

Second Regular Session
Seventieth General Assembly
STATE OF COLORADO

INTRODUCED

LLS NO. 16-0391.01 Jennifer Berman x3286

SENATE BILL 16-069

SENATE SPONSORSHIP

Garcia, Newell, Donovan, Lambert, Lundberg, Guzman, Kerr, Merrifield, Ulibarri

HOUSE SPONSORSHIP

Pabon, Williams, Esgar, Hamner, Lebsock, Salazar, Young

Senate Committees
Health & Human Services

House Committees

A BILL FOR AN ACT

101 CONCERNING MEASURES TO PROVIDE COMMUNITY-BASED
102 OUT-OF-HOSPITAL MEDICAL SERVICES.

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)

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

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
Capital letters indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.

"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.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, 25-3.5-103, **add** (4.3), (4.5), and (4.7) as follows:

25-3.5-103. Definitions. As used in this article, unless the context otherwise requires:

(4.3) "COMMUNITY PARAMEDIC" MEANS AN EMERGENCY MEDICAL SERVICE PROVIDER WHO OBTAINS AN ENDORSEMENT IN COMMUNITY PARAMEDICINE PURSUANT TO SECTION 25-3.5-203.5.

(4.5) (a) "COMMUNITY PARAMEDICINE" MEANS THE PROVISION OF CERTAIN OUT-OF-HOSPITAL MEDICAL SERVICES, AS DETERMINED BY RULE, THAT A COMMUNITY PARAMEDIC MAY PROVIDE.

(b) THE DIRECTOR MAY, BY RULE, FURTHER DEFINE COMMUNITY PARAMEDICINE AS NECESSARY TO IMPLEMENT SECTION 25-3.5-203.5.

(4.7) "COUNCIL" MEANS THE EMERGENCY MEDICAL AND TRAUMA SERVICES ADVISORY COUNCIL CREATED IN SECTION 25-3.5-104.

SECTION 2. In Colorado Revised Statutes, **add** 25-3.5-203.5 as

1 follows:

2 **25-3.5-203.5. Community paramedic endorsement - rules.**

3 (1) (a) (I) ON OR BEFORE JULY 1, 2017, THE DIRECTOR OR, IF THE
4 DIRECTOR IS NOT A PHYSICIAN, THE CHIEF MEDICAL OFFICER SHALL ADOPT
5 RULES IN ACCORDANCE WITH ARTICLE 4 OF TITLE 24, C.R.S., CONCERNING
6 THE SCOPE OF PRACTICE OF COMMUNITY PARAMEDICINE AND THE
7 STANDARDS FOR THE DEPARTMENT'S ISSUANCE OF AN ENDORSEMENT IN
8 COMMUNITY PARAMEDICINE TO AN EMERGENCY MEDICAL SERVICE
9 PROVIDER.

10 (II) THE RULES MUST ESTABLISH CONTINUING COMPETENCY
11 STANDARDS FOR MAINTAINING A COMMUNITY PARAMEDIC ENDORSEMENT.

12 (b) THE DEPARTMENT SHALL ISSUE A COMMUNITY PARAMEDIC
13 ENDORSEMENT TO AN EMERGENCY MEDICAL SERVICE PROVIDER WHO
14 SATISFIES THE REQUIREMENTS FOR ENDORSEMENT AS SPECIFIED IN THE
15 RULES.

16 (2) THE RULES MUST ESTABLISH:

17 (a) THE TASKS AND PROCEDURES THAT AN EMERGENCY MEDICAL
18 SERVICE PROVIDER WITH A COMMUNITY PARAMEDIC ENDORSEMENT IS
19 AUTHORIZED TO PERFORM, INCLUDING:

20 (I) ANY OF THE SERVICES THAT A COMMUNITY ASSISTANCE
21 REFERRAL AND EDUCATION SERVICES (CARES) PROGRAM MAY PROVIDE
22 PURSUANT TO SECTION 25-3.5-1103 (2);

23 (II) AN INITIAL COMPREHENSIVE ASSESSMENT OF THE PATIENT AND
24 ANY SUBSEQUENT ASSESSMENTS, AS NEEDED;

25 (III) MEDICAL INTERVENTIONS;

26 (IV) CARE COORDINATION;

