

Colorado Association of Homes and Services for the Aging

HB1001 INCOME TAX CREDIT TO INCENTIVIZE COLORADO JOB GROWTH

Sponsors Rep. Rice & Sen. Heath

As amended gives the Colorado Economic Development Commission discretion to establish, for the period January 1, 2009 - January 1, 2015 a job growth incentive tax credit. Provides an income tax credit to firms that create jobs in Colorado. If jobs are created within an enhanced rural enterprise zone, firms must create at least 5 jobs and retain them for one year, if not in zone, must be 20 jobs. Jobs must pay 110% of area wage. To establish credit, the commission multiplies the estimated net job growth for each of the years in the credit period by 50% of the taxpayer's total estimated taxes imposed on the employer each year for the new employees of the project under the federal insurance contributions act. Commission may make the credit less than this, if desired. Allows a carry forward of credits. Establishes procedures and reporting requirements.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref. New section 39-22-531

HB1004 AUTHORITY OF PACE ORGANIZATIONS TO EMPLOY PHYSICIANS

Sponsors Rep. Apuan & Sen. Boyd

Allows a PACE organization to employ a physician as long as the PACE organization does not limit or exercise control over the physician's independent judgment and does not offer the physician a percentage of the fees charged to patients or other financial incentives. Requires the PACE organization that employs physicians to annually report to the department of public health and environment.

Position Active Support

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Amends 25-3-103.7

HB1020 EXPEDITED MEDICAL PROGRAM REENROLLMENT

Sponsors Rep. Acree & Sen. Spence
Directs the department of health care policy and financing to establish a process for reenrollment in Medicaid and the children's basic health plan both over the phone and the internet. Allows the department to create a pilot program that will serve a limited amount of recipients and enrollees. This will be intended to serve as a transition until the system has the capability to serve recipients and enrollees statewide.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount \$476,150 GF gifts, grants and donations

Statutory Ref. Amends 25.5-4-205

HB1047 ALTERNATIVE THERAPIES FOR MEDICAID

Sponsors Rep. Todd & Sen. Williams
Establishes a pilot program to provide chiropractic care, massage therapy, and acupuncture to an eligible person with a spinal cord injury (pilot program). Defines "person with as disability" as any person eligible for Medicaid with a spinal cord injury who is voluntarily willing to participate in the program, and who demonstrates need. Directs the medical services board to adopt rules to administer the pilot program, including defining complementary and alternative therapies. Requires the department of health care policy and financing to report to the joint health and human services committee of the General Assembly. Authorizes the department to solicit and accept gifts, grants, and donations for the pilot program. Repeals the pilot program, effective September 1, 2015.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount \$26,740 GF gifts, grants and donations

Statutory Ref. New Part 13, in Article 6 of Title 25.5

HB1048 BOARDS AFFECTING PERSONS WITH A DISABILITY

Sponsors Rep. Labuda & Sen. M. Carroll
Requires a board or commission in state government that has as its primary purpose the creation, implementation, or modification of a program that impacts persons with a disability, to include a person with a disability, a family member of a person with a disability, or an advocate for the disabled as a voting members of that board or commission.

Position Active Monitor

Current Status Laid Over 2nd reading in House till June 09, 2009

Fiscal Impact None

Impact Amount

Statutory Ref. Amends 24-3.7-101

HB1061 HEALTH CARE TRANSPARENCY

Sponsors Rep. McGihon & Sen. Tochtrop
Requires intermediaries to comply with the same standards, guidelines, medical policies, and benefit terms as their contracting insurance carriers. Payments to health care providers must indicate the name of the intermediary and the contracting insurance carrier. A violation of either requirement is an unfair or deceptive act or practice in the business of insurance. Requires the Commissioner of Insurance to examine the actions of insurance carriers related to intermediaries during market conduct examinations of the carriers.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Amends 10-16-705 and 10-3-1104

HB1073 ELECTRONIC PRESCRIPTIONS IN MEDICAL ASSISTANCE PROGRAM

Sponsors Rep. Massey & Sens. Boyd and Kopp
Health Care Task Force. Directs the department of health care policy and financing to study and report to the health and human services committees of the general assembly on the ability and feasibility of using electronic prescriptions including whether; 1) federal law allows incentives for e-prescribing, 2) if the state would realize a cost-savings, 3) if additional legislation is necessary to start e-prescribing, and 4) recommendations for patient-protection measures to ensure that any e-prescribing does not negatively impact a recipient's health or access to prescription drugs. Repeals the statute authorizing the study July 1, 2010.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount \$26,000 GF gifts, grants and donations

Statutory Ref. Amends 25.5-5-508

HB1088 CERTIFY NONPROFITS AS LOCAL PUBLIC PROCUREMENT UNIT

Sponsors Rep. Balmer & Sen. Newell
Allows the executive director of the department of personnel to certify a public benefit nonprofit entity as a local public procurement unit. Conditions such certification on the public benefit nonprofit entity using any procured supplies, services, or construction in the furtherance of its stated nonprofit purpose. Defines "public benefit nonprofit entity" as an organization that receives funds from federal, state, or local governmental sources and is exempt from federal taxation under section 501 (c) (3) of the federal internal revenue code. Directs the department of personnel to deliver a report to the State Military Affairs committees in both houses on the number certified nonprofits using the public procurement process and include the amount total spending by certified entities.

