

HOUSE COMMITTEE OF REFERENCE REPORT

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Chairman of Committee

May 6, 2016  
Date

Committee on Finance.

After consideration on the merits, the Committee recommends the following:

SB16-069 be amended as follows, and as so amended, be referred to the Committee on Appropriations with favorable recommendation:

1 Amend the Health, Insurance, and Environment Committee Report, dated  
2 May 5, 2016, page 1, strike lines 1 and 2 and substitute:

3 "Amend reengrossed bill, page 2, strike line 3 and substitute "(4.3) and  
4 (4.5) as follows:".

5 Page 2 of the bill, line 8, strike "25-3.5-203.5." and substitute  
6 "25-3.5-206.".

7 Page 2 of the bill, line 9, strike "(a)".

8 Page 2 of the bill, strike lines 12 through 16.

9 Page 3 of the bill, strike lines 4 through 27 and substitute:

10 "(1) ON OR BEFORE JANUARY 1, 2018, THE BOARD SHALL ADOPT  
11 RULES IN ACCORDANCE WITH ARTICLE 4 OF TITLE 24, C.R.S., FOR  
12 COMMUNITY PARAMEDICS INCLUDING STANDARDS FOR:

13 (a) THE DEPARTMENT'S ISSUANCE OF AN ENDORSEMENT IN  
14 COMMUNITY PARAMEDICINE TO AN EMERGENCY MEDICAL SERVICE  
15 PROVIDER;

16 (b) VERIFYING AN EMERGENCY MEDICAL SERVICE PROVIDER'S  
17 COMPETENCY TO BE ENDORSED AS A COMMUNITY PARAMEDIC. THE  
18 STANDARDS MUST INCLUDE A REQUIREMENT THAT THE EMERGENCY

1 MEDICAL SERVICE PROVIDER HAS OBTAINED FROM AN ACCREDITED  
2 PARAMEDIC TRAINING CENTER OR AN ACCREDITED COLLEGE OR  
3 UNIVERSITY A CERTIFICATE OF COMPLETION FOR A COURSE IN COMMUNITY  
4 PARAMEDICINE WITH COMPETENCY VERIFIED BY A PASSING SCORE ON AN  
5 EXAMINATION OFFERED NATIONALLY AND RECOGNIZED IN COLORADO FOR  
6 CERTIFYING COMPETENCY TO SERVE AS A COMMUNITY PARAMEDIC; AND

7 (c) CONTINUING COMPETENCY TO MAINTAIN A COMMUNITY  
8 PARAMEDIC ENDORSEMENT.

9 (2) RULES ADOPTED UNDER THIS SECTION SUPERSEDE ANY RULES  
10 OF THE COLORADO MEDICAL BOARD REGARDING THE MATTERS SET FORTH  
11 IN THIS PART 2.

12 **SECTION 3.** In Colorado Revised Statutes, 25-3.5-206, **add** (4)  
13 (a.5) as follows:

14 **25-3.5-206. Emergency medical practice advisory council -**  
15 **creation - powers and duties - emergency medical service provider**  
16 **scope of practice - rules.** (4) (a.5) (I) ON OR BEFORE JANUARY 1, 2018,  
17 THE DIRECTOR, OR, IF THE DIRECTOR IS NOT A PHYSICIAN, THE CHIEF  
18 MEDICAL OFFICER SHALL ADOPT RULES IN ACCORDANCE WITH ARTICLE 4  
19 OF TITLE 24, C.R.S., CONCERNING THE SCOPE OF PRACTICE OF A  
20 COMMUNITY PARAMEDIC. AN EMERGENCY MEDICAL SERVICE PROVIDER'S  
21 ENDORSEMENT AS A COMMUNITY PARAMEDIC, ISSUED PURSUANT TO THE  
22 RULES ADOPTED UNDER SECTION 25-3.5-203.5, IS VALID FOR AS LONG AS  
23 THE EMERGENCY MEDICAL SERVICE PROVIDER MAINTAINS HIS OR HER  
24 CERTIFICATION BY THE DEPARTMENT.