27 (V) RESOURCE NAVIGATION;

1 (VI) PATIENT EDUCATION;
2 (VII) INVENTORY AND ADMINISTRATION OF MEDICATIONS; AND
3 (VIII) GATHERING OF LABORATORY AND DIAGNOSTIC DATA; AND
4 (b) STANDARDS FOR VERIFYING AN EMERGENCY MEDICAL SERVICE
5 PROVIDER'S COMPETENCY TO BE ENDORSED AS A COMMUNITY PARAMEDIC,
6 INCLUDING A REQUIREMENT THAT THE CHIEF MEDICAL OFFICER OR THE
7 CHIEF MEDICAL OFFICER'S DESIGNEE VERIFY THAT THE EMERGENCY
8 MEDICAL SERVICE PROVIDER HAS OBTAINED FROM AN ACCREDITED
9 COLLEGE OR UNIVERSITY A CERTIFICATE OF COMPLETION FOR A COURSE IN
10 COMMUNITY PARAMEDICINE WITH COMPETENCY VERIFIED BY A PASSING
11 SCORE EITHER ON THE CERTIFIED COMMUNITY PARAMEDIC EXAMINATION
12 PROVIDED BY THE BOARD FOR CRITICAL CARE TRANSPORT PARAMEDIC
13 CERTIFICATION, OR ITS SUCCESSOR ENTITY, OR ON ANOTHER NATIONAL
14 EXAMINATION OFFERED FOR CERTIFYING COMPETENCY TO SERVE AS A
15 COMMUNITY PARAMEDIC.

16 (3) RULES ADOPTED UNDER THIS SECTION SUPERSEDE ANY RULES
17 OF THE COLORADO MEDICAL BOARD REGARDING THE MATTERS SET FORTH
18 IN THIS PART 2.

19 **SECTION 3.** In Colorado Revised Statutes, **add** parts 11 and 12
20 to article 3.5 of title 25 as follows:

21 PART 11
22 COMMUNITY ASSISTANCE REFERRAL AND
23 EDUCATION SERVICES (CARES) PROGRAM

24 **25-3.5-1101. Short title.** THE SHORT TITLE OF THIS PART 11 IS THE
25 "COMMUNITY ASSISTANCE REFERRAL AND EDUCATION SERVICES
26 (CARES) PROGRAM ACT".

27 **25-3.5-1102. Definitions.** AS USED IN THIS PART 11, UNLESS THE

1 CONTEXT OTHERWISE REQUIRES:

2 (1) "AUTHORIZED ENTITY" MEANS:

3 (a) A LICENSED AMBULANCE SERVICE;

4 (b) A FIRE DEPARTMENT OF A TOWN, CITY, OR CITY AND COUNTY;

5 OR

6 (c) A FIRE PROTECTION DISTRICT ORGANIZED IN ACCORDANCE
7 WITH PART 3 OF ARTICLE 1 OF TITLE 32, C.R.S.

8 (2) "MEDICAL DIRECTOR" MEANS A LICENSED PHYSICIAN IN GOOD
9 STANDING WHO:

10 (a) AUTHORIZES AND DIRECTS INDIVIDUALS WHO PERFORM ACTS
11 ON BEHALF OF A CARES PROGRAM; AND

12 (b) IS IDENTIFIED AS BEING RESPONSIBLE TO ASSURE THE
13 COMPETENCY OF INDIVIDUALS WHO PERFORM ACTS ON BEHALF OF A
14 CARES PROGRAM.

15 (3) "PROGRAM" OR "CARES PROGRAM" MEANS A COMMUNITY
16 ASSISTANCE REFERRAL AND EDUCATION SERVICES PROGRAM ESTABLISHED
17 IN ACCORDANCE WITH THIS PART 11.

