for operating a community paramedicine agency. Part 12 also creates the community paramedicine agencies cash fund.

Position Monitor

Comment

Bill: [SB16-075](#)

Title: DNA Collection Misdemeanor Vulnerable Persons

Status Introduced In Senate - Assigned to Judiciary (01/19/2016)

Senate Sponsors [M. Johnston](#) (D)  
[J. Cooke](#) (R)

House Sponsors [P. Lawrence](#) (R)  
[D. Pabon](#) (D)

Under current law, an offender convicted of a misdemeanor involving unlawful sexual conduct must provide a DNA sample for inclusion in the Colorado bureau of investigation's DNA database. The bill would require collection of a DNA sample from a person convicted of any of the following misdemeanors:

Official  
Summary

- Third degree assault;
- Menacing;
- Reckless endangerment;
- Theft;
- Criminal mischief;
- Child abuse;
- Violation of a protection order;
- Solicitation of a prostitute; and
- Harassment.

Position Monitor

Comment

Bill: [SB16-084](#)

Title: Uniform Substitute Health Care Decision-making Documents

Status Introduced In Senate - Assigned to Judiciary (01/29/2016)

Senate Sponsors [P. Steadman](#) (D)

House Sponsors

Official **Colorado Commission on Uniform State Laws.** The bill adopts, Summary with amendments, the Uniform Recognition of Substitute Health Care

Decision-making Documents Act as Colorado law.  
The bill establishes the circumstances under which a substitute health care decision-making document (document) is valid in this state. A person may assume in good faith that a document is genuine, valid, and still in effect and that the decision-maker's authority is genuine, valid, and still in effect.  
A person who is asked to accept a document shall do so within a reasonable amount of time. The person may not require an additional or different form of document for authority granted in the document presented. A person who refuses to accept a document is subject to:

- A court order mandating acceptance of the document; and
- Liability for reasonable attorney's fees and costs incurred in an action or proceeding that mandates acceptance of the document.

A person is not required to accept a document under certain described conditions.

Position Monitor

Comment

Bill: [SB16-090](#)

Title: Marijuana Health Effects Data Regional Level

Status Introduced In House - Assigned to Appropriations (02/18/2016)

Senate Sponsors [P. Steadman](#) (D)

House Sponsors [D. Young](#) (D)

Official Summary **Joint Budget Committee.** Under current law, the department of public health and environment is directed to collect data on the health effects of marijuana use at a county level. The bill allows the department to determine whether to collect the data at a county or regional level.

Position Monitor

Comment

Bill: [SB16-110](#)

Title: Child Victim Privacy Criminal Justice Records

Status Introduced In House - Assigned to Judiciary (02/23/2016)

Senate Sponsors [L. Woods](#) (R)

House Sponsors [P. Lundeen](#) (R)

Official Summary	The bill requires that, before releasing a criminal justice record related to a child-victim crime, the releasing agency delete the name and any other information that would identify a child victim of the offense. The bill specifies the crimes that are child-victim crimes. The bill makes an exception for sharing information between identified government entities.
Position	Monitor
Comment	

Bill: [SB16-118](#)

Title:	Screening To Identify Prenatal Substance Exposure
Status	Senate Committee on State, Veterans, & Military Affairs Postpone Indefinitely (02/23/2016)
Senate Sponsors	<a href="#">L. Newell</a> (D)
House Sponsors	<a href="#">J. Singer</a> (D)

Official Summary	<p>The bill directs the department of public health and environment (department) to identify a screening questionnaire related to prenatal substance exposure. Information gathered from a screening questionnaire may not be used for either criminal purposes or to justify contact with county departments of human or social services, unless a program's or entity's mandatory reporter of abuse and neglect status is triggered.</p> <p>Home visitation programs, the juvenile justice system, the child welfare system, early childhood providers, schools, and school districts developing a individualized family service plan or a child's initial individualized education program are required to use a screening questionnaire.</p> <p>Birthing facilities and health care providers are strongly encouraged to adopt a consistent practice of screening and documentation for prenatal substance exposure. Prenatal substance exposure is defined in the bill as prenatal exposure to regular or binge use of alcohol, over-the-counter and prescription medications, or controlled substances.</p>
Position	Monitor
Comment	

