

CHAPTER 261

PUBLIC UTILITIES

SENATE BILL 21-156

BY SENATOR(S) Garcia, Bridges, Buckner, Cooke, Coram, Danielson, Donovan, Fenberg, Fields, Gardner, Ginal, Gonzales, Hansen, Hisey, Jaquez Lewis, Kirkmeyer, Kolker, Lee, Liston, Lundeen, Moreno, Pettersen, Priola, Rankin, Rodriguez, Scott, Simpson, Smallwood, Sonnenberg, Story, Winter, Woodward, Zenzinger;
 also REPRESENTATIVE(S) Mullica, Amabile, Bacon, Bernett, Bird, Bockenfeld, Duran, Exum, Froelich, Gray, Herod, Hooton, Jodeh, Kipp, Lontine, McCluskie, McCormick, Michaelson Jenet, Pelton, Roberts, Sullivan, Valdez D., Van Winkle, Garnett.

AN ACT

CONCERNING THE CREATION OF A PILOT GRANT PROGRAM FOR THE USE OF NURSES IN 911 DISPATCH TO HELP DIVERT INCOMING 911 CALLS THAT DO NOT REQUIRE EMERGENCY MEDICAL SERVICE TO OTHER TYPES OF MEDICAL CARE, AND, IN CONNECTION THEREWITH, MAKING AN APPROPRIATION.

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

SECTION 1. In Colorado Revised Statutes, **add** 24-33.5-1618 as follows:

24-33.5-1618. Nurse intake of 911 calls - pilot grant program - reporting - definitions - legislative declaration - repeal. (1) THE GENERAL ASSEMBLY HEREBY FINDS AND DECLARES THAT:

(a) ALL CITIZENS OF COLORADO DESERVE ACCESS TO HIGH-QUALITY HEALTH CARE WITHOUT HAVING THEIR ECONOMIC SECURITY AND WELL-BEING JEOPARDIZED;

(b) INCREASING HEALTH-CARE COSTS CONTINUE TO BE A TOP CONCERN FOR COLORADO FAMILIES AND THE STATE CONTINUES TO EXPLORE OPPORTUNITIES TO LOWER THOSE COSTS;

(c) THE COLORADO HEALTH INSTITUTE IN ITS 2015 "COLORADO HEALTH ACCESS SURVEY" REPORTED THAT ROUGHLY FORTY PERCENT OF EMERGENCY DEPARTMENT VISITS IN COLORADO OCCUR FOR NONEMERGENCY REASONS;

(d) THE CENTER FOR IMPROVING VALUE IN HEALTH CARE REPORTS THAT MORE THAN EIGHT HUNDRED MILLION DOLLARS COULD BE SAVED EACH YEAR IN

Capital letters or bold & italic numbers indicate new material added to existing law; dashes through words or numbers indicate deletions from existing law and such material is not part of the act.

COLORADO BY TREATING NONEMERGENCY HEALTH-CARE ISSUES THROUGH VISITS TO A DOCTOR'S OFFICE, A CLINIC, OR AN URGENT CARE SETTING INSTEAD OF THROUGH EMERGENCY DEPARTMENT VISITS;

(e) THE OFFICE OF THE ASSISTANT SECRETARY FOR PREPAREDNESS AND RESPONSE IN THE UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES DETERMINED THAT THE IMPLEMENTATION OF INNOVATIVE PROGRAMS THAT FOCUS ON TREATING INDIVIDUALS WITH NONEMERGENCY HEALTH-CARE NEEDS IN HEALTH-CARE SETTINGS OTHER THAN EMERGENCY DEPARTMENTS CAN SAVE UP TO FIVE HUNDRED SIXTY MILLION DOLLARS IN MEDICARE COSTS;

