

Legislative Report

Public Health Nurses Association of Colorado

HB1008 NO GENDER INDIVIDUAL HEALTH INS RATES

Sponsors Rep. Schafer and Rep. McCann & Sen. Carroll M. and Sen Schwartz

Health Care Task Force. The bill prohibits carriers from using gender as a basis for varying premium rates for individual health insurance policies and declares premium rates based on gender to be unfairly discriminatory.

Current Status Senate Health & Human Services

Position Monitor

HB1021 REQUIRED COVERAGE REPRODUCTIVE SERVICES

Sponsors Rep. Frangas and Rep. McCann & Sen. Foster

Health Care Task Force. The bill requires entities issuing individual sickness and accident insurance policies in this state to provide the same coverage for maternity care as is currently mandated for all group sickness and accident insurance policies. The bill also requires both individual and group policies to provide coverage for pregnancy management, including contraceptive counseling, drugs, and devices. The bill excludes abortion procedures and services from pregnancy management.

Current Status Senate Business, Labor & Technology

Position Support

HB1022 SUPPL NUTRITION ASSISTANCE PROG ADMIN

Sponsors Rep. Summers and Rep. Gagliardi & Sen. Boyd

Economic Opportunity Poverty Reduction Task Force.

Section 1: The bill requires the state department of human services (department) to adopt the maximum certification period allowable pursuant to federal law for the receipt of federal food assistance benefits under the supplemental nutrition assistance program.

Additionally, the bill requires the department to develop and implement a state outreach plan with the use of private and federal moneys to promote access to federal food benefits by eligible persons. The department may partner or contract with one or more nonprofit organizations to develop and implement the outreach plan and is authorized to seek and accept gifts, grants, and donations for the purposes of developing and implementing the state outreach plan. The bill requires the department to submit the outreach plan for federal approval by September 1, 2010, and to request any matching federal moneys that may be available upon approval of the outreach plan. In the event that the department will not be receiving sufficient federal or private moneys to develop and implement the outreach plan, the department is exempted from developing and implementing an outreach plan.

The bill also includes amendments changing the name of the federal food stamps program to the supplemental nutrition assistance program to reflect the federal name change.

Section 2: The bill directs the department to implement a program or policy, pursuant to federal law, establishing broad-based categorical eligibility for federal food assistance benefits. At a minimum, the program or policy shall remove the asset test for eligibility.

Current Status House Appropriations

Position Monitor

HB1032 BEHAVIORAL HEALTH CRISIS RESPONSE SERVICES

Sponsors Rep. Frangas & Sen. Boyd

Amended on 2/18/10 with a strike below, HB 1032 states the State Department shall review Colorado's current behavioral health crisis response system and formulate a plan to address the lack of a coordinated crisis response, including how to best use existing resources. The Department shall report back to the Joint House and Human Services on January 30th, 2011 including a plan for addressing the issue.

Current Status House Appropriations

Position Support

HB1033 SCREENING BRIEF INTERVENTION REFERRAL

Sponsors Rep. Massey & Sen. Boyd and Sen. Schwartz

This bill came from the Health Care Task Force. The bill adds to the list of optional services provided to medicaid recipients screening, brief intervention, and referral to treatment for alcohol and other substance abuse services.

Current Status House Appropriations

Position Support

HB1138 COLORADO HEALTH SERVICES CORPS

Sponsors Rep. Gagliardi & Sen. Morse

The bill changes the name of the state health care professional loan repayment program to the Colorado health services corps (health services corps), the name of the health care community board to the Colorado health services advisory council, and the name of the health care professional loan repayment fund to the Colorado health services corps fund. Contracts for health care professional loan repayments entered into by collegeinvest or the primary care office in the department of public health and environment (primary care office) under the prior name of the program are still valid obligations.

The bill specifies the manner in which the health services corps may make a lump sum payment on an eligible professional's education loans pursuant to a contract. The bill exempts the selection of health care professionals from the competitive bidding requirements of the procurement code. The bill repeals the \$35,000 per year limit on the amount of education loan repayment that a health professional may receive under the health services corps.

