Second Regular Session Sixty-eighth General Assembly STATE OF COLORADO

PREAMENDED

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

LLS NO. 12-0356.01 Duane Gall x4335

HOUSE BILL 12-1300

HOUSE SPONSORSHIP

Gardner B., Barker, Ryden, Waller

SENATE SPONSORSHIP

Aguilar,

House Committees

Senate Committees

Judiciary

A BILL FOR AN ACT 101 CONCERNING PROFESSIONAL REVIEW COMMITTEES, AND, IN 102 CONNECTION THEREWITH, IMPLEMENTING THE SUNSET REVIEW 103 RECOMMENDATIONS OF THE DEPARTMENT OF REGULATORY 104 AGENCIES.

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.)

Sunset Process - House Judiciary Committee. The bill implements the recommendations made by the department of regulatory

agencies (DORA) pursuant to DORA's 2011 sunset review report of professional review committees and the committee on anticompetitive conduct.

Sections 1 and 2 of the bill continue the functions of professional review committees for 7 years, until 2019.

Sections 3 to 7 of the bill authorize professional review of physician assistants and advanced practice nurses.

Section 6 of the bill also specifies that the sharing of professional review records and information with regulators and other professional review entities does not waive the professional review privilege or violate applicable confidentiality provisions.

Section 8 of the bill requires entities that conduct professional review of physicians or physician assistants to register with the Colorado medical board and report on their activities, and directs the medical board to publish summary data in aggregated form. Section 9 of the bill requires entities that conduct professional review of the practice of advanced practice nursing to register with the nursing board and report on their activities, and directs the nursing board to publish summary date in aggregated form. If an entity fails to register and report as required, the entity and its governing board lose the qualified immunity that would otherwise apply for acts and omissions occurring during the period of noncompliance.

The bill also corrects inconsistent references to peer review and professional review and makes nonsubstantive clarifications and corrections to statutory language.

SECTION 1. In Colorado Revised Statutes, amend 12-36.5-107
as follows:

12-36.5-107. Repeal of article. This article is repealed, effective
July 1, 2012 SEPTEMBER 1, 2019. Prior to such repeal, THE DEPARTMENT
OF REGULATORY AGENCIES SHALL REVIEW the functions of professional
review committees and the committee on anticompetitive conduct shall
be reviewed in accordance with section 24-34-104, C.R.S.

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

SECTION 2. In Colorado Revised Statutes, 24-34-104, **amend** (43) introductory portion and (50.5) introductory portion; **repeal** (43) (g);

and **add** (50.5) (e) as follows:

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1	24-34-104. General assembly review of regulatory agencies
2	and functions for termination, continuation, or reestablishment.
3	(43) The following agencies, functions, or both, shall terminate on July
4	1, 2012:
5	(g) The functions of professional review committees pursuant to
6	article 36.5 of title 12, C.R.S.;
7	(50.5) The following agencies, functions, or both, shall terminate
8	on September 1, 2019:
9	(e) THE FUNCTIONS OF PROFESSIONAL REVIEW COMMITTEES
10	PURSUANT TO ARTICLE 36.5 OF TITLE 12, C.R.S.
11	SECTION 3. In Colorado Revised Statutes, amend 12-36.5-101
12	as follows:
13	12-36.5-101. Legislative declaration. (1) The general assembly
14	hereby finds, determines, and declares that the Colorado medical board
15	created pursuant to IN article 36 of this title acts AND THE STATE BOARD
16	OF NURSING CREATED IN ARTICLE 38 OF THIS TITLE ACT for the state in its
17	sovereign capacity to govern licensure, discipline, and professional
18	review of persons licensed to practice medicine, LICENSED AS PHYSICIAN
19	ASSISTANTS, AND LICENSED TO PRACTICE NURSING AND GRANTED AN
20	AUTHORITY AS ADVANCED PRACTICE NURSES, RESPECTIVELY, in this state.
21	The general assembly further finds, determines, and declares that:
22	(a) The authority to practice medicine PROVIDE HEALTH CARE in
23	this state is a privilege granted by the legislative authority of the state; and
24	that
25	(b) It is necessary for the health, safety, and welfare of the people
26	of this state that the Colorado medical board APPROPRIATE REGULATORY
2.7	BOARDS exercise its THEIR authority to protect the people of this state

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1	from the unauthorized practice of medicine and from unprofessional
2	conduct by persons licensed to practice medicine PROVIDE HEALTH CARE
3	under article 36 ARTICLES 36 AND 38 of this title.
4	(2) The general assembly recognizes that:
5	(a) Many patients of persons licensed to practice medicine
6	PROVIDE HEALTH CARE in this state have restricted choices of physicians
7	HEALTH CARE PROVIDERS under a variety of circumstances and
8	conditions;
9	(b) Many patients lack the knowledge, experience, or education
10	to properly evaluate the quality of medical OR NURSING practice or the
11	professional conduct of those licensed to practice medicine, LICENSED TO
12	ACT AS PHYSICIAN ASSISTANTS, AND LICENSED TO PRACTICE NURSING AND
13	GRANTED AN AUTHORITY AS ADVANCED PRACTICE NURSES; and
14	(c) It is necessary and proper that the Colorado medical board
15	RESPECTIVE REGULATORY BOARDS exercise its THEIR regulatory authority
16	to protect the health, safety, and welfare of the people of this state.
17	(3) The general assembly recognizes that, in the proper exercise
18	of its THEIR authority and responsibilities under this article, the Colorado
19	medical board AND THE STATE BOARD OF NURSING must, to some extent,
20	replace competition with regulation, and that such THE replacement of
21	competition by regulation, particularly with regard to physicians PERSONS
22	LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE
23	38 OF THIS TITLE AND GRANTED AN AUTHORITY AS ADVANCED PRACTICE
24	NURSES, is related to a legitimate state interest in the protection of the
25	health, safety, and welfare of the people of this state.
26	SECTION 4. In Colorado Revised Statutes, amend 12-36.5-102
27	as follows:

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1	12-36.5-102. Definitions. As used in this article, unless the
2	context otherwise requires:
3	(1) "Medical board" means the Colorado medical board created
4	pursuant to section 12-36-103. "AUTHORIZED ENTITY" MEANS A
5	CORPORATION, ORGANIZATION, OR ENTITY THAT IS AUTHORIZED TO
6	ESTABLISH A PROFESSIONAL REVIEW COMMITTEE UNDER SECTION
7	12-36.5-104 (3) OR (4) OR UNDER RULES OF THE MEDICAL BOARD OR
8	NURSING BOARD ADOPTED PURSUANT TO SECTION 12-36.5-104 (5).
9	(2) "CMS" MEANS THE FEDERAL CENTERS FOR MEDICARE AND
10	MEDICAID SERVICES.
11	(2) (3) "Governing board" means any A board, board of trustees,
12	governing board, or other body, or duly authorized subcommittee thereof,
13	of any organization of health care providers AN AUTHORIZED ENTITY,
14	which board or body has final authority pursuant to such organization's
15	THE ENTITY'S written bylaws, policies, or procedures to take final action
16	regarding the recommendations of any authorized A professional review
17	committee.
18	(4) "JOINT COMMISSION" MEANS THE JOINT COMMISSION ON THE
19	ACCREDITATION OF HEALTHCARE ORGANIZATIONS OR ITS SUCCESSOR
20	ENTITY.
21	(5) "MEDICAL BOARD" MEANS THE COLORADO MEDICAL BOARD
22	CREATED IN SECTION 12-36-103 (1).
23	(3) (6) "Professional review committee" means any committee
24	authorized under the provisions of this article to review and evaluate the
25	QUALIFICATIONS, COMPETENCE, AND professional conduct of, and the
26	quality and appropriateness of patient care provided by, any physician
27	DEDSON licensed under article 36 of this title OP LICENSED LINDER APTICLE