Position Active monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. 24-110-207.5; 24-110-101

HB1091 CARBON MONOXIDE ALARMS IN RESIDENTIAL PROPERTIES

Sponsors Rep. Sooper and Court & Sen. Romer

Requires any existing single-family dwelling or dwelling unit of an existing multi-family dwelling offered for sale or transferor for rent on or after July 1, 2009, that has a fuel-burning heater or appliance, a fireplace, or an attached garage to have an operational carbon monoxide alarm installed within 15 feet of each room lawfully used for sleeping purposes or in a location as specified in any building code adopted by the state or a local government. Requires any single-family dwelling or dwelling unit of a multi-family dwelling for which a building permit is issued for new construction on or after July 1, 2009, that has a fuel-burning heater or appliance, a fireplace, or an attached garage to have an operational carbon monoxide alarm installed within 15 feet of each room lawfully used for sleeping purposes. Allows for a centralized alarm system or other mechanism for a responsible person to hear the alarm at all times in a multi-family dwelling used for rental purposes so long as such dwellings have an operation carbon monoxide alarm installed within twenty five feet of any fuel fired heater or appliance or in a location as specified in building code adopted by the state or local government. Sets the maintenance and installation requirements for carbon monoxide alarms in single-family dwellings and dwelling units in multi-family dwellings that are used for rental purposes. Specifies that nothing in the act shall be construed to limit a municipality, city, home rule city, city and county, county, or other local governmental entity from adopting or enforcing more stringent requirements for the installation and maintenance of carbon monoxide alarms. Establishes that any person who installs a carbon monoxide alarm according to the manufacturer's published instructions shall have no liability to any person with respect to the operation, maintenance, or effectiveness of the carbon monoxide alarm.

Position Active Monitor
Current Status Signed by Governor
Fiscal Impact None
Impact Amount
Statutory Ref.

HB1103 PRESUMPTIVE ELIGIBILITY FOR LONG TERM CARE

Sponsors Rep. Riesberg & Sen. Newell

Authorizes the department of health care policy and financing to seek federal approval so that a person in need of long-term care who declares all of the information necessary to determine eligibility under Medicaid shall be presumptively eligible for benefits by declaration. Allows the department in the seeking of the waiver to have sufficient spending authority to implement the program. In addition, if the waiver constricts or the spending authority is not sufficient, allows the department to implement the program as a pilot. Provides counties be ineligible for recovery from the state department for both error rates and medical costs if a recipient was found not eligible after being presumed eligible.

Position Active support
Current Status Signed by Governor
Fiscal Impact None
Impact Amount
Statutory Ref. Amends 25.5-5-204

HB1178 CAREGIVER ABUSE DEVELOPMENTAL DISABILITY

Sponsors Rep. Green & Sen. Boyd

Creates a 20 member voluntary task force to implement a registry of caregivers who have a substantiated allegation of exploitation, mistreatment, neglect, physical abuse, or sexual abuse of a person with a developmental disability. Members of the task force may include members of the general assembly, interested parties, community centered boards, service providers, family members, advocates, persons with legal or judicial expertise with abuse registries, and law enforcement. The task force is encouraged to evaluate issues related to the creation and implementation of the registry including any existing processes, best practices, standards for what constitutes wrongdoing, definitions of family and whether family members should be included on the registry, fair and thorough investigative process including who should perform the investigations along with uniform standards for training, any statutes that need modified, and the cost of implementation.

Position Active monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref. New Section Part 1 of Article 10.5 of Title 27

HB1191 HCPF LIENS AGAINST THIRD PARTY CLAIMS

Sponsors Rep. McCann & Sen. Boyd

Provides that liens against third parties on any judgment, award, or settlement cannot exceed the amount of medical assistance provided by the department of healthcare policy and financing and requires the liens to be effective to the fullest extent possible as allowed by federal law.

Position Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Amends 25.5-4-301

HB1196 NURSING HOME PENALTY BENEFIT RESIDENTS

Sponsors Rep. Gerou & Sen. Boyd

Expands the authorized uses for monies in the nursing home penalty cash fund to include measures that will benefit residents of nursing homes by improving their quality of life through initiatives geared at resident centered care in nursing homes including consumer education, training state surveyors, supervisors and state and local ombudsman, development of a newsletter and website detail, and education and consultation for identifying and implementing initiatives in nursing homes that are resident centered. Caps the amount of money in the Nursing Home Penalty Cash Fund at \$200,000 for FY 09-10, and 25% of the monies deposited for FY 2010-2011. Authorizes a minimum balance to remain in the fund at one million dollars. Creates a 10 member Nursing Facility Culture Change Accountability Board to provide recommendations to the department of health care policy and financing and the department of public health and environment regarding expenditures from the fund. Requires a report to the joint Health and Human Services Committees as well as the Governor's office regarding expenditures from the fund and the purposes for which the fund was expended. Allows the Medical Services Board to have final authority regarding the distribution of cash funds. Allows for up to 10 percent of the funds to be used to administer and operate the accountability board, including expense reimbursement for members of the board. Sunsets the accountability board and the expanded uses of the fund September 1, 2016.

Position Active Amend

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount \$ 200,000 CF

Statutory Ref. Amends 25-1-107.5

HB1198 UNIFORM POWER OF ATTORNEY ACT

Sponsors Rep. McGihon & Sen. Morse

Enacts the Uniform Power of Attorney Act as promulgated by the National Conference of Commissioners on Uniform State Laws. Includes a standard, statutory form for Power of Attorney. Repeals Part 13 of Article 1 of Title 15 (the old act).

Position Monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref.

