

**First Regular Session  
Seventy-first General Assembly  
STATE OF COLORADO**

**INTRODUCED**

LLS NO. 17-0445.01 Christy Chase x2008

**SENATE BILL 17-064**

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**SENATE SPONSORSHIP**

**Kefalas**, Aguilar, Jones, Kerr

**HOUSE SPONSORSHIP**

**Lontine**, Ginal, Kennedy, Singer

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**Senate Committees**

State, Veterans, & Military Affairs

**House Committees**

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**A BILL FOR AN ACT**

101      **CONCERNING THE LICENSING OF FREESTANDING EMERGENCY**  
102                    **DEPARTMENTS THAT PROVIDE EMERGENCY CARE OUTSIDE A**  
103                    **HOSPITAL SETTING.**

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**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://leg.colorado.gov>.)*

The bill creates a new license, referred to as a "freestanding emergency department license", for the department of public health and environment to issue on or after July 1, 2019, to a health facility that provides emergency and urgent care and is either independent from and not affiliated with or located in a hospital or is operated by a hospital at

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.*

a location off the hospital's main campus. The state board of health is to adopt rules regarding the new license, including rules to set licensure requirements and fees, safety and care standards, staffing requirements, fee transparency requirements, and other areas related to the operation of freestanding emergency departments. To qualify for a license, a facility must provide claims and billing data to health insurers and must be able to triage patients to determine the level of care they require.

Starting on the date the bill takes effect through June 30, 2019, the department is prohibited from issuing a new license to a person to operate a freestanding health facility that provides emergency care, whether independent from or operated by a hospital, unless the facility will serve an area of the state that has limited access to emergency care.

Additionally, the bill requires a health facility that is operating as a freestanding emergency department under current law to:

- ! Submit data to insurers to enable reporting of claims and billing data from freestanding emergency departments;
- ! Differentiate in a patient's billing statement the facility fee, professional fee, and ancillary service charges; and
- ! Post on its website a current facility fee schedule that indicates the range of facility fees that a patient may be charged and a list of health benefit plans or products for which the facility and its health care providers are in-network or out-of-network.

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

2 **SECTION 1. Legislative declaration.** (1) The general assembly  
3 hereby finds and determines that:

4 (a) When initially introduced in Colorado, freestanding emergency  
5 departments were conceived to stabilize patients in rural areas with life-  
6 or limb-threatening conditions before transferring them to a facility  
7 offering a higher level of care to provide definitive treatment;

8 (b) The freestanding emergency department model has since  
9 expanded in urban and suburban areas while not growing in rural areas of  
10 the state where emergency services are less available;

11 (c) While freestanding emergency departments are described as  
12 providing consumers greater access to emergency care at convenient

1 locations, their proliferation has raised concerns about delays in definitive  
2 treatment for trauma patients and lack of transparency in pricing and  
3 insurance coverage for services provided at a freestanding emergency  
4 department; and

5 (d) Therefore, it is important to add pricing and coverage  
6 transparency requirements for freestanding emergency departments that  
7 are currently operating in the state currently and to preclude the issuance  
8 of new licenses for these facilities for a two-year period to allow the state  
9 board of health to develop a comprehensive system for licensing  
10 freestanding emergency departments in the future.

11 **SECTION 2.** In Colorado Revised Statutes, **add** 25-1.5-113 as  
12 follows:

13 **25-1.5-113. Freestanding emergency departments - licensure**  
14 **- requirements - rules - definitions - repeal.** (1) (a) ON OR AFTER THE  
15 EFFECTIVE DATE OF THIS SECTION, A HEALTH FACILITY THAT PROVIDES  
16 EMERGENCY CARE AND EITHER IS LICENSED AS A COMMUNITY CLINIC AS  
17 DESCRIBED IN SECTION 25-3-101 (2)(a)(I)(B) OR IS AFFILIATED WITH OR  
18 OPERATED BY A HOSPITAL SYSTEM AND IS LOCATED OFF THE HOSPITAL'S  
19 MAIN CAMPUS SHALL:

20 (I) PROVIDE DATA TO HEALTH INSURERS TO ENABLE THEM TO  
21 TRACK CLAIMS OR BILLING DATA FROM A FACILITY DESCRIBED IN  
22 SUBSECTION (7)(c)(II) OF THIS SECTION, WHICH DATA MUST INCLUDE A  
23 MODIFIER ON THE CLAIM OR A NATIONAL PROVIDER IDENTIFIER UNIQUE TO  
24 EACH INDIVIDUAL FACILITY'S PHYSICAL ADDRESS AND LOCATION;

25 (II) DIFFERENTIATE AND LIST SEPARATELY IN A PATIENT'S BILLING  
26 STATEMENT THE CHARGES ASSOCIATED WITH THE FACILITY FEE,  
27 PROFESSIONAL FEES, AND FEES FOR ANY ANCILLARY SERVICES PROVIDED

1 TO THE PATIENT; AND

2 (III) POST ON ITS WEBSITE A CURRENT FACILITY FEE SCHEDULE  
3 THAT CLEARLY DELINEATES THE RANGE OF FACILITY FEES THAT A PATIENT  
4 MAY BE CHARGED AND A LIST OF HEALTH BENEFIT PLANS OR PRODUCTS  
5 FOR WHICH THE FACILITY AND ITS HEALTH CARE PROVIDERS ARE  
6 IN-NETWORK OR OUT-OF-NETWORK.

7 (b) THE BOARD MAY ADOPT RULES AS NECESSARY TO IMPLEMENT  
8 THIS SUBSECTION (1).

9 (c) THIS SUBSECTION (1) IS REPEALED, EFFECTIVE DECEMBER 31,  
10 2019.

11 (2) (a) ON OR AFTER JULY 1, 2019, A PERSON THAT WISHES TO  
12 OPERATE A FREESTANDING EMERGENCY DEPARTMENT MUST APPLY FOR  
13 AND OBTAIN FROM THE DEPARTMENT AN ANNUAL FREESTANDING  
14 EMERGENCY DEPARTMENT LICENSE, UNLESS GRANTED AN EXCEPTION BY  
15 THE BOARD IN ACCORDANCE WITH BOARD RULES ADOPTED UNDER  
16 SUBSECTION (4)(c) OF THIS SECTION TO OPERATE AS A COMMUNITY CLINIC.  
17 THE DEPARTMENT SHALL ISSUE A FREESTANDING EMERGENCY  
18 DEPARTMENT LICENSE TO A HEALTH FACILITY TO OPERATE A  
19 FREESTANDING EMERGENCY DEPARTMENT IF THE HEALTH FACILITY  
20 SATISFIES THE REQUIREMENTS OF THIS SECTION AND BOARD RULES  
21 ADOPTED IN ACCORDANCE WITH THIS SECTION.

22 (b) ON OR AFTER THE EFFECTIVE DATE OF THIS SECTION, A HEALTH  
23 FACILITY THAT IS OPERATING AS OR MEETS THE DEFINITION OF A  
24 FREESTANDING EMERGENCY DEPARTMENT, AS DEFINED IN THIS SECTION  
25 AND UNDER BOARD RULES, BUT IS LICENSED OR OPERATING AS A  
26 COMMUNITY CLINIC, AS DESCRIBED IN SECTION 25-3-101 (2)(a)(I)(B), OR  
27 IS OPERATED BY OR AFFILIATED WITH A HOSPITAL SYSTEM AND IS LOCATED

1 OFF THE HOSPITAL'S MAIN CAMPUS, MUST COMPLY WITH ALL  
2 REQUIREMENTS OF THIS SECTION AND RULES ADOPTED UNDER THIS  
3 SECTION AND OBTAIN A FREESTANDING EMERGENCY DEPARTMENT LICENSE  
4 UNDER THIS SECTION BY DECEMBER 31, 2019, IN ORDER TO CONTINUE  
5 OPERATING. ON AND AFTER JANUARY 1, 2020, A FACILITY SUBJECT TO THIS  
6 SUBSECTION (2)(b) SHALL NOT OPERATE UNLESS THE FACILITY IS:

7 (I) LICENSED AS A FREESTANDING EMERGENCY DEPARTMENT; OR

8 (II) GRANTED AN EXCEPTION BY THE BOARD IN ACCORDANCE WITH  
9 BOARD RULES ADOPTED UNDER SUBSECTION (4)(c) OF THIS SECTION.