18 **25-3.5-1103. Community assistance referral and education**
19 **services programs - authorization - scope.** (1) TO IMPROVE THE
20 HEALTH OF RESIDENTS WITHIN ITS JURISDICTION, PREVENT ILLNESS AND
21 INJURY, OR REDUCE THE INCIDENCE OF 911 CALLS AND HOSPITAL
22 EMERGENCY DEPARTMENT VISITS MADE FOR THE PURPOSE OF OBTAINING
23 NONEMERGENCY, NONURGENT MEDICAL CARE OR SERVICES, AN
24 AUTHORIZED ENTITY MAY ESTABLISH A COMMUNITY ASSISTANCE
25 REFERRAL AND EDUCATION SERVICES PROGRAM TO PROVIDE COMMUNITY
26 OUTREACH AND HEALTH EDUCATION TO RESIDENTS WITHIN THE
27 AUTHORIZED ENTITY'S JURISDICTION.

1 (2) SUBJECT TO THE SUPERVISION OF A MEDICAL DIRECTOR, AN
2 AUTHORIZED ENTITY OPERATING A PROGRAM MAY:

3 (a) PROVIDE THE FOLLOWING PROGRAM SERVICES:

4 (I) COMMUNITY OUTREACH ON HEALTH ISSUES AND SERVICES;

5 (II) HEALTH EDUCATION; AND

6 (III) REFERRALS FOR:

7 (A) LOW-COST MEDICATION PROGRAMS; AND

8 (B) ALTERNATIVE RESOURCES TO THE 911 SYSTEM; AND

9 (b) PARTNER WITH HOSPITALS, LICENSED HOME CARE AGENCIES,
10 OTHER MEDICAL CARE FACILITIES INCLUDING LICENSED COMMUNITY
11 PARAMEDICINE AGENCIES AS DEFINED IN SECTION 25-3.5-1201 (1),
12 PRIMARY CARE PROVIDERS, OTHER HEALTH CARE PROFESSIONALS, OR
13 SOCIAL SERVICES AGENCIES TO PROVIDE PROGRAM SERVICES AND ENSURE
14 NONDUPLICATION OF SERVICES.

15 (3) AN AUTHORIZED ENTITY OPERATING A PROGRAM SHALL:

16 (a) HIRE OR CONTRACT WITH ONE OR MORE OF THE FOLLOWING
17 LICENSED PROFESSIONALS TO PROVIDE PROGRAM SERVICES:

18 (I) NURSE PRACTITIONER;

19 (II) REGISTERED NURSE;

20 (III) ADVANCED PRACTICE NURSE;

21 (IV) PHYSICIAN ASSISTANT;

22 (V) PHYSICIAN;

23 (VI) PHYSICAL THERAPIST; OR

24 (VII) OCCUPATIONAL THERAPIST; AND

25 (b) PROVIDE SERVICES BY DISPATCHING GROUPS OF TWO OR MORE
26 INDIVIDUALS, WITH EACH GROUP CONTAINING OR ACCOMPANIED BY A
27 LICENSED PRACTITIONER WHO IS COMPETENT TO PROVIDE SERVICES IN THE

1 SCOPE OF PRACTICE THAT MEETS THE NEEDS OF THE RESIDENT BEING
2 SERVED.

3 (4) THE COUNCIL MAY ESTABLISH GUIDELINES FOR THE
4 DEVELOPMENT AND IMPLEMENTATION OF A PROGRAM.

5 **25-3.5-1104. Reports.** (1) (a) IF AN AUTHORIZED ENTITY
6 DEVELOPS A PROGRAM UNDER THIS ARTICLE, THE AUTHORIZED ENTITY
7 SHALL REPORT TO THE COUNCIL ON THE PROGRESS OF THE PROGRAM ON OR
8 BEFORE DECEMBER 31 IN THE YEAR FOLLOWING THE YEAR IN WHICH THE
9 PROGRAM COMMENCED AND ON OR BEFORE DECEMBER 31 OF EACH
10 SUBSEQUENT YEAR IN WHICH THE PROGRAM CONTINUES TO OPERATE.

11 (b) AN AUTHORIZED ENTITY'S REPORT MUST INCLUDE:

12 (I) THE NUMBER OF RESIDENTS WHO HAVE USED PROGRAM
13 SERVICES AND THE TYPES OF PROGRAM SERVICES USED;

14 (II) IF PRACTICABLE, A MEASUREMENT OF ANY REDUCTION IN THE
15 USE OF THE 911 SYSTEM FOR NONEMERGENCY, NONURGENT MEDICAL
16 ASSISTANCE BY RESIDENTS WITHIN THE AUTHORIZED ENTITY'S
17 JURISDICTION; AND

18 (III) IF PRACTICABLE, A MEASUREMENT OF ANY REDUCTION IN
19 VISITS TO THE EMERGENCY DEPARTMENT IN A HOSPITAL FOR
20 NONEMERGENCY, NONURGENT MEDICAL ASSISTANCE BY RESIDENTS
21 WITHIN THE AUTHORIZED ENTITY'S JURISDICTION.

