

**Second Regular Session
Sixty-seventh General Assembly
STATE OF COLORADO**

PREAMENDED

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

LLS NO. 10-0328.02 Christy Chase

HOUSE BILL 10-1260

HOUSE SPONSORSHIP

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Boyd and Newell,

House Committees

Health and Human Services
Appropriations

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A BILL FOR AN ACT

101 **CONCERNING THE SUNSET REVIEW OF THE COLORADO STATE BOARD**
102 **OF MEDICAL EXAMINERS, AND, IN CONNECTION THEREWITH,**
103 **CONTINUING THE BOARD AND THE REGULATION OF PHYSICIANS**
104 **AND PHYSICIAN ASSISTANTS UNTIL JULY 1, 2019, AND**
105 **IMPLEMENTING THE RECOMMENDATIONS CONTAINED IN THE**
106 **SUNSET REVIEW AND REPORT OF THE BOARD.**

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>.)

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.*

Sunset Process - House Health and Human Services Committee. The bill implements the recommendations of the department of regulatory agencies in its sunset review of the Colorado state board of medical examiners by amending the "Colorado Medical Practice Act" (act) as follows:

Sections 1, 2, and 3 of the bill continue the Colorado state board of medical examiners, renamed as the Colorado medical board pursuant to recommendation 4 of the sunset report, for 9 years, until July 1, 2019.

Sections 4 and 5 of the bill schedule for sunset review and repeal on July 1, 2012, the system of professional review committees that review and evaluate the quality and appropriateness of patient care provided by licensed physicians in this state.

Sections 6 through 12 of the bill:

- ! Transfer regulatory authority pertaining to the duties and functions of emergency medical technicians (EMTs) from the state board of medical examiners to a newly created board within the Colorado department of public health and environment, effective January 1, 2011;
- ! Create the board of emergency medical and trauma services (BEMTS) to regulate the duties and functions of EMTs and adopt rules for such purpose;
- ! Schedule the BEMTS and its functions related to the regulation of EMTs for sunset review and repeal on July 1, 2017; and
- ! Clarify that the rendering of services by certified EMTs that are consistent with EMT functions and duties, as defined by BEMTS rules, does not constitute the practice of medicine.

Section 13 of the bill:

- ! Changes the name of the Colorado state board of medical examiners to the "Colorado medical board" (medical board);
- ! Eliminates the 5-year residency requirement for prospective members of the medical board;
- ! Repeals the statutory requirement that the governor, when making appointments to the medical board, consult with professional associations for physicians and osteopathic physicians;
- ! Eliminates the notice and hearing requirement when the governor removes a member of the medical board; and
- ! Repeals the office of the secretary on the medical board.

Sections 13 through 16 of the bill increase the size of the medical board by 3 members, create a licensing panel within the medical board to address issues pertaining to the licensing of physicians and the unlicensed practice of medicine, and repeal outdated provisions regarding the

procedures and duties of the medical board.

Section 16 also protects from subpoena, discovery, and admissibility in court the records of the medical board related to a complaint filed against a physician or physician assistant.

Sections 17 and 18 of the bill clarify that the director of the division of registrations has a continuing obligation and authority to ensure that the rules of the medical board and the state board of nursing pertaining to the prescriptive authority of advanced practice nurses and collaboration with physicians are and remain complementary.

Sections 19 and 20 of the bill repeal the existing limited license that is available only to physicians providing pro bono services to pediatric patients of Shriners hospital and replace the limited license with a broader pro bono license that would allow physicians, who are either licensed in Colorado but ceasing their regular practice or are licensed in another jurisdiction, to provide medical services in this state free of charge. The section requires a physician to provide the medical board with proof of qualifications and subjects the physician to regulatory oversight by the medical board. Additionally, a physician practicing under a pro bono license would still need to maintain professional liability coverage.

Section 21 of the bill creates a new type of license, referred to as a "reentry license", for physicians and physician assistants who have not actively engaged in their respective practices for 2 years or have not maintained continued competency during that period. The reentry license allows a physician or physician assistant to engage in the practice after an assessment of his or her competency and areas of needed improvement, participation in an educational program specifically geared to that person's needs, and supervision of his or her practice, as necessary.

Section 22 of the bill allows the medical board to annually adjust the fee that is assessed upon physician and physician assistant license and renewal applicants and that funds the physicians' and physician assistants' peer health assistance program to reflect not only the rate of inflation, but also the overall utilization of the program. The board is further authorized to assess different fee amounts to physicians and physician assistants based on the program utilization rates by practice type. Section 22 also clarifies that the fees are custodial funds that are not subject to appropriation by the general assembly.