The bill requires the primary care office to report specified information to the governor and specified committees of the general assembly on or before December 1, 2011, and every other December 1 thereafter.

The bill makes conforming amendments due to the name changes.

Current Status Senate Health & Human Services

Position Support

HB1147 SAFER STREETS FOR NONMOTORIZED TRANSPORT

Sponsors Rep. Kefalas & Sen. Bacon

Section 2 codifies the existing bicycle and pedestrian policy directive of CDOT into law. Section 3 Requires CDOT, CDE, and public safety to collaborate under the safe routes to schools program with local governments and school districts to make available to schools a comprehensive educational curriculum regarding the safe use of public streets and premises open to the public by users of nonmotorized with wheeled transportation. Requires an individual 2yrs of age up to 18 yrs of age to wear a helmet when using nonmotorized wheeled transportation in public

Current Status 3rd reading in House

Position Support

HB1160 WELLNESS INCENTIVES REWARDS OUTCOMES

Sponsors Rep. Rice and Rep. Stephens & Sen. Mitchell

Current law allows health insurance carriers offering individual health coverage plans and small group plans and the board of directors of the CoverColorado program or carriers providing health benefit plans to CoverColorado participants to offer incentives or rewards to encourage persons covered under the plans to participate in a wellness and prevention program. The incentives or rewards can be based only on participation in a wellness and prevention program and cannot be tied to any particular outcome achieved by participating in the program.

The bill repeals the restriction on incentives based on outcomes and allows carriers to base the incentives or rewards on satisfaction of a standard related to a health factor if the incentive or reward under the wellness and prevention program is consistent with the nondiscrimination requirements of the federal "Health Insurance Portability and Accountability Act of 1996".

Current Status 2nd reading in House

Position Monitor

HB1179 PRIMARY CARE ACT

Sponsors Rep. Acree & Sen. Boyd

Section 1 of the bill expresses the intent of the general assembly to encourage the expansion of primary health care services to shortage areas throughout the state through use of available space in public buildings and donations and investments by private businesses to assist physicians in locating and offering primary care services in rural areas.

Section 2 of the bill allows medical malpractice insurers to discount the medical malpractice insurance rates of licensed physicians who provide primary care services in health professional shortage areas for at least 50% of their practice time.

Section 3 of the bill expands the state health care professional loan repayment program by:

*Eliminating the cap on the amount of an award under the program; and

*Eliminating restrictions on the type of setting in which a health care professional may provide primary care services in order to be eligible for loan repayment under the program.

Section 4 of the bill requires the department of health care policy and financing to develop a 5-year strategic plan for increasing reimbursement rates for primary care providers, and removing differentiation in rates based on service delivery location, under medicaid.

Current Status House Appropriations

Position Monitor

HB1191 ELIMINATE CANDY & SODA SALES TAX EXEMPTION

Sponsors Rep. Pommer & Sen. Heath

Effective March 1, 2010, sections 1 and 2 of the bill:

*Narrow the existing state sales and use tax exemptions for food so that candy and soft drinks are no longer exempt from the state sales tax and use taxes;

*Authorize the department of revenue to promulgate rules that allow sellers of candy and soft drinks to, if necessary, reasonably estimate the amount of sales taxes due on their sales; and

* Make conforming amendments to prevent the narrowing of the exemption from affecting county, municipal, and other local government or political subdivision sales and use taxes.

Current Status Signed by Governor

Position Support

HB1216 CHIROPRACTOR & PHARMACIST ADMINISTER DRUGS

Sponsors Rep. Riesberg

Section 1 of the bill permits a prescription drug outlet to allow a pharmacist to take immunizations and vaccines off the premises for administration to a patient. Sections 2 and 3 require the board of chiropractic examiners to develop a formulary of nutritional remedial measures that may be administered by a chiropractor for the treatment of neuromuscular-skeletal conditions.