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1	38 OF THIS TITLE AND GRANTED AN AUTHORITY AS AN ADVANCED
2	PRACTICE NURSE. "PROFESSIONAL REVIEW COMMITTEE" INCLUDES A
3	GOVERNING BOARD, A HEARING PANEL APPOINTED BY A GOVERNING BODY
4	TO CONDUCT A HEARING UNDER SECTION 12-36.5-104 (7) (a), AND AN
5	INDEPENDENT THIRD PARTY DESIGNATED BY A GOVERNING BOARD UNDER
6	SECTION 12-36.5-104 (8) (b).
7	(4) (7) (a) "Records" means any and all written, ELECTRONIC, or
8	verbal ORAL communications by any person any member of an
9	investigative body, or any professional review committee or governing
10	board, or the staff thereof arising from any activities of a professional
11	review committee, INCLUDING A GOVERNING BOARD, ESTABLISHED BY AN
12	authorized by ENTITY UNDER this article OR BY THE AGENT OR STAFF
13	THEREOF, including the ANY:
14	(I) REFERENCE;
15	(II) Complaint, response, OR correspondence related thereto TO
16	THE COMPLAINT OR RESPONSE;
17	(III) INTERVIEWS OR STATEMENTS, REPORTS, MEMORANDA,
18	ASSESSMENTS, AND PROGRESS REPORTS DEVELOPED TO ASSIST IN
19	PROFESSIONAL REVIEW ACTIVITIES;
20	(IV) ASSESSMENTS AND PROGRESS REPORTS TO ASSIST IN
21	PROFESSIONAL REVIEW ACTIVITIES, INCLUDING REPORTS AND
22	ASSESSMENTS DEVELOPED BY INDEPENDENT CONSULTANTS IN
23	CONNECTION WITH PROFESSIONAL REVIEW ACTIVITIES; AND
24	(V) Recordings or transcripts of proceedings, minutes, formal
25	recommendations, decisions, exhibits, and other similar items or
26	documents RELATED TO PROFESSIONAL REVIEW ACTIVITIES AND typically
27	constituting the records of administrative proceedings.

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1	(b) "RECORDS" DOES NOT INCLUDE ANY WRITTEN, ELECTRONIC, OR
2	ORAL COMMUNICATIONS BY ANY PERSON THAT ARE OTHERWISE
3	AVAILABLE FROM AN ORIGINAL SOURCE OUTSIDE THE SCOPE OF
4	PROFESSIONAL REVIEW ACTIVITIES, INCLUDING MEDICAL RECORDS AND
5	OTHER HEALTH INFORMATION.
6	(8) "STATE BOARD OF NURSING" OR "NURSING BOARD" MEANS THE
7	STATE BOARD OF NURSING CREATED IN SECTION 12-38-104.
8	SECTION 5. In Colorado Revised Statutes, amend 12-36.5-103
9	as follows:
10	12-36.5-103. Use of professional review committees.
11	(1) (a) The general assembly recognizes that:
12	(I) The medical board AND THE NURSING BOARD, while assuming
13	and retaining ultimate authority for licensure and discipline in accordance
14	with article ARTICLES 36 AND 38 of this title, RESPECTIVELY, and in
15	accordance with this article, cannot practically and economically assume
16	responsibility over every single allegation or instance of purported
17	deviation from the standards of quality for the practice of medicine OR
18	NURSING, from the standards of professional conduct, or from the
19	standards of appropriate care; and that
20	(II) An attempt to exercise such oversight would result in
21	extraordinary delays in the determination of the legitimacy of such THE
22	allegations and would result in the inappropriate and unequal exercise of
23	its THEIR authority to license and discipline physicians PERSONS LICENSED
24	UNDER ARTICLE $\overline{36}$ OF THIS TITLE OR LICENSED UNDER ARTICLE $\overline{38}$ OF THIS
25	TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES.
26	(b) It is therefore the intent of the general assembly that the
27	medical board AND THE NURSING BOARD utilize and allow professional

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review committees and governing boards to assist it THEM in meeting its THEIR responsibilities under article ARTICLES 36 AND 38 of this title, RESPECTIVELY, and under this article.

- (2) All physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES are encouraged to serve upon such professional review committees when called to do so and to study and review in good faith an objectively reasonable manner the professional conduct of physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES, including the QUALIFICATIONS, COMPETENCE, AND PROFESSIONAL CONDUCT OF, AND THE quality and appropriateness of patient care PROVIDED BY, THOSE PERSONS.
- (3) (a) The use of professional review committees is declared to be an extension of the authority of the medical board AND NURSING BOARD. However, except as otherwise provided in this article, nothing in this article shall limit LIMITS the authority of professional review committees properly constituted under this article.
- (b) Professional review committees, the members who constitute such THE committees, governing boards, AUTHORIZED ENTITIES, and persons who participate directly or indirectly in professional review proceedings ACTIVITIES are granted certain immunities from SUIT AND liability FOR DAMAGES arising from actions which THAT are within the scope of their activities and taken in good faith as provided in section 12-36.5-105. Such THESE grants of immunity from SUIT AND liability FOR DAMAGES are declared to be necessary to ensure that professional review

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1	committees and governing boards can exercise their professional
2	knowledge and judgment.
3	SECTION 6. In Colorado Revised Statutes, amend 12-36.5-104
4	as follows:
5	12-36.5-104. Establishment of professional review committees
6	- function - rules. (1) A professional review committee may be
7	established pursuant to this section to review and evaluate the
8	QUALIFICATIONS AND COMPETENCE OF, THE quality and appropriateness
9	of patient care provided by, and the professional conduct of, any
10	physician licensed under article 36 of this title PERSON LICENSED UNDER
11	ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE
12	AND GRANTED AN AUTHORITY AS AN ADVANCED PRACTICE NURSE.
13	(2) Persons Licensed to practice medicine under article 36 of this
14	title PHYSICIANS who are actively engaged in the practice of medicine in
15	this state shall MUST constitute a majority of THE VOTING MEMBERS OF any
16	professional review committee established pursuant to this section FOR
17	PHYSICIANS AND PHYSICIAN ASSISTANTS; except for those boards THAT
18	PHYSICIANS NEED NOT CONSTITUTE THE MAJORITY OF THE VOTING
19	MEMBERS OF A BOARD authorized by paragraph (g) of subsection (4) of
20	this section OR AN INDEPENDENT THIRD PARTY DESIGNATED BY A
21	GOVERNING BOARD UNDER PARAGRAPH (b) OF SUBSECTION (8) OF THIS
22	SECTION.
23	(3) A utilization and quality control peer review organization, as
24	defined pursuant to 42 U.S.C. sec. 1320c-1, or any other organization
25	performing similar review services under federal or state law shall be IS
26	an approved professional review committee under this article.
27	(4) Any A professional review committee established by any of

