

**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

Health and Human Services

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

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.*

HOUSE
3rd Reading Unamended
April 11, 2011

HOUSE
Amended 2nd Reading
April 8, 2011

- 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.

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

2

1 **SECTION 1.** Part 1 of article 1 of title 25.5, Colorado Revised
2 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
3 read:

4 **25.5-1-128. Provider payments - exemption from certain state**
5 **fiscal requirements.** (1) (a) NOTWITHSTANDING ANY PROVISION OF LAW
6 TO THE CONTRARY, WHEN THE STATE DEPARTMENT HAS REGULATORY
7 AUTHORITY OVER A PROVIDER AND HAS ESTABLISHED A STATE
8 DEPARTMENT-APPROVED PROVIDER APPLICATION TO PROVIDE A SERVICE
9 OR BILL THE STATE DEPARTMENT OR ITS AUTHORIZED CONTRACTOR FOR
10 THE SERVICE, THE PROVIDER AND THE STATE DEPARTMENT ARE EXEMPT
11 FROM THE REQUIREMENTS OF SECTION 24-30-202 (1), C.R.S.

12 (b) THE EXECUTIVE DIRECTOR MAY ADOPT RULES TO IMPLEMENT
13 THIS SECTION FOR ANY PROGRAM THE STATE DEPARTMENT IS AUTHORIZED
14 TO ADMINISTER, INCLUDING:

15 (I) THE "COLORADO MEDICAL ASSISTANCE ACT", ARTICLES 4 TO
16 6 OF THIS TITLE;

17 (II) THE "CHILDREN'S BASIC HEALTH PLAN ACT", ARTICLE 8 OF
18 THIS TITLE;

19 (III) THE "COLORADO INDIGENT CARE PROGRAM", PART 1 OF
20 ARTICLE 3 OF THIS TITLE;

21 (IV) THE SCHOOL HEALTH SERVICES PROGRAM AUTHORIZED BY
22 SECTION 25.5-5-318;

23 (V) THE PRIMARY CARE FUND, PURSUANT TO PART 3 OF ARTICLE
24 3 OF THIS TITLE; AND

25 (VI) STATE-FUNDED HEALTH AND MEDICAL CARE PURSUANT TO
26 ARTICLE 2 OF THIS TITLE.

27 (2) AS USED IN THIS SECTION, "PROVIDER" MEANS A HEALTH CARE

1 PROVIDER, MENTAL HEALTH CARE PROVIDER, PHARMACIST, HOME HEALTH
2 AGENCY, GENERAL PROVIDER, AS DEFINED IN SECTION 25.5-3-103 (3),
3 QUALIFIED PROVIDER, AS DEFINED IN SECTION 25.5-3-203 (5), SCHOOL
4 DISTRICT, AS DEFINED IN SECTION 25.5-5-318 (1) (a), OR ANY OTHER
5 ENTITY THAT PROVIDES HEALTH CARE, HEALTH CARE COORDINATION,
6 OUTREACH, ENROLLMENT, OR ADMINISTRATIVE SUPPORT SERVICES
7 THROUGH FEE-FOR-SERVICE, THE PRIMARY CARE PHYSICIAN PROGRAM, A
8 MANAGED CARE ENTITY, A BEHAVIORAL HEALTH ORGANIZATION, A
9 MEDICAL HOME, OR ANY SYSTEM OF CARE THAT COORDINATES HEALTH
10 CARE OR SERVICES, AS DEFINED AND AUTHORIZED THROUGH STATE BOARD
11 OR EXECUTIVE DIRECTOR RULE.

12 **SECTION 2.** 30-28-106 (3), Colorado Revised Statutes, is
13 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

14 **30-28-106. Adoption of master plan - contents - definitions.**

15 (3) (h) (I) THE MASTER PLAN OF A COUNTY OR REGION ADOPTED IN
16 ACCORDANCE WITH THIS SECTION MAY INCLUDE A COMMUNITY HEALTH
17 ELEMENT REFLECTING CURRENT AND PROJECTED POPULATION ESTIMATES
18 PURSUANT TO WHICH THE COUNTY OR REGION SHALL INDICATE HOW ITS
19 PLANNING DECISIONS WILL PROMOTE PUBLIC HEALTH AND SAFETY AND
20 THE GENERAL WELFARE OF THE RESIDENTS OF THE COUNTY OR REGION, AS
21 APPLICABLE. MATTERS TO BE ADDRESSED IN CONNECTION WITH THIS
22 ELEMENT OF THE MASTER PLAN MAY INCLUDE, WITHOUT LIMITATION,
23 ACCESSIBILITY, AVAILABILITY, AFFORDABILITY, AND DELIVERY OF HEALTH
24 CARE SERVICES AND HEALTH CARE FACILITIES; PUBLIC SAFETY; CIVIC
25 PARTICIPATION WITHIN THE TERRITORIAL BOUNDARIES OF THE COUNTY OR
26 REGION; AND ANY OTHER FACTORS OR POLICIES THAT WILL PROMOTE
27 PUBLIC HEALTH AND SAFETY AND THE GENERAL WELFARE WITHIN THE