HB1213 CREATION OF THE HOUSING DEVELOPMENT GRANT FUND

Sponsors Rep. Gagliardi & Sen. Schwartz
Allows the housing development grant fund in DOLA, Division of Housing to accept gifts, grants, donations, bequests, etc. Allows the director of the division to solicit, accept, expend and disburse the money for grants and loans. Specifies that all such monies will not revert to the general fund if unexpended. Authorizes the state housing board to improve, preserve or expand the supply of affordable housing. As amended allows foundation donations and allows monies to be used for foreclosure prevention and needs assessment. Repeals foreclosure prevention authorization on June 30, 2011. Caps all general fund monies not spent on direct housing in any one year at 25%.

Position Passive support

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref.

HB1215 SSI MAINTENANCE STABILIZATION FUND

Sponsors Rep. Ferrandino & Sen. Tapia
JBC Bill-Creates a state supplemental security income stabilization fund for the purpose of stabilizing the source of funding required to meet the federal requirements for maintenance of efforts for the state-funded supplemental to persons receiving financial benefits pursuant to Title of the social security act (SSI). Authorizes a continuous appropriation. Establishes a minimum cap of \$1.5 million in the fund. Requires the state department to submit a report to the JBC by February 15th of every year indicating whether expenditures were made from the stabilization fund, the aggregate monthly amount of expenditures, and the particular programs for which the expenditures were made.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount

Statutory Ref. New Section Part 2 of Article 2 of Title 26

HB1220 PERMIT UNIT OWNER TO PROMOTE AFFORDABLE HOUSING

Sponsors Rep. Scanlan & Sen. Gibbs
Amends the "Colorado Common Interest Ownership Act" to specify that, in communities of 100,000 or less with a tramway license, the unit owners' association shall not prospectively prohibit a unit owner, public or private, from restricting or specifying by deed, covenant, or other document:
* The permissible sale price, rental rate, or lease rate of the unit; or
* Occupancy or other requirements designed to promote affordable or workforce housing.

Position Monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref.

HB1222 ADMINISTRATION OF APPROVED MONEYS

Sponsors Rep. Ferrandino & Sen. Keller

Recommended by the Joint Budget Committee, extends the repeal date included in five statutory sections. Authorizes the transfer of appropriations or over expenditure of appropriations in order to close the state's accounting books at the end of the fiscal year. Extends the repeal date to September 1, 2014. Allows the Medicare Modernization Act (MMA) of 2003 State Contribution Payment to be under the unlimited over expenditure authority for the Medicaid program. Specifically the bill extends the repeal dates of statutory sections authorizing the following actions in connection with appropriated money: 1) Transfers to implement conditional or centralized appropriations, 2) Transfers between departments, 3) Cash fund transfers to implement conditional or centralized appropriations and transfers of health care policy and financing and human services Medicaid programs, 4) Interdepartmental transfers, 5) Authorizes the controller to allow department, institution, or agencies of the state including higher education to make expenditures in the amount authorized by a line item, 6) Transfers between items of appropriation in judicial. Clarifies the department of health care policy and finance has unlimited over expenditure authority for the state contribution payment of the federal "Medicaid Modernization Act of 2003."

Position Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Amends various statutes

HB1223 TOBACCO LITIGATION FUND AND COLORADO BENEFIT MANAGEMENT SYSTEM

Sponsors Rep. Marostica & Sen. Tapia

Extends the deadline for expending moneys for the Colorado benefits management system (CBMC) from the health care supplemental appropriations and over expenditures account of the tobacco litigation settlement cash fund for one year. Upon expiration of the deadline, transfers any remaining balance to the General Fund. Money in this account can be used as follows: Up to \$6.2 million of the \$24.4 million can be used for funding shortfalls occurring in the Children's Basic Health Plan during FY 2006-07 and FY 2007-08; the remainder can be used for over expenditures and supplementals occurring in the CBMS during FY 2006-07 through FY 2008-09; and any moneys that remain in the account on April 16, 2009, will flow to the programs that are supported with tobacco settlement payments. To date, \$2.4 million has been used from the account: \$1.2 million for the Children's Basic Health Plan, and \$1.2 million for the CBMS. The current balance is \$22.0 million.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount see above

Statutory Ref. Amends 24-22-115 and 24-75-1104.5

HB1248 BUSINESS ENTITIES REGULATION

Sponsors Rep. Gerou & Sen. Shaffer
Clarifies filing and record-keeping requirements for Secretary of State business filings. Clarifies partnership law issues. Repeals and reenacts the statute authorizing boards of directors of nonprofit corporations to take action without a meeting.

Position Monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref.