25 (II) THE RULES MUST ESTABLISH THE TASKS AND PROCEDURES  
26 THAT AN EMERGENCY MEDICAL SERVICE PROVIDER WITH A COMMUNITY  
27 PARAMEDIC ENDORSEMENT IS AUTHORIZED TO PERFORM IN ADDITION TO  
28 AN EMERGENCY MEDICAL SERVICE PROVIDER'S SCOPE OF PRACTICE,  
29 INCLUDING:

30 (A) AN INITIAL ASSESSMENT OF THE PATIENT AND ANY  
31 SUBSEQUENT ASSESSMENTS, AS NEEDED;

32 (B) MEDICAL INTERVENTIONS;

33 (C) CARE COORDINATION;

34 (D) RESOURCE NAVIGATION;

35 (E) PATIENT EDUCATION;

36 (F) INVENTORY, COMPLIANCE, AND ADMINISTRATION OF  
37 MEDICATIONS; AND

38 (G) GATHERING OF LABORATORY AND DIAGNOSTIC DATA."

39 Renumber succeeding sections accordingly.

1 Page 4 of the bill, strike lines 1 through 16.

2 Page 5 of the bill, strike lines 4 through 11 and substitute:

3 "(c) A FIRE PROTECTION DISTRICT, AMBULANCE DISTRICT, HEALTH  
4 ASSURANCE DISTRICT, HEALTH SERVICE DISTRICT, OR METROPOLITAN  
5 DISTRICT, OR SPECIAL DISTRICT AUTHORITY; OR

6 (d) A HEALTH CARE BUSINESS ENTITY, INCLUDING A LICENSED OR  
7 CERTIFIED HEALTH CARE FACILITY THAT IS SUBJECT TO REGULATION  
8 UNDER ARTICLE 3 OF THIS TITLE."

9 Page 5 of the bill, line 14, strike "HEALTH CARE PROFESSIONAL" and  
10 substitute "PHYSICIAN OR ADVANCED PRACTICE REGISTERED NURSE WHO  
11 IS LICENSED IN COLORADO AND IN GOOD STANDING AND".

12 Page 1 of the report, strike lines 4 through 6 and substitute:

13 "Page 6 of the bill, after line 2 insert:

14 "(2) (a) ON OR AFTER JULY 1, 2018, AN AUTHORIZED ENTITY THAT  
15 OPERATES OR PLANS TO OPERATE A CARES PROGRAM IN COLORADO  
16 SHALL NOTIFY THE DEPARTMENT OF ITS CARES PROGRAM IN THE FORM  
17 AND MANNER REQUIRED BY THE DEPARTMENT.

18 (b) THE DEPARTMENT SHALL MAINTAIN A LIST OF ALL AUTHORIZED  
19 ENTITIES THAT OPERATE A CARES PROGRAM AND MAKE THE LIST  
20 ACCESSIBLE TO THE PUBLIC.

21 (c) AN AUTHORIZED ENTITY OPERATING A CARES PROGRAM  
22 SHALL NOT ASSERT THAT IT IS LICENSED OR CERTIFIED BY THE  
23 DEPARTMENT."

24 Renumber succeeding subsections accordingly.

25 Page 6 of the bill, strike lines 6 through 27 and substitute:

26 "(a) PROVIDE THE FOLLOWING SERVICES:

27 (I) HEALTH EDUCATION AND INFORMATION AVAILABLE ON  
28 RELEVANT SERVICES; AND

29 (II) REFERRALS FOR AND INFORMATION CONCERNING LOW-COST  
30 MEDICATION PROGRAMS AND ALTERNATIVE RESOURCES TO THE 911  
31 SYSTEM;