1 TERRITORIAL BOUNDARIES OF THE COUNTY OR REGION. IN ASSESSING THE
2 ACCESSIBILITY, AVAILABILITY, AFFORDABILITY, AND DELIVERY OF
3 CURRENT AND ANTICIPATED HEALTH CARE SERVICES AND FACILITIES, THE
4 PLANNING COMMISSION MAY CONSIDER:

5 (A) SURROUNDING COUNTIES, REGIONS, OR MUNICIPALITIES IN
6 ORDER TO DEVELOP AN INVENTORY OF EXISTING FACILITIES AND SERVICES
7 AND AN ASSESSMENT OF TRANSIT ACCESSIBILITY; AND

8 (B) POPULATION ESTIMATES AND PROJECTIONS PROVIDED BY THE
9 COLORADO DEPARTMENT OF LOCAL AFFAIRS TO ESTABLISH CURRENT AND
10 PROJECTED NEEDS OF FACILITIES AND SERVICES.

11 (II) NOTHING IN SUBPARAGRAPH (I) OF THIS PARAGRAPH (h) SHALL
12 BE CONSTRUED TO PRECLUDE THE DEVELOPMENT OF A HEALTH CARE
13 FACILITY OR HOSPITAL THAT IS NOT INCLUDED IN THE MASTER PLAN OF A
14 COUNTY OR REGION, NOR SHALL ANYTHING IN SAID SUBPARAGRAPH (I) BE
15 CONSTRUED AS REQUIRING A HOSPITAL OR FACILITY TO OFFER ANY
16 SERVICE THAT IS INCLUDED IN THE PLAN.

17 (III) TO THE EXTENT PRACTICABLE, A COUNTY OR REGION THAT
18 ELECTS TO INCLUDE A COMMUNITY HEALTH ELEMENT IN ITS MASTER PLAN
19 IS STRONGLY ENCOURAGED TO COLLABORATE WITH A PUBLIC HEALTH
20 AGENCY OF THE COUNTY OR DISTRICT, AS APPLICABLE, IN THE INCLUSION
21 OF SUCH ELEMENT AND TO FURTHER USE INFORMATION CONTAINED IN A
22 PUBLIC HEALTH PLAN GOVERNING THE COUNTY OR REGION PURSUANT TO
23 SUBPART 3 OF PART 5 OF ARTICLE 1 OF TITLE 25, C.R.S., IN THE INCLUSION
24 OF SUCH ELEMENT.

25 (IV) AS USED IN THIS PARAGRAPH (h), UNLESS THE CONTEXT
26 OTHERWISE REQUIRES:

27 (A) "HEALTH CARE FACILITY" OR "FACILITY" INCLUDES, WITHOUT

1 LIMITATION, PUBLIC AND PRIVATE HEALTH CARE CLINICS OR PRACTICES,
2 INCLUDING SCHOOL-BASED HEALTH CENTERS; LOCATIONS THAT PROVIDE
3 ACCESS TO ALTERNATIVE MEDICINES; LONG-TERM CARE FACILITIES;
4 REHABILITATIVE CENTERS; HOSPICES; AND PHARMACIES. FOR PURPOSES
5 OF THIS PARAGRAPH (h), "HEALTH CARE FACILITY" SHALL NOT INCLUDE A
6 HOSPITAL, OR ANY FACILITY OWNED OR OPERATED BY A HOSPITAL, THAT
7 IS LICENSED OR CERTIFIED PURSUANT TO SECTION 25-3-101, C.R.S.