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1	the following organizations, entities, or professional societies shall be
2	AUTHORIZED ENTITIES IS an approved professional review committee
3	under this article if it operates pursuant to IN SUBSTANTIAL COMPLIANCE
4	WITH written bylaws, policies, or procedures that are in compliance with
5	this article and that have been approved by its THE AUTHORIZED ENTITY'S
6	governing board:
7	(a) The medical OR NURSING staff of a hospital licensed pursuant
8	to part 1 of article 3 of title 25, C.R.S., or certified pursuant to section
9	25-1.5-103 (1) (a) (II), C.R.S.;
10	(b) The medical OR NURSING staff of a hospital-related
11	corporation. For the purposes of this paragraph (b), a corporation AN
12	ENTITY is A "hospital-related CORPORATION" if the licensed or certified
13	hospital or holding company of such the LICENSED OR CERTIFIED hospital
14	has ownership or control of such corporation THE ENTITY;
15	(c) A society or association of physicians whose membership
16	includes not less than one-third of the doctors of medicine or doctors of
17	osteopathy licensed to practice and residing in this state, if the physician
18	whose services are the subject of the review is a member of such THE
19	society or association;
20	(d) A society or association of physicians licensed to practice and
21	residing in this state and specializing in a specific discipline of medicine,
22	whose society or association has been designated by the medical board as
23	the A specialty society or association representative of physicians
24	practicing such THE specific discipline of medicine, if the physician
25	whose services are the subject of the review is a member of such THE
26	specialty society or association;
27	(e) An individual practice association or a preferred provider

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organization comprised CONSISTING of at least twenty-five physicians or a medical group which THAT predominantly serves members of a health maintenance organization licensed pursuant to parts 1 and 4 of article 16 of title 10, C.R.S. A professional review committee established pursuant to this paragraph (e) shall have HAS jurisdiction to review only physicians who are members of the association or organization creating and authorizing that committee; except that such THE professional review committee may review the care provided to a particular patient referred by a member of such THE association or organization to another physician who is not a member of such THE association or organization.

- (f) A corporation authorized to insure physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES pursuant to article 3 of title 10, C.R.S., or any other corporation ORGANIZATION authorized to insure such physicians PERSONS in this state when designated by the medical board OR NURSING BOARD under subsection (5) of this section;
- (g) THE governing boards BOARD of any AUTHORIZED entity which THAT has a professional review committee established pursuant to article 36 OR ARTICLE 38 of this title;
- (h) Any peer PROFESSIONAL review committee established or created by a combination or pooling of any of the organizations authorized by this section to have a professional review committee ENTITIES:
- (i) (I) A nonprofit corporation or association comprised CONSISTING of representatives from a statewide medical PROFESSIONAL society and a statewide hospital association. Such THE association shall

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1	be comprised MUST CONSIST of physicians PERSONS LICENSED UNDER
2	ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE
3	AND GRANTED AUTHORITY AS ADVANCED PRACTICE NURSES, hospital
4	administrators, and hospital trustees, with a majority of such THE
5	representatives being physicians PERSONS LICENSED UNDER ARTICLE 36 OF
6	THIS TITLE OR LICENSED UNDER ARTICLE $\overline{38}$ OF THIS TITLE AND GRANTED
7	AUTHORITY AS ADVANCED PRACTICE NURSES. The association may
8	establish, or contract for, one or more peer PROFESSIONAL review
9	committees to review the care by hospital staff physicians HEALTH CARE
10	PROVIDERS, with priority given to small rural medical HOSPITAL staffs.
11	Such peer These Professional review services shall must be available
12	statewide on a fee-for-service basis to licensed or certified hospitals at the
13	joint request of the governing body BOARD and the medical OR NURSING
14	staff of the hospital or at the sole request of the governing body BOARD
15	of the hospital. If a physician MEMBER being reviewed specializes in a
16	generally recognized specialty of medicine OR NURSING, at least one of
17	the physicians HEALTH CARE PROVIDERS on the peer PROFESSIONAL
18	review committee shall MUST be a physician practicing PERSON LICENSED
19	UNDER ARTICLE 36 OF THIS TITLE, OR LICENSED UNDER ARTICLE 38 OF THIS
20	TITLE AND GRANTED AUTHORITY AS AN ADVANCED PRACTICE NURSE, WHO
21	PRACTICES such specialty.
22	(II) For purposes of the introductory portion to this subsection (4)
23	AND THIS PARAGRAPH (i), the bylaws, policies, and OR procedures shall
24	MUST be in SUBSTANTIAL compliance with this article and be approved by
25	the nonprofit corporation or association.
26	(j) The medical OR NURSING staff of an ambulatory surgical center

licensed pursuant to part 1 of article 3 of title 25, C.R.S.;

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1	(K) A PROFESSIONAL SERVICES ENTITY ORGANIZED PURSUANT TO
2	SECTION 12-36-134;
3	(1) A PROVIDER NETWORK THAT INCLUDES HEALTH CARE
4	PROVIDERS ORGANIZED PURSUANT TO PART 3 OF ARTICLE 18 OF TITLE 6,
5	C.R.S.;
6	(m) A HEALTH SYSTEM THAT INCLUDES TWO OR MORE
7	AUTHORIZED ENTITIES WITH A COMMON GOVERNING BOARD;
8	(n) A TRUST ORGANIZATION ESTABLISHED UNDER ARTICLE 70 OF
9	TITLE 11, C.R.S.;
10	(o) AN ENTITY LICENSED PURSUANT TO PARTS 1 AND 4 OF ARTICLE
11	16 OF TITLE 10, C.R.S.; AND
12	(p) AN ACCOUNTABLE CARE ORGANIZATION ESTABLISHED UNDER
13	THE FEDERAL "PATIENT PROTECTION AND AFFORDABLE CARE ACT",
14	PUB.L. 111-148, OR OTHER ORGANIZATION WITH A SIMILAR FUNCTION.
15	(5) The medical board AND THE NURSING BOARD, WITH RESPECT
16	TO THE LICENSEES SUBJECT TO THEIR JURISDICTION, may establish by rule
17	procedures necessary to authorize other health care or physician
18	organizations or professional societies to AS AUTHORIZED ENTITIES THAT
19	MAY establish professional review committees.
20	(6) (a) A professional review committee acting pursuant to this
21	part 1 may investigate or cause to be investigated:
22	(I) The qualifications AND COMPETENCE of any physician licensed
23	under article 36 of this title PERSON LICENSED UNDER ARTICLE 36 OF THIS
24	TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED
25	AUTHORITY AS AN ADVANCED PRACTICE NURSE who seeks to subject
26	himself or herself to the authority of any organization, entity, or
27	professional society listed in subsection (4) of this section or any

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organization or professional society that has been authorized by the medical board to establish a professional review committee pursuant to subsection (5) of this section AUTHORIZED ENTITY; or

- (II) The quality or appropriateness of patient care rendered by, or the professional conduct of, any physician licensed under article 36 of this title PERSON LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS AN ADVANCED-PRACTICE NURSE who is subject to the authority of such organization, entity, or professional society THE AUTHORIZED ENTITY.
- (b) Such The Professional Review Committees Hall Conduct The investigation shall be conducted in Substantial conformity with written bylaws, policies, or procedures adopted by such organization, entity, or professional society The Authorized Entity's Governing BOARD.
- (7) The written bylaws, policies, or procedures of any professional review committee shall FOR LICENSED PHYSICIANS AND PHYSICIAN ASSISTANTS MUST provide for at least the following:
- (a) (I) EXCEPT AS PROVIDED IN SUBPARAGRAPH (II) OF THIS PARAGRAPH (a), if the findings of any investigation indicate that the LICENSED physician OR PHYSICIAN ASSISTANT who is the subject of the investigation is lacking in qualifications OR COMPETENCY, has provided substandard or inappropriate patient care, or has exhibited inappropriate professional conduct AND THE PROFESSIONAL REVIEW COMMITTEE TAKES OR RECOMMENDS AN ACTION TO ADVERSELY AFFECT THE PHYSICIAN'S OR PHYSICIAN ASSISTANT'S MEMBERSHIP, AFFILIATION, OR PRIVILEGES WITH THE AUTHORIZED ENTITY, the professional review committee shall hold a hearing unless the physician waives his right to a hearing, to consider