HB1260 DESIGNATED BENEFICIARY AGREEMENTS

Sponsors Rep. Ferrandino & Sen. Veiga
Authorizes two competent, unmarried adults to execute a designated beneficiary agreement and record it with a county clerk and recorder. Specifies a statutory form that may be used for designated beneficiary agreements and encourages clerks to make form available. Provides that in the absence of a superseding legal document, the designated beneficiary agreement entitles the parties to certain benefits and protections under state law, primarily within the Colorado Probate Code. Allows either party to a designated beneficiary agreement to unilaterally revoke the agreement by recording a form with the same county clerk's office, and requires the clerk to mail a copy of the revocation to the other party. Specifies that a designated beneficiary agreement is revoked upon the marriage of either party. Specifies that powers and rights conferred by a designated beneficiary agreement survive the death of the party that granted them, but the agreement itself terminates upon death and the survivor may enter into a new designated beneficiary agreement. Provides good faith immunity to third parties that rely on the validity of a designated beneficiary agreement and affirmations by a party to the agreement that it is valid and not superseded. Makes a legislative declaration about the purposes of the act and contains conforming amendments to affected statutes. Amended to delete provisions on recognition of civil unions, domestic partnerships or same-sex marriages from another jurisdiction. Amended to clarify the effects of superseding legal documents that are invalid and to specify that execution of agreement shall not constitute evidence of parties' intent to establish a common law marriage. Amended to refer to statutory fee schedule for recording documents with clerk and delete dollar amounts for filing fees. Amended to change references to "filing" to "recording" and make other changes regarding role of county clerk. Specifies effective date and time at time received in clerk's office for recording. Amended to add disclaimer to statutory form and to clarify that designated beneficiary agreement alone does not change or make designations for pensions, insurance policies or bank accounts. Amended to add rights of nursing home patients to list of statutory rights conferred by designated beneficiary agreement and to expand hospital visitation rights to hospices and other health care facilities. Amended to clarify ability of surviving children to sue for wrongful death when there is a designated beneficiary.

Position Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. New Article 22 in Title 15

HB1281 STATE BOARDS PERSONS WITH DISABILITIES

Sponsors Rep. Labuda & Sens. M. Carroll and Newell
Encourages the governor to include representation by at least one person with a disability, a family member of a person with a disability, or a member of an advocacy group for persons with disabilities on the State Board of Housing, the State Board of Health, the State Board of Human Services, Colorado Children's Trust Fund Board, the Civil Rights Commission, the Medical Services Board, the Advisory Board for mental health service standards for health care facilities, the Transportation Board, and the Commission on Aging.

Position Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Various

HB1293 COLORADO HEALTHCARE AFFORDABILITY ACT

Sponsors Reps. Reisberg and Ferrandino & Sens. Keller and Boyd
Creates the Health Care Affordability Act of 2009. The Department of Health Care Policy and Financing (HCPF) is authorized to collect hospital provider fees for the purpose of obtaining federal financial participation for the state's medical assistance programs. Fees are set by the State Medical Services Board based on federal regulations and are for the following: 1) to increase Medicaid and CICIP reimbursements to hospitals); 2) to increase the number of people covered by medical assistance programs; and 3) to pay for administrative costs related to the fee and program expansions. Payments to hospitals are subject to the receipt of federal authorization, state payments to hospitals will increase through 1) maximizing provider payments based on federal regulations, 2) increasing payments under the Colorado Indigent Care Program (CICP) to 100 percent of cost, and 3) paying a new quality incentive payment. Expanding Medical Assistance Programs will occur if sufficient fees and federal funding are available. Allows HCPF to expand medical assistance programs as follows: 1) increasing the income eligibility limit for the Children's Basic Health Plan (CBHP) from 205 up to 250 percent of the federal poverty level (FPL) for both children and pregnant women (implementation Spring 2010); 2) increasing the income eligibility limit for Medicaid for parents from 60 up to 100 percent FPL (Implementation Spring 2010); 3) providing for 12-month continuous eligibility for children in Medicaid (Implementation Spring 2012); 4) creating a new Medicaid buy-in program for disabled adults and children with income up to 450 percent FPL (Implementation Summer 2011); and 5) creating a new Medicaid eligibility category for childless adults with income up to 100 percent FPL (Implementation Winter 2012). Requires payments to hospitals be fully funded before any eligibility expansion. Authorizes the Medical Services Board to set rules related to the fee and expansion programs, but rules to reduce medical benefits or eligibility must be approved by the Joint Budget Committee. Creates a 12-member Hospital Provider Fee Oversight and Advisory Board established to provide recommendations to the HCPF and the Medical Services Board regarding the implementation of the fee and the expansion of programs. Requires the advisory board to report to the General Assembly. Requires five years after the bill becomes law, legislative service agencies of the General Assembly must conduct a review of the implementation of the act, and provide a written report. Provides that Hospital Provider Rates shall not be reduced any lower than the indexed rate of all provider types.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount

Statutory Ref. New Section 25.5-4-402.3

HB1349 CONTINUE HEALTH CARE AFTER EMPLOYMENT

Sponsors Rep. Fischer & Sen. Heath

Allows an employee who has been terminated from employment the right to continue health care coverage with a 65% premium subsidy if the employee is an assistance-eligible individual. Defines "assistance-eligible individual" as an individual who: - Between September 1, 2008 and February 16, 2009, was continuously insured under the group policy of the employer for at least 6 months prior to termination; - Experienced a qualifying event; - and is not eligible for health care coverage under another group plan or under Medicare. Defines "qualifying event" to mean an involuntary termination from employment that does not include the death of the employee, divorce or legal separation from the employee, or loss of dependent status. Requires an employer to provide notice to qualified beneficiaries of the right to elect coverage that includes eligibility and other information pursuant to the federal "American Recovery and Reinvestment Act of 2009." Applies this act to employers who employ employees on at least 50% of its working days, or if the employer was not in business for the entire preceding calendar year, on at least 50% of its working days in the preceding calendar quarter.

Position Monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref. Amends 10-16-108.3, 10-16-105.5

HB1364 INCREASE HEALTH CARE TASK FORCE TERMS

Sponsors Rep. Reisberg & Sen. Boyd

Increased the length of terms that members appointed to the health care task force serve from one year to no more than two years.