1 (b) TO PROVIDE SERVICES IN ACCORDANCE WITH PARAGRAPH (a)  
2 OF THIS SUBSECTION (3) AND TO ENSURE NONDUPLICATION OF THE  
3 SERVICES, COLLABORATE WITH APPROPRIATE COMMUNITY RESOURCES,  
4 INCLUDING:  
5 (I) HEALTH CARE FACILITIES LICENSED OR ISSUED A CERTIFICATE  
6 OF COMPLIANCE PURSUANT TO SECTION 25-1.5-103 OR SUBJECT TO  
7 REGULATION BY THE DEPARTMENT PURSUANT TO ARTICLE 1 OR 3 OF THIS  
8 TITLE;  
9 (II) PRIMARY CARE PROVIDERS;  
10 (III) OTHER HEALTH CARE PROFESSIONALS; OR  
11 (IV) SOCIAL SERVICES AGENCIES.  
12 (4) (a) AN AUTHORIZED ENTITY OPERATING A CARES PROGRAM  
13 SHALL NOT PROVIDE SERVICES THAT WOULD REQUIRE A LICENSE OR  
14 CERTIFICATION PURSUANT TO PART 12 OF THIS ARTICLE OR ARTICLE 3 OR  
15 3.5 OF THIS TITLE.  
16 (b) IN THE FORM AND MANNER PRESCRIBED BY THE DEPARTMENT  
17 AND BEFORE REFERRING A SERVICE OR PROVIDER TO A RECIPIENT OF A  
18 CARES PROGRAM SERVICE, AN AUTHORIZED ENTITY OPERATING A  
19 CARES PROGRAM SHALL DISCLOSE, AT A MINIMUM, IN WRITING, THE  
20 FOLLOWING INFORMATION TO THE RECIPIENT:  
21 (I) ANY RELATIONSHIP THAT THE CARES PROGRAM HAS WITH AN  
22 INDIVIDUAL OR ENTITY TO WHICH IT REFERS A RECIPIENT OF CARES  
23 PROGRAM SERVICE; AND  
24 (II) WHETHER THE AUTHORIZED ENTITY DIRECTS, CONTROLS,  
25 SCHEDULES, OR TRAINS ANY PROVIDER TO WHICH IT REFERS A RECIPIENT  
26 OF CARES PROGRAM SERVICES.  
27 (5) THE DEPARTMENT MAY INVESTIGATE AN AUTHORIZED ENTITY  
28 AS IT DEEMS NECESSARY TO ENSURE:  
29 (a) THE PROTECTION OF THE HEALTH, SAFETY, AND WELFARE OF A  
30 RECIPIENT OF CARES PROGRAM SERVICES; AND  
31 (b) THAT THE AUTHORIZED ENTITY IS NOT PROVIDING SERVICES  
32 THROUGH ITS CARES PROGRAM THAT REQUIRE A LICENSE OR  
33 CERTIFICATION PURSUANT TO PART 12 OF THIS ARTICLE OR ARTICLE 3 OR  
34 3.5 OF THIS TITLE.  
35 (6) A PERSON WORKING DIRECTLY OR INDIRECTLY FOR A CARES  
36 PROGRAM, WHETHER AS AN EMPLOYEE OR A CONTRACTOR, MAY ONLY  
37 PROVIDE SERVICES CONSISTENT WITH THE REQUIREMENTS OF SUBSECTION  
38 (3) OF THIS SECTION; EXCEPT THAT NOTHING IN THIS SECTION PROHIBITS  
39 A LICENSED, CERTIFIED, OR REGISTERED HEALTH CARE OR MENTAL HEALTH  
40 PROVIDER OR CERTIFIED EMERGENCY MEDICAL SERVICE PROVIDER FROM

1 ACTING OR PROVIDING SERVICES WITHIN HIS OR HER SCOPE OF PRACTICE  
2 IF NECESSARY TO RESPOND TO AN EMERGENT SITUATION.

3 (7) (a) IF AN ENTITY OFFERED COMMUNITY OUTREACH AND  
4 HEALTH EDUCATION BEFORE JANUARY 1, 2015, THE ENTITY MAY  
5 CONTINUE AND NEED NOT COMPLY WITH THE REQUIREMENTS OF THIS PART  
6 11. THE ENTITY MAY VOLUNTARILY PROVIDE REPORTS CONSISTENT WITH  
7 THE REQUIREMENTS OF SECTION 25-3.5-1104.

8 (b) THIS SUBSECTION (7) IS REPEALED, EFFECTIVE JULY 1, 2021."

9 Page 7 of the bill, strike lines 1 through 22.

10 Page 7 of the bill, line 25, strike "BOARD" and substitute "DEPARTMENT,  
11 IN THE FORM AND MANNER DETERMINED BY THE DEPARTMENT,".

12 Page 8 of the bill, strike line 5 and substitute:

13 "(II) A MEASUREMENT OF ANY REDUCTION IN THE".

14 Page 8 of the bill, strike line 9 and substitute:

15 "(III) A MEASUREMENT OF ANY REDUCTION IN".

16 Page 8 of the bill, line 16, strike "BOARD" and substitute "DEPARTMENT".

17 Page 8 of the bill, line 17, strike "ANY".

18 Page 8 of the bill, strike lines 18 and 19 and substitute "THE PREVIOUS  
19 YEAR INTO A SINGLE REPORT AND POST THE REPORT ON ITS".

20 Page 8 of the bill, strike line 27 and substitute ""AGENCY" MEANS A SOLE  
21 PROPRIETORSHIP, PARTNERSHIP, CORPORATION, NONPROFIT ENTITY,  
22 SPECIAL DISTRICT, GOVERNMENTAL UNIT OR AGENCY, OR LICENSED OR  
23 CERTIFIED HEALTH CARE FACILITY THAT IS SUBJECT TO REGULATION  
24 UNDER ARTICLE 1.5 OR 3 OF THIS TITLE THAT MANAGES AND OFFERS,  
25 DIRECTLY OR BY CONTRACT, COMMUNITY INTEGRATED HEALTH CARE  
26 SERVICES."