Section 23 of the bill:

- ! Eliminates from the definition of "practice of medicine" the requirement that the physician be compensated;
- ! Moves the definition of "telemedicine" to a new statutory definitions section created in section 38 of the bill;
- ! Clarifies the conditions under which a physician licensed in another state may engage in the occasional practice of medicine in Colorado without first obtaining a Colorado

license; and

- ! Allows physicians to supervise up to 3 physician assistants, rather than 2.

Section 24 of the bill streamlines the process for issuing a license by endorsement to a physician who holds a current, valid license from another jurisdiction by allowing the medical board to rely on the verification of the applicant that he or she has actively practiced medicine in the other jurisdiction for 5 of the last 7 years or has otherwise maintained competency and the submission of proof satisfactory to the medical board that the applicant has not been subject to final or pending disciplinary action in another jurisdiction.

Section 25 of the bill imposes a 2-year waiting period for application for a license to practice medicine or as a physician assistant for a physician, physician assistant, or other health care professional whose license has been revoked or who has surrendered his or her license to avoid discipline.

Sections 26 and 27 of the bill allow a physician or physician assistant who suffers from a physical or mental illness or disability that limits his or her ability to practice to enter into a confidential agreement with the medical board whereby the licensee agrees to limit his or her practice in a manner consistent with the limitations of the disability. The licensee is obligated to inform the medical board when he or she suffers from such an illness or disability, and failure to so inform the board, to act within his or her limitations based on the illness or disability, or to comply with the terms of the confidential agreement constitutes unprofessional conduct subject to discipline by the medical board.

Section 28 of the bill requires a licensee to report to the medical board any adverse action taken against him or her within 30 days of the action, and makes failure to so report unprofessional conduct subject to discipline. Section 28 also restates the grounds for disciplining a licensee on the basis of alcohol or drug abuse to specify that the use or abuse of alcohol or drugs must be habitual or excessive.

Section 29 of the bill expands the medical board's authority to impose fines by eliminating the requirement that fines may only be imposed in lieu of license suspension.

Section 30 of the bill increases the minimum level of professional liability coverage physicians are required to maintain from \$500,000 per incident to \$1 million per incident, and from \$1.5 million annual aggregate per year to \$3 million annual aggregate per year.

Section 31 of the bill requires physicians and physician assistants to make arrangements for the safekeeping of patient medical records in their custody if the physician or physician assistant ceases practice. Each physician and physician assistant is required to develop a plan detailing these arrangements, certify to the medical board that he or she has developed the plan, and notify patients as to how to access their records

if the physician or physician assistant is unavailable to provide the records.

Sections 32 through 35 of the bill create a separate and distinct license for physician assistants while maintaining the same qualifications and licensing requirements for physician assistants. These sections also relocate provisions concerning distinguished foreign teaching physician licenses and temporary licenses to separate and distinct sections in the act.

Section 36 of the bill consolidates provisions concerning unauthorized practice under the act and clarifies that physician assistants are also subject to penalties for engaging in the unauthorized practice as a physician assistant.

Section 37 of the bill limits the time period for which physicians must report their licensing histories to the prior 10 years and makes conforming changes necessitated by the medical board name change.

Sections 38 through 41 of the bill create a new definition section in the act to which defined terms throughout the act are relocated and make corresponding conforming amendments.

Sections 42 through 44 of the bill repeal outdated and obsolete provisions in the act.

Sections 45 through 84 of the bill are conforming amendments related mostly to the medical board name change and the creation of separate licenses pursuant to sections 32 through 35 of the bill.

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

2 **SECTION 1.** 12-36-103 (6) (b), Colorado Revised Statutes, is
3 amended to read:

4 **12-36-103. Colorado medical board - immunity - subject to**
5 **termination - repeal of article.** (6) (b) This article is repealed, effective
6 July 1, ~~2010~~ 2019.

7 **SECTION 2. Repeal.** 24-34-104 (41) (b) (I), Colorado Revised
8 Statutes, is repealed as follows:

9 **24-34-104. General assembly review of regulatory agencies**
10 **and functions for termination, continuation, or reestablishment.**

11 (41) The following agencies, functions, or both, shall terminate on July
12 1, 2010:

13 (b) The following boards in the division of registrations in the

1 department of regulatory agencies:

2 (I) ~~The Colorado state board of medical examiners, created by~~
3 ~~article 36 of title 12, C.R.S.;~~

4 **SECTION 3.** 24-34-104 (50), Colorado Revised Statutes, is
5 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

6 **24-34-104. General assembly review of regulatory agencies**
7 **and functions for termination, continuation, or reestablishment.**

8 (50) The following agencies, functions, or both, shall terminate on July
9 1, 2019:

10 (e) THE COLORADO MEDICAL BOARD, CREATED BY ARTICLE 36 OF
11 TITLE 12, C.R.S.

