HOUSE COMMITTEE OF REFERENCE REPORT

February 24, 2011

	Chairman of Committee Date
	Committee on <u>Health and Environment</u> .
	After consideration on the merits, the Committee recommends the following:
	HB11-1217 be amended as follows, and as so amended, be referred to the Committee on Appropriations with favorable recommendation:
1 2	Amend printed bill, strike everything below the enacting clause and substitute:
3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18	"SECTION 1. 25-20.5-703 (1) (a) (III), (1) (c), and (3), Colorado Revised Statutes, are amended to read: 25-20.5-703. Colorado health service corps - program - creation - conditions. (1) (a) (III) In consideration for receiving repayment of all or part of his or her education loan, the health care professional shall agree to provide primary health services in federally designated health professional shortage areas in Colorado, OR, IN THE CASE OF A HEALTH CARE PROVIDER WHO BECOMES ELIGIBLE TO PARTICIPATE IN THE LOAN REPAYMENT PROGRAM AS DESCRIBED IN SUB-SUBPARAGRAPH (A.5) OF SUBPARAGRAPH (I) OF THIS PARAGRAPH (a), THE HEALTH CARE PROVIDER SHALL AGREE TO PROVIDE PRIMARY OR NONPRIMARY HEALTH SERVICES, AS APPLICABLE, IN FEDERALLY DESIGNATED HEALTH PROFESSIONAL SHORTAGE AREAS IN COLORADO. (c) (I) EXCEPT AS OTHERWISE PROVIDED IN SUBPARAGRAPH (II) OF THIS PARAGRAPH (c), health care professionals practicing in nonprimary care specialties shall ARE not be eligible for loan repayments through the Colorado health service corps.
20	(II) Nonprimary care specialists or other health care
21	PROVIDERS, INCLUDING REGISTERED OCCUPATIONAL THERAPISTS AND
22	LICENSED PROFESSIONAL NURSES OR PHYSICAL THERAPISTS, ARE ELIGIBLE
23	FOR LOAN REPAYMENTS THROUGH THE COLORADO HEALTH SERVICE CORPS

IF THE FEDERAL GOVERNMENT AUTHORIZES THEIR PARTICIPATION IN THE NATIONAL HEALTH SERVICE CORPS PROGRAM AND AUTHORIZES FEDERAL MATCHING FUNDS FOR THOSE PROVIDERS TO RECEIVE LOAN REPAYMENTS THROUGH THE COLORADO HEALTH SERVICE CORPS.

- (3) (a) EXCEPT AS OTHERWISE PROVIDED IN PARAGRAPH (b) OF THIS SUBSECTION (3), a health care professional participating in the Colorado health service corps shall not practice with a for-profit private group or solo practice or at a proprietary hospital or clinic.
- (b) A HEALTH CARE PROVIDER PRACTICING WITH A FOR-PROFIT PRIVATE GROUP OR SOLO PRACTICE OR AT A PROPRIETARY HOSPITAL OR CLINIC MAY PARTICIPATE IN THE COLORADO HEALTH SERVICE CORPS IF THE FEDERAL GOVERNMENT AUTHORIZES THE PARTICIPATION OF SUCH PROVIDERS IN THE NATIONAL HEALTH SERVICE CORPS PROGRAM AND AUTHORIZES FEDERAL MATCHING FUNDS FOR THOSE PROVIDERS TO RECEIVE LOAN REPAYMENTS THROUGH THE COLORADO HEALTH SERVICE CORPS.

SECTION 2. 25-20.5-703 (1) (a) (I), Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SUB-SUBPARAGRAPH to read:

25-20.5-703. Colorado health service corps - program - creation - conditions. (1) (a) (I) (A.5) On or after the effective date of this sub-subparagraph (A.5), if the federal government expands eligibility for the national health service corps program to health care providers other than those defined as health care professionals, those providing nonprimary health care services, or those practicing with a for-profit private group or solo practice or at a proprietary hospital or clinic, and the federal government authorizes federal matching funds for those providers applying to participate in the Colorado health service corps, the primary care office may provide loan repayments for those health care providers through the Colorado health service corps, subject to available appropriations.

SECTION 3. 25.5-4-401 (5) and (6), Colorado Revised Statutes, are amended, and the said 25.5-4-401 is further amended BY THE ADDITION OF A NEW SUBSECTION, to read:

25.5-4-401. Providers - payments - rules - legislative declaration. (4.5) (a) The General assembly hereby finds, determines, and declares that access to health care services will be improved and costs of health care will be restrained if providers are allowed to deliver and receive reimbursement for

MEDICAL CARE, SERVICES, OR GOODS PROVIDED TO RECIPIENTS OF THE MEDICAID PROGRAM IN NONTRADITIONAL LOCATIONS, SUCH AS THE HOME OF THE RECIPIENT OR THROUGH TELEMEDICINE IN ACCORDANCE WITH SECTION 25.5-5-320.

- (b) THE STATE DEPARTMENT SHALL PROVIDE PAYMENT TO PROVIDERS WHO DELIVER MEDICAL CARE, SERVICES, OR GOODS TO RECIPIENTS OF THE MEDICAID PROGRAM, REGARDLESS OF THE LOCATION OF THE DELIVERY OF CARE, SERVICES, OR GOODS, AS LONG AS THE MEDICAL CARE, SERVICES, OR GOODS ARE THE TYPE FOR WHICH COMPENSATION IS AUTHORIZED UNDER TITLE XIX.
- (c) Providers are encouraged to deliver medical care, services, and goods to recipients in nontraditional settings or locations as appropriate to facilitate access to care by recipients, particularly for those recipients who reside in federally designated health professional shortage areas, as defined in section 25-20.5-702, C.R.S.
- (5) The state board may promulgate rules to provide for the implementation and administration of subsections (3), and (4), AND (4.5) of this section.
- (6) The state department shall make good faith efforts to obtain a waiver or waivers from OF any requirements of Title XIX of the social security act which THAT would prohibit the implementation of subsections SUBSECTION (3), and (4), OR (4.5) of this section. Such THE STATE DEPARTMENT SHALL OBTAIN THE NECESSARY waiver or waivers shall be obtained from the federal department of health and human services or any successor agency. If such waivers are not granted THE FEDERAL DEPARTMENT DOES NOT GRANT THE NECESSARY WAIVER, the state department shall not act to implement or administer subsections SUBSECTION (3), and (4), OR (4.5) of this section to the extent that Title XIX prohibits it IMPLEMENTATION OF ANY OF THOSE SUBSECTIONS.

SECTION 4. 24-10-103 (4) (b), Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SUBPARAGRAPH to read:

- **24-10-103. Definitions.** As used in this article, unless the context otherwise requires:
 - (4) (b) "Public employee" includes any of the following:
- (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.

SECTION 5. Act subject to petition - effective date. This act shall take effect at 12:01 a.m. on the day following the expiration of the ninety-day period after final adjournment of the general assembly (August 10, 2011, if adjournment sine die is on May 11, 2011); except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within such period, then the act, item, section, or part shall not take effect unless approved by the people at the general election to be held in November 2012 and shall take effect on the date of the official declaration of the vote thereon by the governor."

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