Bill: [SB16-120](#)

Title:	Review By Medicaid Client For Billing Fraud
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Status	Senate Committee on Health & Human Services Refer Amended to Appropriations (02/18/2016)
Senate Sponsors	<a href="#">E. Roberts</a> (R)
House Sponsors	<a href="#">D. Coram</a> (R)
Official Summary	<p>The bill requires the department of health care policy and financing (department), by a certain date, to develop and implement an explanation of benefits for Medicaid recipients. The purpose of the explanation of benefits is to inform a Medicaid client of a claim for reimbursement made for services provided to the client or on his or her behalf, so that the client may discover and report administrative or provider errors or fraudulent claims for reimbursement. The bill specifies certain information that must be included in the explanation of benefits. Specifically, the explanation of benefits must include information regarding at least one method for a Medicaid client to report errors in the explanation of benefits.</p> <p>The department shall work with Medicaid clients and Medicaid advocates to develop an explanation of benefits and educational materials that are understandable to Medicaid clients.</p> <p>The explanation of benefits must be sent to clients not less than bimonthly, and the department shall determine the most cost-effective means for producing and distributing the explanation of benefits, which means may include e-mail or distribution with existing communications to clients.</p>
Position	Monitor
Comment	

Bill: [SB16-127](#)

Title:	Repeal Medical Clean Claims Task Force
Status	Senate Committee on Business, Labor, & Technology Refer Amended - Consent Calendar to Senate Committee of the Whole (02/24/2016)
Senate Sponsors	<a href="#">J. Tate</a> (R)
House Sponsors	<a href="#">J. Arndt</a> (D)
Official Summary	<p>In 2010, the general assembly passed the Medical Clean Claims Transparency and Uniformity Act (Act). The purpose of the Act was to require the executive director of the department of health care policy and financing to establish a task force of industry and government representatives to develop a standardized set of payment rules and claim</p>

edits to be used by payers and health care providers in Colorado. The bill repeals the Act.

Position Monitor

Comment

Bill: [SB16-134](#)

Title: Professional Licensing For Military Veterans

Status Introduced In Senate - Assigned to Business, Labor, & Technology (02/18/2016)

Senate Sponsors [R. Heath](#) (D)  
[L. Garcia](#) (D)

House Sponsors [D. Kagan](#) (D)  
[J. Danielson](#) (D)

Official Summary **Section 1** of the bill requires the Colorado department of public health and environment (CDPHE) to consider crediting a military veteran's training, education, and experience toward the qualifications for certification as an emergency medical service provider. **Section 2** of the bill requires the Colorado department of revenue (DOR) to consider crediting a military veteran's training, education, and experience toward the qualifications for a commercial driver's license. **Section 3** of the bill requires the division of veterans affairs to make reasonable efforts to notify a discharged member of the obligations of CDPHE and DOR under sections 1 and 2 of the bill and of the duties and functions of a professional licensing authority that is regulated by the department of regulatory agencies.

Position Monitor

Comment

Bill: [SB16-135](#)

Title: Collaborative Pharmacy Practice Agreements

Status Senate Committee on Health & Human Services Refer Amended to Finance (02/25/2016)

Senate Sponsors [I. Aguilar](#) (D)

House Sponsors [J. Ginal](#) (D)

Official  
Summary

The bill allows a health benefit plan to provide coverage for health care services provided by a pharmacist if the pharmacist meets specified requirements. The bill also allows a pharmacist to enter into a collaborative pharmacy practice agreement with one or more physicians if:

- The pharmacist holds a current license to practice in Colorado;
- The pharmacist is engaged in the practice of pharmacy;
- The pharmacist has earned a doctorate of pharmacy degree or completed at least 5 years of experience as a licensed pharmacist;
- The pharmacist carries adequate malpractice insurance;
- The pharmacist agrees to devote a portion of his or her practice to collaborative pharmacy practice; and
- There is a mechanism in place to document changes to medical records.

The bill prohibits the employment of a physician or advanced practice nurse for collaborative practice agreements if the physician or advanced practice nurse does not have a separate medical practice.

The bill grants rule-making authority to the state board of pharmacy, the Colorado medical board, and the state board of nursing.

Position

Monitor

Comment