22 (c) AN AUTHORIZED ENTITY'S REPORT PURSUANT TO THIS SECTION
23 MUST NOT INCLUDE ANY PERSONALLY IDENTIFIABLE INFORMATION
24 CONCERNING A PROGRAM CLIENT OR PROSPECTIVE CLIENT.

25 (2) ON OR BEFORE MARCH 31 OF EACH YEAR, THE COUNCIL SHALL
26 COMPILE ANY ANNUAL REPORTS RECEIVED FROM AUTHORIZED ENTITIES IN
27 THE PREVIOUS YEAR INTO A SINGLE REPORT CONCERNING THE EFFICACY OF

1 PROGRAMS THROUGHOUT THE STATE AND SHALL POST THE REPORT ON ITS
2 WEBSITE.

3 PART 12

4 COMMUNITY PARAMEDICINE AGENCIES

5 **25-3.5-1201. Definitions.** AS USED IN THIS PART 12, UNLESS THE
6 CONTEXT OTHERWISE REQUIRES:

7 (1) "COMMUNITY PARAMEDICINE AGENCY" OR "AGENCY" MEANS
8 A PARTNERSHIP, CORPORATION, NONPROFIT ENTITY, SPECIAL DISTRICT, OR
9 OTHER LEGAL ENTITY THAT MANAGES AND OFFERS, DIRECTLY OR BY
10 CONTRACT, COMMUNITY PARAMEDICINE SERVICES.

11 (2) "MANAGER" OR "ADMINISTRATOR" MEANS ANY PERSON WHO
12 CONTROLS AND SUPERVISES OR OFFERS OR ATTEMPTS TO CONTROL AND
13 SUPERVISE THE DAY-TO-DAY OPERATIONS OF A COMMUNITY
14 PARAMEDICINE AGENCY.

15 (3) "MEDICAL DIRECTOR" MEANS A LICENSED PHYSICIAN IN GOOD
16 STANDING WHO:

17 (a) AUTHORIZES AND DIRECTS CERTIFICATE HOLDERS WHO
18 PERFORM ACTS ON BEHALF OF THE COMMUNITY PARAMEDICINE AGENCY;
19 AND

20 (b) IS IDENTIFIED AS BEING RESPONSIBLE TO ASSURE THE
21 COMPETENCY OF THE CERTIFICATE HOLDERS.

22 (4) "OWNER" MEANS AN OFFICER, DIRECTOR, GENERAL PARTNER,
23 LIMITED PARTNER, OR OTHER PERSON HAVING A FINANCIAL OR EQUITY
24 INTEREST OF TWENTY-FIVE PERCENT OR GREATER.

25 **25-3.5-1202. Community paramedicine agency license**
26 **required - rules - civil and criminal penalties - liability insurance.**

27 (1) ON OR AFTER JANUARY 1, 2018, A PERSON SHALL NOT OPERATE OR

1 MAINTAIN A COMMUNITY PARAMEDICINE AGENCY UNLESS THE PERSON HAS
2 SUBMITTED TO THE DEPARTMENT A COMPLETED APPLICATION FOR
3 LICENSURE AS A COMMUNITY PARAMEDICINE AGENCY. ON OR AFTER JULY
4 1, 2018, A PERSON SHALL NOT OPERATE OR MAINTAIN AN AGENCY
5 WITHOUT A COMMUNITY PARAMEDICINE AGENCY LICENSE ISSUED BY THE
6 DEPARTMENT.