12 **SECTION 4.** Part 1 of article 36.5 of title 12, Colorado Revised
13 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
14 read:

15 **12-36.5-107. Repeal of article.** THIS ARTICLE IS REPEALED,
16 EFFECTIVE JULY 1, 2012. PRIOR TO SUCH REPEAL, THE FUNCTIONS OF
17 PROFESSIONAL REVIEW COMMITTEES AND THE COMMITTEE ON
18 ANTICOMPETITIVE CONDUCT SHALL BE REVIEWED IN ACCORDANCE WITH
19 SECTION 24-34-104, C.R.S.

20 **SECTION 5.** 24-34-104 (43), Colorado Revised Statutes, is
21 amended BY THE ADDITION OF THE FOLLOWING NEW
22 PARAGRAPHS to read:

23 **24-34-104. General assembly review of regulatory agencies**
24 **and functions for termination, continuation, or reestablishment.**

25 (43) The following agencies, functions, or both, shall terminate on July
26 1, 2012:

27 (f) THE FUNCTIONS OF PROFESSIONAL REVIEW COMMITTEES

1 PURSUANT TO ARTICLE 36.5 OF TITLE 12, C.R.S.;

2 (g) THE FUNCTIONS OF THE COMMITTEE ON ANTICOMPETITIVE
3 CONDUCT PURSUANT TO ARTICLE 36.5 OF TITLE 12, C.R.S.

4 **SECTION 6.** 25-3.5-103, Colorado Revised Statutes,
5 is amended BY THE ADDITION OF A NEW SUBSECTION to read:

6 **25-3.5-103. Definitions.** As used in this article, unless the context
7 otherwise requires:

8 (7.5) "EMERGENCY MEDICAL PRACTICE ADVISORY COUNCIL" OR
9 "ADVISORY COUNCIL" MEANS THE EMERGENCY MEDICAL PRACTICE
10 ADVISORY COUNCIL CREATED IN SECTION 25-3.5-206.

11 **SECTION 7.** 25-3.5-201 (1), Colorado Revised Statutes, is
12 amended to read:

13 **25-3.5-201. Training programs.** (1) The department shall
14 design and establish specialized curricula for personnel who respond
15 routinely to emergencies. ~~Each curriculum shall be approved by the~~
16 ~~council in consultation with the state board of medical examiners.~~ The
17 board of county commissioners may select from the various curricula
18 available those courses meeting the minimum requirements established
19 by said board.

20 **SECTION 8.** 25-3.5-203 (1) (a), Colorado Revised Statutes, is
21 amended, and the said 25-3.5-203 (1) is further amended BY THE
22 ADDITION OF A NEW PARAGRAPH, to read:

23 **25-3.5-203. Emergency medical technicians - certification -**
24 **renewal of certificate - duties of department - rules - criminal history**
25 **record checks - repeal.** (1) (a) (I) PRIOR TO JANUARY 1, 2011, the duties
26 and functions of emergency medical technicians, including the acts that
27 they are authorized to perform subject to the medical direction of a

1 licensed physician, shall be regulated by rules adopted by the Colorado
2 state MEDICAL board. of medical examiners. The council shall advise and
3 make recommendations to said board concerning such rules before final
4 adoption.

5 (II) THIS PARAGRAPH (a) IS REPEALED, EFFECTIVE JANUARY 1,
6 2011.

7 (a.5) ON AND AFTER JANUARY 1, 2011, THE EXECUTIVE DIRECTOR
8 OR CHIEF MEDICAL OFFICER SHALL REGULATE THE ACTS EMERGENCY
9 MEDICAL TECHNICIANS ARE AUTHORIZED TO PERFORM SUBJECT TO THE
10 MEDICAL DIRECTION OF A LICENSED PHYSICIAN. THE EXECUTIVE
11 DIRECTOR OR CHIEF MEDICAL OFFICER, AFTER CONSIDERING THE ADVICE
12 AND RECOMMENDATIONS OF THE ADVISORY COUNCIL, SHALL ADOPT AND
13 REVISE RULES, AS NECESSARY, REGARDING THE REGULATION OF
14 EMERGENCY MEDICAL TECHNICIANS AND THEIR DUTIES AND FUNCTIONS.
15 THE EXECUTIVE DIRECTOR OR CHIEF MEDICAL OFFICER MAY ADOPT THE
16 RULES PRIOR TO JANUARY 1, 2011, BUT THE RULES SHALL NOT TAKE
17 EFFECT UNTIL JANUARY 1, 2011, OR LATER.