(f) BY IMPLEMENTING A PROGRAM THAT ALLOWS EMERGENCY MEDICAL SERVICE PROVIDERS TO ADOPT PROTOCOLS AND STRATEGIES TO TRIAGE PATIENTS AND REDIRECT NONEMERGENCY PATIENTS TO HEALTH-CARE SETTINGS OTHER THAN AN EMERGENCY DEPARTMENT, COLORADO CAN LEAD THE NATION IN REDUCING HEALTH-CARE COSTS AND UNNECESSARY UTILIZATION OF EMERGENCY DEPARTMENTS; AND

(g) PILOTING A PROGRAM THAT REIMAGINES THE EMERGENCY MEDICAL SERVICES SYSTEM IN THIS MANNER:

(I) WILL RESULT IN ADDITIONAL HEALTH-CARE COST SAVINGS;

(II) WILL HELP REDUCE THE BURDEN ON FIRST RESPONDERS AND EMERGENCY DEPARTMENTS BY REDIRECTING INDIVIDUALS WITH NONEMERGENCY HEALTH-CARE NEEDS TO ALTERNATIVE HEALTH-CARE PROVIDERS; AND

(III) IS MORE IMPORTANT THAN EVER IN LIGHT OF THE COVID-19 PANDEMIC.

(2) ON OR BEFORE JANUARY 1, 2022, THE DIVISION SHALL IMPLEMENT A PILOT GRANT PROGRAM TO HELP FINANCE AND COORDINATE TECHNICAL SUPPORT FOR PUBLIC SAFETY ANSWERING POINTS THAT APPLY FOR AND ARE APPROVED TO PARTICIPATE IN THE PILOT GRANT PROGRAM FOR THE OPERATION OF NURSE INTAKE OF 911 CALLS.

(3) (a) (I) THE DIVISION SHALL ESTABLISH:

(A) AN APPLICATION PROCESS FOR PUBLIC SAFETY ANSWERING POINTS TO APPLY TO PARTICIPATE IN THE PILOT GRANT PROGRAM, INCLUDING A REQUIREMENT THAT AN APPLICANT INCLUDE A CLEARLY STATED FINANCIAL GOAL OF ANTICIPATED COST SAVINGS IN ITS INITIAL GRANT APPLICATION; AND

(B) PROGRAM REQUIREMENTS, INCLUDING SCOPE OF PRACTICE REQUIREMENTS, FOR THE PILOT GRANT PROGRAM.

(II) TO BE ELIGIBLE TO APPLY, A PUBLIC SAFETY ANSWERING POINT MUST AGREE THAT, IF APPROVED TO PARTICIPATE IN THE PILOT GRANT PROGRAM, THE PUBLIC SAFETY ANSWERING POINT WILL:

(A) OPERATE A PROGRAM FOR NURSE INTAKE OF 911 CALLS OR A SUBSTANTIALLY COMPARABLE 911 TRIAGE SYSTEM THAT COMPLIES WITH THE PROGRAM

REQUIREMENTS THAT THE DIVISION ESTABLISHES PURSUANT TO SUBSECTION (3)(a)(I)(B) OF THIS SECTION OR ENTER INTO A CONTRACT WITH AN ENTITY THAT EMPLOYS OR CONTRACTS WITH NURSES WHO ARE TRAINED AND EQUIPPED TO PROVIDE NURSE INTAKE OF 911 CALLS; AND

(B) UTILIZE THE GRANT MONEY FOR THE PAYMENT OF COSTS ASSOCIATED WITH THE INTAKE OF 911 CALLS THAT DO NOT RESULT IN THE DISPATCH OF AMBULANCE SERVICE OR TREATMENT IN AN EMERGENCY ROOM.