Position Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Amends 10-16-221

HJR1017 HOSPICE & PALLIATIVE CARE INTERIM STUDY

Sponsors Reps. Riesberg and Roberts & Sen. Williams

Creates and interim committee that shall consist of ten members of the General Assembly to consider the barriers to accessing and utilizing hospice and palliative care in urban and rural areas of Colorado, the economics and cost savings of hospice and palliative care, factors contributing to ethical dilemmas at the end of life and methods to reduce those factors, including clarifying laws and regulations governing advance directives; and factors limiting the efficacy of the provision of hospice and palliative care, including laws and regulations pertaining to the legal pronouncement of death. Requires the committee to report their findings to the next meeting of the 67th General Assembly.

Position Monitor

Current Status Adopted

Fiscal Impact Yes

Impact Amount \$31,508 GF expenditure

Statutory Ref. resolution

HJR1022 HOME CARE PLACEMENT AGENCY TASK FORCE

Sponsors Rep. Frangas & Sen. Sandoval

Position Monitor

Current Status Adopted

Fiscal Impact

Impact Amount

Statutory Ref.

SB005 COLORADO TRAUMATIC BRAIN INJURY PROGRAM

Sponsors Sen. Spence & Rep. Primavera
Expands the definition of traumatic brain injury to include blast injuries. Creates the traumatic brain injury trust fund board which is responsible for promulgating reasonable policies and procedures pertaining to the operation of the trust fund. The board is also required to use the trust fund moneys to provide direct services to persons with traumatic brain injuries, support research, and support education grants to increase awareness and understanding of issues and needs related to traumatic brain injury.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount

Statutory Ref.

SB010 USE OF AUTOMATED EXTERNAL DEFIBRILLATOR

Sponsors Sen. Spence & Rep. Primavera
Eliminates certain staffing and reporting requirements of a person or entity that acquires an automated external defibrillator (AED). Provides to a person or entity who, in good faith and without compensation, renders emergency care or treatment by the use of an AED immunity from liability for any civil damages for acts or omissions made in good faith as a result of such care or treatment, regardless of whether the person or entity that acquired the AED has satisfied statutory requirements and other provisions of law. Amended to extend immunity to persons that review plans for AED and provide training to staff.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Amends 13-21-108.1 and 22-1-125

SB044 ADMINISTRATIVE PROCEDURES FOR DEPT OF HUMAN SERVICES

Sponsors Sen. Boyd & Rep. Hullinghorst

For reviews of an administrative law judge's decision involving the department of human services (department), permits a party who cannot afford a written transcript to file an audio recording. Eliminates an exception for provider appeals that allows the decision of the administrative law judge rather than the department to constitute final agency action for purposes of judicial review. Repeals an obsolete provision relating to appeals under the old merit system. Makes the rule-making authority of the state board of human services (state board) and the executive director of the department (executive director) consistent throughout the statutes by clarifying that the state board has rule-making authority over program scope and content and client and provider rights and that the executive director has rule-making authority over department administration, accounting, and fiscal reporting. Provides that any existing rules of the executive director or of the department adopted prior to the enactment of this bill that contain subject matter appropriate for board rules are valid and enforceable until revised, amended, or repealed by the state board. This bill allows a party to file an audio recording in lieu of a written transcript for department reviews of an administrative law judge's decision; provides the department final action authority for provider appeals; clarifies and standardizes the rule-making authority of the State Board of Human Services and the executive director of the department throughout the statutes; and provides that existing rules are valid and enforceable until revised by the board or the executive director as appropriate.

Position Monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref. 26-1-106

SB051 ENERGY-EFFICIENT STRUCTURE FINANCING

Sponsors Sen. Carroll M. & Rep Levy

Cleans up Colorado Clean Energy Finance Program Act. Adds banks or mortgage lenders as lenders. Adds rental and business property as eligible recipients. Specifies that renewable energy developers and installers may be certified. Authorizes GEO as administrator to develop and use a logo. Clarifies that apartment buildings are eligible. Increases the cap from \$30 million to \$40 million on the amount of loans guaranteed by the state treasurer. But allows no more than \$15 million in 08 -09 and no more than \$25 million altogether in 08 -09 and 09-10. Requires landlords to allow energy audits of rental properties if requested by tenant, at tenant's expense. Allows the treasurer to apply prudent practices in managing the money at the treasurer's discretion. Creates the ability for renewable energy generation equipment installed on property owned by others to be exchanged for future purchases of energy under power purchase agreements or assignment of rebates. Requires the PUC to require utilities to set aside a portion of their annual budget for rebates for low income utility customers.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref.

SB128 SUNSET UNLICENSED ADMINISTRATION OF MEDS

Sponsors Sen. M. Carrol & Rep. Green

Sunset Process- Senate Health and Human Services Committee. Implements the recommendations of the department of regulatory agencies in its sunset review of the administration of medications by unlicensed persons as follows: 1) Continues the qualified medication administration person (QMAP) program, 2) Removes the QMAP education and evaluation program from the sunset review calendar, 3) Requires employers to document that all unlicensed medication administration persons who are currently within their employ have passed the QMAP competency evaluation at least once every 5 years, as a condition of employment, 4) Requires employers who utilize QMAP services to conduct drug-related criminal background checks on employees prior to employment.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount \$15,218 CF

Statutory Ref. Repeals 25-1.5-304, Repeals and reenacts 24-34-104, 12-38-125,12-36-106 and amends 25-1.5-