Current Status Senate Health & Human Services

Position Monitor

HB1242 UNIFORM INDIVIDUAL HEALTH INSURANCE APPLICATION

Sponsors Rep. Apuan & Sen. Tochtrop

The bill requires the commissioner of insurance (commissioner) to implement a uniform application form for individual sickness and accident health benefit plans. The bill requires the commissioner to take recommendations from members of the insurance industry regarding the form and content of the uniform application form and to promulgate rules to require its exclusive use by the industry after January 1, 2012.

Current Status House State Affairs

Position Monitor

HB1248 COLORADO SAFE PERSONAL CARE PRODUCTS ACT

Sponsors Rep. Primavera & Sen. Boyd

The bill creates the "Colorado Safe Personal Care Products Act" (act), which prohibits a manufacturer from knowingly selling, offering for sale, or distributing for sale or use in Colorado on and after September 1, 2011, any personal care product that contains a chemical identified as causing cancer or reproductive toxicity.

The bill sets forth legislative findings and declarations regarding chemicals in consumer products and the harmful health effects of those chemicals, particularly on women of childbearing age, fetuses, and children.

The bill further establishes a process for identifying those chemicals that cannot be contained in personal care products sold or distributed in Colorado by recognizing existing lists of harmful chemicals established by authoritative bodies such as the United States environmental protection agency, the international agency for research on cancer, the national toxicology program, and the national institute for occupational safety and health.

"Personal care products", consistent with the definition of "cosmetics" in the federal "Food, Drug, and Cosmetic Act", is defined to include any article intended to be rubbed, poured, sprinkled, or sprayed on, introduced into, or otherwise applied to the human body for cleansing, beautifying, promoting attractiveness, or altering a person's appearance.

Private citizens may file suit to enforce the act, and the prevailing plaintiff may recover an award of attorney fees and costs if a violation is found. If a manufacturer violates the act, the bill authorizes the imposition of a civil penalty of up to \$5,000 per violation per product for the first offense and up to \$10,000 per violation per product for a second or subsequent offense.

Current Status House Judiciary

Position Support

HB1252 BREAST CANCER SCREENING WITH MAMMOGRAPHY

Sponsors Rep. Primavera & Sen. Boyd and Sen. Schwartz

The bill requires that breast cancer screening with mammography be individualized for each patient and that if a health care provider deems it to be medically appropriate, a breast cancer screening shall be a covered benefit. In 2009, the general assembly changed the required breast cancer screening coverage provisions to tie them to the recommendations of the U.S. preventive services task force. This bill requires coverage for more frequent breast cancer screening than the task force recommendations if the screening is deemed medically appropriate.

Current Status House Health & Human Services

Position Support

HB1260 SUNSET REVIEW BOARD OF MEDICAL EXAMINERS

Sponsors Rep. Riesberg and Rep. Acree & Sen. Newell

Sunset Process - House Health and Human Services Committee. The bill implements the recommendations of the department of regulatory agencies in its sunset review of the Colorado state board of medical examiners by amending the "Colorado Medical Practice Act" (act)

Current Status House Appropriations

Position Monitor

Sponsors

Rep. Frangas

The bill allows certain local governments, small businesses, and nonprofit organizations to offer participation in fully funded state group benefit plans for medical and dental coverages to their employees. The bill:

*Specifies that participation in state group benefit plans for medical and dental coverages is voluntary for local government, small businesses, and nonprofit organizations and that local government, small business, and nonprofit organization employees cannot participate in state group benefit plans if their employer has not chosen to offer participation to its employees.

*Allows the state personnel director to charge an administrative fee to participating local government, small business, and nonprofit organization employees to cover the state's cost of administering group benefit plans for local government, small business, and nonprofit organization employees.

*Precludes participating local governments, small businesses, and nonprofit organizations from offering any other medical and dental benefit coverages to their employees and requires the local governments, small businesses, and nonprofit organizations to agree to participate in state group benefit plans for at least 3 years.

*Requires participating local governments, small businesses, and nonprofit organizations to contribute on behalf of their participating employees a minimum amount as determined by the director of the department of personnel (director).

*Requires participating local government, small business, and nonprofit organization employees to comply with all rules and procedures adopted by the director.

*Allows local governments, small businesses, and nonprofit organizations to determine eligibility of their employees and their dependents for participation in state group benefit plans for medical and dental coverages.