7 (2) (a) A PERSON WHO VIOLATES SUBSECTION (1):

8 (I) IS GUILTY OF A MISDEMEANOR AND, UPON CONVICTION
9 THEREOF, SHALL BE PUNISHED BY A FINE OF NOT LESS THAN FIFTY
10 DOLLARS NOR MORE THAN FIVE HUNDRED DOLLARS; AND

11 (II) MAY BE SUBJECT TO A CIVIL PENALTY ASSESSED BY THE
12 DEPARTMENT, AFTER CONDUCTING A HEARING IN ACCORDANCE WITH
13 SECTION 24-4-105, C.R.S., OF UP TO TEN THOUSAND DOLLARS FOR EACH
14 VIOLATION OF THIS SECTION. THE DEPARTMENT SHALL TRANSMIT ALL
15 FINES COLLECTED PURSUANT TO THIS SUBPARAGRAPH (II) TO THE STATE
16 TREASURER, WHO SHALL CREDIT THE MONEYS TO THE GENERAL FUND.

17 (b) AN OWNER, MANAGER, OR ADMINISTRATOR OF AN AGENCY IS
18 SUBJECT TO THE PENALTIES IN THIS SUBSECTION (2) FOR ANY VIOLATION
19 OF SUBSECTION (1).

20 (3) A LICENSE APPLICANT SHALL SUBMIT TO THE DEPARTMENT, IN
21 THE MANNER DETERMINED BY THE BOARD BY RULE, PROOF THAT THE
22 AGENCY AND ANY STAFF THAT IT EMPLOYS OR CONTRACTS IS COVERED BY
23 GENERAL LIABILITY INSURANCE IN AN AMOUNT DETERMINED BY THE
24 BOARD BY RULE.

25 **25-3.5-1203. Minimum standards for community**
26 **paramedicine agencies - rules.** (1) IN ADDITION TO THE SERVICES THAT
27 THE BOARD, BY RULE, AUTHORIZES A COMMUNITY PARAMEDICINE AGENCY

1 TO PERFORM, AN AGENCY MAY PERFORM ANY OF THE SERVICES THAT MAY
2 BE PROVIDED THROUGH A CARES PROGRAM PURSUANT TO SECTION
3 25-3.5-1103 (2). ON OR BEFORE JULY 1, 2017, THE BOARD SHALL UTILIZE
4 THE COMMUNITY PARAMEDICINE/MOBILE INTEGRATED HEALTHCARE TASK
5 FORCE REPORT, DATED OCTOBER 8, 2015, TO PROMULGATE RULES
6 PROVIDING MINIMUM STANDARDS FOR THE OPERATION OF AN AGENCY
7 WITHIN THE STATE. THE RULES MUST INCLUDE THE FOLLOWING:

8 (a) A REQUIREMENT THAT THE AGENCY BE SUPERVISED BY A
9 MEDICAL DIRECTOR;

10 (b) INSPECTION OF AGENCIES BY THE DEPARTMENT OR THE
11 DEPARTMENT'S DESIGNATED REPRESENTATIVE;

12 (c) MINIMUM EDUCATIONAL, TRAINING, AND EXPERIENCE
13 STANDARDS FOR THE ADMINISTRATOR AND STAFF OF AN AGENCY,
14 INCLUDING A REQUIREMENT THAT THE ADMINISTRATOR AND STAFF BE OF
15 GOOD MORAL CHARACTER;

16 (d) FEES FOR AGENCY APPLICATIONS AND LICENSURE BASED ON
17 THE DEPARTMENT'S DIRECT AND INDIRECT COSTS IN IMPLEMENTING THIS
18 PART 12. THE DEPARTMENT SHALL TRANSMIT THE FEES TO THE STATE
19 TREASURER, WHO SHALL CREDIT THE FEES TO THE COMMUNITY
20 PARAMEDICINE AGENCIES CASH FUND CREATED IN SECTION 25-3.5-1204.

21 (e) THE AMOUNT OF GENERAL LIABILITY INSURANCE COVERAGE
22 THAT AN AGENCY SHALL MAINTAIN AND THE MANNER IN WHICH AN
23 AGENCY SHALL DEMONSTRATE PROOF OF INSURANCE TO THE
24 DEPARTMENT. THE BOARD MAY ESTABLISH BY RULE THAT AN AGENCY
25 MAY OBTAIN A SURETY BOND IN LIEU OF LIABILITY INSURANCE COVERAGE.