(b) BEFORE ENTERING INTO A CONTRACT PURSUANT TO SUBSECTION (3)(a)(II)(A) OF THIS SECTION, A PUBLIC SAFETY ANSWERING POINT MUST:

(I) GET DIRECTION REGARDING THE CONTRACT FROM BOTH:

(A) THE MEDICAL DIRECTOR IN THE JURISDICTION THAT THE PUBLIC SAFETY ANSWERING POINT SERVES; AND

(B) THE CHIEF OF THE FIRE DEPARTMENT IN THE JURISDICTION THAT THE PUBLIC SAFETY ANSWERING POINT SERVES; AND

(II) SEEK INPUT FROM COMMUNITY STAKEHOLDERS IN THE JURISDICTION THAT THE PUBLIC SAFETY ANSWERING POINT SERVES, INCLUDING:

(A) OTHER PUBLIC SAFETY ENTITIES SUCH AS THE POLICE;

(B) RECOGNIZED EMPLOYEE ORGANIZATIONS WHOSE MEMBERS PROVIDE EMERGENCY MEDICAL SERVICES; AND

(C) COMMUNITY HEALTH ORGANIZATIONS, COMMUNITY MENTAL HEALTH PROVIDERS, AND OTHER MEDICAL PROVIDERS WHOSE SERVICES MIGHT BE USED AS PART OF THE PILOT GRANT PROGRAM.

(c)(I) OF THE PUBLIC SAFETY ANSWERING POINTS THAT APPLY TO PARTICIPATE IN THE PILOT GRANT PROGRAM PURSUANT TO SUBSECTION (3)(a) OF THIS SECTION, THE DIVISION SHALL DESIGNATE FOUR PUBLIC SAFETY ANSWERING POINTS TO PARTICIPATE IN THE PILOT GRANT PROGRAM. OF THE FOUR PUBLIC SAFETY ANSWERING POINTS DESIGNATED TO PARTICIPATE:

(A) ONE MUST BE LOCATED WITHIN A COUNTY THAT HAS A POPULATION OF SIXTY THOUSAND OR MORE RESIDENTS; AND

(B) THREE MUST BE LOCATED WITHIN A SINGLE COUNTY THAT HAS OR SEPARATE COUNTIES THAT HAVE A POPULATION OF FEWER THAN SIXTY THOUSAND RESIDENTS.

(II) ONCE THE DIVISION RECEIVES PROOF FROM A DESIGNATED PUBLIC SAFETY ANSWERING POINT THAT IT HAS ENTERED INTO A CONTRACT WITH AN ENTITY DESCRIBED IN SUBSECTION (3)(a)(II)(A) OF THIS SECTION, THE DIVISION SHALL AWARD THE PUBLIC SAFETY ANSWERING POINT GRANT MONEY.

(d) THE DIVISION, IN COORDINATION WITH THE PUBLIC UTILITIES COMMISSION CREATED IN SECTION 40-2-101, THE STATE BOARD OF NURSING CREATED IN SECTION

12-255-105, THE COLORADO 911 RESOURCE CENTER OR ITS SUCCESSOR ENTITY, AND THE COLORADO CHAPTER OF THE NATIONAL EMERGENCY NUMBER ASSOCIATION OR ITS SUCCESSOR ENTITY, SHALL PROVIDE TECHNICAL SUPPORT TO THE DESIGNATED PUBLIC SAFETY ANSWERING POINTS REGARDING THEIR OPERATION OF NURSE INTAKE OF 911 CALLS.

(4) THE DIVISION SHALL REQUIRE THAT THE DESIGNATED PUBLIC SAFETY ANSWERING POINTS REPORT ON THE OPERATION OF NURSE INTAKE OF 911 CALLS, INCLUDING REPORTING ON THE NUMBER OF CALLS FOR WHICH NURSE INTAKE OF 911 CALLS WAS USED AND THE DISPOSITION OF THOSE CALLS. ON OR BEFORE SEPTEMBER 1, 2023, THE DIVISION SHALL PUBLISH THE REPORT ON ITS PUBLIC WEBSITE AND SUBMIT COPIES OF THE REPORT TO THE JUDICIARY COMMITTEES IN THE SENATE AND THE HOUSE OF REPRESENTATIVES OR THEIR SUCCESSOR COMMITTEES.