*Establishes the local government, small business, and nonprofit organization group benefit plans fund in the state treasury and specifies that the fund contains the premium account and the administration account.

*Specifies that group benefit plan premium costs received by the director for local government, small business, and nonprofit organization employee premiums shall be deposited into the premium account and that expenditures shall be made from the premium account for the payment to carriers of premiums, claims costs, and other administrative fees and costs associated with the group benefit plans for local government, small business, and nonprofit organization employees.

*Specifies that moneys credited to or expended from the premium account for payment to carriers who provide fully funded group benefit plans to local government, small business, and nonprofit organization employees do not constitute state fiscal year spending for purposes of the state constitutional limitation on spending.

Current Status House Business Affairs & Labor**Position** Monitor

HB1321 HEALTH CARE SERVICES FUND MONEYS

Sponsors Rep. Pommer & Sen. Tapia

Budget Package Bill. For the 2009-10 fiscal year, the bill appropriates \$10,390,000 from the general fund to the Colorado health care services fund. For that fiscal year, the bill changes the allocation of moneys appropriated out of the Colorado health care services fund. The bill establishes the primary care special distribution fund (fund). Portions of the moneys in the fund shall be appropriated to 2 classes of clinics that received reduced funding due to moneys being out of the primary care fund. The department of health care policy and financing shall develop distribution formulas to equalize the reductions experienced by health clinics. Current law allows up to \$15 million of the money in the primary care fund to be appropriated for certain health-related purposes. The bill increases this limit to \$17,790,000. The bill also transfers \$2,005,000 from the primary care fund to the fund.

Current Status Passed Senate as amended

Position Support

HB1323 USE OF TOBACCO TAX MASTER SETTLEMENT

Sponsors Rep. Pommer & Sen. Tapia

Budget Package Bill. For the 2009-10 fiscal year, the bill limits the transfer of tobacco settlement moneys to the comprehensive primary and preventive care grant program to the amount of moneys committed for grants on or before September 30, 2009, and transfers the remaining amount to the general fund. For the 2010-11 fiscal year, transfers to the general fund all of the tobacco settlement moneys annually transferred to the comprehensive primary and preventive care grant program. The bill reallocates the transfer of tobacco settlement moneys from the Colorado indigent care program to the children's basic health plan trust. For the 2009-10 fiscal year, the bill transfers to the general fund the amount of tobacco settlement moneys that would have gone to the Colorado Indigent Care Program. The bill repeals the supplemental tobacco litigation settlement moneys account in the comprehensive primary and preventive care fund. The bill permits the use of moneys in the AIDS and HIV prevention fund for the AIDS drug assistance program in 2010-11 fiscal year. The bill makes an appropriation.

Current Status Passed Senate as amended

Position Monitor

HB1324 MEDICAID NURSING FACILITY PER DIEM RATES

Sponsors Rep. Ferrandino & Sen. White

Budget Package Bill. Commencing March 1, 2010, and through June 30, 2011, the bill reduces the general fund portion of per diem rates paid to Medicaid-certified class I nursing facility providers by 1.5%. The bill specifies that the department of health care policy and financing may, but is not required to, increase the supplemental Medicaid payments made to the providers due to the reduction. The bill authorizes moneys in the Medicaid nursing facility cash fund to be used to reimburse the general fund for increased reimbursements paid to nursing facilities for services provided to hospice patients.

Current Status Passed Senate as amended

Position Monitor

HB1330 ALL-PAYER HEALTH CLAIMS DATABASE

Sponsors Rep. Kefalas and Rep. Kagan & Sen. Morse

The bill requires the executive director of the department of health care policy and financing (executive director) to appoint an advisory committee to make recommendations regarding the creation of a Colorado all-payer health claims database for the purpose of transparent public reporting of health care information. The executive director is required to appoint an administrator to create the database. The administrator, in consultation with the advisory committee, shall create the database if sufficient gifts, grants, and donations are received on or before January 1, 2012, to pay for the creation and maintenance of the database. The executive director shall promulgate rules to create and maintain the database. The data shall be made available to the public, state agencies, and private entities consistent with privacy laws. The advisory committee is scheduled to sunset July 1, 2016.

