

**Colorado Rural Health Center
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BILL [SB10-020](#)

Cover Colorado Financial Viability

(Healthcare Interim Task Force)

CRHC Position: Monitor

Sponsors: Boyd/Massey

The bill authorizes the board of directors (board) of the CoverColorado program to establish a schedule of fees for compensating health care providers that render covered health care services to CoverColorado participants. The bill also prohibits health care providers from billing participants for costs in excess of the applicable fee on the fee schedule for services covered by the program. Additionally, the bill authorizes the board to maintain enrollment in the CoverColorado program consistent with the program's financial resources

Status: Sent to the Governor to sign

BILL [SB10-058](#)

Eligibility Nursing Teacher Loan Forgive

CRHC Position: Support

Sponsors: TAPIA / FERRANDINO

Status: Signed by the Governor.

BILL [SB10-115](#)

Facilities May Donate Unused Medications

CRHC Position: Monitor

Sponsors: TOCHTROP / PRIMAVERA

Status: Signed by the Governor

BILL [SB10-124](#)

Michael Skolnik Med Transparency 2010

CRHC Position: Monitor

Sponsors: Carroll M./Ryden

Enacts the "Michael Skolnik Medical Transparency Act of 2010" to extend similar reporting requirements currently required of physicians, as applicable, to the following

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health care professionals who apply for a new license, certification, or registration or to renew, reinstate, or reactivate a license, certification, or registration, on or after July 1, 2011:

- * Audiologists and licensed hearing aid providers;
- * Acupuncturists;
- * Podiatrists;
- * Chiropractors;
- * Dentists and dental hygienists;
- * Physician assistants;
- * Direct-entry midwives;
- * Practical nurses, professional nurses, and advanced practice nurses;
- * Optometrists;
- * Physical therapists; and
- * Psychologists, social workers, marriage and family therapists, professional counselors, addiction counselors, and unlicensed psychotherapists. Also adds new reporting requirements for physicians.

Status: Passed Senate – Passed House Health & Human Services & Finance; Sent to Appropriations

Hearing: N/A

BILL [SB10-153](#)

Behavioral Health Screening & Efficiency

CRHC Position: Monitor

Sponsors: BOYD

The bill sets forth a legislative declaration concerning the importance of creating a comprehensive approach to behavioral health issues, including mental health and substance use disorders, and establishes the behavioral health transformation council to develop strategies for implementing a systemic transformation of the behavioral health care system. The governor is directed to appoint a behavioral health transformation council whose goal it is to implement a systemic transformation of the behavioral health system. The bill further establishes the behavioral health screening in the criminal justice system planning group (planning group) to determine a standard set of data elements and outlines the membership and duties of the planning group.

Status: Passed Senate & House

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BILL [SB10-176](#)

APN Registry Inclusion Requirements

CRHC Position: Monitor

Sponsors: TOCHTROP / GAGLIARDI

Status: Signed by the Governor

BILL [SB10-212](#)

Repeal Most TABOR Refund Mechanisms

Sponsors: CADMAN

Section 20 (7) (d) of article X of the state constitution requires the state to refund any state revenues in excess of the state fiscal year spending limit. In accordance with this constitutional requirement, the general assembly enacted methods to refund the excess state revenues. Capital letters indicate new material to be added to existing statute. Dashes through the words indicate deletions from existing statute. The bill repeals all of the current refund methods with the exception of the:

- * Earned income tax credit;
- * Income tax rate reduction; and
- * State sales tax refund.

Status: Introduced In Senate - Assigned to Finance

BILL [SB10-213](#)

Suspension 2010 Interim Committees

Sponsors: SHAFFER B. / WEISSMANN

Executive Committee of the Legislative Council. The legislative council of the general assembly is prohibited from creating or authorizing the conduct of any interim studies during the 2010 interim. The activities of the following committees and task forces are suspended during the 2010 interim:

- * Economic opportunity poverty reduction task force;
- * Legislative emergency epidemic response committee;
- * Health care task force;
- * Legislative oversight committee for the continuing examination of the treatment of persons with mental illness who are involved in the criminal and juvenile justice systems;

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- * Mentally ill offender task force;
- * Early childhood and school readiness legislative commission;
- * Police officers' and firefighters' pension reform commission;
- * Water resources review committee;
- * Transportation legislation review committee. Reporting requirements related to the activities of these committees and task forces are suspended or postponed due to the suspension of their activities during the 2010 interim

Status: Assigned to Senate State, Veterans, & Military Affairs

Hearing: May 5th – 1:30pm – SCR 356 (2) in senate calendar

BILL [SJR10-010](#)

Declare Fiscal Emergency Tobacco Tax

SJR10-101 passed the House & the Senate and will allow the state to use Amendment 35 (A35) tobacco tax moneys for any health related purposes for FY10-11. As of this writing, \$25.7 million will be transferred from A35 money to the Department of Health Care Policy & Finance (HCPF) for Medical Services Premiums. The \$25.7 million will be cut from the Dept. of Public Health & Environment (CDPHE) grant programs for Health Disparities (\$4.5 million), Tobacco Education, Prevention, and Cessation (\$15.4 million), and Cancer Cardiovascular & Pulmonary Disease (\$5.6 million). Also, CDPHE will be cut \$270,000 for personal services and operating expenses.

