

**First Regular Session  
Sixty-ninth General Assembly  
STATE OF COLORADO**

**ENGROSSED**

*This Version Includes All Amendments Adopted  
on Second Reading in the House of Introduction*

LLS NO. 13-0235.01 Kristen Forrestal x4217

**HOUSE BILL 13-1088**

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**A BILL FOR AN ACT**

101     **CONCERNING MODIFICATION OF THE WORK OF THE DEPARTMENT OF**  
102             **PUBLIC HEALTH AND ENVIRONMENT REGARDING HEALTH**  
103             **DISPARITIES TO INCLUDE HEALTH EQUITY, AND, IN CONNECTION**  
104             **THEREWITH, RENAMING THE OFFICE OF HEALTH DISPARITIES TO**  
105             **THE OFFICE OF HEALTH EQUITY AND CONSOLIDATING THE**  
106             **DUTIES OF THE MINORITY HEALTH ADVISORY COMMISSION AND**  
107             **THE INTERAGENCY HEALTH DISPARITIES LEADERSHIP COUNCIL**  
108             **INTO THE NEWLY CREATED HEALTH EQUITY COMMISSION.**

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**Bill Summary**

*(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that*

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  
Amended 2nd Reading  
February 7, 2013

*applies to the reengrossed version of this bill will be available at <http://www.leg.state.co.us/billsummaries>.)*

The bill changes the name of the office of health disparities in the department of public health and environment to the office of health equity (office) and adds duties to the office that include promoting health equity and including more diverse groups that may be affected by health equity and health disparity issues. The bill also replaces the minority health advisory commission with the health equity commission (commission). The purpose of the commission is to serve as an advisor to the office on health equity issues. The commission representation is changed from 13 to 15 members and includes the executive directors of the department of human services and department of health care policy and financing. The members of the commission must represent diverse populations in Colorado that include those whose health equity may be affected due to ethnicity, sexual orientation, gender identity, disability, and socioeconomic status and also must have expertise in at least one specified area. The commission's new duties include coordination of the departments' health equity efforts and health disparities grant program and strengthening partnerships with communities impacted by health disparities. The bill changes the sunset review date of the commission from 2017 to 2023.

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

2           **SECTION 1.** In Colorado Revised Statutes, 25-4-2201, **amend**  
3 (2); and **add** (1.5) and (3) as follows:

4           **25-4-2201. Legislative declaration.** (1.5) THE GENERAL  
5 ASSEMBLY HEREBY DETERMINES AND DECLARES THAT:

6           (a) UNDERSTANDING THE ROOT CAUSES OF HEALTH DISPARITIES  
7 INCLUDES RECOGNIZING THAT HEALTH STARTS IN OUR HOMES, SCHOOLS,  
8 AND COMMUNITIES;

9           (b) VULNERABLE POPULATIONS THAT ARE CURRENTLY IDENTIFIED  
10 BY RACE, ETHNICITY, SEXUAL ORIENTATION, GENDER IDENTITY,  
11 DISABILITY STATUS, AGING POPULATION, AND SOCIOECONOMIC STATUS,  
12 AMONG OTHERS, EXPERIENCE POORER HEALTH STATUS OUTCOMES; AND

13           (c) MOUNTING EVIDENCE DEMONSTRATES THAT FACTORS SUCH AS

1 ECONOMIC, PHYSICAL, AND SOCIAL ENVIRONMENT PLAY A SIGNIFICANT  
2 ROLE IN HEALTH, AND IF ADDRESSED, CAN CREATE BETTER HEALTH  
3 OUTCOMES.

4 (2) Therefore, the general assembly hereby declares that it is in the  
5 best interests of the state to establish a health disparities grant program to  
6 provide prevention, early detection, and treatment of cancer and  
7 cardiovascular and pulmonary diseases to ~~minority~~ UNDER-REPRESENTED  
8 populations.

9 (3) THE GENERAL ASSEMBLY FINDS THAT MODIFYING THE DUTIES  
10 AND STRUCTURE OF THE OFFICE OF HEALTH DISPARITIES TO BECOME THE  
11 OFFICE OF HEALTH EQUITY REFLECTS THE RECENT ADVANCEMENTS IN THE  
12 FIELD OF HEALTH BY BROADENING THE SCOPE OF THE OFFICE TO INCLUDE  
13 THE ECONOMIC, PHYSICAL, AND SOCIAL ENVIRONMENT, AND OFFERS A  
14 MORE INCLUSIVE APPROACH TO ELIMINATING HEALTH DISPARITIES FOR ALL  
15 COLORADANS.