Current Status 2nd reading in House

Position Monitor

HB1335 BOCES SCHOOL FOOD PROGRAM

Sponsors Rep. Massey

The bill authorizes each board of cooperative services (BOCES) to maintain, equip, and operate a food-service facility as a school food authority. The bill creates the BOCES healthy food grant program in the department of education to:

- (1) Make grants available to BOCES that maintain, equip, and operate food-service facilities as school food authorities; and
- (2) require each BOCES that receives a grant from the program to procure and distribute to schools of its constituent school districts only food and beverages that satisfy certain nutritional standards. The bill sets forth an application process for the program and permissible uses of grant moneys. The BOCES healthy food grant program cash fund is created, and the department is authorized to expend no more than 10% of the moneys appropriated to the fund to offset the direct and indirect costs incurred by the department in implementing the program. The department is required to prepare and submit to the education committees of the house of representatives and the senate a report that describes the activities carried out under the program and evaluates the effectiveness of the program. The state board of education is required to promulgate rules establishing policies and procedures for the administration of the program. The program is repealed, effective July 1, 2015.

Current Status House Appropriations

Position Pending Review

SB056 IMMUNIZATION INFORMATION SCHOOL CHILDREN

Sponsors Sen. Boyd & Rep. Riesberg

The bill requires the state charter school institute and each school district board of education to adopt and implement a policy requiring each school to annually provide parents and legal guardians with a paper or email copy of a standardized immunization document developed and updated, as instructed, by the department of public health and environment.

Current Status House Education

Position Support

SB058 **ELIGIBILITY NURSING TEACHER LOAN FORGIVE**

Sponsors Sen. Tapia & Rep. Ferrandino

The bill changes certain eligibility requirements for the nursing teacher loan forgiveness pilot program, including reducing the required employment in teaching from full time to half time and allowing the teaching position to begin within 4 years after the completion of the nursing teacher's advanced degree.

Current Status House Education

Position Support

SB068 **COLORADO WORKS STREAMLINING ELIGIBILITY**

Sponsors Sen. Boyd & Rep. Massey

*Section 1 of the bill replaces the statutorily required verification of child immunizations as a condition of eligibility to participate in the Colorado works program (works program) with the requirement that a county department of social services distribute information concerning vaccinations to all applicants for the works program. Section 6 repeals the verification of child immunizations as a condition of eligibility for the works program.

*Section 2 amends the term "assistance" to align with the use of the term in current law and under department of human services (department) rule and adds a definition for "guardian" to the works program. The defined term "specified caretaker relative" is amended to "specified caretaker" to include a person who exercises responsibility for a dependent child in his or her home.

*Section 3 allows a person or a family to receive assistance upon verification of pregnancy instead of at the sixth month of pregnancy and makes conforming amendments relating to a "specified caretaker".

*Section 3 also removes the asset test for eligibility for the works program and prohibits the use of an asset test as a condition of eligibility for the works program.

*Section 4 makes conforming amendments to align the statutes with defined terms.

*Section 5 removes the statutory language concerning the standard of need for eligibility for basic cash assistance and the calculation of the amount of a basic cash assistance grant. The department, through the state board of human services, shall promulgate rules concerning the standard of need for eligibility for a basic cash assistance grant and that standard of need shall not be less than the basis for standard of need currently in statute.

The department shall also promulgate rules concerning the calculation for determining the amount of a participant's basic cash assistance grant, and that calculation shall include an earned income disregard. The department shall ensure that the earned income disregard and the calculation for a basic cash assistance grant do not result in an applicant or participant having or receiving fewer financial resources than the applicant or participant would have had or received under specified previous law or rule. Certain provisions in current law are relocated within the statute amended in this bill section.

*Section 7 provides for an effective date of January 1, 2011, for the provisions of the bill.