18 SECTION 9. 25-3.5-205 (5) (a), Colorado Revised Statutes, is
19 amended to read:

20 25-3.5-205. Emergency medical technicians - investigations -
21 discipline. (5) For the purposes of this section:

22 (a) "Medical director" means a physician who supervises certified
23 emergency medical technicians consistent with the rules adopted by the
24 board of medical examiners BY THE EXECUTIVE DIRECTOR OR CHIEF
25 MEDICAL OFFICER, AS APPLICABLE, PURSUANT TO SECTION 25-3.5-206.

26 SECTION 10. Part 2 of article 3.5 of title 25, Colorado Revised
27 Statutes, is amended BY THE ADDITION OF A NEW SECTION to

1 read:

2 **25-3.5-206. Emergency medical practice advisory council -**
3 **creation - powers and duties - emergency medical technician scope of**

4 **practice rules.** (1) THERE IS HEREBY CREATED WITHIN THE
5 DEPARTMENT, AS A TYPE 2 ENTITY UNDER THE DIRECTION OF THE
6 EXECUTIVE DIRECTOR OF THE DEPARTMENT, THE EMERGENCY MEDICAL
7 PRACTICE ADVISORY COUNCIL, REFERRED TO IN THIS PART 2 AS THE
8 "ADVISORY COUNCIL". THE ADVISORY COUNCIL IS RESPONSIBLE FOR
9 ADVISING THE DEPARTMENT REGARDING THE APPROPRIATE SCOPE OF
10 PRACTICE FOR EMERGENCY MEDICAL TECHNICIANS CERTIFIED PURSUANT
11 TO SECTION 25-3.5-203.

12 (2) (a) THE EMERGENCY MEDICAL PRACTICE ADVISORY COUNCIL
13 SHALL CONSIST OF THE FOLLOWING ELEVEN MEMBERS:

14 (I) EIGHT VOTING MEMBERS APPOINTED BY THE GOVERNOR AS
15 FOLLOWS:

16 (A) TWO PHYSICIANS LICENSED IN GOOD STANDING IN COLORADO
17 WHO ARE ACTIVELY SERVING AS EMERGENCY MEDICAL SERVICE MEDICAL
18 DIRECTORS AND ARE PRACTICING IN RURAL OR FRONTIER COUNTIES;

19 (B) TWO PHYSICIANS LICENSED IN GOOD STANDING IN COLORADO
20 WHO ARE ACTIVELY SERVING AS EMERGENCY MEDICAL SERVICE MEDICAL
21 DIRECTORS AND ARE PRACTICING IN URBAN COUNTIES;

22 (C) ONE PHYSICIAN LICENSED IN GOOD STANDING IN COLORADO
23 WHO IS ACTIVELY SERVING AS AN EMERGENCY MEDICAL SERVICE MEDICAL
24 DIRECTOR IN ANY AREA OF THE STATE;

25 (D) ONE EMERGENCY MEDICAL TECHNICIAN CERTIFIED AT AN
26 ADVANCED LIFE SUPPORT LEVEL WHO IS ACTIVELY INVOLVED IN THE
27 PROVISION OF EMERGENCY MEDICAL SERVICES;

1 (E) ONE EMERGENCY MEDICAL TECHNICIAN CERTIFIED AT A BASIC
2 LIFE SUPPORT LEVEL WHO IS ACTIVELY INVOLVED IN THE PROVISION OF
3 EMERGENCY MEDICAL SERVICES; AND

4 (F) ONE EMERGENCY MEDICAL TECHNICIAN CERTIFIED AT ANY
5 LEVEL WHO IS ACTIVELY INVOLVED IN THE PROVISION OF EMERGENCY
6 MEDICAL SERVICES;

7 (II) ONE VOTING MEMBER WHO, AS OF THE EFFECTIVE DATE OF
8 THIS SECTION, IS A MEMBER OF THE STATE EMERGENCY MEDICAL AND
9 TRAUMA SERVICES ADVISORY COUNCIL, APPOINTED BY THE EXECUTIVE
10 DIRECTOR OF THE DEPARTMENT; AND

11 (III) TWO NONVOTING EX OFFICIO MEMBERS APPOINTED BY THE
12 EXECUTIVE DIRECTOR OF THE DEPARTMENT.