26 (f) FACTORS FOR AGENCIES TO CONSIDER WHEN DETERMINING
27 WHETHER A CONVICTION OF AN OFFENSE OR A PLEA OF GUILTY OR NOLO

1 CONTENDERE TO AN OFFENSE DISQUALIFIES A PERSON FROM EMPLOYMENT
2 WITH THE AGENCY. THE BOARD MAY DETERMINE WHICH OFFENSES
3 REQUIRE CONSIDERATION OF THE FACTORS.

4 (g) A DETERMINATION OF WHO IS AN ELIGIBLE RECIPIENT OF
5 COMMUNITY PARAMEDICINE SERVICES;

6 (h) ESTABLISHING OCCURRENCE REPORTING REQUIREMENTS
7 PURSUANT TO SECTION 25-1-124; AND

8 (i) REQUIREMENTS FOR RETAINING RECORDS, INCLUDING THE TIME
9 THAT AGENCIES MUST MAINTAIN RECORDS FOR INSPECTION BY THE
10 DEPARTMENT.

11 **25-3.5-1204. Community paramedicine agencies cash fund -**
12 **created.** THERE IS CREATED THE COMMUNITY PARAMEDICINE AGENCIES
13 CASH FUND, REFERRED TO IN THIS SECTION AS THE "FUND". THE
14 DEPARTMENT SHALL TRANSMIT FEES COLLECTED PURSUANT TO THIS PART
15 12 TO THE STATE TREASURER FOR DEPOSIT IN THE FUND. THE MONEY IN
16 THE FUND IS SUBJECT TO ANNUAL APPROPRIATION BY THE GENERAL
17 ASSEMBLY TO THE DEPARTMENT FOR THE DEPARTMENT'S DIRECT AND
18 INDIRECT COSTS IN IMPLEMENTING AND ADMINISTERING THIS PART 12.
19 ANY UNENCUMBERED OR UNEXPENDED MONEY IN THE FUND AT THE END
20 OF A FISCAL YEAR REMAINS IN THE FUND AND SHALL NOT BE CREDITED OR
21 TRANSFERRED TO THE GENERAL FUND OR ANY OTHER FUND.

22 **25-3.5-1205. License - application - inspection - criminal**
23 **history records check - issuance.** (1) A COMMUNITY PARAMEDICINE
24 AGENCY LICENSE EXPIRES AFTER ONE YEAR. THE DEPARTMENT SHALL
25 DETERMINE THE FORM AND MANNER OF INITIAL AND RENEWAL LICENSE
26 APPLICATIONS.

27 (2) (a) THE DEPARTMENT SHALL INSPECT AN AGENCY AS IT DEEMS

1 NECESSARY TO ENSURE THE HEALTH, SAFETY, AND WELFARE OF AGENCY
2 CONSUMERS. AN AGENCY SHALL SUBMIT IN WRITING, IN A FORM AND
3 MANNER PRESCRIBED BY THE DEPARTMENT, A PLAN DETAILING THE
4 MEASURES THAT THE AGENCY WILL TAKE TO CORRECT ANY VIOLATIONS
5 FOUND BY THE DEPARTMENT AS A RESULT OF AN INSPECTION.

6 (b) THE DEPARTMENT SHALL KEEP ALL MEDICAL RECORDS AND
7 PERSONALLY IDENTIFYING INFORMATION OBTAINED DURING AN
8 INSPECTION OF AN AGENCY CONFIDENTIAL. ALL RECORDS AND
9 INFORMATION OBTAINED BY THE DEPARTMENT THROUGH AN INSPECTION
10 ARE EXEMPT FROM DISCLOSURE PURSUANT TO SECTIONS 24-72-204,
11 C.R.S., AND 25-1-124.

12 (3) (a) (I) (A) WITH THE SUBMISSION OF AN APPLICATION FOR A
13 LICENSE PURSUANT TO THIS SECTION, EACH OWNER, MANAGER, AND
14 ADMINISTRATOR OF AN AGENCY APPLYING FOR AN INITIAL OR RENEWAL
15 LICENSE SHALL SUBMIT A COMPLETE SET OF HIS OR HER FINGERPRINTS TO
16 THE COLORADO BUREAU OF INVESTIGATION FOR THE PURPOSE OF
17 CONDUCTING A STATE AND NATIONAL FINGERPRINT-BASED CRIMINAL
18 HISTORY RECORD CHECK UTILIZING THE RECORDS OF THE COLORADO
19 BUREAU OF INVESTIGATION AND THE FEDERAL BUREAU OF INVESTIGATION.
20 THE COLORADO BUREAU OF INVESTIGATION SHALL FORWARD THE
21 RESULTS OF A CRIMINAL HISTORY RECORD CHECK TO THE DEPARTMENT.