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1	the findings except that, AND RECOMMENDATIONS UNLESS THE PHYSICIAN
2	OR PHYSICIAN ASSISTANT WAIVES, IN WRITING, THE RIGHT TO A HEARING.
3	(II) If the professional review committee is submitting its findings
4	AND RECOMMENDATIONS to another professional review committee for
5	review, only one hearing shall be IS necessary prior to any appeal before
6	the governing body BOARD.
7	(b) Any A person who has participated in the course of any AN
8	investigation shall be IS disqualified as a member of the PROFESSIONAL
9	REVIEW committee at any THAT CONDUCTS A hearing held pursuant to
10	paragraph (a) of this subsection (7), but such THE person may participate
11	as a witness in such THE hearing.
12	(c) The physician AUTHORIZED ENTITY SHALL GIVE REASONABLE
13	NOTICE OF THE HEARING, AND OF ANY FINDING OR RECOMMENDATION
14	THAT WOULD ADVERSELY AFFECT THE PHYSICIAN'S OR PHYSICIAN
15	ASSISTANT'S MEMBERSHIP, AFFILIATION, OR PRIVILEGES WITH THE
16	AUTHORIZED ENTITY TO THE PHYSICIAN OR PHYSICIAN ASSISTANT who is
17	the subject of any AN investigation, shall be given reasonable notice of
18	such hearing and shall have THE PHYSICIAN OR PHYSICIAN ASSISTANT HAS
19	a right to be present, to be represented by legal counsel at such THE
20	hearing, and to offer evidence in his OR HER own behalf.
21	(d) After such THE hearing, the professional review committee
22	THAT CONDUCTED THE HEARING shall make any recommendations it
23	deems necessary to the governing board, unless OTHERWISE provided by
24	federal law or regulation.
25	(e) THE PROFESSIONAL REVIEW COMMITTEE SHALL GIVE a copy of
26	such THE recommendations shall be given to the subject physician OR
27	PHYSICIAN ASSISTANT, who then shall have HAS the right to appeal the

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1	findings and recommendations of the professional review committee to
2	the governing board to which the recommendations are made WITH
3	REGARD TO ANY FINDING OR RECOMMENDATION THAT WOULD ADVERSELY
4	AFFECT THE PHYSICIAN'S OR PHYSICIAN ASSISTANT'S MEMBERSHIP.
5	AFFILIATION, OR PRIVILEGES WITH THE AUTHORIZED ENTITY.
6	(f) The professional review committee shall forward a
7	copy of any recommendations made pursuant to paragraph (d) of this
8	subsection (7) shall be promptly forwarded to the medical board.
9	(8) (a) All governing boards shall adopt written bylaws, policies,
10	or procedures UNDER which provide that a physician OR PHYSICIAN
11	ASSISTANT who is the subject of an adverse recommendation by a
12	professional review committee may appeal to the governing board Such
13	FOLLOWING A HEARING IN ACCORDANCE WITH SUBSECTION (7) OF THIS
14	SECTION. THE bylaws, policies, or procedures shall MUST provide that the
15	physician OR PHYSICIAN ASSISTANT shall be given reasonable notice of his
16	OR HER right to appeal and, unless waived by the physician shall have
17	PHYSICIAN ASSISTANT, HAS the right to appear before the governing board
18	to be represented by legal counsel, and to offer such THE argument on the
19	record as he OR SHE deems appropriate.
20	(b) The bylaws may provide that a committee of not fewer than
21	three members of the governing board may hear the appeal. such ALSO
22	THE bylaws may also allow for an appeal to be heard by an independent
23	third party designated by the A GOVERNING board UNDER THIS PARAGRAPH
24	(b).
25	(9) THE WRITTEN BYLAWS, POLICIES, OR PROCEDURES OF ANY
26	PROFESSIONAL REVIEW COMMITTEE FOR ADVANCED PRACTICE NURSES
27	MUST PROVIDE FOR AT LEAST THE FOLLOWING:

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1	(a) ONE OR MORE LICENSED NURSES WHO ARE REGISTERED AS
2	ADVANCED PRACTICE NURSES WHO ARE ACTIVELY ENGAGED IN THE
3	PRACTICE OF NURSING IN THIS STATE MUST BE MEMBERS OF THE
4	PROFESSIONAL REVIEW COMMITTEE ESTABLISHED PURSUANT TO THIS
5	SECTION FOR ADVANCED PRACTICE NURSES, EXCEPT THAT ADVANCED
6	PRACTICE NURSES NEED NOT BE MEMBERS OF A GOVERNING BOARD OR AN
7	INDEPENDENT THIRD PARTY DESIGNATED BY A GOVERNING BOARD, IF
8	APPLICABLE TO THE PROFESSIONAL REVIEW PROCESS.
9	(b) THE PROFESSIONAL REVIEW PROCESS FOR ADVANCED PRACTICE
10	NURSES CONDUCTED BY AUTHORIZED ENTITIES THAT ARE NOT LICENSED
11	HEALTH FACILITIES MAY BE SUBSTANTIALLY SIMILAR TO THE PROCESS
12	UNDER SUBSECTIONS (7) AND (8) OF THIS SECTION FOR PHYSICIANS AND
13	PHYSICIAN ASSISTANTS, EXCEPT THAT ADVANCED PRACTICE NURSES WILL
14	SUBSTITUTE FOR PHYSICIAN ASSISTANTS. THE PROFESSIONAL REVIEW
15	COMMITTEE SHALL FORWARD A COPY OF ANY RECOMMENDATIONS TO THE
16	NURSING BOARD.
17	(c) THE PROFESSIONAL REVIEW PROCESS FOR ADVANCED PRACTICE
18	NURSES CONDUCTED BY AUTHORIZED ENTITIES THAT ARE LICENSED
19	HEALTH FACILITIES AND THAT PARTICIPATE IN ANY FEDERAL HEALTH CARE
20	PROGRAM, INCLUDING THE FEDERAL MEDICARE AND MEDICAID PROGRAMS,
21	MAY BE ESTABLISHED IN A MANNER TO COMPLY WITH THE APPLICABLE
22	HEALTH FACILITY LICENSING REQUIREMENTS UNDER TITLE 25, C.R.S., AND
23	ASSOCIATED REGULATIONS, THE FEDERAL "SOCIAL SECURITY ACT", AND
24	THE CONDITIONS FOR COVERAGE OR CONDITIONS OF PARTICIPATION
25	PROMULGATED BY THE CMS, AS APPLICABLE TO THE TYPE OF HEALTH
26	FACILITY. THE PROFESSIONAL REVIEW COMMITTEE SHALL FORWARD A
27	COPY OF ANY RECOMMENDATIONS TO THE NURSING BOARD.