SB138 SUNSET CERTIFIED NURSE AIDES

Sponsors Sen. Boyd & Rep. Gagliardi

Sunset Process - Senate Health and Human Services Committee. Implements the recommendations of the department of regulatory agencies in its sunset review of the nurse aide certification program as follows: 1) Continues the regulation of certified nurse aides (CNAs) through September 1, 2020, 2) Changes the composition of the advisory committee to allow a professional nurse or a practical nurse who supervises CNAs to serve on the committee and simplifies the requirements for representing the public, 3) Changes the make-up of the advisory committee and authorizes members of the advisory committee to receive a per diem for their service, 4) Repeals the medication administration advisory committee, 5) Clarifies grounds for discipline regarding drug use and establishes as grounds for discipline the failure to respond to the state board of nursing (board) and the failure to report a criminal conviction, 6) Consolidates language regarding unauthorized nurse aide practice and continues the unauthorized practice as a class 2 misdemeanor, 7) Allows the board to require a CNA to undergo a physical or mental examination by a licensed health care provider other than a physician, 8) Repeals the requirement that proceedings relating to complaints where formal charges were filed be subject to the open records law, 9) Repeals the statutes specifying scope of practice, education, and experience requirements for certification as a medication aide and requires the board to promulgate rules in these areas, 10) Authorizes the board to require CAN training programs to include up to 25% more hours than the minimum federal requirements, 11) Specifies that the 4 months that a CNA may work without certification shall be consecutive, 12) Extends the waiting period for a CNA whose certification has been denied, revoked, or surrendered from one year to 2 years before the board may reinstate the certification, 13) Repeals the section in the "Nurse Practice Act" that prohibits a registered nurse from delegating the authority to select medications to another person if the person is not otherwise authorized to select medications. Repeals the 12-38.1-120 September 1, 2020.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact

Impact Amount

Statutory Ref.

SB169 **SUNSET NURSING HOME ADMINISTRATORS BOARD**

Sponsors Sen. Tochtrop & Rep. Riesberg

Sunset Process - Senate Health and Human Services Committee. Implements the recommendations of the department of regulatory agencies in its sunset review of the board of examiners of nursing home administrators (board) as follows: 1) Continues the board and its functions through July 1, 2018; 2) Reduces the size of the board from 8 to 5 members by eliminating, as their terms expire, the 2 long-term care professional members, and allows nursing home administrators who have not engaged in practice in Colorado for at least 5 years to serve on the board; 3) Allow complaints alleging violations of the law to be submitted to the board and allows the board to act on the complaint; 4) Repeals the requirement that the board submit an annual report to the governor; 5) Eliminates a bachelor's degree in business administration from the list of degrees that an applicant for a nursing home administrator license can hold in order to avoid participation in the AIT program as a prerequisite to licensure; 6) Eliminates the ability of an applicant for licensure to have 2 years of experience in supervision in a nursing home or hospital in order to avoid the AIT program as a prerequisite to licensure; 7) Eliminates the requirement that participants in the administrator-in-training program (AIT program) submit bi-monthly progress reports to the board and instead allows the board, by rule, to determine the frequency of progress reports; 8) Allows the board to impose fines, pursuant to a schedule of fines established by rule, when a licensee or temporary license holder commits an act constituting grounds for discipline; and 9) Makes technical revisions to eliminate obsolete provisions, corrects erroneous references, and allows mental or physical examinations of licensees or temporary license holders to be conducted by other licensed health care professionals who are not physicians.

Position Active Monitor

Current Status Signed by Governor

Fiscal Impact None

Impact Amount

Statutory Ref. Repeals and Reenacts 24-34-104

SB187 **HEALTH CARE POLICY AND FINANCING SUPPLEMENTAL**

Sponsors Sen. Keller & Rep. Pommer

Makes supplemental appropriation to the department of health care policy and financing. Funds anticipated increases for caseload growth. Adds addition federal match for Medicaid from the American Recovery and Reinvestment Act of 2009.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount

Statutory Ref.

SB210 TOBACCO SETTLEMENT HEALTH PROGRAMS

Sponsors Sen. Tapia & Rep. Ferrandino

This bill is part of the Joint Budget Committee's FY 2008-09 and FY2009-10 budget balancing packages. The bill transfers \$1.2M of tobacco-settlement moneys to the General Fund for FY2008-09. The transfers are comprised of \$65,000 from the AIDS Drug Assistance Program, \$149,070 from payments to local public health agencies, and \$977,356 from the Colorado Indigent Care Program for rural hospitals with less than 60 beds and public hospitals. The bill also merges two streams of tobacco litigation settlement revenue that support CHP+ and specifies that the annual funding for Home-Settlement and Community-Based Services for Children with Autism from the Tobacco Litigation Settlement Cash Fund is up to \$1 million. For FY09-10, the bill transfers \$2.4M from the Comprehensive Primary and Preventive Care Grants Program to the General Fund.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount see above

Statutory Ref. 24-22-115 (1) (b), 24-75-1104.5, 25-4-1411, 25.5-6-805, 25.5-8-105, 25-36-101 (5)

SB212 STATE SALES TAX VENDOR FEE CAP

Sponsors Sen. White & Rep. Pommer

Joint Budget Committee budget balancing package for FY 2008-09: It temporarily reduces the amount that vendors can retain (vendor fee) to compensate for sales tax collection expenses. The bill lowers the vendor fee rate from 3 1/3 percent to 1.35 percent for monthly filers. The bill covers returns made on or after March 1, 2009, through December 31, 2011. Vendors are given a one-month grace period, from March 1, 2009 to April 1, 2009, during which interest and penalties are waived for errors made in remitting sales tax revenues that may result from the change in the vendor fee. The bill is repealed December 31, 2013.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount \$12.5 million GF revenue

