First Regular Session Sixty-eighth General Assembly STATE OF COLORADO

PREAMENDED

This Unofficial Version Includes Committee Amendments Not Yet Adopted on Second Reading

LLS NO. 11-0087.01 Christy Chase

HOUSE BILL 11-1217

HOUSE SPONSORSHIP

Acree, Joshi, Kerr A., Stephens, Summers

SENATE SPONSORSHIP

Boyd, Roberts

House Committees
Health and Environment
Appropriations

Senate Committees

A BILL FOR AN ACT

101 CONCERNING MEASURES TO EXPAND ACCESS TO HEALTH CARE
102 THROUGHOUT THE STATE.

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.)

The bill enacts measures to expand access to health care in Colorado, including the following:

Section 1 of the bill expands the school-based health center grant program administered by the prevention services division in the department of public health and

- environment to allow the division to award grants to center operators to offer rehabilitative services at existing centers.
- ! Sections 2 and 3 of the bill expand eligibility for participation in the state loan repayment program to health care providers who do not provide primary care services, practice in a for-profit setting, or are otherwise not currently eligible. These providers' eligibility is contingent upon their agreement to provide services in underserved areas of the state and upon a corresponding expansion of the federal government's national loan repayment program.
- ! Section 4 charges the center for improving value in health care (CIVHC), which was established in 2008 by an executive order of the governor, with studying and recommending improvements to the system for reimbursing health care providers who deliver care to recipients of the state's public medical assistance programs as well as to insured individuals.
- ! Section 5 requires the department of health care policy and financing to reimburse providers for medical care, services, or goods provided to medicaid recipients, regardless of the location of the service delivery, and to seek a waiver from the United States department of health and human services if necessary to implement this requirement.
- ! Sections 6 and 7 authorize the state and local governments to enter into agreements with health care providers to allow the providers to use available space in a building owned by the state or local government and located in a federally designated health professional shortage area for purposes of providing access to health care to persons residing in close proximity to the public building. As a condition of the agreement to use space in the public building, the health care provider must agree to accept medicaid patients at those sites.
- ! Section 8 extends governmental immunity to health care practitioners who provide care to patients, including medicaid patients, in available space in a public building located in a federally designated health professional shortage area pursuant to an agreement authorized by section 6 or 7 of the bill.

SECTION 1. 25-20.5-703 (1) (a) (III), (1) (c), and (3), Colorado

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

Revised Statutes, are amended to read:

1

2	25-20.5-703. Colorado health service corps - program -
3	creation - conditions. (1) (a) (III) In consideration for receiving
4	repayment of all or part of his or her education loan, the health care
5	professional shall agree to provide primary health services in federally
6	designated health professional shortage areas in Colorado, OR, IN THE
7	CASE OF A HEALTH CARE PROVIDER WHO BECOMES ELIGIBLE TO
8	PARTICIPATE IN THE LOAN REPAYMENT PROGRAM AS DESCRIBED IN
9	SUB-SUBPARAGRAPH (A.5) OF SUBPARAGRAPH (I) OF THIS PARAGRAPH (a),
10	THE HEALTH CARE PROVIDER SHALL AGREE TO PROVIDE PRIMARY OR
11	NONPRIMARY HEALTH SERVICES, AS APPLICABLE, IN FEDERALLY
12	DESIGNATED HEALTH PROFESSIONAL SHORTAGE AREAS IN COLORADO.
13	(c) (I) EXCEPT AS OTHERWISE PROVIDED IN SUBPARAGRAPH (II) OF
14	THIS PARAGRAPH (c), health care professionals practicing in nonprimary
15	care specialties shall ARE not be eligible for loan repayments through the
16	Colorado health service corps.
17	(II) NONPRIMARY CARE SPECIALISTS OR OTHER HEALTH CARE
18	PROVIDERS, INCLUDING REGISTERED OCCUPATIONAL THERAPISTS AND
19	LICENSED PROFESSIONAL NURSES OR PHYSICAL THERAPISTS, ARE ELIGIBLE
20	FOR LOAN REPAYMENTS THROUGH THE $\overline{\mathbf{C}}$ OLORADO HEALTH SERVICE CORPS
21	IF THE FEDERAL GOVERNMENT AUTHORIZES THEIR PARTICIPATION IN THE
22	NATIONAL HEALTH SERVICE CORPS PROGRAM AND AUTHORIZES FEDERAL
23	MATCHING FUNDS FOR THOSE PROVIDERS TO RECEIVE LOAN REPAYMENTS
24	THROUGH THE COLORADO HEALTH SERVICE CORPS.
25	(3) (a) EXCEPT AS OTHERWISE PROVIDED IN PARAGRAPH (b) OF
26	THIS SUBSECTION (3), a health care professional participating in the
27	Colorado health service corps shall not practice with a for-profit private