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1	(9) (10) All governing boards that are required to report their final
2	actions to the medical board OR THE NURSING BOARD, AS APPROPRIATE,
3	are not otherwise relieved of such THEIR obligations by virtue of any
4	provision of this article.
5	(10) (11) (a) EXCEPT AS SPECIFIED IN PARAGRAPH (b) OF THIS
6	SUBSECTION (11), the records of a AN AUTHORIZED ENTITY AND ITS
7	professional review committee, a ITS governing board, or the committee
8	on anticompetitive conduct shall ARE not be subject to subpoena or
9	discovery and shall ARE not be admissible in any civil suit. brought
10	against a physician who is the subject of such records.
11	(b) Notwithstanding the provisions of paragraph (a) of this
12	subsection (10), such Subject to subsection (14) of this section, the
13	records shall be ARE subject to subpoena and available for use:
14	(I) By the committee on anticompetitive conduct;
15	(II) By either party in any AN appeal or de novo proceeding
16	brought pursuant to this part 1;
17	(III) By a physician Person Licensed under Article 36 of this
18	TITLE, OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED
19	AUTHORITY AS AN ADVANCED PRACTICE NURSE, in a suit seeking judicial
20	review of any AN action by the governing board;
21	(IV) BY THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND
22	ENVIRONMENT IN ACCORDANCE WITH ITS AUTHORITY TO ISSUE OR
23	CONTINUE A HEALTH FACILITY LICENSE OR CERTIFICATION FOR AN
24	AUTHORIZED ENTITY;
25	(V) BY THE CMS IN ACCORDANCE WITH ITS EVALUATION PROCESS
26	FOR FEDERAL HEALTH CARE PROGRAM PARTICIPATION BY AN AUTHORIZED
27	ENTITY:

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1	(IV) (VI) By a governing board seeking judicial review;
2	(VII) BY THE MEDICAL BOARD WITHIN THE SCOPE OF ITS
3	AUTHORITY OVER LICENSED PHYSICIANS AND PHYSICIAN ASSISTANTS; AND
4	(VIII) BY THE NURSING BOARD WITHIN THE SCOPE OF ITS
5	AUTHORITY OVER ADVANCED PRACTICE NURSES.
6	(12) (a) EXCEPT AS PROVIDED IN PARAGRAPH (b) OF THIS
7	SUBSECTION (12), THE RECORDS OF AN AUTHORIZED ENTITY OR ITS
8	PROFESSIONAL REVIEW COMMITTEE MAY BE DISCLOSED TO:
9	(I) THE MEDICAL BOARD, AS REQUESTED BY THE MEDICAL BOARD
10	ACTING WITHIN THE SCOPE OF ITS AUTHORITY OR AS REQUIRED OR
11	APPROPRIATE UNDER THIS ARTICLE OR ARTICLE 36 OF THIS TITLE;
12	(II) THE NURSING BOARD, AS REQUESTED BY THE NURSING BOARD
13	ACTING WITHIN THE SCOPE OF ITS AUTHORITY OR AS REQUIRED OR
14	APPROPRIATE UNDER THIS ARTICLE OR ARTICLE 38 OF THIS TITLE;
15	(III) THE COLORADO DEPARTMENT OF PUBLIC HEALTH AND
16	ENVIRONMENT ACTING WITHIN THE SCOPE OF ITS HEALTH FACILITY
17	LICENSING AUTHORITY OR AS THE AGENT OF CMS;
18	(IV) CMS, IN CONNECTION WITH THE SURVEY AND CERTIFICATION
19	PROCESSES FOR FEDERAL HEALTH CARE PROGRAM PARTICIPATION BY AN
20	AUTHORIZED ENTITY; AND
21	(V) THE JOINT COMMISSION OR OTHER ENTITY GRANTED DEEMING
22	AUTHORITY BY CMS, IN CONNECTION WITH A SURVEY OR REVIEW FOR
23	ACCREDITATION.
24	(b) THE MEDICAL BOARD, NURSING BOARD, AND COLORADO
25	DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT SHALL NOT MAKE
26	FURTHER DISCLOSURES OF ANY RECORDS DISCLOSED BY AN AUTHORIZED
27	ENTITY OR ITS PROFESSIONAL REVIEW COMMITTEE UNDER THIS SECTION.

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1	(13) The records of an authorized entity or its
2	PROFESSIONAL REVIEW COMMITTEE OR GOVERNING BOARD MAY BE
3	SHARED BY AND AMONG AUTHORIZED ENTITIES AND THEIR PROFESSIONAL
4	REVIEW COMMITTEES AND GOVERNING BOARDS CONCERNING THE
5	QUALIFICATIONS, COMPETENCE, AND PROFESSIONAL CONDUCT OF, AND
6	QUALITY AND APPROPRIATENESS OF PATIENT CARE PROVIDED BY, A
7	HEALTH CARE PROVIDER WHO SEEKS TO SUBJECT HIMSELF OR HERSELF TO,
8	OR IS CURRENTLY SUBJECT TO, THE AUTHORITY OF THE AUTHORIZED
9	ENTITY.
10	(14) RESPONDING TO A SUBPOENA OR DISCLOSING OR SHARING OF
11	OTHERWISE PRIVILEGED RECORDS AND INFORMATION PURSUANT TO
12	SUBSECTION (11) , (12) , OR (13) OF THIS SECTION DOES NOT CONSTITUTE A
13	WAIVER OF THE PRIVILEGE SPECIFIED IN PARAGRAPH (a) OF SUBSECTION
14	(11) OF THIS SECTION OR A VIOLATION OF THE CONFIDENTIALITY
15	REQUIREMENTS OF SUBSECTION (15) OF THIS SECTION. RECORDS PROVIDED
16	TO ANY GOVERNMENTAL AGENCY, INCLUDING THE DEPARTMENT OF PUBLIC
17	HEALTH AND ENVIRONMENT, THE MEDICAL BOARD, AND THE NURSING
18	BOARD PURSUANT TO SUBSECTION (11) OR (12) OF THIS SECTION ARE NOT
19	PUBLIC RECORDS SUBJECT TO THE "COLORADO OPEN RECORDS ACT", PART
20	2 OF ARTICLE 72 OF TITLE 24, C.R.S. A PERSON PROVIDING THE RECORDS
21	TO AN AUTHORIZED ENTITY OR ITS PROFESSIONAL REVIEW COMMITTEE OR
22	GOVERNING BOARD, THE DEPARTMENT OF PUBLIC HEALTH AND
23	ENVIRONMENT, THE MEDICAL BOARD, THE NURSING BOARD, CMS, THE
24	JOINT COMMISSION, OR OTHER GOVERNMENTAL AGENCY IS ENTITLED TO
25	THE SAME IMMUNITY FROM SUIT AND LIABILITY FOR DAMAGES AS
26	PROVIDED UNDER SECTION 12-36.5-105 FOR THE DISCLOSURE OF THE
27	RECORDS.