8 (B) "HEALTH CARE SERVICE" OR "SERVICE" MEANS, WITHOUT
9 LIMITATION, ADOLESCENT HEALTH CARE, BEHAVIORAL CARE,
10 CHIROPRACTIC SERVICES, DENTAL SERVICES, THE PROVISION OF DURABLE
11 MEDICAL EQUIPMENT, EMERGENCY CARE, WELL WOMAN CARE, GERIATRIC
12 CARE, HEALTH AND MEDICAL INSTRUCTION AT LOCAL EDUCATIONAL
13 INSTITUTIONS, HEARING SERVICES AND THE PROVISION OF HEARING AIDS,
14 INPATIENT CARE, LONG-TERM CARE, MENTAL HEALTH SERVICES,
15 OBSTETRIC AND GYNECOLOGICAL CARE, OUTPATIENT CARE, PEDIATRIC
16 SERVICES, THE PROVISION OF PRESCRIPTION DRUGS AND MEDICATION
17 THERAPY MANAGEMENT, PRIMARY AND PREVENTIVE CARE, SUBSTANCE
18 ABUSE TREATMENT, TRAUMA CARE, VISION CARE AND CORRECTION, AND
19 CARE FOR INDIVIDUALS WITH DISABILITIES.

20 **SECTION 3.** 31-23-206, Colorado Revised Statutes, is amended
21 BY THE ADDITION OF A NEW SUBSECTION to read:

22 **31-23-206. Master plan - definitions.** (5.5) (a) THE MASTER
23 PLAN OF A MUNICIPALITY ADOPTED IN ACCORDANCE WITH THIS SECTION
24 MAY INCLUDE A COMMUNITY HEALTH ELEMENT REFLECTING CURRENT AND
25 PROJECTED POPULATION ESTIMATES PURSUANT TO WHICH THE
26 MUNICIPALITY SHALL INDICATE HOW ITS PLANNING DECISIONS WILL
27 PROMOTE PUBLIC HEALTH AND SAFETY AND THE GENERAL WELFARE OF

1 THE RESIDENTS OF THE MUNICIPALITY. MATTERS TO BE ADDRESSED IN
2 CONNECTION WITH THIS ELEMENT OF THE MASTER PLAN MAY INCLUDE,
3 WITHOUT LIMITATION, ACCESSIBILITY, AVAILABILITY, AFFORDABILITY,
4 AND DELIVERY OF HEALTH CARE SERVICES AND HEALTH CARE FACILITIES;
5 PUBLIC SAFETY; CIVIC PARTICIPATION WITHIN THE TERRITORIAL
6 BOUNDARIES OF THE MUNICIPALITY; AND ANY OTHER FACTORS OR
7 POLICIES THAT WILL PROMOTE PUBLIC HEALTH AND SAFETY AND THE
8 GENERAL WELFARE WITHIN THE TERRITORIAL BOUNDARIES OF THE
9 MUNICIPALITY. IN ASSESSING THE ACCESSIBILITY, AVAILABILITY,
10 AFFORDABILITY, AND DELIVERY OF CURRENT AND ANTICIPATED HEALTH
11 CARE SERVICES AND FACILITIES, THE PLANNING COMMISSION MAY
12 CONSIDER:

13 (I) SURROUNDING COUNTIES, REGIONS, OR MUNICIPALITIES IN
14 ORDER TO DEVELOP AN INVENTORY OF EXISTING FACILITIES AND SERVICES
15 AND AN ASSESSMENT OF TRANSIT ACCESSIBILITY; AND

16 (II) POPULATION ESTIMATES AND PROJECTIONS PROVIDED BY THE
17 COLORADO DEPARTMENT OF LOCAL AFFAIRS TO ESTABLISH CURRENT AND
18 PROJECTED NEEDS OF FACILITIES AND SERVICES.

19 (b) TO THE EXTENT PRACTICABLE, A MUNICIPALITY THAT ELECTS
20 TO INCLUDE A COMMUNITY HEALTH ELEMENT IN ITS MASTER PLAN IS
21 STRONGLY ENCOURAGED TO COLLABORATE WITH A PUBLIC HEALTH
22 AGENCY OF THE MUNICIPALITY OR OF THE COUNTY OR DISTRICT WITHIN
23 WHICH THE MUNICIPALITY IS LOCATED, AS APPLICABLE, IN THE INCLUSION
24 OF SUCH ELEMENT AND TO FURTHER USE INFORMATION CONTAINED IN A
25 PUBLIC HEALTH PLAN GOVERNING THE MUNICIPALITY PURSUANT TO
26 SUBPART 3 OF PART 5 OF ARTICLE 1 OF TITLE 25, C.R.S., IN THE INCLUSION
27 OF SUCH ELEMENT.