Statutory Ref. Amends 39-26-105

Sponsors

Sen. Morse & Reps. Marostica and Court

Under current law, General Fund appropriations are limited to the lesser of a 6 percent increase from the previous year's appropriation level and 5 percent of Colorado personal income. SB 09-228 sets the limit equal to 5 percent of Colorado personal income. Transfers from the General Fund to transportation, capital construction, and the General Fund statutory reserve are required by the bill as follows: 2% of general fund appropriations to transportation, 0.5% to capital construction and 0.5% to the reserve beginning in FY12-13 and continuing for 5 years, however the capital construction transfer increases to 1% in the third, fourth and fifth years of the transfers. The five-year block of transfers is subject to a trigger on personal income growth. If personal income increases by less than 5 percent in 2012, the entire five-year block of transfers is postponed until the first fiscal year in which personal income increases by at least 5 percent during the calendar year in which the fiscal year originated. If personal income growth were to fall below 5 percent during the five-year period, the transfers would continue to occur without pause. Each individual transfer is subject to a trigger based on the size of future TABOR refunds. If a TABOR refund equal to between 1 percent and 3 percent of General Fund revenue is expected to occur, transfers will be reduced by 50 percent. If the TABOR refund is equal to more than 3 percent of General Fund revenue, the transfer will not occur. Once the five-year period of transfers is complete, the General Fund statutory reserve will equal 6.5 percent of General Fund appropriations. Eliminates other statutory references and obsolete provisions related to the appropriation limit and makes conforming amendments. Eliminates the automatic transfer to the controlled maintenance trust fund that is a percentage of excess general fund revenue. Eliminates the automatic transfer of general fund surplus to the HUTF and capital construction fund. Eliminates the automatic diversion of sales and use tax revenues to the sales and use tax holding fund and instead gives General Assembly the discretion to make such transfers. Eliminates the limit on the amount the General Assembly may appropriate from the HUTF for specified state agencies.

Position

Active Support

Current Status

Signed by Governor

Fiscal Impact**Impact Amount****Statutory Ref.**

Amends 24-75-201.1; New Section 24-75-219; conforming amendments

Sponsors

Sen. Tochtrop & Rep. Riesberg

I) Sunset Process - Senate Health and Human Services - Implements the recommendations of the department of regulatory agencies in its sunset review of the state board of nursing (state board) as follows: 1) Continues the state board and its functions through July 1, 2020; 2) Eliminates the requirement that one of the 2 licensed practical nurses serving on the state board must be employed by a rural hospital and instead encourages the governor, when making appointments to the state board, to strive for geographical, political, urban, and rural balance among the board membership; 3) Clarifies that state board members representing the public cannot currently hold, and cannot have held in the past, any health care license, and they cannot be employed by or connected with health care facility, agency, or insurer; 4) Eliminates the requirement that state board members be confirmed by the senate; 5) Lengthens state board member terms from 3 years to 4 years; 6) Authorizes the state board to impose civil fines in lieu of other discipline and requires the state board to adopt rules to define a fining structure; 7) Removes the requirement that license applicants submit proof that they are not addicted to drugs or alcohol. Modifies provisions regarding grounds for disciplining a licensee as follows: 1) Establishes habitual intemperance or excessive use of habit-forming drugs or controlled substances as a ground for discipline, rather than alcohol or drug dependence and addiction; 2) Eliminates the requirement that failure to submit a completed questionnaire to the state board upon license renewal must be negligent or willful in order to constitute grounds for discipline; and 3) Adds failure to notify the state board of a criminal conviction within 45 days after the conviction as ground for discipline. Consolidates provisions regarding the circumstances in which the state board may deny a license and adds that the state board may deny license to an applicant who lacks continued competency. Requires a nurse who has been denied a license, has had a license revoked, or has surrendered a license to avoid discipline to wait 2 years before reapplying for a license to practice nursing. Repeals obsolete provisions regarding graduate nurse permits and vouchers to spend moneys appropriated to the state board. Repeals the requirement that proceedings relating to complaints against nurses where formal charges are filed are subject to the open records law. Clarifies that the state board may conduct a criminal history record check on any person under the state board's regulatory authority. Clarifies that professional nurses can perform medical functions delegated by physician assistants. Specifies that, in addition to persons seeking to renew a license, applicants for an initial or reinstated license are required to pay a fee to support the nursing peer health assistance program or nurse alternative to discipline program. On and after July 1, 2010, requires all new applicants for placement on the advanced practice registry to have national certification. Eliminates restrictions on types of medications that an advanced practice nurse can prescribe. Repeals the "Nursing Shortage Alleviation Act of 2002". Requires advanced practice nurses engaged in independent practice to obtain professional liability insurance, and allows the state board to adopt rules specifying exemptions to and lesser requirements for professional liability coverage. Adds failure to maintain professional liability insurance to the grounds for discipline by the board.

II) Codifies the DORA workgroup recommendations for "articulated plans" with regard to safe prescribing. Requires both the board of nursing and the board of medical examiners to adopt "similar" rules to implement the "articulated plans" by 2010. Requires completion of a mutually structured post-graduate preceptor-ship, as defined by the board and adopted by rule consisting of no less than 1,800 documented hours to be completed immediately preceding the five year period. Requires the preceptor to be conducted by either a physician or a physician and an advanced practice nurse with prescriptive authority. Upon satisfactory completion of the preceptor the board may grant provisional prescriptive authority to the APN, limiting the authority to those medications consistent with their scope and focus. Requires the APN within a five year period to gain an additional 1,800 hours of experience in a mutually structured mentorship with a physician or a physician and an APN. Upon completion of the preceptor and mentor program the nurse, upon the signature of the mentors, will be granted prescriptive authority. Creates a 12 member "Nurse Physician Advisory Task Force for Colorado Health Care" (NPATCH) whose purpose is to promote safety and improve health care in Colorado by supporting collaboration and communications between the practices.