22 (B) AN OWNER, MANAGER, OR ADMINISTRATOR WHO HAS
23 PREVIOUSLY SUBMITTED FINGERPRINTS FOR STATE LICENCING PURPOSES
24 MAY REQUEST THAT THE FINGERPRINTS ON FILE BE USED.

25 (II) EACH OWNER, MANAGER, OR ADMINISTRATOR OF AN AGENCY
26 IS RESPONSIBLE FOR PAYING THE FEE ESTABLISHED BY THE COLORADO
27 BUREAU OF INVESTIGATION FOR CONDUCTING THE FINGERPRINT-BASED

1 CRIMINAL HISTORY RECORD CHECK TO THE BUREAU.

2 (III) THE DEPARTMENT MAY ACQUIRE A NAME-BASED CRIMINAL
3 HISTORY RECORD CHECK FOR AN OWNER, MANAGER, OR ADMINISTRATOR
4 WHO HAS TWICE SUBMITTED TO A FINGERPRINT-BASED CRIMINAL HISTORY
5 RECORD CHECK AND WHOSE FINGERPRINTS ARE UNCLASSIFIABLE.

6 (b) THE DEPARTMENT SHALL DENY A LICENSE OR RENEWAL OF A
7 LICENSE IF THE RESULTS OF A CRIMINAL HISTORY RECORD CHECK OF AN
8 OWNER, MANAGER, OR ADMINISTRATOR DEMONSTRATES THAT THE
9 OWNER, MANAGER, OR ADMINISTRATOR HAS BEEN CONVICTED OF A
10 FELONY OR A MISDEMEANOR INVOLVING CONDUCT THAT THE DEPARTMENT
11 DETERMINES COULD POSE A RISK TO THE HEALTH, SAFETY, OR WELFARE OF
12 COMMUNITY PARAMEDICINE CONSUMERS.

13 (c) IF AN AGENCY APPLYING FOR AN INITIAL LICENSE IS
14 TEMPORARILY UNABLE TO SATISFY ALL OF THE REQUIREMENTS FOR
15 LICENSURE, THE DEPARTMENT MAY ISSUE A PROVISIONAL LICENSE TO THE
16 AGENCY; EXCEPT THAT THE DEPARTMENT SHALL NOT ISSUE A
17 PROVISIONAL LICENSE TO AN AGENCY IF OPERATION OF THE AGENCY WILL
18 ADVERSELY AFFECT THE HEALTH, SAFETY, OR WELFARE OF THE AGENCY'S
19 CONSUMERS. THE DEPARTMENT MAY REQUIRE AN AGENCY APPLYING FOR
20 A PROVISIONAL LICENSE TO DEMONSTRATE TO THE DEPARTMENT'S
21 SATISFACTION THAT THE AGENCY IS TAKING SUFFICIENT STEPS TO SATISFY
22 ALL OF THE REQUIREMENTS FOR FULL LICENSURE. A PROVISIONAL LICENSE
23 IS VALID FOR NINETY DAYS AND MAY BE RENEWED ONE TIME AT THE
24 DEPARTMENT'S DISCRETION.

25 **25-3.5-1206. License denial - suspension - revocation.**

26 (1) UPON DENIAL OF AN APPLICATION FOR AN INITIAL LICENSE, THE
27 DEPARTMENT SHALL NOTIFY THE APPLICANT IN WRITING OF THE DENIAL BY

1 MAILING A NOTICE TO THE APPLICANT AT THE ADDRESS SHOWN ON THE
2 APPLICATION OR, IF THE APPLICANT DESIGNATES AN EMAIL ADDRESS TO
3 WHICH NOTIFICATIONS SHOULD BE SENT, BY EMAILING THE WRITTEN
4 DENIAL TO THE APPLICANT. IF AN APPLICANT, WITHIN THIRTY DAYS AFTER
5 RECEIVING THE NOTICE OF DENIAL, PETITIONS THE DEPARTMENT TO SET A
6 DATE AND PLACE FOR A HEARING, THE DEPARTMENT SHALL GRANT THE
7 APPLICANT A HEARING TO REVIEW THE DENIAL IN ACCORDANCE WITH
8 ARTICLE 4 OF TITLE 24, C.R.S.