1 (c) NOTHING IN PARAGRAPH (a) OF THIS SUBSECTION (5.5) SHALL
2 BE CONSTRUED TO PRECLUDE THE DEVELOPMENT OF A HEALTH CARE
3 FACILITY OR HOSPITAL THAT IS NOT INCLUDED IN THE MASTER PLAN OF A
4 MUNICIPALITY, NOR SHALL ANYTHING IN SAID PARAGRAPH (a) BE
5 CONSTRUED AS REQUIRING A HOSPITAL OR FACILITY TO OFFER ANY
6 SERVICE THAT IS INCLUDED IN THE PLAN.

7 (d) AS USED IN THIS SUBSECTION (5.5), UNLESS THE CONTEXT
8 OTHERWISE REQUIRES:

9 (I) "HEALTH CARE FACILITY" OR "FACILITY" INCLUDES, WITHOUT
10 LIMITATION, PUBLIC AND PRIVATE HEALTH CARE CLINICS OR PRACTICES,
11 INCLUDING SCHOOL-BASED HEALTH CENTERS; LOCATIONS THAT PROVIDE
12 ACCESS TO ALTERNATIVE MEDICINES; LONG-TERM CARE FACILITIES;
13 REHABILITATIVE CENTERS; HOSPICES; AND PHARMACIES. FOR PURPOSES
14 OF THIS SUBSECTION (5.5), "HEALTH CARE FACILITY" SHALL NOT INCLUDE
15 A HOSPITAL, OR ANY FACILITY OWNED OR OPERATED BY A HOSPITAL, THAT
16 IS LICENSED OR CERTIFIED PURSUANT TO SECTION 25-3-101, C.R.S.

17 (II) "HEALTH CARE SERVICE" OR "SERVICE" MEANS, WITHOUT
18 LIMITATION, ADOLESCENT HEALTH CARE, BEHAVIORAL CARE,
19 CHIROPRACTIC SERVICES, DENTAL SERVICES, THE PROVISION OF DURABLE
20 MEDICAL EQUIPMENT, EMERGENCY CARE, WELL WOMAN CARE, GERIATRIC
21 CARE, HEALTH AND MEDICAL INSTRUCTION AT LOCAL EDUCATIONAL
22 INSTITUTIONS, HEARING SERVICES AND THE PROVISION OF HEARING AIDS,
23 INPATIENT CARE, LONG-TERM CARE, MENTAL HEALTH SERVICES,
24 OBSTETRIC AND GYNECOLOGICAL CARE, OUTPATIENT CARE, PEDIATRIC
25 SERVICES, THE PROVISION OF PRESCRIPTION DRUGS AND MEDICATION
26 THERAPY MANAGEMENT, PRIMARY AND PREVENTIVE CARE, SUBSTANCE
27 ABUSE TREATMENT, TRAUMA CARE, VISION CARE AND CORRECTION, AND

1 CARE FOR INDIVIDUALS WITH DISABILITIES.

2 SECTION 4. 25.5-6-108.5 (2) (b), Colorado Revised Statutes, is
3 amended to read:

4 25.5-6-108.5. Community long-term care studies - authority
5 to implement - alternative care facility report. (2) (b) The study
6 conducted pursuant to this subsection (2) shall be completed by January
7 1, 2011 2012, and, if federal approval is obtained prior to final
8 figure-setting for the fiscal year commencing July 1, 2011 2012, the state
9 department shall submit a request through the budget process for
10 implementation of the approved changes for that fiscal year.

11 SECTION 5. Appropriation. In addition to any other
12 appropriation, there is hereby appropriated, to the department of health
13 care policy and financing, for allocation to the executive director's office,
14 general professional services and special projects, for the fiscal year
15 beginning July 1, 2011, the sum of seventy-five thousand dollars
16 (\$75,000), or so much thereof as may be necessary, for the
17 implementation of this act. Of said sum, thirty-seven thousand five
18 hundred dollars (\$37,500) shall be from the department of health care
19 policy and financing cash fund, and thirty-seven thousand five hundred
20 dollars (\$37,500) shall be from federal funds.

21 SECTION 6. Effective date. This act shall take effect July 1,
22 2011.

23 SECTION 7. Safety clause. The general assembly hereby finds,
24 determines, and declares that this act is necessary for the immediate
25 preservation of the public peace, health, and safety.