III) Defines "Advance Practice Nursing" as an expanded scope of "professional nursing" (which includes "delegated medical functions), in a role and population focus approved by the board,

with or without compensation or personal profit. Further defines the practice of advance practice nursing to include prescribing medications.

Position Monitor
Current Status Signed by Governor
Fiscal Impact Yes
Impact Amount \$259,881 CF expenditures
Statutory Ref. Amends various sections of Title 12 Article 38

SB261 OLD AGE PENSION SUPPLEMENT FUND MEDICAID

Sponsors Sen. Tapia & Rep. Ferrandino
Budget Package Bill from JBC. For FY 2008-09, allows up to \$3 million from the supplemental old age pension health and medical care fund to be used to offset general fund costs of persons 65 or older who are served through the Medicaid program. For FY 2009-10, allows the fund to be used to offset general fund costs of persons age 65 or older who are served through the Medicaid program. Repeals such authorization on July 1, 2010.

Position Monitor
Current Status Signed by Governor
Fiscal Impact Yes
Impact Amount (\$3million)FY08-09 and (\$6 million)FY 09-10
Statutory Ref. Amends 25.5-2.101

SB263 MEDICAID NURSING FACILITIES PAYMENTS

Sponsors Sen. White & Rep. Pommer
Budget Package Bill from JBC. Makes changes in the calculations of Medicaid nursing facility reimbursement rates. Specifies the methodology used to calculate the nursing facility General Fund per diem cap during the American Recovery and Reinvestment Act (ARRA-federal stimulus) time period. Specifies that the federal match for payments associated with the general fund share of the per diem rate to nursing facility provider shall be 50%. Reduces the General Fund cap to 0.0 percent growth in FY 2009-10, allows a 5.0 percent growth cap for FY 2010-11, and reinstates the current 3.0 percent cap on General Fund growth after FY 2010-11. Specifies that the increase in the cost of direct and indirect health care services and raw food shall not exceed 8.0 percent beginning in FY 2009-10. Calculates the A&G 8% based on costs reported and audits as of July 1, 2009 and indexed accordingly. Makes supplemental payments to providers from the nursing home provider fee rather than per diem rates. Makes supplemental payments for quality incentives, residents with severe mental disorders, Medicaid offsets, and per diem rates that exceed the general fund share. Makes these supplemental payments subject to available appropriations and federal matching funds. Authorizes the department of health care policy and financing to suspend or reduce supplemental payments if moneys are not sufficient to fully fund all the payments. Limits the nursing facility provider fee to \$7.50 per non-Medicare-resident day in FY 2009-10, and allows the fee to increase by inflation in future years. Prohibits providers from including the amount of the provider fee as a separate line item.

Position Active Monitor
Current Status Signed by Governor
Fiscal Impact Yes
Impact Amount (\$3.7 million) GF savings for FY 08-09 and (\$17.1 million) FY 09-10
Statutory Ref. Amends 25.5-6-201, 202, and 203

SB265 MEDICAID CHP+ PAYMENT TIMING

Sponsors Sen. White & Rep. Pommer
Budget Package Bill from JBC. Authorizes Health Care Policy and Financing to delay the last normal provider payment cycle for the 2009-10 fiscal year until after July 1, 2010. Specifies that, after June 1, 2010, capitated payments made to various managed care entities (prepaid inpatient health plans, BHOs, PACE and managed care plans) shall be made on the first day of the month following the enrollment of the recipients in the managed care entities. Clarifies that the Medicare Modernization Act State Contribution Payment does not have to be paid before the date it is due. This bill is anticipated to reduce expenditures in FY 2009-10 by \$87.3 million total funds (including \$35.6 million General Fund).

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount (\$35 million) GF

Statutory Ref. Amends 25.5-4-201

SB276 SUSPEND PROPERTY TAX EXEMPTIONS

Sponsors Sen. White & Rep. Pommer
Budget Package Bill from JBC. For property tax year 2010, zeroes out the seniors' and disabled veterans' property tax exemption for qualifying taxpayers. Saves \$91.4 million in FY 2009-10 by preventing need for general fund backfill of local property tax revenues for school finance act.

Position Monitor

Current Status Signed by Governor

Fiscal Impact Yes

Impact Amount (\$91.4 million)

Statutory Ref. Amends 39-3-203

SJR039 DISABILITY HISTORY WEEK

Sponsors Sen. Spence & Rep. Primavera
Proclaims the week beginning July 26, 2009, the anniversary of the signing of the federal Americans with Disabilities Act of 1990, as Disability History Week in Colorado.

Position Monitor

Current Status Adopted

Fiscal Impact None

Impact Amount

Statutory Ref. non-statutory

SJR040**TRANSFORMED INTEGRATED BEHAVIORAL HEALTH**

Sponsors

Sen. Boyd & Rep. Frangas

Finds that an integrated behavioral health system will increase access and reduce administrative and service duplication while providing a coordinated system of care for the behavioral health needs of all Coloradans, and that the final report on the transformation transfer initiative will result from a meaningful partnership between the executive branch, consumers, families, and stakeholders in the development of a transformed behavioral health system in Colorado.

Position

Monitor

Current Status

Adopted

Fiscal Impact**Impact Amount****Statutory Ref.**