Current Status Passed Senate as amended

Position Monitor

SB073 **NURSE HOME VISITOR PROGRAM ADMINISTRATION**

Sponsors Sen. Tapia & Rep. McFadyen

Modifies and clarifies the roles of the department of public health and environment and the health sciences facility at the university of Colorado with regard to the nurse home visitor program, which receives moneys from tobacco litigation settlement funds. Specifically, the bill: clarifies that the term "health sciences facility" means the Anschutz medical campus, or a successor facility at the university of Colorado health sciences center; designates the health sciences facility, rather than the department, as the recipient of applications for the program; requires the state board of health to consult with the health sciences facility when promulgating rules regarding program applications; clarifies that the health sciences facility shall monitor and evaluate the implementation, operation, and effectiveness of the program; requires program contractors and entities administering the program to cooperate with the health sciences facility and the department in preparation of those reports; requires the nurse home visitor program to pay the annual program evaluation costs incurred by the department and the health sciences facility; and clarifies that, except for duties related to program reports, the role of the department under the program is limited to financial administration, and limits to one full-time equivalent employee the annual amount that the department may retain from the nurse home visitor program fund for costs in executing this duty.

Current Status Senate Appropriations

Position Monitor

SB081 **FARM TO SCHOOL INTERAGENCY TASK FORCE**

Sponsors Sen. Sandoval & Rep. Solano

In order to provide for the development of a state farm-to-school program, which will promote the consumption of nutritional foods provided by state agricultural producers, the bill creates the "Farm-toSchool Healthy Kids Act", which establishes the interagency farm-to-school coordination task force.

The composition of the task force consists of:

- * The Commissioner of Education or designee of the Commissioner;
- * The Executive Director of CDPHE or designee of the director;
- * Four representatives of school food service directors;
- * One Representative of a parent organization;
- * One Representative of fruit and vegetable organizations;
- * One Representative of cattle ranching organizations;
- * One Representative of the Western Dairy Association;
- * One Representative of a food distribution association.

The bill sets a future repeal date of December 13, 2013.

Current Status House Education

Position Monitor

SB106 **FOOD SYSTEMS ADVISORY COUNCIL**

Sponsors Sen. Bacon & Rep. Looper

The bill creates a 13-member food systems advisory council (council). The executive directors or their designees from the departments of public health and environment, agriculture, human services, education, and local affairs are 5 of the members of the council. The remaining members are appointed by the Governor's office of Boards and Commissions. Those appointed members are representatives of 6 functional areas: Nutrition and health; agricultural production; food wholesalers and food retailers; anti-hunger and food assistance programs; economic development; and local government. The purposes of the council are to:

- * Identify and use existing studies of the food system and examples of best practices, whenever possible;
- * Collaborate with other task forces, committees, or organizations with similar purposes;
- * Develop local food policies for Colorado that contribute to building robust, resilient, and long-term local food economies;
- * Develop policy recommendations regarding hunger and food access;
- * Support the efforts of, be a resource to, and receive input from local and regional food policy councils in the state;
- * Advise and recommend actions that state and local governments, businesses, agriculture, and consumers can take to build robust, resilient, and long-term local food economies. The bill lists several policy issues that the council will consider and study. The council may appoint subcommittees in the following areas: Local and regional food councils, local government, and school districts. The council may also appoint other subcommittees. The council may accept gifts, grants, donations, or federal funds to fund the work of the council. The council will annually report its findings and recommendations, including proposals for legislation or for administrative action, to the general assembly, the governor, and the commissioner of agriculture. As an advisory committee, the council will undergo a sunset review and be repealed, effective July 1, 2013, unless extended by the general assembly.

Current Status Senate Appropriations

Position Monitor

SB109 **MEDICAL MARIJUANA DOCTOR PATIENT RELATIONS**

Sponsors Sens. Romer and Spence & Reps. Massey and McCann

Under the bill, the department of public health and environment (department) will promulgate new rules related to standards for issuing registry identification cards, documentation for physicians who prescribe medical marijuana, and sanctions for physicians who violate the bill. A physician who certifies that a patient can use medical marijuana shall certify certain information to the department and maintain a separate record-keeping system for his or her medical marijuana patients. A physician who certifies that a patient can use medical marijuana shall not receive remuneration from or offer it to a primary caregiver, distributor, or any other provider of medical marijuana. The bill creates a medical marijuana review board (board) that will consider requests by nonveteran patients under 21 years of age who want to be registered medical marijuana patients. For a patient who is under 21 years of age to become a registered medical marijuana patient, a majority of the board must determine that the patient has a debilitating medical condition and could benefit from the use of medical marijuana. The bill adds the medical marijuana program to the list of statutes that involve medical records.