13 (b) MEMBERS OF THE ADVISORY COUNCIL SHALL SERVE
14 FOUR-YEAR TERMS; EXCEPT THAT, OF THE MEMBERS INITIALLY APPOINTED
15 TO THE ADVISORY COUNCIL BY THE GOVERNOR, FOUR MEMBERS SHALL
16 SERVE THREE-YEAR TERMS. A VACANCY ON THE ADVISORY COUNCIL
17 SHALL BE FILLED BY APPOINTMENT BY THE APPOINTING AUTHORITY FOR
18 THAT VACANT POSITION FOR THE REMAINDER OF THE UNEXPIRED TERM.
19 MEMBERS SERVE AT THE PLEASURE OF THE APPOINTING AUTHORITY AND
20 CONTINUE IN OFFICE UNTIL THE MEMBER'S SUCCESSOR IS APPOINTED.

21 (c) MEMBERS OF THE ADVISORY COUNCIL SHALL SERVE WITHOUT
22 COMPENSATION BUT SHALL BE REIMBURSED FROM THE EMERGENCY
23 MEDICAL SERVICES ACCOUNT, CREATED IN SECTION 25-3.5-603, FOR THEIR
24 ACTUAL AND NECESSARY TRAVEL EXPENSES INCURRED IN THE
25 PERFORMANCE OF THEIR DUTIES UNDER THIS ARTICLE.

26 (d) THE ADVISORY COUNCIL SHALL ELECT A CHAIR AND
27 VICE-CHAIR FROM ITS MEMBERS.

1 (e) THE ADVISORY COUNCIL SHALL MEET AT LEAST QUARTERLY
2 AND MORE FREQUENTLY AS NECESSARY TO FULFILL ITS OBLIGATIONS.

3 (f) THE DEPARTMENT SHALL PROVIDE STAFF SUPPORT TO THE
4 ADVISORY COUNCIL.

5 (g) AS USED IN THIS SUBSECTION (2), "LICENSED IN GOOD
6 STANDING" MEANS THAT THE PHYSICIAN HOLDS A CURRENT, VALID
7 LICENSE TO PRACTICE MEDICINE IN COLORADO THAT IS NOT SUBJECT TO
8 ANY RESTRICTIONS.

9 (3) THE ADVISORY COUNCIL SHALL PROVIDE GENERAL TECHNICAL
10 EXPERTISE ON MATTERS RELATED TO THE PROVISION OF PATIENT CARE BY
11 EMERGENCY MEDICAL TECHNICIANS AND SHALL ADVISE OR MAKE
12 RECOMMENDATIONS TO THE DEPARTMENT IN THE FOLLOWING AREAS:

13 (a) THE ACTS AND MEDICATIONS THAT CERTIFIED EMERGENCY
14 MEDICAL TECHNICIANS AT EACH LEVEL OF CERTIFICATION ARE
15 AUTHORIZED TO PERFORM OR ADMINISTER UNDER THE DIRECTION OF A
16 PHYSICIAN MEDICAL DIRECTOR;

17 (b) REQUESTS FOR WAIVERS TO THE SCOPE OF PRACTICE RULES
18 ADOPTED PURSUANT TO THIS SECTION AND SECTION 25-3.5-203 (1) (a.5);

19 (c) MODIFICATIONS TO EMERGENCY MEDICAL TECHNICIAN
20 CERTIFICATION LEVELS AND CAPABILITIES; AND

21 (d) CRITERIA FOR PHYSICIANS TO SERVE AS EMERGENCY MEDICAL
22 SERVICE MEDICAL DIRECTORS.