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1	group or solo practice or at a proprietary hospital or clinic.
2	(b) A HEALTH CARE PROVIDER PRACTICING WITH A FOR-PROFIT
3	PRIVATE GROUP OR SOLO PRACTICE OR AT A PROPRIETARY HOSPITAL OR
4	CLINIC MAY PARTICIPATE IN THE $\overline{\text{C}}$ OLORADO HEALTH SERVICE CORPS IF
5	THE FEDERAL GOVERNMENT AUTHORIZES THE PARTICIPATION OF SUCH
6	PROVIDERS IN THE NATIONAL HEALTH SERVICE CORPS PROGRAM AND
7	AUTHORIZES FEDERAL MATCHING FUNDS FOR THOSE PROVIDERS TO
8	RECEIVE LOAN REPAYMENTS THROUGH THE COLORADO HEALTH SERVICE
9	CORPS.
10	SECTION 2. 25-20.5-703 (1) (a) (I), Colorado Revised Statutes,
11	is amended BY THE ADDITION OF A NEW SUB-SUBPARAGRAPH
12	to read:
13	25-20.5-703. Colorado health service corps - program -
14	creation - conditions. (1) (a) (I) (A.5) On or after the effective
15	DATE OF THIS SUB-SUBPARAGRAPH (A.5), IF THE FEDERAL GOVERNMENT
16	EXPANDS ELIGIBILITY FOR THE NATIONAL HEALTH SERVICE CORPS
17	PROGRAM TO HEALTH CARE PROVIDERS OTHER THAN THOSE DEFINED AS
18	HEALTH CARE PROFESSIONALS, THOSE PROVIDING NONPRIMARY HEALTH
19	CARE SERVICES, OR THOSE PRACTICING WITH A FOR-PROFIT PRIVATE GROUP
20	OR SOLO PRACTICE OR AT A PROPRIETARY HOSPITAL OR CLINIC, AND THE
21	FEDERAL GOVERNMENT AUTHORIZES FEDERAL MATCHING FUNDS FOR
22	THOSE PROVIDERS APPLYING TO PARTICIPATE IN THE COLORADO HEALTH
23	SERVICE CORPS, THE PRIMARY CARE OFFICE MAY PROVIDE LOAN
24	REPAYMENTS FOR THOSE HEALTH CARE PROVIDERS THROUGH THE
25	COLORADO HEALTH SERVICE CORPS, SUBJECT TO AVAILABLE
26	APPROPRIATIONS.
27	SECTION 3. 25.5-4-401 (5) and (6), Colorado Revised Statutes,

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1	are amended, and the said 25.5-4-401 is further amended BY THE
2	ADDITION OF A NEW SUBSECTION, to read:
3	25.5-4-401. Providers - payments - rules - legislative
4	declaration. (4.5) (a) The General assembly hereby finds,
5	DETERMINES, AND DECLARES THAT ACCESS TO HEALTH CARE SERVICES
6	WILL BE IMPROVED AND COSTS OF HEALTH CARE WILL BE RESTRAINED IF
7	PROVIDERS ARE ALLOWED TO DELIVER AND RECEIVE REIMBURSEMENT FOR
8	MEDICAL CARE, SERVICES, OR GOODS PROVIDED TO RECIPIENTS OF THE
9	MEDICAID PROGRAM IN NONTRADITIONAL LOCATIONS, SUCH AS THE HOME
10	OF THE RECIPIENT OR THROUGH TELEMEDICINE IN ACCORDANCE WITH
11	SECTION 25.5-5-320.
12	(b) The state department shall provide payment to
13	PROVIDERS WHO DELIVER MEDICAL CARE, SERVICES, OR GOODS TO
14	RECIPIENTS OF THE MEDICAID PROGRAM, REGARDLESS OF THE LOCATION
15	OF THE DELIVERY OF CARE, SERVICES, OR GOODS, AS LONG AS THE
16	MEDICAL CARE, SERVICES, OR GOODS ARE THE TYPE FOR WHICH
17	COMPENSATION IS AUTHORIZED UNDER TITLE XIX.
18	(c) PROVIDERS ARE ENCOURAGED TO DELIVER MEDICAL CARE,
19	SERVICES, AND GOODS TO RECIPIENTS IN NONTRADITIONAL SETTINGS OR
20	LOCATIONS AS APPROPRIATE TO FACILITATE ACCESS TO CARE BY
21	RECIPIENTS, PARTICULARLY FOR THOSE RECIPIENTS WHO RESIDE IN
22	FEDERALLY DESIGNATED HEALTH PROFESSIONAL SHORTAGE AREAS, AS
23	DEFINED IN SECTION 25-20.5-702, C.R.S.
24	(5) The state board may promulgate rules to provide for the
25	implementation and administration of subsections (3), and (4), AND (4.5)
26	of this section.
27	(6) The state department shall make good faith efforts to obtain

