

First Regular Session
Seventieth General Assembly
STATE OF COLORADO

REVISED

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

LLS NO. 15-0168.01 Kristen Forrestal x4217

HOUSE BILL 15-1233

HOUSE SPONSORSHIP

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A BILL FOR AN ACT

101 CONCERNING THE CREATION OF THE RESPITE CARE TASK FORCE, AND,
102 IN CONNECTION THEREWITH, MAKING AN APPROPRIATION.

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 creates the respite care task force to study the dynamics of supply and demand with regard to respite care services in Colorado. The majority and minority leadership of the Senate and House of Representatives shall appoint 9 members to the task force, who shall serve without compensation. The department of human services is directed to provide staff support to the task force. The task force is

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.

SENATE
Amended 2nd Reading
April 24, 2015

HOUSE
3rd Reading Unamended
April 20, 2015

HOUSE
Amended 2nd Reading
April 17, 2015

required to submit a report to the general assembly by December 1, 2015.

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

2 **SECTION 1. Legislative declaration.** (1) The general assembly
3 determines and declares that:

4 (a) The current extent of demand for respite care in Colorado is
5 unknown, although it is apparent that there is a lack of adequate respite
6 care facilities and respite training programs in Colorado;

7 (b) Caregivers work twenty-four hours per day, seven days per
8 week to ensure their loved ones have the support and tools they need to
9 live their best lives;

10 (c) It is critical that caregivers in our communities have access to
11 respite care so that they have time to rejuvenate and spend time with their
12 families and friends;

13 (d) It is important that caregivers are able to trust and depend on
14 the individuals providing respite care to their loved ones; and

15 (e) Reliable access to affordable respite care will be beneficial to
16 caregivers and to their families and loved ones.

17 (2) Therefore, it is the intent of the general assembly to create a
18 respite care task force and to:

19 (a) Authorize a study to determine the current state of respite care
20 in Colorado, including access to care and funding of respite care services;

21 (b) Determine the availability and level of culturally competent
22 and patient-centered respite care; and

23 (c) Increase the availability of affordable respite care throughout
24 Colorado.

25 **SECTION 2.** In Colorado Revised Statutes, **add** part 6 to article

1 of title 26 as follows:

2 PART 6

3 RESPITE CARE TASK FORCE

4 **26-1-601. Task force - creation.** (1) THERE IS CREATED, WITHIN
5 THE DEPARTMENT OF HUMAN SERVICES, THE RESPITE CARE TASK FORCE TO
6 STUDY THE DYNAMICS OF SUPPLY AND DEMAND WITH REGARD TO RESPITE
7 CARE SERVICES IN COLORADO. THE TASK FORCE CONSISTS OF THE
8 MEMBERS APPOINTED IN ACCORDANCE WITH SUBSECTION (2) OF THIS
9 SECTION.

10 (2) NO LATER THAN JULY 1, 2015:

11 (a) THE SPEAKER OF THE HOUSE OF REPRESENTATIVES SHALL
12 APPOINT ONE PERSON WHO REPRESENTS A LICENSED HOSPICE
13 ORGANIZATION;

14 (b) THE MINORITY LEADER OF THE HOUSE OF REPRESENTATIVES
15 SHALL APPOINT:

16 (I) ONE PERSON FROM AN ORGANIZATION THAT REPRESENTS
17 PERSONS WITH DEVELOPMENTAL DISABILITIES; AND

18 (II) ONE OWNER OR OPERATOR OF A RESPITE CARE FACILITY;

19 (c) THE PRESIDENT OF THE SENATE SHALL APPOINT ONE MEMBER
20 OF AN ORGANIZATION THAT PROVIDES SERVICES, EDUCATION, AND
21 OUTREACH TO SENIORS;

22 (d) THE MINORITY LEADER OF THE SENATE SHALL APPOINT:

23 (I) ONE MEMBER OF AN ORGANIZATION THAT ADVANCES
24 RESEARCH TO END ALZHEIMER'S DISEASE; AND

25 (II) ONE PERSON WHO REPRESENTS PERSONS WITH BRAIN INJURIES;

26 (e) THE GOVERNOR SHALL APPOINT:

27 (I) ONE REPRESENTATIVE FROM THE DEPARTMENT OF HUMAN

1 SERVICES;

2 (II) ONE PERSON FROM A RURAL AREA WHO UTILIZES RESPITE

3 CARE;

4 (III) ONE MEMBER OF AN ORGANIZATION THAT PROVIDES

5 SERVICES, EDUCATION, AND OUTREACH IN THE AREA OF MENTAL HEALTH;

6 (IV) ONE PERSON WHO PROVIDES SERVICES, EDUCATION, AND

7 OUTREACH FOR PERSONS WITH CHRONIC CONDITIONS, LONG-TERM

8 CONDITIONS, AND DISABLING CONDITIONS ACROSS A LIFE SPAN;

9 (V) ONE PERSON WHO REPRESENTS A LICENSED HOME HEALTH

10 CARE AGENCY;

11 (VI) ONE PERSON WHO REPRESENTS A NONPROFIT ENTITY THAT

12 PROVIDES SERVICES, EDUCATION, OUTREACH, AND ADVOCACY TO PERSONS

13 WITH DISABILITIES;

14 (VII) ONE REPRESENTATIVE OF THE DEPARTMENT OF HEALTH CARE

15 POLICY AND FINANCING; AND

16 (VIII) ONE REPRESENTATIVE OF THE DEPARTMENT OF PUBLIC

17 HEALTH AND ENVIRONMENT, WHO SHALL BE THE SOLE NONVOTING

18 MEMBER OF THE TASK FORCE.

19 (f) THE APPOINTING AUTHORITIES SHALL STRIVE TO ENSURE THAT

20 THE APPOINTEES, AS A WHOLE, WILL REPRESENT THE INTERESTS AND

21 CONCERNS OF ALL PERSONS WHO CAN BE PREDICTED TO NEED RESPITE

22 CARE, INCLUDING THE YOUNG AND PERSONS FROM DIVERSE SOCIAL AND

23 CULTURAL BACKGROUNDS.

24 (3) (a) THE DEPARTMENT SHALL RETAIN A FACILITATOR FOR THE

25 TASK FORCE WHO SHALL CONVENE THE FIRST MEETING OF THE TASK FORCE

26 NO LATER THAN JULY 15, 2015, AT WHICH MEETING THE TASK FORCE

27 MEMBERS SHALL SELECT FROM AMONG THE MEMBERSHIP A PERSON TO

1 SERVE AS CHAIR OF THE TASK FORCE. THE TASK FORCE SHALL MEET UPON
2 THE CALL OF THE CHAIR AS OFTEN AS NECESSARY TO COMPLETE THE
3 STUDY SPECIFIED IN THIS PART 6. THE TASK FORCE MAY MEET WITHIN THE
4 COMMITTEE HEARING ROOMS OF THE STATE CAPITOL, SUBJECT TO
5 AVAILABILITY.

6 (b) THE TASK FORCE MEMBERS SHALL SERVE WITHOUT
7 COMPENSATION AND WITHOUT REIMBURSEMENT FOR EXPENSES.

8 (c) IF A VACANCY OCCURS ON THE TASK FORCE FOR ANY REASON,
9 THE ORIGINAL APPOINTING AUTHORITY SHALL APPOINT A PERSON WHO
10 MEETS THE REQUIREMENTS OF THE VACANT POSITION TO FILL THE
11 VACANCY AS SOON AS POSSIBLE AFTER THE VACANCY OCCURS.

12 **26-1-602. Respite care study - report.** (1) THE RESPITE CARE
13 TASK FORCE CREATED IN SECTION 26-1-601 SHALL STUDY, THROUGH DATA
14 COLLECTION, THE DYNAMICS OF THE SUPPLY OF, AND DEMAND FOR,
15 RESPITE CARE SERVICES IN THIS STATE. THE STUDY MAY INCLUDE THE
16 FOLLOWING ISSUES:

17 (a) ACCESS TO RESPITE CARE SERVICES;

18 (b) THE TYPES OF SERVICES THAT ARE MOST IN DEMAND AND THE
19 SERVICES THAT ARE CURRENTLY AVAILABLE;

20 (c) THE AVAILABILITY AND LEVEL OF CULTURALLY COMPETENT
21 CARE AND PATIENT-CENTERED CARE;

22 (d) THE NUMBER OF RESPITE CAREGIVERS IN THE STATE AND THEIR
23 LOCATIONS;

24 (e) SOLUTIONS TO INCREASE THE NUMBER OF RESPITE CAREGIVERS;

25 (f) THE FUNDING OF RESPITE CARE SERVICES, INCLUDING ACCESS
26 TO THAT FUNDING; AND

27 (g) OTHER RESPITE CARE ISSUES AS DETERMINED APPROPRIATE BY

1 THE TASK FORCE.

2 (2) THE RESPITE CARE TASK FORCE MAY DISCUSS POLICIES THAT
3 INCLUDE, BUT ARE NOT LIMITED TO:

4 (a) REQUIRING THE DEPARTMENT OF HUMAN SERVICES, THE
5 DEPARTMENT OF HEALTH CARE POLICY AND FINANCING, AND THE
6 DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT TO CREATE A
7 STRUCTURE TO GIVE ONE DEPARTMENT THE RESPONSIBILITY TO LICENSE
8 RESPITE CAREGIVERS AND ADDRESS THE PAYMENT FOR SERVICES;

9 (b) THE CREATION OF PILOT PROGRAMS BY COMMUNITY COLLEGES,
10 TECHNICAL SCHOOLS, AND EDUCATIONAL INSTITUTIONS OFFERING
11 FOUR-YEAR DEGREES TO TRAIN RESPITE CAREGIVERS; AND

12 (c) THE DEVELOPMENT OF DATA COLLECTION, RECOMMENDATIONS
13 FOR RESPITE CARE UTILIZATION, ACCESS, AND AVAILABILITY OF SERVICES.

14 (3) THE DEPARTMENT OF HUMAN SERVICES IS AUTHORIZED TO
15 CONTRACT FOR AN EXTERNAL STUDY CONCERNING RESPITE CARE. THE
16 DEPARTMENT SHALL DEVELOP CRITERIA AND COMPONENTS FOR THE
17 STUDY. THE FINAL STUDY RESULTS MUST BE PROVIDED TO THE RESPITE
18 CARE TASK FORCE.

19 (4) ON OR BEFORE JANUARY 31, 2016, THE RESPITE CARE TASK
20 FORCE, WITH ASSISTANCE FROM THE DEPARTMENT OF HUMAN SERVICES,
21 SHALL SUBMIT A REPORT THAT INCLUDES ITS FINDINGS AND
22 RECOMMENDATIONS TO THE PUBLIC HEALTH CARE AND HUMAN SERVICES
23 COMMITTEE OF THE HOUSE OF REPRESENTATIVES AND THE HEALTH AND
24 HUMAN SERVICES COMMITTEE OF THE SENATE, OR THEIR SUCCESSOR
25 COMMITTEES.

26 **26-1-603. Notice of funding through gifts, grants, and**
27 **donations - respite care task force fund - repeal.** (1) (a) THE RESPITE

1 CARE TASK FORCE IS AUTHORIZED TO SEEK AND ACCEPT GIFTS, GRANTS, OR
2 DONATIONS FROM PRIVATE OR PUBLIC SOURCES FOR THE PURPOSES OF THIS
3 PART 6; EXCEPT THAT THE TASK FORCE MAY NOT ACCEPT A GIFT, GRANT,
4 OR DONATION THAT IS SUBJECT TO CONDITIONS THAT ARE INCONSISTENT
5 WITH THIS PART 6 OR ANY OTHER LAW OF THE STATE. THE RESPITE CARE
6 TASK FORCE SHALL TRANSMIT ALL PRIVATE AND PUBLIC MONEYS
7 RECEIVED THROUGH GIFTS, GRANTS, OR DONATIONS TO THE STATE
8 TREASURER, WHO SHALL CREDIT THEM TO THE RESPITE CARE TASK FORCE
9 FUND, WHICH FUND IS HEREBY CREATED AND REFERRED TO IN THIS PART
10 6 AS THE "FUND". THE MONEYS IN THE FUND ARE SUBJECT TO ANNUAL
11 APPROPRIATION BY THE GENERAL ASSEMBLY TO THE DEPARTMENT OF
12 HUMAN SERVICES FOR THE DIRECT AND INDIRECT COSTS ASSOCIATED WITH
13 IMPLEMENTING THIS PART 6.

14 (b) (I) IN SEEKING OR ACCEPTING A GIFT, GRANT, OR DONATION,
15 THE DEPARTMENT OF HUMAN SERVICES SHALL NOTIFY THE LEGISLATIVE
16 COUNCIL STAFF WHEN IT HAS RECEIVED ADEQUATE FUNDING THROUGH
17 GIFTS, GRANTS, OR DONATIONS FOR THE RESPITE CARE TASK FORCE AND
18 SHALL INCLUDE IN THE NOTIFICATION THE INFORMATION SPECIFIED IN
19 SECTION 24-75-1303 (3), C.R.S.

20 (II) THIS PARAGRAPH (b) IS REPEALED, EFFECTIVE JULY 1, 2016.

21 **26-1-604. Repeal.** THIS PART 6 IS REPEALED, EFFECTIVE JULY 1,
22 2016.

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24 **SECTION 3. Safety clause.** The general assembly hereby finds,
25 determines, and declares that this act is necessary for the immediate
26 preservation of the public peace, health, and safety.