27 Page 9 of the bill, strike lines 1 through 5.

28 Page 9 of the bill, line 12, strike "HEALTH CARE PROFESSIONAL WHO" and

- 1 substitute "PHYSICIAN OR ADVANCED PRACTICE REGISTERED NURSE WHO  
2 IS LICENSED IN COLORADO, IS IN GOOD STANDING, AND".
- 3 Page 9 of the bill, line 14, strike "AGENCY." and substitute "AGENCY;  
4 EXCEPT THAT, IF THE AGENCY HIRES OR CONTRACTS WITH A COMMUNITY  
5 PARAMEDIC, ONLY A LICENSED PHYSICIAN IN GOOD STANDING MAY  
6 PROVIDE MEDICAL DIRECTION."
- 7 Page 9 of the bill, line 20, strike "JANUARY" and substitute "JULY".
- 8 Page 9 of the bill, line 24, strike "JULY 1," and substitute "DECEMBER  
9 31,".
- 10 Page 1 of the report, after line 9 insert:
- 11 "Page 10 of the bill, line 24, strike "(2)" and substitute "(3)".
- 12 Page 10 of the bill, line 27, strike "25-3.5-203.5 (2) (a)" and substitute  
13 "25-3.5-206".
- 14 Page 11 of the bill, strike lines 1 through 3 and substitute "THAT SECTION.  
15 ON OR BEFORE JANUARY 1, 2018, THE BOARD SHALL PROMULGATE  
16 RULES".
- 17 Page 11 of the bill, line 13, after "(d)" insert "(I)".
- 18 Page 11 of the bill, after line 18 insert:
- 19 "(II) THE DEPARTMENT SHALL COLLECT FEES FROM ANY ENTITY  
20 THAT APPLIES TO OPERATE A COMMUNITY INTEGRATED HEALTH CARE  
21 SERVICE AGENCY, INCLUDING AN AGENCY WHOLLY OWNED AND OPERATED  
22 BY A GOVERNMENTAL UNIT OR AGENCY. THE DEPARTMENT SHALL  
23 TRANSMIT THE FEES TO THE STATE TREASURER WHO SHALL CREDIT THE  
24 FEES TO THE COMMUNITY INTEGRATED HEALTH CARE SERVICE AGENCIES  
25 CASH FUND CREATED IN SECTION 25-3.5-1204."
- 26 Page 11 of the bill, strike lines 24 through 27.
- 27 Page 12 of the bill, strike line 1.

- 1 Reletter succeeding paragraphs accordingly.
- 2 Page 12 of the bill, line 4, strike "AND".
- 3 Page 12 of the bill, strike line 7 and substitute "DEPARTMENT; AND  
4 (h) A REQUIREMENT THAT AGENCIES REPORT TO THE DEPARTMENT  
5 ON AN ANNUAL BASIS."
- 6 Page 13 of the bill, line 10, strike "(A)".
- 7 Page 13 of the bill, strike lines 20 through 22.
- 8 Page 14 of the bill, line 4, strike "SHALL" and substitute "MAY".
- 9 Page 14 of the bill, strike line 27.
- 10 Page 15 of the bill, strike lines 1 and 2 and substitute "APPLICATION. IF AN  
11 APPLICANT, WITHIN SIXTY DAYS AFTER".
- 12 Page 15 of the bill, strike line 7 and substitute:  
13 "(2) THE DEPARTMENT MAY SUSPEND, REVOKE, OR".
- 14 Page 15 of the bill, line 19, strike "SHALL" and substitute "MAY".
- 15 Page 15 of the bill, strike line 24 and substitute:  
16 "(4) THE DEPARTMENT MAY IMPOSE INTERMEDIATE".
- 17 Page 16 of the bill, strike lines 7 and 8 and substitute:  
18 "(e) PAY A CIVIL PENALTY OF UP TO TEN THOUSAND DOLLARS PER  
19 VIOLATION. THE DEPARTMENT,".
- 20 Page 16 of the bill, line 17, strike "2021." and substitute "2025.".
- 21 Page 16 of the bill, line 21, strike "(52.5) (f)" and substitute "(56) (d)".
- 22 Page 16 of the bill, strike lines 24 through 26 and substitute "(56) The  
23 following agencies, functions, or both, terminate on September 1, 2025:

1 (d) THE FUNCTIONS OF THE DEPARTMENT OF PUBLIC HEALTH  
2 AND".".

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