23 (4) (a) THE EXECUTIVE DIRECTOR OR, IF THE EXECUTIVE DIRECTOR
24 IS NOT A PHYSICIAN, THE CHIEF MEDICAL OFFICER SHALL ADOPT RULES IN
25 ACCORDANCE WITH ARTICLE 4 OF TITLE 24, C.R.S., CONCERNING THE
26 SCOPE OF PRACTICE OF EMERGENCY MEDICAL TECHNICIANS FOR
27 PREHOSPITAL CARE. THE RULES SHALL INCLUDE, BUT NOT BE LIMITED TO,

1 THE FOLLOWING:

2 (I) ALLOWABLE ACTS FOR EACH LEVEL OF EMERGENCY MEDICAL
3 TECHNICIAN CERTIFICATION AND THE MEDICATIONS THAT EACH LEVEL OF
4 EMERGENCY MEDICAL TECHNICIAN CERTIFICATION CAN ADMINISTER;

5 (II) DEFINING THE PHYSICIAN MEDICAL DIRECTION THAT IS
6 REQUIRED FOR APPROPRIATE OVERSIGHT OF AN EMERGENCY MEDICAL
7 TECHNICIAN BY AN EMERGENCY MEDICAL SERVICES MEDICAL DIRECTOR;

8 (III) CRITERIA FOR REQUESTS TO WAIVE THE SCOPE OF PRACTICE
9 RULES AND THE CONDITIONS FOR SUCH WAIVERS; AND

10 (IV) MINIMUM STANDARDS FOR PHYSICIANS TO BE EMERGENCY
11 MEDICAL SERVICES MEDICAL DIRECTORS.

12 (b) RULES ADOPTED PURSUANT TO THIS SUBSECTION (4)
13 SUPERSEDE ANY RULES OF THE COLORADO MEDICAL BOARD REGARDING
14 THE MATTERS SET FORTH IN THIS SUBSECTION (4).

15 **SECTION 11.** 25-3.5-603 (3) (c) (I), Colorado Revised Statutes,
16 is amended to read:

17 **25-3.5-603. Emergency medical services account - creation -**
18 **allocation of funds.** (3) On and after July 1, 2002, moneys in the
19 emergency medical services account shall be appropriated:

20 (c) To the direct and indirect costs of planning, developing,
21 implementing, maintaining, and improving the statewide emergency
22 medical and trauma services system. Such costs shall include:

23 (I) Providing technical assistance and support to local
24 governments, local emergency medical and trauma service providers, and
25 RETACs operating a statewide data collection system, coordinating local
26 and state programs, providing assistance in selection and purchasing of
27 medical and communication equipment, and administering the EMTS

1 grant program, AND ESTABLISHING AND MAINTAINING SCOPE OF PRACTICE
2 FOR CERTIFIED MEDICAL TECHNICIANS; and

3 **SECTION 12.** 25-3.5-706, Colorado Revised Statutes, is
4 amended to read:

5 **25-3.5-706. Immunity from liability.** The department, the board,
6 the council as defined in section 25-3.5-703 (3.5), a RETAC as defined
7 in section 25-3.5-703 (6.8), THE EMERGENCY MEDICAL PRACTICE
8 ADVISORY COUNCIL CREATED IN SECTION 25-3.5-206, key resource
9 facilities, any other public or private entity acting on behalf of or under
10 contract with the department, and counties and cities and counties shall
11 be immune from civil and criminal liability and from regulatory sanction
12 for acting in compliance with the provisions of this part 7. Nothing in
13 this section shall be construed as providing any immunity to such entities
14 or any other person in connection with the provision of medical treatment,
15 care, or services that are governed by the medical malpractice statutes,
16 article 64 of title 13, C.R.S.

17 **SECTION 13.** 12-36-106 (3), Colorado Revised Statutes, is
18 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

19 **12-36-106. Practice of medicine defined - exemptions from**
20 **licensing requirements - unauthorized practice by physician**
21 **assistants - penalties - repeal.** (3) Nothing in this section shall be
22 construed to prohibit, or to require a license or a physician training license
23 under this article with respect to, any of the following acts:

24 (w) THE RENDERING OF SERVICES BY AN EMERGENCY MEDICAL
25 TECHNICIAN CERTIFIED PURSUANT TO SECTION 25-3.5-203, C.R.S., AS
26 LONG AS THE SERVICES RENDERED ARE CONSISTENT WITH RULES ADOPTED
27 BY THE EXECUTIVE DIRECTOR OR CHIEF MEDICAL OFFICER, AS APPLICABLE,

1 PURSUANT TO SECTION 25-3.5-206, C.R.S., DEFINING THE DUTIES AND
2 FUNCTIONS OF EMERGENCY MEDICAL TECHNICIANS.

3 SECTION 14. 12-36-103 (1) (a), (2), (3), (4), (6) (a), and (7),
4 Colorado Revised Statutes, are amended to read:

5 12-36-103. Colorado medical board - immunity - subject to
6 termination - repeal of article. (1) (a) (I) There is hereby created the
7 Colorado state MEDICAL board, of medical examiners, referred to in this
8 article as the "board". which THE BOARD shall consist of nine SIXTEEN
9 MEMBERS APPOINTED BY THE GOVERNOR AND POSSESSING THE
10 QUALIFICATIONS SPECIFIED IN THIS ARTICLE AND AS FOLLOWS:

11 (A) ELEVEN physician members; [REDACTED]

12 (B) ONE MEMBER LICENSED UNDER THIS ARTICLE AS A PHYSICIAN
13 ASSISTANT; and

14 (C) Four members from the public at large who have no financial
15 or professional association with the medical profession. to be appointed
16 by the governor and to have the qualifications provided in this article.