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I	(11) At the request of the medical board, a governing board shall
2	provide the medical board with the complete record of all professional
3	review proceedings, including, but not limited to, the findings,
4	recommendations, and actions taken.
5	(12) (15) Investigations, examinations, hearings, meetings, or any
6	AND other proceedings of a professional review committee or governing
7	board conducted pursuant to the provisions of this part 1 shall be ARE
8	exempt from the provisions of any law requiring that proceedings be
9	conducted publicly or that the minutes or records, INCLUDING ANY
10	MINUTES, be open to public inspection.
11	(13) (16) EXCEPT AS OTHERWISE PROVIDED IN SUBSECTION (11),
12	(12), OR (13) OF THIS SECTION, all proceedings, recommendations, records,
13	and reports involving professional review committees or governing
14	boards shall be ARE confidential.
15	(14) (17) A professional review committee or governing board
16	which THAT is constituted and conducts its reviews and activities pursuant
17	to the provisions of SUBSTANTIALLY IN ACCORDANCE WITH this part 1 is
18	declared not to be an unlawful conspiracy in violation of section 6-4-104
19	or 6-4-105, C.R.S.
20	SECTION 7. In Colorado Revised Statutes, 12-36.5-104.4,
21	amend (1) as follows:
22	12-36.5-104.4. Hospital professional review committees.
23	(1) The quality and appropriateness of patient care rendered by
24	physicians PERSONS LICENSED UNDER ARTICLE 36 OF THIS TITLE, LICENSED
25	UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AUTHORITY AS
26	ADVANCED PRACTICE NURSES, and other licensed health care professionals
27	so influence the total quality of patient care that a review of care provided

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I	in a hospital is ineffective without concomitantly reviewing THE overall
2	QUALIFICATIONS, COMPETENCE, AND PROFESSIONAL CONDUCT OF, AND
3	THE quality and appropriateness of care rendered by, physicians and other
4	licensed health care professionals SUCH PERSONS.
5	SECTION 8. In Colorado Revised Statutes, add 12-36.5-104.6
6	as follows:
7	12-36.5-104.6. Governing boards to register with medical
8	board - annual reports - aggregation and publication of data - rules.
9	(1) EACH GOVERNING BOARD THAT ESTABLISHES OR USES ONE OR MORE
10	PROFESSIONAL REVIEW COMMITTEES TO REVIEW THE PRACTICE OF
11	PHYSICIANS OR PHYSICIAN ASSISTANTS SHALL:
12	(a) REGISTER WITH THE MEDICAL BOARD IN A FORM SATISFACTORY
13	TO THE MEDICAL BOARD ON OR BEFORE JULY $1,2013$, if the governing
14	BOARD HAS EXISTING PROFESSIONAL REVIEW COMMITTEES, OR, IF THE
15	GOVERNING BOARD ESTABLISHES A PROFESSIONAL REVIEW COMMITTEE ON
16	or after July 1 , 2013 , within thirty days after approving the
17	WRITTEN BYLAWS, POLICIES, OR PROCEDURES FOR THE PROFESSIONAL
18	REVIEW COMMITTEE; AND
19	(b) REPORT ON ITS PROFESSIONAL REVIEW ACTIVITIES DURING THE
20	IMMEDIATELY PRECEDING CALENDAR YEAR IN A FORM SATISFACTORY TO
21	THE MEDICAL BOARD. THESE REPORTS MUST INCLUDE THE NUMBER AND
22	TYPE OF CASES REVIEWED AND THE RESULTS OF SUCH REVIEWS, IN
23	AGGREGATE FORM AND WITHOUT INDIVIDUALLY IDENTIFIABLE
24	INFORMATION CONCERNING THE SUBJECT PHYSICIANS OR PHYSICIAN
25	ASSISTANTS.
26	(2) THE MEDICAL BOARD SHALL PUBLISH THE DATA PROVIDED
27	PURSUANT TO PARAGRAPH (b) OF SUBSECTION (1) OF THIS SECTION IN

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1	AGGREGATE FORM AND WITHOUT INDIVIDUALLY IDENTIFIABLE
2	INFORMATION CONCERNING THE SUBJECT PHYSICIANS OR PHYSICIAN
3	ASSISTANTS OR THE AUTHORIZED ENTITY.
4	(3) THE MEDICAL BOARD SHALL ADOPT RULES TO IMPLEMENT THIS
5	SECTION AND MAY COLLECT A REASONABLE REGISTRATION FEE TO
6	RECOVER ITS DIRECT AND INDIRECT COSTS OF ADMINISTERING THE
7	REGISTRATION AND PUBLICATION SYSTEMS REQUIRED BY THIS SECTION.
8	SECTION 9. In Colorado Revised Statutes, add 12-36.5-104.8
9	as follows:
10	12-36.5-104.8. Governing boards to register with nursing
11	board - annual reports - aggregation and publication of data - rules.
12	(1) EACH GOVERNING BOARD THAT ESTABLISHES OR USES ONE OR MORE
13	PROFESSIONAL REVIEW COMMITTEES TO REVIEW THE PRACTICE OF
14	ADVANCED PRACTICE NURSES SHALL:
15	(a) REGISTER WITH THE NURSING BOARD IN A FORM SATISFACTORY
16	TO THE NURSING BOARD ON OR BEFORE JULY 1, 2013, IF THE GOVERNING
17	BOARD HAS EXISTING PROFESSIONAL REVIEW COMMITTEES, OR, IF THE
18	GOVERNING BOARD ESTABLISHES A PROFESSIONAL REVIEW COMMITTEE ON
19	OR AFTER JULY 1, 2013, WITHIN THIRTY DAYS AFTER APPROVING THE
20	WRITTEN BYLAWS, POLICIES, OR PROCEDURES FOR THE PROFESSIONAL
21	REVIEW COMMITTEE; AND
22	(b) REPORT ON ITS PROFESSIONAL REVIEW ACTIVITIES DURING THE
23	IMMEDIATELY PRECEDING CALENDAR YEAR IN A FORM SATISFACTORY TO
24	THE NURSING BOARD. THESE REPORTS MUST INCLUDE THE NUMBER AND
25	TYPE OF CASES REVIEWED AND THE RESULTS OF SUCH REVIEWS, IN
26	AGGREGATE FORM AND WITHOUT INDIVIDUALLY IDENTIFIABLE
27	INFORMATION CONCERNING THE SUBJECT ADVANCED DRACTICE NUDGES

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1	(2) THE NURSING BOARD SHALL PUBLISH THE DATA PROVIDED
2	PURSUANT TO PARAGRAPH (b) OF SUBSECTION (1) OF THIS SECTION IN
3	AGGREGATE FORM AND WITHOUT INDIVIDUALLY IDENTIFIABLE
4	INFORMATION CONCERNING THE SUBJECT ADVANCED PRACTICE NURSES OR
5	THE AUTHORIZED ENTITY.
6	(3) THE NURSING BOARD SHALL ADOPT RULES TO IMPLEMENT THIS
7	SECTION AND MAY COLLECT A REASONABLE REGISTRATION FEE TO
8	RECOVER ITS DIRECT AND INDIRECT COSTS OF ADMINISTERING THE
9	REGISTRATION AND PUBLICATION SYSTEMS REQUIRED BY THIS SECTION.
10	SECTION 10. In Colorado Revised Statutes, amend 12-36.5-105
11	as follows:
12	12-36.5-105. Immunity from suit and liability. (1) A member
13	of a professional review committee, GOVERNING BOARD, HEARING PANEL,
14	OR INDEPENDENT THIRD PARTY DESIGNATED BY A GOVERNING BOARD
15	UNDER SECTION 12-36.5-104 (8) (b); A PERSON SERVING ON THE STAFF OF
16	THAT COMMITTEE, BOARD, PANEL, OR THIRD PARTY; a witness OR
17	CONSULTANT before a professional review committee; or AND any person
18	who files a complaint or otherwise participates in the professional review
19	process shall be IS immune from suit in any civil or criminal action,
20	including antitrust actions, brought by a physician who is the subject of
21	the review by such professional review committee, if such member made
22	a reasonable effort to obtain the facts of the matter as to which he acted,
23	acted in the reasonable belief that the action taken by him was warranted
24	by the facts, and otherwise acted in good faith within the scope of such
25	professional review committee process and if such witness or participant
26	acted in good faith within the scope of such professional review
27	committee process AND IS IMMUNE FROM LIABILITY FOR DAMAGES UNLESS,

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IN CONNECTION WITH THE PROFESSIONAL REVIEW PROCESS, THE PERSON
PROVIDED FALSE INFORMATION AND KNEW THAT THE INFORMATION WAS
FALSE.