16 **SECTION 2.** In Colorado Revised Statutes, 25-4-2202, **amend**  
17 (1) and (4); **repeal** (2); and **add** (3.5), (3.7), and (4.5) as follows:

18 **25-4-2202. Definitions.** As used in this part 22, unless the  
19 context otherwise requires:

20 (1) "Commission" means the ~~minority health advisory~~ HEALTH  
21 EQUITY commission created in section 25-4-2206.

22 (2) "~~Council~~" means the ~~interagency health disparities leadership~~  
23 ~~council~~ created in section 25-4-2207.

24 (3.5) "HEALTH DISPARITIES" MEANS DIFFERENCES IN HEALTH  
25 STATUS, ACCESS TO CARE, AND QUALITY OF CARE AS DETERMINED BY  
26 RACE, ETHNICITY, SEXUAL ORIENTATION, GENDER IDENTITY, DISABILITY  
27 STATUS, AGING POPULATION, SOCIOECONOMIC STATUS, AND OTHER

1 FACTORS.

2 (3.7) "HEALTHEQUITY" MEANS ACHIEVING THE HIGHEST LEVEL OF  
3 HEALTH FOR ALL PEOPLE AND ENTAILS FOCUSED EFFORTS TO ADDRESS  
4 AVOIDABLE INEQUALITIES BY EQUALIZING THOSE CONDITIONS FOR HEALTH  
5 FOR ALL GROUPS, ESPECIALLY FOR THOSE THAT HAVE EXPERIENCED  
6 SOCIOECONOMIC DISADVANTAGES OR HISTORICAL INJUSTICES.

7 (4) "Office" means the office of health ~~disparities~~ EQUITY created  
8 in section 25-4-2204.

9 (4.5) "SOCIAL DETERMINANTS OF HEALTH" MEANS  
10 LIFE-ENHANCING RESOURCES, SUCH AS FOOD, HOUSING, ECONOMIC AND  
11 SOCIAL RELATIONSHIPS, TRANSPORTATION, EDUCATION, AND HEALTH  
12 CARE, WHOSE DISTRIBUTION ACROSS POPULATIONS EFFECTIVELY  
13 DETERMINES THE LENGTH AND QUALITY OF LIFE.

14 **SECTION 3.** In Colorado Revised Statutes, 25-4-2203, **amend**  
15 (3) as follows:

16 **25-4-2203. Health disparity grant program - rules.** (3) The  
17 commission shall APPOINT A REVIEW COMMITTEE TO review the  
18 applications received pursuant to this section and make recommendations  
19 to the ~~state board~~ COMMISSION regarding the entities that may receive  
20 grants and the amounts of the grants. THE COMMISSION SHALL FINALIZE  
21 THE RECOMMENDATIONS FOR FUNDING AND PROVIDE THEM TO THE STATE  
22 BOARD. Within thirty days after receiving the commission's  
23 recommendations, the state board shall award grants to the selected  
24 entities, specifying the amount and duration of each award. A grant  
25 awarded pursuant to this section shall not exceed three years without  
26 renewal.

27 **SECTION 4.** In Colorado Revised Statutes, 25-4-2204, **amend**

1 (1) as follows:

2 **25-4-2204. Office of health equity - creation.** (1) There is  
3 hereby created in the department of public health and environment the  
4 office of health ~~disparities~~ EQUITY. The executive director of the  
5 department, subject to the provisions of section 13 of article XII of the  
6 state constitution, shall appoint the director of the office, who shall be the  
7 head of the office.

8 **SECTION 5.** In Colorado Revised Statutes, 25-4-2205, **amend**  
9 (1), (2) introductory portion, (2) (b), (2) (d), (2) (e), (2) (j), and (3);  
10 **repeal** (2) (k); and **add** (2) (l) and (2) (m) as follows:

11 **25-4-2205. Powers and duties of office of health equity.**

12 (1) The purpose of the office is to serve in a coordinating, educating, and  
13 capacity-building role for state and local public health programs and  
14 community-based organizations, ~~The office shall be dedicated to~~  
15 ~~eliminating racial, ethnic, and rural health disparities in Colorado by~~  
16 ~~fostering systems change and capacity-building through collaboration~~  
17 ~~with multiple sectors impacting minority health and with input from a~~  
18 ~~variety of multicultural professionals~~ PROMOTING HEALTH EQUITY IN  
19 COLORADO BY IMPLEMENTING STRATEGIES TAILORED TO ADDRESS THE  
20 VARYING COMPLEX CAUSES OF HEALTH DISPARITIES, INCLUDING THE  
21 ECONOMIC, PHYSICAL, AND SOCIAL ENVIRONMENT. THE OFFICE SHALL  
22 WORK COLLABORATIVELY WITHIN THE DEPARTMENT AND WITH AFFECTED  
23 STAKEHOLDERS TO SET PRIORITIES, COLLECT AND DISSEMINATE DATA, AND  
24 ALIGN RESOURCES WITHIN THE DEPARTMENT AND ACROSS OTHER STATE  
25 AGENCIES.