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1	a waiver or waivers from OF any requirements of Title XIX of the social
2	security act which THAT would prohibit the implementation of
3	subsections SUBSECTION (3), and (4), OR (4.5) of this section. Such THE
4	STATE DEPARTMENT SHALL OBTAIN THE NECESSARY waiver or waivers
5	shall be obtained from the federal department of health and human
6	services or any successor agency. If such waivers are not granted THE
7	FEDERAL DEPARTMENT DOES NOT GRANT THE NECESSARY WAIVER, the
8	state department shall not act to implement or administer subsections
9	SUBSECTION (3), and (4), OR (4.5) of this section to the extent that Title
10	XIX prohibits it IMPLEMENTATION OF ANY OF THOSE SUBSECTIONS.
11	SECTION 4. 24-10-103 (4) (b), Colorado Revised Statutes, is
12	amended BY THE ADDITION OF A NEW SUBPARAGRAPH to read:
13	24-10-103. Definitions. As used in this article, unless the context
14	otherwise requires:
15	(4) (b) "Public employee" includes any of the following:
1516	(4) (b) "Public employee" includes any of the following:(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A
16	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A
16 17	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861
16 17 18	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861 (aa) (2) OF THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x
16 17 18 19	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861 (aa) (2) OF THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x (aa) (2), PROVIDES HEALTH CARE SERVICES TO PATIENTS SEEKING HEALTH
16 17 18 19 20	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861 (aa) (2) OF THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x (aa) (2), PROVIDES HEALTH CARE SERVICES TO PATIENTS SEEKING HEALTH CARE SERVICES AT THE RURAL HEALTH CLINIC, WHICH PATIENTS SHALL
16 17 18 19 20 21	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861 (aa) (2) OF THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x (aa) (2), PROVIDES HEALTH CARE SERVICES TO PATIENTS SEEKING HEALTH CARE SERVICES AT THE RURAL HEALTH CLINIC, WHICH PATIENTS SHALL INCLUDE RECIPIENTS OF MEDICAL ASSISTANCE, AS DEFINED IN SECTION
16 17 18 19 20 21 22	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861 (aa) (2) OF THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x (aa) (2), PROVIDES HEALTH CARE SERVICES TO PATIENTS SEEKING HEALTH CARE SERVICES AT THE RURAL HEALTH CLINIC, WHICH PATIENTS SHALL INCLUDE RECIPIENTS OF MEDICAL ASSISTANCE, AS DEFINED IN SECTION 25.5-4-103, C.R.S. FOR PURPOSES OF THIS SUBPARAGRAPH (VIII), THE
16 17 18 19 20 21 22 23	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861 (aa) (2) OF THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x (aa) (2), PROVIDES HEALTH CARE SERVICES TO PATIENTS SEEKING HEALTH CARE SERVICES AT THE RURAL HEALTH CLINIC, WHICH PATIENTS SHALL INCLUDE RECIPIENTS OF MEDICAL ASSISTANCE, AS DEFINED IN SECTION 25.5-4-103, C.R.S. FOR PURPOSES OF THIS SUBPARAGRAPH (VIII), THE HEALTH CARE PRACTITIONER IS A "PUBLIC EMPLOYEE" ONLY WHEN HE OR
16 17 18 19 20 21 22 23 24	(VIII) A HEALTH CARE PRACTITIONER WHO, PURSUANT TO A CONTRACT WITH A RURAL HEALTH CLINIC, AS DEFINED IN SECTION 1861 (aa) (2) OF THE FEDERAL "SOCIAL SECURITY ACT", 42 U.S.C. SEC. 1395x (aa) (2), PROVIDES HEALTH CARE SERVICES TO PATIENTS SEEKING HEALTH CARE SERVICES AT THE RURAL HEALTH CLINIC, WHICH PATIENTS SHALL INCLUDE RECIPIENTS OF MEDICAL ASSISTANCE, AS DEFINED IN SECTION 25.5-4-103, C.R.S. FOR PURPOSES OF THIS SUBPARAGRAPH (VIII), THE HEALTH CARE PRACTITIONER IS A "PUBLIC EMPLOYEE" ONLY WHEN HE OR SHE PROVIDES HEALTH CARE SERVICES AT THE RURAL HEALTH CLINIC.

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- 10, 2011, if adjournment sine die is on May 11, 2011); except that, if a 2 referendum petition is filed pursuant to section 1 (3) of article V of the 3 state constitution against this act or an item, section, or part of this act 4 within such period, then the act, item, section, or part shall not take effect 5 unless approved by the people at the general election to be held in 6 November 2012 and shall take effect on the date of the official
- declaration of the vote thereon by the governor.

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