BILL [HB10-1005](#)

Home Health Care

(Healthcare Interim Task Force)

CRHC Position: Support

Sponsors: Massey/Foster

This bill makes telemedicine eligible for reimbursement under the state's medical assistance program (program) in order to comply with direction from the federal centers for Medicare and Medicaid services. Eliminates incorrect references to the way reimbursement payments are made under the program. Deletes the requirement that reimbursement rates from telemedicine be budget neutral or result in cost savings to the program. Requires that any cost savings identified be considered for use in paying for home health care or home- and community-based services instead of requiring the savings be applied to payment for the services. Deletes the requirement that the state medical services board consider reductions in travel costs by home health care or home-

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and community-based service providers and other factors when setting reimbursement rates for services.

Status: Passed House & Senate

BILL [HB10-1010](#)

Expand Public-Private Initiatives

(Long-term Fiscal Stability Commission)

CRHC Position: Support

Sponsors: FERRANDINO / MORSE

Status: Signed by the Governor

BILL [HB10-1024](#)

Declaring Patient Terminally Ill

(Hospice and Palliative Care Interim Committee)

CRHC Position: Monitor

Sponsors: Balmer & Riesberg/Willimas

Status: Signed by the Governor

BILL [HB10-1025](#)

CO Medical Treatment Act Updates

(Hospice and Palliative Care Interim Committee)

CRHC Position: Monitor

Sponsors: ROBERTS / NEWELL

Status: Signed by the Governor

BILL [HB10-1032](#)

Behavioral Health Crisis Response

Healthcare Interim Task Force

CRHC Position: Monitor

Sponsors: Frangas/Boyd

This bill requires the department of human services (department) to enter into a contract with a nonprofit entity for the provision of initial triage services through a coordinated and integrated crisis response system (system services) for persons experiencing mental

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health or substance abuse crisis. The system services that are contracted for may include, but need not be limited to, services for a telephone hotline operating 24 hours per day and 7 days per week, services provided through an integrated information technology system, and services provided by community-based crisis centers that provide short-term mental health services to persons in crisis.

Status: Passed House – Assigned Senate Health & Human Services

Hearing Set: May 5th – Upon Adjournment – SCR 352 (2) in Senate calendar

BILL [HB10-1033](#)

Screening Brief Intervention Referral

(Healthcare Interim Task Force)

CRHC Position: Monitor

Sponsors: Massey/Boyd & Schwartz

Adds to the list of optional services provided to medicaid recipients screening, brief intervention, and referral to treatment for alcohol and other substance abuse services.

Status: Passed House & Senate

BILL [HB10-1050](#)

On-line Registry Med Directives Form

(Hospice and Palliative Care Interim Committee)

CRHC Position: Monitor

Sponsors: Balmer & Riesberg/Willimas

Status: Signed by the Governor

BILL [HB10-1122](#)

Medical Orders Scope of Treatment

CRHC Position: Monitor

Sponsors: ROBERTS & ... / WILLIAMS

The bill provides that a medical orders for scope of treatment form (MOST form) that is properly executed and signed by an adult's physician, advanced practice nurse, or, if under the supervision or authority of the physician, physician's assistant shall have the same force and effect as a physician's order with respect to medical treatment of the adult who is the subject of the MOST form. An adult with decisional capacity or an

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authorized decision-maker for an adult who lacks decisional capacity may execute a MOST form.

Status: Passed House & Senate

BILL [HB10-1138](#)

Concerning the Program to Repay Educational Loans of Health Care Professionals

CRHC Position: Support

Sponsors: GAGLIARDI / MORSE

Status: Signed by the Governor

BILL [HB10-1166](#)

Plain Language in Insurance Policies

CRHC Position: Monitor

Sponsors: KEFALAS / NEWELL

Status: Signed by the Governor

BILL [HB10-1179](#)

Primary Care Act

CRHC Position: Monitor

Sponsors: ACREE / BOYD

Status: P/d

BILL [HB10-1217](#)

Repeal Authority Sell Trinidad Nursing

CRHC Position: Monitor

Sponsors: MCKINLEY

The bill repeals the authority of the executive director of the department of human services to sell the Trinidad state nursing home.