10 (3) (a) A FREESTANDING EMERGENCY DEPARTMENT LICENSED  
11 UNDER THIS SECTION SHALL PROVIDE DATA TO HEALTH INSURERS TO  
12 ENABLE THEM TO TRACK CLAIMS OR BILLING DATA FROM A FACILITY  
13 DESCRIBED IN SUBSECTION (7)(c)(II) OF THIS SECTION, WHICH DATA MUST  
14 INCLUDE A MODIFIER ON THE CLAIM OR A NATIONAL PROVIDER IDENTIFIER  
15 UNIQUE TO EACH INDIVIDUAL FACILITY'S PHYSICAL ADDRESS AND  
16 LOCATION.

17 (b) TO QUALIFY FOR A LICENSE UNDER THIS SECTION, A  
18 FREESTANDING EMERGENCY DEPARTMENT MUST HAVE THE ABILITY TO  
19 TRIAGE PATIENTS UPON INTAKE TO DETERMINE WHETHER A MEDICAL  
20 EMERGENCY EXISTS OR WHETHER URGENT CARE IS NEEDED. IF NO MEDICAL  
21 EMERGENCY EXISTS, THE FREESTANDING EMERGENCY DEPARTMENT MUST  
22 HAVE THE ABILITY TO PROVIDE URGENT CARE ON SITE. WHEN A  
23 FREESTANDING EMERGENCY DEPARTMENT PROVIDES URGENT CARE, THE  
24 URGENT CARE SERVICES MUST BE BILLED AS URGENT CARE RATHER THAN  
25 EMERGENCY CARE, AND ANY AFFILIATED FACILITY FEE MUST BE LIMITED  
26 TO REFLECT THE LESS COMPREHENSIVE RESOURCES USED OR NEEDED TO  
27 PROVIDE URGENT CARE AS OPPOSED TO EMERGENCY CARE.

1           (4) THE BOARD SHALL ADOPT RULES ESTABLISHING THE  
2 REQUIREMENTS FOR LICENSURE OF, SAFETY AND CARE STANDARDS FOR,  
3 AND FEES FOR LICENSING AND INSPECTING FREESTANDING EMERGENCY  
4 DEPARTMENTS, WHICH FEES MUST BE SET IN ACCORDANCE WITH SECTION  
5 25-3-105. THE RULES MUST INCLUDE, AT A MINIMUM:

6           (a) A REQUIREMENT THAT THE FACILITY IMPLEMENT TRANSFER  
7 AND TRANSPORT PROTOCOLS THAT ENSURE THAT PATIENTS ARE DIRECTED  
8 TO THE HOSPITAL THAT CAN PROVIDE THE APPROPRIATE LEVEL OF CARE  
9 BASED ON THE PATIENTS' NEEDS;

10          (b) MINIMUM STAFFING REQUIREMENTS, INCLUDING A  
11 REQUIREMENT THAT THE FACILITY HAVE A PHYSICIAN WHO IS BOARD  
12 CERTIFIED OR BOARD ELIGIBLE IN EMERGENCY MEDICINE ON SITE AT ALL  
13 TIMES;

14          (c) A PROCESS FOR THE DEPARTMENT TO GRANT AN EXCEPTION TO  
15 THE LICENSURE REQUIREMENTS SET FORTH IN THIS SECTION AND IN BOARD  
16 RULES FOR A FREESTANDING EMERGENCY DEPARTMENT LOCATED IN AN  
17 UNDERSERVED AREA OF THE STATE, SUCH AS A RURAL AREA WITH LIMITED  
18 ACCESS TO EMERGENCY CARE;