17 (II) The terms of the members of the board shall be four years.
18 For the two public member appointees added to the board during the
19 calendar year beginning January 1, 2000, the term for one public member
20 appointee shall expire May 3, 2002, and the other shall expire May 3,
21 2003 FOR THE TWO PHYSICIAN AND ONE PHYSICIAN ASSISTANT
22 APPOINTEES ADDED TO THE BOARD DURING THE CALENDAR YEAR
23 BEGINNING JANUARY 1, 2010, THE TERM FOR ONE OF THE PHYSICIAN
24 MEMBER APPOINTEES SHALL EXPIRE FOUR YEARS AFTER THE
25 APPOINTMENT; THE TERM FOR THE OTHER PHYSICIAN MEMBER APPOINTEE
26 SHALL EXPIRE THREE YEARS AFTER THE APPOINTMENT; AND THE TERM FOR
27 THE PHYSICIAN ASSISTANT APPOINTEE SHALL EXPIRE TWO YEARS AFTER

1 THE APPOINTMENT. Thereafter, the terms of the members of the board
2 shall be four years.

3 (2) (a) EXCEPT AS PROVIDED IN PARAGRAPH (b) OF THIS
4 SUBSECTION (2), the board shall be comprised at all times of ~~seven~~ EIGHT
5 members having the degree of doctor of medicine, and ~~two~~ THREE
6 members having the degree of doctor of osteopathy, all of whom shall
7 have been licensed IN GOOD STANDING and actively engaged in the
8 practice of their professions in this state for at least three years next
9 preceding their appointments, ~~and shall have been residents of this state~~
10 ~~for at least five years next preceding their appointments,~~ and four FIVE
11 members of the public at large. ~~In making appointments to the board, the~~
12 ~~governor shall give due consideration to recommendations submitted by~~
13 ~~the Colorado state medical society with respect to appointments to each~~
14 ~~office, if any, to be filled by a physician holding the degree of doctor of~~
15 ~~medicine and to recommendations submitted by the Colorado osteopathic~~
16 ~~association with respect to appointments to each office, if any, to be filled~~
17 ~~by a physician holding the degree of doctor of osteopathy.~~

18 (b) IF THE GOVERNOR DETERMINES THAT A PHYSICIAN WITH THE
19 DEGREE OF DOCTOR OF OSTEOPATHY IS NOT AVAILABLE TO SERVE ON THE
20 BOARD FOR A PARTICULAR TERM, THE GOVERNOR MAY APPOINT A
21 PHYSICIAN WHO HAS THE DEGREE OF DOCTOR OF MEDICINE AND WHOSE
22 LICENSE IS IN GOOD STANDING TO FILL THE VACANCY FOR THE LENGTH OF
23 THAT TERM. AT THE END OF THE TERM, IF THE GOVERNOR, AFTER A GOOD
24 FAITH ATTEMPT, CANNOT FIND A PHYSICIAN WITH THE DEGREE OF DOCTOR
25 OF OSTEOPATHY, THE GOVERNOR MAY APPOINT A PHYSICIAN WHO HAS THE
26 DEGREE OF DOCTOR OF MEDICINE AND WHOSE LICENSE IS IN GOOD
27 STANDING TO FILL THE VACANCY FOR ONE TERM.

1 (3) ~~In the event~~ IF a vacancy in the membership of the board
2 occurs for any cause other than expiration of a term, the governor shall
3 appoint a successor to fill the unexpired portion of the term of ~~such~~ THE
4 member whose office has been so vacated and shall appoint ~~such~~ THE new
5 member in the same manner as members for a full term. Members of the
6 board shall remain in office until their successors have been appointed.
7 A member of the board ~~upon notice and hearing~~, may be removed by the
8 governor for continued neglect of duty, incompetence, or unprofessional
9 or dishonorable conduct.