Current Status Passed House as amended

Position Monitor

SB110 PRIMARY SEAT BELT LAW

Sponsors Sen. Williams & Rep. Ryden

Under current law, failure to wear a restraining device in a vehicle is a secondary offense. The bill makes failure to wear a restraining device in a vehicle a primary offense and punishable as a class B traffic infraction. For a law enforcement officer to stop a driver for a restraining device violation, the officer must clearly observe the restraining device violation and be able to articulate that the restraining device was unfastened. If a person charged with a restraining device violation produces a bona fide written statement by a physician certifying that physical disability makes restraint by a safety belt system inappropriate, the charge will be dismissed. The bill increases fines for restraining device violations. The bill modifies the age and height requirements for certain children who are otherwise required to be fastened in a child restraint system. The general assembly states its intent that the statutory prohibition against profiling be strictly observed by each law enforcement officer who stops or contemplates the stop of a motor vehicle driver for an alleged restraining device violation.

Current Status 2nd reading in Senate

Position Support

SB115 FACILITIES MAY DONATE UNUSED MEDICATIONS

Sponsors Sen. Tochtrop & Rep. Primavera

The bill deletes the requirement that medications be donated by a patient, resident, or the patient's or resident's next of kin before allowing a licensed health care facility to donate the unused medications to another patient in the facility or to a nonprofit entity. Currently, medications in the possession of a facility are destroyed when the patient dies or is discharged if the facility is not able to get permission for the donation.

Current Status House Health & Human Services

Position Monitor

SB117 MEDICAID OVER-THE-COUNTER MEDICINES

Sponsors Sen. Foster & Rep. Primavera

The bill adds over-the-counter medications identified through the drug utilization review process to services provided under medicaid when the medications are prescribed by a licensed practitioner or a qualified licensed pharmacist. The medical services board is required to adopt rules to allow pharmacies to be reimbursed for dispensing the specified medications to medicaid recipients and to identify the standards for qualified pharmacists. Licensed pharmacists are required to consult with the recipient and, when appropriate, refer the recipient to appropriate health care professionals.

Current Status Senate Appropriations

Position Monitor

Sponsors

Sen. Carroll M. & Rep. Ryden

Pursuant to the "Michael Skolnik Medical Transparency Act", enacted in 2007, physicians licensed in Colorado are required to report information pertaining to their practice history, including the following:

- *The physician's name, address, and telephone number;
- *Information pertaining to any license to practice medicine held by the physician at any time;
- *Any board certifications and specialties;
- *Any affiliations with hospitals or health care facilities;
- *Any health care-related business ownership interests or employment contracts if the aggregate value of the contracts exceeds \$5,000 annually;
- *Any public disciplinary action taken by the state board or the regulatory body of another state or country;
- *Any agreement or stipulation to temporarily cease or restrict practice or any board order restricting or suspending the physician's license;
- *Any final action resulting in an involuntary limitation or probationary status on, or reduction, nonrenewal, denial, revocation, or suspension of the physician's medical staff membership or clinical privileges at a hospital or health care facility on or after September 1, 1990;
- *Any involuntary surrender of the physician's United States drug enforcement administration registration;
- *Any final criminal conviction or plea arrangement relating to the commission or alleged commission of a felony or crime of moral turpitude;
- *Any final judgment, settlement, or arbitration award in a medical malpractice claim; and
- *The refusal of an insurance carrier to issue a medical malpractice insurance policy to the physician due to past claims experience.