19          (d) RESTRICTIONS ON THE LOCATION OF A FREESTANDING  
20 EMERGENCY DEPARTMENT IN PROXIMITY TO A CRITICAL ACCESS HOSPITAL;

21          (e) TRANSPARENCY REQUIREMENTS WITH REGARD TO FEES  
22 CHARGED BY FREESTANDING EMERGENCY DEPARTMENTS, INCLUDING THE  
23 FOLLOWING:

24           (I) DEFINING THE CIRCUMSTANCES WHEN AND FOR WHICH  
25 FREESTANDING EMERGENCY DEPARTMENTS MAY CHARGE A FACILITY FEE;

26           (II) REQUIRING FREESTANDING EMERGENCY DEPARTMENTS TO  
27 DIFFERENTIATE AND LIST SEPARATELY IN A PATIENT'S BILLING STATEMENT

1 THE CHARGES ASSOCIATED WITH THE FACILITY FEE, PROFESSIONAL FEES,  
2 AND FEES FOR ANY ANCILLARY SERVICES PROVIDED TO THE PATIENT; AND

3 (III) REQUIRING A FREESTANDING EMERGENCY DEPARTMENT TO  
4 MAINTAIN ON ITS WEBSITE:

5 (A) A CURRENT FACILITY FEE SCHEDULE THAT CLEARLY  
6 DELINEATES THE RANGE OF FACILITY FEES THAT A PATIENT MAY BE  
7 CHARGED; AND

8 (B) A LIST OF HEALTH BENEFIT PLANS OR PRODUCTS FOR WHICH  
9 THE FREESTANDING EMERGENCY DEPARTMENT AND ITS HEALTH CARE  
10 PROVIDERS ARE IN-NETWORK OR OUT-OF-NETWORK;

11 (f) REQUIREMENTS FOR PARTICIPATION IN THE TRAUMA SYSTEM  
12 AND OTHER STATEWIDE SYSTEMS OF CARE;

13 (g) REQUIREMENTS FOR BEHAVIORAL HEALTH CRISIS  
14 EVALUATIONS; AND

15 (h) REQUIREMENTS FOR CONSUMER EDUCATION ABOUT SERVICE  
16 AVAILABILITY.

17 (5) THE RULES ADOPTED BY THE BOARD MUST TAKE EFFECT BY  
18 JULY 1, 2019, AND THEREAFTER, THE BOARD SHALL AMEND THE RULES AS  
19 NECESSARY.

20 (6) THE DEPARTMENT SHALL NOT ISSUE A FREESTANDING  
21 EMERGENCY DEPARTMENT LICENSE TO A HEALTH FACILITY THAT DOES NOT  
22 SATISFY THE CRITERIA SPECIFIED IN THIS SECTION OR RULES ADOPTED BY  
23 THE BOARD PURSUANT TO THIS SECTION.

24 (7) AS USED IN THIS SECTION:

25 (a) "BOARD" MEANS THE STATE BOARD OF HEALTH CREATED IN  
26 SECTION 25-1-103.

27 (b) "FACILITY FEE" MEANS A FEE CHARGED OR BILLED BY A

1 FREESTANDING EMERGENCY DEPARTMENT FOR SERVICES PROVIDED IN THE  
2 FACILITY THAT IS:

3 (I) INTENDED TO COMPENSATE THE FREESTANDING EMERGENCY  
4 DEPARTMENT FOR THE FACILITY'S OPERATING EXPENSES; AND

5 (II) SEPARATE AND DISTINCT FROM A PROFESSIONAL FEE.

6 (c) "FREESTANDING EMERGENCY DEPARTMENT" MEANS A HEALTH  
7 FACILITY THAT OFFERS EMERGENCY CARE AND URGENT CARE AND IS  
8 EITHER:

9 (I) INDEPENDENT FROM A HOSPITAL SYSTEM, IS NOT ATTACHED TO  
10 OR CONTAINED WITHIN A HOSPITAL, AND IS NOT OPERATED BY OR  
11 AFFILIATED WITH A HOSPITAL SYSTEM; OR

12 (II) AFFILIATED WITH OR OPERATED BY A HOSPITAL SYSTEM AND  
13 IS LOCATED OFF THE HOSPITAL'S MAIN CAMPUS.