26 (2) The office ~~shall have~~ HAS the following powers, duties, and  
27 functions:

1 (b) LEADING AND coordinating ~~with and providing advice to the~~  
2 ~~department~~ THE DEPARTMENT'S HEALTH EQUITY EFFORTS;

3 (d) Providing education to the public on ~~racial and ethnic health~~  
4 ~~disparities and cultural competence~~ HEALTHEQUITY, HEALTH DISPARITIES,  
5 AND THE SOCIAL DETERMINANTS OF HEALTH;

6 (e) ~~Improving~~ COORDINATING THE interpretation and translation  
7 services within ~~public health systems~~ THE DEPARTMENT AND OFFERING  
8 TECHNICAL ASSISTANCE TO OTHER STATE AND LOCAL AGENCIES;

9 (j) Coordinating and staffing the ~~minority health advisory~~ EQUITY  
10 commission created in section 25-4-2206;

11 (k) ~~Coordinating and supporting an interagency health disparities~~  
12 ~~leadership council created in section 25-4-2207.~~

13 (l) BUILDING COLLABORATIVE PARTNERSHIPS WITH COMMUNITIES  
14 TO IDENTIFY AND PROMOTE HEALTH EQUITY STRATEGIES; AND

15 (m) DEVELOPING COMMUNICATIONS STRATEGIES REGARDING  
16 HEALTH EQUITY.

17 (3) The office shall report to the executive director of the  
18 department or to ~~the chief medical officer of the department~~ HIS OR HER  
19 DESIGNEE, at the discretion of the executive director.

20 **SECTION 6.** In Colorado Revised Statutes, 25-4-2206, **amend**  
21 (1), (2) (a), (3) introductory portion, (3) (a), (3) (b), and (5); and **repeal**  
22 (3) (c) as follows:

23 **25-4-2206. Health equity commission - creation - repeal.**

24 (1) There is hereby created in the office the ~~minority health advisory~~  
25 EQUITY commission. The purpose of the commission is to ~~Provide a~~  
26 ~~formal mechanism for community members to raise awareness of~~  
27 ~~minority health needs, issues, and resources and to give input on health~~

1 ~~programming at the level of the executive director of the department; help~~  
2 ~~the department determine culturally innovative data collection strategies;~~  
3 ~~and strengthen collaboration between the department and minority~~  
4 ~~communities to ensure that programs and services meet minority health~~  
5 ~~needs~~ SERVE AS AN ADVISOR TO THE OFFICE ON HEALTH EQUITY ISSUES,  
6 SPECIFICALLY FOCUSING ON ALIGNMENT, EDUCATION, AND  
7 CAPACITY-BUILDING FOR STATE AND LOCAL HEALTH PROGRAMS AND  
8 COMMUNITY-BASED ORGANIZATIONS. THE COMMISSION SHALL BE  
9 DEDICATED TO PROMOTING HEALTH EQUITY AND ELIMINATING HEALTH  
10 DISPARITIES.

11 (2) (a) The commission ~~shall consist~~ CONSISTS of the following  
12 ~~thirteen~~ FIFTEEN members, who ~~shall be appointed~~ ARE as follows:

13 (I) THE SPEAKER OF THE HOUSE OF REPRESENTATIVES SHALL  
14 APPOINT one member of the house of representatives; ~~who shall be~~  
15 ~~appointed by the speaker of the house of representatives;~~

16 (II) THE PRESIDENT OF THE SENATE SHALL APPOINT one member  
17 of the senate; ~~who shall be appointed by the president of the senate;~~

18 (III) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT SHALL  
19 APPOINT ten members who represent, to the extent practical, Colorado's  
20 DIVERSE ethnic, racial, SEXUAL ORIENTATION, GENDER IDENTITY,  
21 DISABILITY, AGING POPULATION, SOCIOECONOMIC, and geographic  
22 diversity ~~appointed by the executive director of the department. At a~~  
23 ~~minimum, there shall be one member who represents African Americans~~  
24 ~~and Blacks in Colorado, one member who represents Asian Americans~~  
25 ~~and Pacific Islanders in Colorado, one member who represents native~~  
26 ~~American Indians in Colorado, and one member who represents Latinos~~  
27 ~~and Hispanics in Colorado;~~ BACKGROUNDS. EACH PERSON APPOINTED TO

1 THE COMMISSION MUST HAVE DEMONSTRATED EXPERTISE IN AT LEAST  
2 ONE, AND PREFERABLY TWO, OF THE FOLLOWING AREAS:

3 (A) AFRICAN-AMERICAN, BLACK, ASIAN-AMERICAN, PACIFIC  
4 ISLANDER, NATIVE AMERICAN, HISPANIC, LATINO, AGING POPULATION,  
5 LESBIAN, GAY, BISEXUAL, TRANSGENDER, DISABLED, LOW SOCIOECONOMIC  
6 STATUS, AND GEOGRAPHIC COMMUNITY HEALTH ISSUES;