(5) (a) AS PART OF THE REPORTING REQUIRED UNDER SUBSECTION (4) OF THIS SECTION, THE DIVISION SHALL REQUIRE THAT THE DESIGNATED PUBLIC SAFETY ANSWERING POINTS SUBMIT INFORMATION TO THE DIVISION REGARDING:

(I) INDIVIDUAL PATIENT SATISFACTION SCORES OBTAINED FROM INDIVIDUALS WHO RECEIVED ALTERNATIVE TREATMENT OTHER THAN THE EMERGENCY DEPARTMENT AS PART OF THE PILOT GRANT PROGRAM AND CLINICAL OUTCOMES FOR THOSE PATIENTS; AND

(II) ANNUAL COST SAVINGS TO THE STATE'S HEALTH-CARE SYSTEM THAT RESULT FROM THE PILOT GRANT PROGRAM. TO QUANTIFY AND VERIFY ITS REPORTED ANNUAL COST SAVINGS, A DESIGNATED PUBLIC SAFETY ANSWERING POINT MUST USE PERFORMANCE METRICS THAT ARE BASED ON THE DIVERSION OF CALLS TO THE NURSE INTAKE OF 911 CALLS FOR WHICH ALTERNATIVE TREATMENT OTHER THAN THE EMERGENCY DEPARTMENT WAS OFFERED OR PROVIDED.

(b) THE DIVISION SHALL EVALUATE THE NEED FOR CONTINUED FUNDING OF THE PILOT GRANT PROGRAM BASED ON THE PATIENT SATISFACTION SCORES AND THEIR CLINICAL OUTCOMES AND ON ANNUAL COST SAVINGS SUBMITTED.

(6) AS USED IN THIS SECTION, UNLESS THE CONTEXT OTHERWISE REQUIRES:

(a) "COVID-19" MEANS THE CORONAVIRUS DISEASE 2019 CAUSED BY THE SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2, ALSO KNOWN AS SARS-CoV-2.

(b) "EMERGENCY TELEPHONE SERVICE" MEANS A TELEPHONE SYSTEM UTILIZING THE SINGLE THREE-DIGIT NUMBER 911 FOR REPORTING POLICE, FIRE, MEDICAL, OR OTHER EMERGENCY SITUATIONS.

(c) "MEDICAL DIRECTOR" HAS THE MEANING SET FORTH IN SECTION 25-3.5-205 (5)(a).

(d) "NURSE" MEANS A REGISTERED NURSE, AS DEFINED IN SECTION 12-225-104 (11) OR AN ADVANCED PRACTICE REGISTERED NURSE, AS DEFINED IN SECTION 12-255-104 (1).

(e) "NURSE INTAKE OF 911 CALLS" MEANS A PUBLIC SAFETY ANSWERING POINT'S USE OF A NURSE TO ASSIST 911 DISPATCHERS IN PROVIDING EMERGENCY TELEPHONE SERVICE WHEREBY THE NURSE HELPS DETERMINE WHICH INCOMING CALLS MAY BE DIVERTED TO A TYPE OF MEDICAL CARE THAT DOES NOT REQUIRE AMBULANCE SERVICE OR TREATMENT IN AN EMERGENCY ROOM.

(f) "PUBLIC SAFETY ANSWERING POINT" MEANS A PUBLICLY FUNDED FACILITY EQUIPPED AND STAFFED ON A TWENTY-FOUR-HOUR BASIS TO RECEIVE AND PROCESS 911 CALLS.

(7) THIS SECTION IS REPEALED, EFFECTIVE JULY 1, 2024.

SECTION 2. Appropriation. For the 2021-22 state fiscal year, \$865,583 is appropriated to the department of public safety for use by the division of homeland security and emergency management. This appropriation is from the general fund and is based on an assumption that the division will require an additional 0.5 FTE. To implement this act, the division may use this appropriation for program administration related to the office of preparedness. Any money appropriated in this section not expended prior to July 1, 2022, is further appropriated to the department for the 2022-23 state fiscal year for the same purpose.

SECTION 3. Safety clause. The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, or safety.

Approved: June 18, 2021