9 (2) IF REQUESTED, THE DEPARTMENT MAY SUSPEND, REVOKE, OR
10 REFUSE TO RENEW THE LICENSE OF A COMMUNITY PARAMEDICINE AGENCY
11 THAT IS OUT OF COMPLIANCE WITH THE REQUIREMENTS OF THIS PART 12
12 OR RULES PROMULGATED PURSUANT TO THIS PART 12. BEFORE TAKING
13 FINAL ACTION TO SUSPEND, REVOKE, OR REFUSE TO RENEW A LICENSE, THE
14 DEPARTMENT SHALL CONDUCT A HEARING ON THE MATTER IN
15 ACCORDANCE WITH ARTICLE 4 OF TITLE 24, C.R.S. THE DEPARTMENT MAY
16 IMPLEMENT A SUMMARY SUSPENSION BEFORE A HEARING IN ACCORDANCE
17 WITH SECTION 24-4-104 (4) (a), C.R.S.

18 (3) AFTER CONDUCTING A HEARING ON THE MATTER IN
19 ACCORDANCE WITH ARTICLE 4 OF TITLE 24, C.R.S., THE DEPARTMENT
20 SHALL REVOKE OR REFUSE TO RENEW AN AGENCY LICENSE WHERE THE
21 OWNER, MANAGER, OR ADMINISTRATOR OF THE AGENCY HAS BEEN
22 CONVICTED OF A FELONY OR MISDEMEANOR INVOLVING CONDUCT THAT
23 THE DEPARTMENT DETERMINES COULD POSE A RISK TO THE HEALTH,
24 SAFETY, OR WELFARE OF THE AGENCY'S CONSUMERS.

25 (4) IF REQUESTED, THE DEPARTMENT MAY IMPOSE INTERMEDIATE
26 RESTRICTIONS OR CONDITIONS ON AN AGENCY THAT MAY REQUIRE THE
27 AGENCY TO:

- 1 (a) RETAIN A CONSULTANT TO ADDRESS CORRECTIVE MEASURES;
- 2 (b) BE MONITORED BY THE DEPARTMENT FOR A SPECIFIC PERIOD;
- 3 (c) PROVIDE ADDITIONAL TRAINING TO ITS EMPLOYEES, OWNERS,
- 4 MANAGERS, OR ADMINISTRATORS;
- 5 (d) COMPLY WITH A DIRECTED WRITTEN PLAN TO CORRECT THE
- 6 VIOLATION, IN ACCORDANCE WITH THE PROCEDURES ESTABLISHED UNDER
- 7 SECTION 25-27.5-108 (2) (b); OR
- 8 (e) PAY A CIVIL PENALTY, NOT TO EXCEED TEN THOUSAND
- 9 DOLLARS PER CALENDAR YEAR FOR ALL VIOLATIONS. THE DEPARTMENT,
- 10 AFTER PROVIDING THE AGENCY WITH THE OPPORTUNITY FOR A HEARING
- 11 IN ACCORDANCE WITH SECTION 24-4-105, C.R.S., ON ANY PENALTIES
- 12 ASSESSED, SHALL TRANSMIT ALL PENALTIES COLLECTED PURSUANT TO
- 13 THIS PARAGRAPH (e) TO THE STATE TREASURER, WHO SHALL CREDIT THE
- 14 MONEY TO THE GENERAL FUND. THE AGENCY MAY REQUEST, AND THE
- 15 DEPARTMENT SHALL GRANT, A STAY IN PAYMENT OF A CIVIL PENALTY
- 16 UNTIL FINAL DISPOSITION OF THE RESTRICTION OR CONDITION.

17 **SECTION 4. Safety clause.** The general assembly hereby finds,
18 determines, and declares that this act is necessary for the immediate
19 preservation of the public peace, health, and safety.