Status: Passed House – Assigned Senate Health & Human Services

Hearing: N/A

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BILL [HB10-1229](#)

Authentication of Verbal Medical Orders

CRHC Position: Monitor

Sponsors: PACE / NEWELL

The bill requires that a licensed hospital require that all verbal orders be authenticated by the physician or responsible individual who has the authority to issue a verbal order in accordance with hospital and medical staff policies. The bill requires that a verbal order be authenticated within 48 hours after the time the order was made unless a read-back and verify process is followed. If a read-back and verify process is followed, the order may be authenticated within 30 days after the date the order was made. Current federal law requires a 48-hour authentication period unless state law designates a specific time frame for the authentication of verbal orders.

Status: Passed both the House & Senate – Sent to the Governor to sign

BILL [HB10-1260](#)

Sunset Review Board Medical Examiners

CRHC Position: Monitor

Sponsors: RIESBERG & ... / NEWELL

Status: Passed House & Senate

BILL [HB10-1262](#)

Green Jobs & Medical Scholarships

CRHC Position: Monitor

Sponsors: FRANGAS

Status: PI'd

BILL [HB10-1283](#)

Patient Safety Issues

CRHC Position: Support

Sponsors: RIESBERG / SANDOVAL

Status: PI'd

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BILL [HB10-1330](#)

All-Payer Health Claims Database

CRHC Position: Support

Sponsors: KEFALAS & ... / MORSE

The bill requires the executive director of the department of health Rice, Riesberg, Solano, Tyler, Vigil care policy and financing (executive director) to appoint an advisory committee to make recommendations regarding the creation of a Colorado all-payer health claims database for the purpose of transparent public reporting of health care information. The executive director is required to appoint an administrator to create the database. The administrator, in consultation with the advisory committee, shall create the database if sufficient gifts, grants, and donations are received on or before January 1, 2012, to pay for the creation and maintenance of the database. The executive director shall promulgate rules to create and maintain the database. The data shall be made available to the public, state agencies, and private entities consistent with privacy laws. The advisory committee is scheduled to sunset July 1, 2016.

Status: Passed House & Senate – Sent to Conference Committee

Hearing: May 5th – 8:30am – Room 353

BILL [HB10-1332](#)

Medical Clean Claims

CRHC Position: Support

Sponsors: MIKLOSI / ROMER

The bill creates the "Medical Clean Claims Transparency and Uniformity Act" (act), which requires the executive director of the department of health care policy and financing (department) to establish a task force of industry and government representatives to develop a standardized set of payment rules and claim edits to be used by payers and health care providers in Colorado. The task force is to track the progress of the national initiative, known as the American society for quality initiative (ASQ initiative), in the development of a national uniform, standardized set of rules and edits and avoid duplication of conflict with the ASQ initiative. The task force is to develop a base set of rules and edits using existing national industry sources and work with the ASQ initiative to develop a complete set of uniform, standardized payment rules and claim edits applicable to all types of professional services. The task force is required to report its recommendations by December 31, 2012, including recommendations to:

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- * Adopt any standardized rules and edits developed by the ASQ initiative if appropriate for Colorado, for implementation by commercial payers by the end of 2012, and by nonprofit payers by the end of 2013; or
- * Adopt the rules and edits sets established by the task force if the ASQ initiative has not come to consensus. If the task force is required to develop its own standard rules and edits, the task force is to do so by December 31, 2012, and payers are to implement the standard rules and edits by the end of 2013 for commercial payers and by the end of 2014 for nonprofit payers. The bill precludes the use of any proprietary or other claims edits to modify the payment of the charges for covered services once the standard payment rules and claim edits are implemented. Contractual provisions between contracting persons or entities and health care providers regarding actual contracted reimbursement rates for procedures and other contractual arrangements negotiated by the parties would be preserved under the bill. The bill reorganizes provisions pertaining to health care contracts, without making any substantive changes to those provisions.

Status: Passed House & Senate

BILL [HB10-1354](#)

Approval Of Legislative Interim Studies

CRHC Position: Monitor

Sponsors: BENEFIELD & ... / MORSE

Under section 1 of the bill, all interim studies will be one-year studies conducted by the appropriate joint committee of reference of the general assembly, based on the issues to be studied. If a legislator seeks authorization for an interim study, he or she will introduce a joint resolution (resolution) that, at a minimum, identifies the issues to be studied and the joint committee of reference that will conduct the study. The legislative council will be the committee of reference for all resolutions that authorize an interim study. If the legislative council approves the resolution, the legislative council must amend the resolution to specify the number of interim committee days that are allocated to the interim study. The legislative council will not allocate more than 25 interim committee days in any one interim or such other number of days as may be budgeted for in the legislative department budget for the applicable budget year. The chairs of the joint committee of reference may appoint subcommittees of the committee to conduct the study or studies assigned to it, but any bills or joint resolutions recommended as a result of a study must be approved by a majority of the members of the joint committee of reference. The chairs may also appoint a task force of interested persons from the community to advise the joint committee of reference or a subcommittee and shall appoint such a task force if required by the resolution that authorized the study. Any