The bill enacts the "Michael Skolnik Medical Transparency Act of 2010" to extend similar reporting requirements, as applicable, to the following health care professionals who apply for a new license, certification, or registration or to renew, reinstate, or reactivate a license, certification, or registration, on or after July 1, 2011:

- *Audiologists and licensed hearing aid providers;
- *Acupuncturists;
- *Podiatrists;
- *Chiropractors;
- *Dentists and dental hygienists;
- *Physician assistants;
- *Direct-entry midwives;
- *Practical nurses, professional nurses, and advanced practice nurses;
- *Optometrists;
- *Physical therapists; and
- *Psychologists, social workers, marriage and family therapists, professional counselors, addiction counselors, and unlicensed psychotherapists.

The reporting requirements, as enacted in the original "Michael Skolnik Medical Transparency Act" of 2007, are modified to require all impacted professionals, including physicians, to:

- *Report the location of the applicant's practice if different than the applicant's address of record;
- *Report information about the education and training the person received pertaining to his or her profession;
- *Provide information about other licenses, certifications, or registrations to practice the applicant's profession that were issued in the previous 10 years, rather than those issued at any time in the person's career; and
- *Comply with their responsibility to report adverse actions to the appropriate regulatory body as otherwise required by law.

The requirement to report the license number, type, original issue date, last renewal date, and expiration date of any other license, certification, or registration issued to the person is eliminated. In addition to the information required to be reported, an impacted professional is also permitted to submit information pertaining to relevant awards and recognitions received by the person.

Current Status Senate Appropriations

Position Monitor

SB153 BEHAVIORAL HEALTH SCREENING AND EFFICIENCY

Sponsors Sen. Boyd

The bill sets forth a legislative declaration concerning the importance of creating a comprehensive approach to behavioral health issues, including mental health and substance use disorders, and establishes the behavioral health transformation council to develop strategies for implementing a systemic transformation of the behavioral health care system. The governor is directed to appoint a behavioral health transformation council whose goal it is to implement a systemic transformation of the behavioral health system. The bill further establishes the behavioral health screening in the criminal justice system planning group (planning group) to determine a standard set of data elements and outlines the membership and duties of the planning group.

Current Status Senate Appropriations

Position Monitor

SB169 PROVIDER FEE ENHANCED MATCH USE

Sponsors Sen. Boyd & Rep. Riesberg

For the 2009-10 and 2010-11 state fiscal years, the bill authorizes the amount of increased federal financial participation, pursuant to the federal "American Recovery and Reinvestment Act of 2009" or other federal act, generated from appropriations out of the hospital provider fee cash fund to be used to offset other general fund appropriations for Medicaid services. The bill recognizes that moneys in the health care expansion fund have been used to offset general fund expenditures for Medicaid services. The bill specifies that the first \$41.4 million of increased federal financial participation shall be transferred to the health care expansion fund and that any amount in excess of \$41.4 million be appropriated for Medicaid services.

Current Status Senate Health & Human Services

Position Pending review

Sponsors

Sen. Steadman & Rep. Primavera

The bill establishes standards for limited services clinics operated within a retail store, supermarket, pharmacy, or similar retail outlet that is not affiliated with a primary care provider and that offers episodic, acute care for minor illnesses and injuries. A limited services clinic is required to:

- *Develop policies and procedures that identify the limited services the clinic can provide;
- *Restrict services to persons who are at least 2 years of age;
- *Review a patient's immunization status in the Colorado immunization information system prior to administering a vaccination;
- *Report to the Colorado immunization information system regarding vaccinations it administers to children;
- *Develop a policy for addressing acute vaccine reactions;
- *Follow accepted and age-appropriate clinical practice guidelines for diagnosing and treating patients in each of its limited services categories and determining when a patient's needs are beyond the scope of services that the clinic provides;
- *Develop policies and procedures for referring patients and maintain a roster of primary care providers in the geographic area that have requested inclusion on the roster and are accepting new patients from a limited services clinic;
- *Provide copies of medical records and test results to the patient and, if the patient consents, transmit medical records and test results to the patient's primary care provider, at no cost to the patient.

Current Status

Senate Health & Human Services

Position

Pending review