14 **SECTION 3.** In Colorado Revised Statutes, 25-1.5-103, **amend**  
15 (1)(a)(I)(A) and (2)(a.5)(II); and **add** (2)(a.5)(III) as follows:

16 **25-1.5-103. Health facilities - powers and duties of department**  
17 **- limitations on rules promulgated by department - definitions.**

18 (1) The department has, in addition to all other powers and duties  
19 imposed upon it by law, the powers and duties provided in this section as  
20 follows:

21 (a) (I) (A) To annually license and to establish and enforce  
22 standards for the operation of general hospitals, hospital units as defined  
23 in section 25-3-101 (2), FREESTANDING EMERGENCY DEPARTMENTS AS  
24 DEFINED IN SECTION 25-1.5-113 (7)(c), psychiatric hospitals, community  
25 clinics, rehabilitation hospitals, convalescent centers, community mental  
26 health centers, acute treatment units, facilities for persons with  
27 intellectual and developmental disabilities, nursing care facilities, hospice



1 care, assisted living residences, dialysis treatment clinics, ambulatory  
2 surgical centers, birthing centers, home care agencies, and other facilities  
3 of a like nature, except those wholly owned and operated by any  
4 governmental unit or agency.

5 (2) For purposes of this section, unless the context otherwise  
6 requires:

7 (a.5) "Community clinic" has the same meaning as set forth in  
8 section 25-3-101 and does not include:

9 (II) A rural health clinic, as defined in section 1861 (aa)(2) of the  
10 federal "Social Security Act", 42 U.S.C. sec. 1395x (aa)(2); OR

11 (III) A FREESTANDING EMERGENCY DEPARTMENT DEFINED IN AND  
12 LICENSED UNDER SECTION 25-1.5-113.

13 **SECTION 4.** In Colorado Revised Statutes, 25-3-101, **amend** (1),  
14 (2)(a)(I) introductory portion, and (2)(a)(III)(C); and **add** (2)(a)(III)(D)  
15 as follows:

16 **25-3-101. Hospitals - health facilities - licensed - definitions.**

17 (1) (a) It is unlawful for any person, partnership, association, or  
18 corporation to open, conduct, or maintain any general hospital, hospital  
19 unit, FREESTANDING EMERGENCY DEPARTMENT AS DEFINED IN SECTION  
20 25-1.5-113 (7)(c), psychiatric hospital, community clinic, rehabilitation  
21 hospital, convalescent center, community mental health center, acute  
22 treatment unit, facility for persons with developmental disabilities, as  
23 defined in section 25-1.5-103 (2)(c), nursing care facility, hospice care,  
24 assisted living residence, except an assisted living residence shall be  
25 assessed a license fee as set forth in section 25-27-107, dialysis treatment  
26 clinic, ambulatory surgical center, birthing center, home care agency, or  
27 other facility of a like nature, except those wholly owned and operated by

1 any governmental unit or agency, without first having obtained a license  
2 from the department of public health and environment.

3 (b) UNLESS GRANTED A LICENSE TO OPERATE IN A RURAL,  
4 UNDERSERVED AREA OF THE STATE THAT HAS LIMITED ACCESS TO  
5 EMERGENCY CARE PURSUANT TO SECTION 25-3-102 (1)(c)(I)(B), ON AND  
6 AFTER THE EFFECTIVE DATE OF THIS SUBSECTION (1)(b), IT IS UNLAWFUL  
7 FOR A HEALTH FACILITY, OTHER THAN A LICENSED OR CERTIFIED HOSPITAL  
8 PROVIDING EMERGENCY CARE IN AN EMERGENCY DEPARTMENT LOCATED  
9 AT THE HOSPITAL, TO PROVIDE EMERGENCY CARE AT THE FACILITY UNLESS  
10 THE HEALTH FACILITY:

11 (I) (A) IS OPERATING AND LICENSED AS A COMMUNITY CLINIC AS  
12 DESCRIBED IN SUBSECTION (2)(a)(I)(B) OF THIS SECTION OR IS OPERATED  
13 BY OR AFFILIATED WITH A HOSPITAL SYSTEM AND IS LOCATED OFF THE  
14 HOSPITAL'S MAIN CAMPUS; AND

15 (B) ON OR BEFORE THE EFFECTIVE DATE OF THIS SUBSECTION  
16 (1)(b), WAS LICENSED OR OPERATING OR SUBMITTED A COMPLETED  
17 LICENSE APPLICATION TO THE DEPARTMENT AND RECEIVED A CERTIFICATE  
18 OF COMPLIANCE FROM THE DEPARTMENT OF PUBLIC SAFETY; OR

19 (II) IS LICENSED AS A FREESTANDING EMERGENCY DEPARTMENT  
20 PURSUANT TO SECTION 25-1.5-113 ON OR AFTER JULY 1, 2019.

21 (c) ON AND AFTER THE EFFECTIVE DATE OF THIS SECTION, A  
22 HOSPITAL SHALL NOT LIST ON ITS LICENSE OR OPEN A NEW OFF-CAMPUS  
23 LOCATION THAT PROVIDES EMERGENCY CARE UNLESS AUTHORIZED BY THE  
24 DEPARTMENT IN ACCORDANCE WITH SECTION 25-3-102 (1)(c)(I)(B).

25 (2) As used in this section, unless the context otherwise requires:

26 (a) (I) "Community clinic" means a health care facility that  
27 provides health care services on an ambulatory basis, is ~~neither licensed~~

1 ~~as an on-campus department or service of a hospital nor listed as an~~  
2 ~~off-campus location under a hospital's license~~ SITUATED AT A DISTINCT  
3 PHYSICAL LOCATION THAT IS NOT ON A HOSPITAL CAMPUS, and meets at  
4 least one of the following criteria:

5 (III) "Community clinic" does not include:

6 (C) A facility that functions only as an office for the practice of  
7 medicine or the delivery of primary care services by other licensed or  
8 certified practitioners; OR

9 (D) A FREESTANDING EMERGENCY DEPARTMENT LICENSED UNDER  
10 SECTION 25-1.5-113.

11 **SECTION 5.** In Colorado Revised Statutes, 25-3-102, **amend**  
12 (1)(a) and (1)(c) as follows:

13 **25-3-102. License - application - issuance - certificate of**  
14 **compliance required - rules.** (1) (a) (I) EXCEPT AS PROVIDED IN  
15 SUBSECTION (1)(a)(II) OF THIS SECTION, an applicant for a license  
16 described in section 25-3-101 shall apply to the department of public  
17 health and environment annually upon such form and in such manner as  
18 prescribed by the department; except that a community residential home  
19 shall make application for a license pursuant to section 25.5-10-214,  
20 C.R.S.

21 (II) (A) EXCEPT AS PROVIDED IN SUBSECTION (1)(a)(II)(B) OF THIS  
22 SECTION, STARTING ON THE EFFECTIVE DATE OF THIS SUBSECTION  
23 (1)(a)(II) THROUGH JUNE 30, 2019, THE DEPARTMENT SHALL NOT ACCEPT  
24 ANY APPLICATIONS FOR A NEW LICENSE TO OPERATE A COMMUNITY CLINIC  
25 PROVIDING EMERGENCY CARE, AS DESCRIBED IN SECTION 25-3-101  
26 (2)(a)(I)(B), OR A FREESTANDING EMERGENCY DEPARTMENT, AS DEFINED  
27 IN SECTION 25-1.5-113 (7)(c), AND SHALL NOT LIST UNDER A HOSPITAL'S