7 (B) DATA COLLECTION, AGGREGATION, OR DISSEMINATION;

8 (C) EDUCATION;

9 (D) HOUSING;

10 (E) HEALTHY COMMUNITY DESIGN;

11 (F) COMMUNITY ENGAGEMENT;

12 (G) LOCAL PUBLIC HEALTH;

13 (H) NONPROFITS, FOUNDATION, OR GRANT-MAKING;

14 (I) ENVIRONMENTAL HEALTH;

15 (J) BEHAVIORAL HEALTH; OR

16 (K) THE PROVISION OF HEALTH CARE SERVICES.

17 (IV) The executive director of the department, OR HIS OR HER  
18 DESIGNEE, shall serve as an ex officio member of the commission;

19 (V) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF HUMAN  
20 SERVICES, OR HIS OR HER DESIGNEE; AND

21 (VI) THE EXECUTIVE DIRECTOR OF THE DEPARTMENT OF HEALTH  
22 CARE POLICY AND FINANCING, OR HIS OR HER DESIGNEE.

23 (3) The commission ~~shall have~~ HAS the following powers and  
24 duties:

25 (a) Providing a formal mechanism for the public to give input to  
26 the ~~department at the level of the executive director of the department~~  
27 OFFICE;



1 (b) Advising the ~~executive director of the department and the~~  
2 ~~department~~ THROUGH THE OFFICE on: ~~determining culturally innovative~~  
3 ~~data collection strategies;~~

4 (I) DETERMINING INNOVATIVE DATA COLLECTION AND  
5 DISSEMINATION STRATEGIES;

6 (II) ALIGNING THE DEPARTMENT'S HEALTH EQUITY EFFORTS AND  
7 THE HEALTH DISPARITIES GRANT PROGRAM CREATED IN SECTION  
8 25-4-2203;

9 (III) STRENGTHENING COLLABORATIVE PARTNERSHIPS WITH  
10 COMMUNITIES IMPACTED BY HEALTH DISPARITIES TO IDENTIFY AND  
11 PROMOTE HEALTH EQUITY STRATEGIES; AND

12 (IV) PROMOTING WORKFORCE DIVERSITY.

13 (c) ~~Strengthening collaboration between the department and~~  
14 ~~minority communities;~~

15 (5) This section is repealed, effective July 1, ~~2017~~ 2023. Prior to  
16 the repeal of this section, the commission shall be reviewed as provided  
17 for in section 2-3-1203 (3), C.R.S.

18 **SECTION 7.** In Colorado Revised Statutes, **repeal** 25-4-2207.

19 **SECTION 8.** In Colorado Revised Statutes, 2-3-1203, **repeal** (3)  
20 (dd) (V); and **add** (3) (jj.5) as follows:

21 **2-3-1203. Sunset review of advisory committees.** (3) The  
22 following dates are the dates for which the statutory authorization for the  
23 designated advisory committees is scheduled for repeal:

24 (dd) July 1, 2017:

25 (V) ~~The minority health advisory commission in the department~~  
26 ~~of public health and environment created in section 25-4-2206, C.R.S.;~~

27 (jj.5) SEPTEMBER 1, 2023:

1 (I) THE HEALTH EQUITY COMMISSION IN THE DEPARTMENT OF  
2 PUBLIC HEALTH AND ENVIRONMENT CREATED IN SECTION 25-4-2206,  
3 C.R.S.

4 **SECTION 9.** In Colorado Revised Statutes, 24-1-119, **amend**  
5 (11) as follows:

6 **24-1-119. Department of public health and environment -**  
7 **creation.** (11) The office of health ~~disparities~~ EQUITY, created by section  
8 25-4-2204, C.R.S., shall exercise its powers and perform its duties and  
9 functions as if the same were transferred by a **type 2** transfer to the  
10 department of public health and environment.

11 **SECTION 10. Act subject to petition - effective date.** This act  
12 takes effect at 12:01 a.m. on the day following the expiration of the  
13 ninety-day period after final adjournment of the general assembly (August  
14 7, 2013, if adjournment sine die is on May 8, 2013); except that, if a  
15 referendum petition is filed pursuant to section 1 (3) of article V of the  
16 state constitution against this act or an item, section, or part of this act  
17 within such period, then the act, item, section, or part will not take effect  
18 unless approved by the people at the general election to be held in  
19 November 2014 and, in such case, will take effect on the date of the  
20 official declaration of the vote thereon by the governor.