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- (2) The governing board the individual members of such board and the AUTHORIZED entity that has established a peer PROFESSIONAL review committee pursuant to section 12-36.5-104 the board's staff, any person acting as a witness or consultant to the board, any witness testifying in a proceeding authorized under this article, and any person who lodges a complaint pursuant to this article shall be immune from liability in any civil action brought against him or her for acts occurring while acting in his or her capacity as board member, staff, consultant, or witness, respectively, if such individual was acting in good faith within the scope of his or her respective capacity, made a reasonable effort to obtain the facts of the matter as to which he or she acted, and acted in the reasonable belief that the action taken by him or her was warranted by the facts. Any person participating in good faith in lodging a complaint or participating in any investigative or administrative proceeding pursuant to this article shall be immune from any civil or criminal liability that may result from such participation IS IMMUNE FROM SUIT IN ANY CIVIL OR CRIMINAL ACTION, INCLUDING ANTITRUST ACTIONS, AND IS IMMUNE FROM LIABILITY FOR DAMAGES IF THE PROFESSIONAL REVIEW ACTION WAS TAKEN WITHIN THE SCOPE OF THE PROFESSIONAL REVIEW PROCESS AND WAS TAKEN:
- (a) IN THE OBJECTIVELY REASONABLE BELIEF THAT THE ACTION WAS IN THE FURTHERANCE OF QUALITY HEALTH CARE;
- (b) AFTER AN OBJECTIVELY REASONABLE EFFORT TO OBTAIN THE FACTS OF THE MATTER;

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1	(c) IN THE OBJECTIVELY REASONABLE BELIEF THAT THE ACTION
2	TAKEN WAS WARRANTED BY THE FACTS; AND
3	(d) IN ACCORDANCE WITH PROCEDURES THAT, UNDER THE
4	CIRCUMSTANCES, WERE FAIR TO THE PERSON LICENSED UNDER ARTICLE 36
5	OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND
6	GRANTED AN AUTHORITY AS AN ADVANCED PRACTICE NURSE.
7	SECTION 11. In Colorado Revised Statutes, 12-36.5-106,
8	amend (2), (5), (7), (8), (9) introductory portion, (9) (a), (9) (b), (9) (e),
9	(9) (f), (9) (k), (9) (n), (10), (12), and (13) as follows:
10	12-36.5-106. Committee on anticompetitive conduct - rules.
11	(2) The committee shall be composed CONSISTS of five persons, none of
12	whom shall be IS a member of the medical board, APPOINTED AS
13	FOLLOWS:
14	(a) THE MEDICAL BOARD SHALL APPOINT four members of the
15	committee, shall WHO MUST be licensed to practice medicine PROVIDE
16	HEALTH CARE and actively engaged in the practice of medicine in this
17	state. and shall be appointed by the medical board. No A member
18	APPOINTED PURSUANT TO THIS PARAGRAPH (a) shall NOT practice in the
19	same medical subspecialty as any other member nor AND SHALL NOT
20	conduct his or her primary practice in the same county as any other
21	member.
22	(b) THE GOVERNOR SHALL APPOINT one member shall be
23	appointed by the governor and shall be WHO IS an attorney licensed to
24	practice in this state AND who has particular expertise and experience in
25	the area of antitrust law.
26	(5) The committee shall annually elect a chairman CHAIR from
27	among its members. Any three members of the committee shall constitute

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a quorum. Any action of a majority of those present comprising such THE quorum shall be IS the action of the committee. Committee members shall be ARE compensated as provided in section 24-34-102 (13), C.R.S. The committee may in its discretion, utilize the expertise of consultants, including but not limited to, legal, medical, and business specialists. THE COMMITTEE SHALL ASSESS AND COLLECT costs of such THE consultants shall be assessed and collected as provided in subsection (11) of this section.

- (7) Any physician A HEALTH CARE PROVIDER who is the subject of a final action by a governing board, which action results in the denial, termination, or restriction of privileges at or membership in or participation in an organization, and who believes that such THE action resulted from unreasonable anticompetitive conduct shall have, as his sole and exclusive remedy, MAY SEEK direct review of the record by the committee. such THE review, shall be WHICH IS THE HEALTH CARE PROVIDER'S EXCLUSIVE REMEDY, IS limited to the sole issue of whether such THE final board action resulted from unreasonable anticompetitive conduct. Failure to exhaust this administrative remedy before the committee shall preclude PRECLUDES the right of de novo review on the merits of the issue of unreasonable anticompetitive conduct.
- (8) Nothing in this article shall preclude PRECLUDES a physician or health care provider otherwise aggrieved by the final action of a governing board from seeking other remedies available to them by law, except as provided in subsection (7) of this section.
- (9) Review by The committee shall be CONDUCT THE REVIEW in accordance with the following procedures and, to the extent practicable, in accordance with the procedures used in the district courts of this state:

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PROVIDER MUST INITIATE THE REVIEW by filing a verified complaint with the committee, no later than thirty days after receipt of a notice of final action by the governing board, alleging, with specificity, all facts disclosed in the record and all additional facts known to the complainant which THAT would support his OR HER allegation that the final action taken by the governing board resulted from unreasonable anticompetitive conduct.

- (b) The committee shall mail a copy of such THE complaint to the governing board and the professional review committee by certified mail, return receipt requested, within five days of AFTER the receipt of such THE complaint by the committee, advising them of their right to file a verified answer to the allegations stated therein Receipt of such complaint by mail shall make IN THE COMPLAINT. The recipients thereof OF THE COMPLAINT BECOME a party to these proceedings UPON RECEIPT OF THE COMPLAINT.
- (e) If the committee finds THAT no such probable cause exists, it shall dismiss the complaint, which dismissal shall constitute CONSTITUTES final administrative action.
- (f) If the committee finds such THAT probable cause exists, it shall schedule a hearing. At such THE hearing, the committee shall review the record below on the sole issue of whether the final action of the governing board resulted from unreasonable anticompetitive conduct and shall take evidence only with regard to the additional facts specifically alleged in the complaint or answer regarding unreasonable anticompetitive conduct, except when, in the discretion of the committee, the interests of a fair hearing demand otherwise.
 - (k) If the committee finds by a preponderance of evidence that the

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final action of the governing board resulted from unreasonable anticompetitive conduct, it shall issue its final order disapproving and setting aside such THE action or modifying the action taken by the governing board in whole or in part, which final order shall be Is binding on the parties. THE COMMITTEE SHALL MAIL a copy of such THE order shall be mailed by certified mail, return receipt requested, to the parties.

- (n) In any case presented to the committee where the medical HEALTH CARE practice of the complainant constitutes a clear and present danger to patients, the committee shall refer the case to the medical board OR NURSING BOARD, AS APPLICABLE, for such action as the board deems appropriate.
- (10) (a) Following final administrative action by the committee, such action of the committee may be reviewed only by the court of appeals MAYREVIEW THE ACTION OF THE COMMITTEE through appropriate proceedings brought pursuant to section 24-4-106 (11), C.R.S.
- (b) Following final administrative action by the committee, any A party aggrieved by the final action of a governing board who wishes to challenge the action of such THE governing board, rather than the committee's review of such THE action, shall have HAS the right to seek de novo review on the merits in a district court in Colorado. In no event shall the medical board, NURSING BOARD, or the committee be made parties to such a THE district court action.
- (c) As a condition of filing a complaint under paragraph (a) of subsection (9) of this section, the complainant shall post a cash bond or equivalent liquid security of three thousand dollars to cover anticipated costs which THAT may be assessed against him OR HER. Within thirty days of AFTER receipt of service of a complaint on a governing board, or

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concurrently with the filing of an answer, whichever is earlier, the governing board shall post a cash bond or equivalent liquid security of three thousand dollars to cover anticipated costs which THAT may be assessed against it as a party. The committee may enforce this latter requirement through the district court.