1 LICENSE A NEW OFF-CAMPUS LOCATION THAT PROVIDES EMERGENCY CARE.

2 (B) THE DEPARTMENT MAY ACCEPT AN APPLICATION FOR A NEW  
3 LICENSE TO OPERATE A FACILITY DESCRIBED IN SUBSECTION (1)(a)(II)(A)  
4 OF THIS SECTION OR MAY LIST UNDER A HOSPITAL LICENSE A NEW  
5 OFF-CAMPUS LOCATION THAT PROVIDES EMERGENCY CARE IF THE FACILITY  
6 WILL BE LOCATED AND PROVIDING EMERGENCY CARE IN A RURAL,  
7 UNDERSERVED AREA OF THE STATE THAT HAS LIMITED ACCESS TO  
8 EMERGENCY CARE, AS DETERMINED IN ACCORDANCE WITH RULES  
9 ADOPTED BY THE STATE BOARD OF HEALTH.

10 (c) (I) (A) EXCEPT AS PROVIDED IN SUBSECTION (1)(c)(I)(B) OF  
11 THIS SECTION, the department shall issue licenses to applicants furnishing  
12 satisfactory evidence of fitness to conduct and maintain a health facility  
13 described in section 25-3-101 in accordance with this part 1 and the rules  
14 adopted by the department.

15 (B) STARTING ON THE EFFECTIVE DATE OF THIS SUBSECTION  
16 (1)(c)(I)(B) AND CONTINUING THROUGH JUNE 30, 2019, THE DEPARTMENT  
17 SHALL NOT ISSUE A NEW LICENSE TO AN APPLICANT TO OPERATE A  
18 COMMUNITY CLINIC PROVIDING EMERGENCY CARE, AS DESCRIBED IN  
19 SECTION 25-3-101 (2)(a)(I)(B), OR A FREESTANDING EMERGENCY  
20 DEPARTMENT, AS DEFINED IN SECTION 25-1.5-113 (7)(c), AND A HOSPITAL  
21 SHALL NOT LIST UNDER ITS LICENSE OR OPEN A NEW OFF-CAMPUS  
22 LOCATION THAT PROVIDES EMERGENCY CARE; EXCEPT THAT THE  
23 DEPARTMENT: MAY ISSUE A NEW LICENSE TO A FACILITY THAT, ON OR  
24 BEFORE THE EFFECTIVE DATE OF THIS SUBSECTION (1)(c)(I)(B),  
25 SUBMITTED A COMPLETED LICENSE APPLICATION TO THE DEPARTMENT AND  
26 RECEIVED A CERTIFICATE OF COMPLIANCE FROM THE DEPARTMENT OF  
27 PUBLIC SAFETY; AND MAY ISSUE A NEW LICENSE TO AN APPLICANT

1 APPLYING TO OPERATE A FACILITY DESCRIBED IN THIS SUBSECTION  
2 (1)(c)(I)(B) OR LIST UNDER A HOSPITAL LICENSE A NEW OFF-CAMPUS  
3 LOCATION PROVIDING EMERGENCY CARE IF, IN EITHER CASE, THE FACILITY  
4 WILL BE LOCATED AND PROVIDING EMERGENCY CARE IN A RURAL,  
5 UNDERSERVED AREA OF THE STATE THAT HAS LIMITED ACCESS TO  
6 EMERGENCY CARE, AS DETERMINED IN ACCORDANCE WITH RULES  
7 ADOPTED BY THE STATE BOARD OF HEALTH.

8 (II) The department shall not require, as satisfactory evidence of  
9 fitness, evidence as to whether an applicant has provided self  
10 declarations, affidavits, or other attestations as to its general compliance  
11 with statutory or regulatory licensing requirements. The department shall  
12 determine an applicant's fitness solely based on the specific fitness  
13 information or documentation submitted by the applicant upon the  
14 department's request or as otherwise acquired by the department through  
15 its own review or investigation of the applicant. The department may  
16 require the applicant to attest to the accuracy of the information provided  
17 as long as the attestation does not require the applicant's affirmation of its  
18 general compliance with statutory or regulatory licensing requirements.

19 **SECTION 6. Safety clause.** The general assembly hereby finds,  
20 determines, and declares that this act is necessary for the immediate  
21 preservation of the public peace, health, and safety.