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bills that a joint committee of reference chooses to recommend must be pertinent to the policy issues identified in the resolution that authorized the interim study. The joint committee of reference may also recommend a joint resolution to continue the interim study for another year if necessary. The recommended bills will be considered interim committee bills and will not count against a legislator's 5-bill limit only if the interim study met the statutory requirements for interim studies and was approved by the legislative council. The president of the senate and the speaker of the house of representatives shall each appoint to the joint committee of reference a prime sponsor of the resolution if at least one of the prime sponsors in each house is not a member of the joint committee of reference. The legislative staff agencies will provide staff support, as necessary, for each joint committee of reference, or subcommittee, that conducts an interim study. A joint committee of reference conducting an interim study will not be allowed to accept in-kind donations of services from a private organization unless the services are in addition to and not in lieu of the services normally provided by legislative staff. Sections 2 through 27 of the bill repeal the interim committees that currently are established in statute and make conforming amendments, including specifying the appropriate committees of reference for reports that, under current law, are submitted to statutory interim committees.

Status: Passed House; Senate 2nd Reading Lost w/ Amendments

Hearing: N/A

BILL [HB10-1376](#)

Long Appropriations Bill

This is the budget for FY10-11.

Status: Signed by the Governor

BILL [HB10-1378](#)

2010 Transfers For Health Care Services (Budget Bill)

Sponsors: FERRANDINO / KELLER

Budget Package Bill. For the 2010-11 fiscal year, the bill authorizes appropriation of the following amounts from the tobacco tax revenues credited to the primary care fund:

* \$11,940,000 to the Colorado health care services fund; and

* \$12,800,000 for health-related purposes. The bill also transfers \$3,560,000 from the primary care fund to the primary care special distribution fund. The bill directs the department of health care policy and financing to develop a distribution formula to

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allocate the moneys in the Colorado health care services fund to Denver health and hospitals and to community health clinics. The bill specifies how moneys in the primary care special distribution fund are to be allocated between providers that participate in the Colorado indigent care program and providers that do not participate.

BILL [HB10-1379](#)

2010 Nursing Facility Rate Reductions (Budget Bill)

Sponsors: FERRANDINO / WHITE

Budget Package Bill. Current law reduces the general fund portion of per diem rates paid to nursing facilities by 1.5%. For the 2010-11 fiscal year, the bill increases that reduction to 2.5%. Current law allows the general fund portion of the per diem rates paid to nursing facilities to increase by up to 5% over the previous year for the 2010-11 fiscal year. The bill provides that, for the 2010-11 fiscal year, the general fund portion shall not increase by more than 1.9% over the previous year.

BILL [HB10-1381](#)

Tobacco Revenues Offset Medical Services (Budget Bill)

Sponsors: FERRANDINO / WHITE

Budget Package Bill. Pursuant to a declaration of a state fiscal emergency under section 21 of article X of the state constitution, for the 2010-11 fiscal year only, the bill allows tobacco tax revenues in the tobacco education programs fund, the prevention, early detection, and treatment fund, and the health disparities grant program fund to be used for any health-related purpose and to serve populations enrolled in the children's basic health plan and the Colorado medical assistance program at the programs' respective levels of enrollment as of January 1, 2005. The bill amends the tobacco cash fund statute to reflect the declaration of a state fiscal emergency for fiscal year 2010-11.

BILL [HB10-1382](#)

Repeal Delay Of Pub Med Asst Prog Pmts (Budget Bill)

Sponsors: FERRANDINO / WHITE

Budget Package Bill. Senate Bill 09-265 authorized the department of health care policy and financing to delay the last normal provider payment cycle for the 2009-10 fiscal year until after July 1, 2010. The bill repeals this authorization. Senate Bill 09-265 also

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specified that after June 1, 2010, capitated payments made to various managed care entities shall be made on the first day of the month following the enrollment of recipients in the managed care entity. The bill repeals these provisions.

BILL [HB10-1426](#)

Trinidad State Nursing Home Fund

Sponsors: RIESBERG &

Currently all moneys related to all state nursing homes and state veterans nursing homes are deposited in a central fund for state nursing homes. The bill establishes the Trinidad state nursing home cash fund to receive all moneys related to the Trinidad state nursing home. The fund will be exempt from the limits on uncommitted reserves.

Status: 2nds in House – Laid over daily

BILL [HJR10-1026](#)

Colorado Broadband

Sponsors: MASSEY / BACON

House Joint Resolution that supports and encourages increasing broadband capacity in rural and underserved areas for education, health care, businesses, and communities.

Status: 2nds in House – Laid over daily