- (12) The committee shall promulgate such rules and regulations as may be necessary for the implementation of this section, including mechanisms to secure the payment of costs as provided in paragraph (c) of subsection (10) and subsection (11) of this section.
- (13) Any A member of the committee, any A member of the committee's staff, any A person acting as a witness or consultant to the committee, any A witness testifying in a proceeding authorized under this article, and any A person who lodges a complaint pursuant to this article shall be ARE immune from liability in any civil action brought against him or her for acts occurring while acting in his or her capacity as committee member, staff, consultant, or witness, respectively, if such THE individual was acting in good faith AN OBJECTIVELY REASONABLE MANNER within the scope of his or her respective capacity, made a reasonable effort to obtain the facts of the matter as to which he or she acted, and acted in the reasonable belief that the action taken by him or her was warranted by the facts. Any person participating in good faith in lodging a complaint or participating in any investigative or administrative proceeding pursuant to this article shall be IS immune from any civil or criminal liability that may result from such THE participation.

SECTION 12. In Colorado Revised Statutes, **amend** 12-36.5-202 as follows:

12-36.5-202. Rules - compliance with reporting requirements

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1	of federal act. Upon implementation of THE MEDICAL BOARD MAY
2	PROMULGATE RULES TO COMPLY WITH THE REPORTING REQUIREMENTS OF
3	the federal "Health Care Quality Improvement Act of 1986", as amended,
4	42 U.S.C. secs. 11101 through 11152, and upon implementation of TO
5	PARTICIPATE IN the federal data bank. the medical board shall promulgate
6	rules to comply with such act which rules are consistent with the
7	standards and the reporting requirements of such act.
8	SECTION 13. In Colorado Revised Statutes, amend 12-36.5-203
9	as follows:
10	12-36.5-203. Limitations on liability relating to professional
11	review actions. (1) The following persons shall ARE IMMUNE FROM SUIT
12	AND not be liable for damages in any A civil action with respect to their
13	participation in, assistance to, or reporting of information to a
14	professional review body COMMITTEE in connection with a professional
15	review action in this state, and such THE persons shall ARE IMMUNE FROM
16	SUIT AND not be liable for damages in any A civil action with respect to
17	their participation in, assistance to, or reporting of information to a
18	professional review body which COMMITTEE THAT meets the standards of
19	and is in conformity with the provisions of the federal "Health Care
20	Quality Improvement Act of 1986", as amended, 42 U.S.C. secs. 11101
21	through 11152: upon implementation of such act by the federal
22	government:
23	(a) The AN AUTHORIZED ENTITY, professional review body
24	COMMITTEE, OR GOVERNING BOARD;
25	(b) Any person acting as a member of or staff to the AUTHORIZED
26	ENTITY, professional review body COMMITTEE, OR GOVERNING BOARD;
27	(c) Any person under a contract or other formal agreement with

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the professional review body A WITNESS, CONSULTANT, OR OTHER PERSON WHO PROVIDED INFORMATION TO THE AUTHORIZED ENTITY, PROFESSIONAL REVIEW COMMITTEE, OR GOVERNING BOARD; AND

- (d) Any person who participates with or assists the professional review body COMMITTEE OR GOVERNING BOARD with respect to the professional review action ACTIVITIES.
- (2) Notwithstanding any other provision of law, no person, whether as a witness or otherwise, who provides information to a professional review body regarding the competence or professional conduct of a physician shall be held, by reason of having provided such information, liable in damages in any civil action unless such information is false and the person providing it knew that such information was false.
- (3) For the purposes of this section, unless the context otherwise requires:
- (a) "Professional review action" means an action or recommendation of a professional review body which COMMITTEE, INCLUDING A GOVERNING BOARD, THAT is taken or made in the conduct of professional review activity and which THAT is based on the QUALITY AND APPROPRIATENESS OF PATIENT CARE PROVIDED BY, AND THE QUALIFICATIONS, competence, or professional conduct of, an individual physician PERSON LICENSED UNDER ARTICLE 36 OF THIS TITLE OR LICENSED UNDER ARTICLE 38 OF THIS TITLE AND GRANTED AN AUTHORITY AS AN ADVANCED PRACTICE NURSE, which conduct ACTION affects or may affect adversely the PERSON'S clinical privileges of or membership in a professional society of the physician AN AUTHORIZED ENTITY. "Professional review action" includes a formal decision by the professional review body COMMITTEE, INCLUDING A GOVERNING BOARD.

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1	not to take an action or make a recommendation as provided in this
2	paragraph (a) and also includes professional review activities relating to
3	a professional review action. An action shall IS not be considered to be
4	based upon the competence or professional conduct of a physician
5	HEALTH CARE PROVIDER if the action is primarily based on:
6	(I) The physician's PERSON'S association or lack of association
7	with a professional society or association;
8	(II) The physician's PERSON'S fees or his OR HER advertising or
9	engaging in other competitive acts intended to solicit or retain business;
10	(III) The physician's PERSON'S association with, supervision of,
11	delegation of authority to, support for, training of, or participation in a
12	private group practice with a member or members of a particular class of
13	health care practitioners or professionals;
14	(IV) The physician's PERSON'S participation in prepaid group
15	health plans, salaried employment, or any other manner of delivering
16	health services whether on a fee-for-service basis or other basis;
17	(V) Any other matter that does not relate to the QUALITY AND
18	APPROPRIATENESS OF PATIENT CARE PROVIDED BY, OR THE
19	QUALIFICATIONS, competence, or professional conduct of, a physician
20	PERSON LICENSED UNDER ARTICLE $\overline{36}$ OF THIS TITLE OR LICENSED UNDER
21	$\overline{\text{ARTICLE}}\overline{\text{38}}\text{OFTHIS}\text{TITLE}\text{AND}\text{GRANTED}\text{AN}\text{AUTHORITY}\text{AS}\text{AN}\text{ADVANCED}$
22	PRACTICE NURSE.
23	(b) "Professional review body" means a health care entity and the
24	governing body or any committee of a health care entity which conducts
25	professional review actions and includes any committee of the medical
26	staff of such an entity when assisting the governing body in a professional
27	review activity.

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1	SECTION 14. In Colorado Revised Statutes, 12-36-118, amend
2	(10) (b) as follows:
3	12-36-118. Disciplinary action by board - immunity - rules.
4	(10) (b) For purposes of the records related to a complaint filed pursuant
5	to this section against a licensee, the board shall be considered IS a
6	professional review committee, the records related to the complaint shall
7	include all records described in section 12-36.5-102 (4) (7), and section
8	12-36.5-104 (10) shall apply (11) APPLIES to those records.
9	SECTION 15. Effective date. (1) Except as otherwise provided
10	in subsection (2) of this section, this act takes effect July 1, 2012.
11	(2) Section 11 of this act takes effect only if House Bill 12-1297
12	does not become law.
13	SECTION 16. Safety clause. The general assembly hereby finds,
14	determines, and declares that this act is necessary for the immediate
15	preservation of the public peace, health, and safety.

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