10 (4) The board shall elect biennially from its members a president
11 AND a vice-president. ~~and a secretary.~~ **Regular Meetings** of the board or
12 ~~either~~ ANY panel established pursuant to ~~section 12-36-118~~; **THIS ARTICLE**
13 shall be held as scheduled by the board in the state of Colorado. ~~Special~~
14 ~~meetings of the board may be called by the president or by three members~~
15 ~~of the board at any time on three days' prior notice by mail or, in case of~~
16 ~~emergency, on twenty-four hours' notice by telephone or electronic~~
17 ~~access, any such meetings to be held at the place designated in the call~~
18 ~~therefor.~~ Except as provided in section 12-36-118 (6), a majority of the
19 board shall constitute a quorum for the transaction of all business. All
20 meetings of the board shall be deemed to have been duly called and
21 regularly held, and all decisions, resolutions, and proceedings of the
22 board shall be deemed to have been duly authorized, unless the contrary
23 be proved.

24 (6) (a) The provisions of section 24-34-104, C.R.S., concerning
25 the termination schedule for regulatory bodies of the state unless extended
26 as provided in that section, are applicable to the Colorado ~~state~~ MEDICAL
27 board ~~of medical examiners~~ created by this section.

1 (7) ~~After consultation with the board, the director of the division~~
2 ~~of registrations shall appoint an executive administrator for the board and~~
3 ~~such other personnel as are deemed necessary, pursuant to section 13 of~~
4 ~~article XII of the state constitution. At least one member of the board~~
5 ~~shall serve on any panel convened by the department of personnel to~~
6 ~~interview candidates for the position of executive administrator.~~

7 **SECTION 15.** Part 1 of article 36 of title 12, Colorado Revised
8 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
9 read:

10 **12-36-111.3. Licensing panel.** (1) (a) THE PRESIDENT OF THE
11 BOARD SHALL ESTABLISH A LICENSING PANEL CONSISTING OF THREE
12 MEMBERS OF THE BOARD AS FOLLOWS:

13 (I) ONE PANEL MEMBER SHALL BE A LICENSED PHYSICIAN HAVING
14 THE DEGREE OF DOCTOR OF MEDICINE;

15 (II) ONE PANEL MEMBER SHALL BE A LICENSED PHYSICIAN HAVING
16 THE DEGREE OF DOCTOR OF OSTEOPATHY; AND

17 (III) ONE PANEL MEMBER SHALL BE A PUBLIC MEMBER OF THE
18 BOARD.

19 (b) THE PRESIDENT MAY ROTATE THE LICENSING PANEL
20 MEMBERSHIP AND THE MEMBERSHIP ON THE INQUIRY AND HEARING
21 PANELS ESTABLISHED PURSUANT TO SECTION 12-36-118 SO THAT ALL
22 MEMBERS OF THE BOARD, INCLUDING THE BOARD PRESIDENT, MAY SERVE
23 ON EACH OF THE BOARD PANELS.

24 (c) IF THE PRESIDENT DETERMINES THAT THE BOARD LACKS A
25 MEMBER TO SERVE ON THE LICENSING PANEL THAT MEETS THE CRITERIA
26 SPECIFIED IN PARAGRAPH (a) OF THIS SUBSECTION (1), THE PRESIDENT MAY
27 APPOINT ANOTHER BOARD MEMBER TO FILL THE VACANCY ON THE PANEL.

1 (2) THE LICENSING PANEL SHALL REVIEW AND MAKE
2 DETERMINATIONS ON APPLICATIONS FOR A LICENSE UNDER THIS ARTICLE.

3 (3) THE LICENSING PANEL SHALL REVIEW AND RESOLVE MATTERS
4 RELATING TO THE UNLICENSED PRACTICE OF MEDICINE. IF IT APPEARS TO
5 THE LICENSING PANEL, BASED UPON CREDIBLE EVIDENCE IN A WRITTEN
6 COMPLAINT BY ANY PERSON OR UPON CREDIBLE EVIDENCE IN A MOTION OF
7 THE LICENSING PANEL, THAT A PERSON IS PRACTICING OR HAS PRACTICED
8 MEDICINE OR AS A PHYSICIAN ASSISTANT WITHOUT A LICENSE AS REQUIRED
9 BY THIS ARTICLE, THE LICENSING PANEL MAY ISSUE AN ORDER TO CEASE
10 AND DESIST THE UNLICENSED PRACTICE. THE ORDER SHALL SET FORTH
11 THE PARTICULAR STATUTES AND RULES THAT HAVE BEEN VIOLATED, THE
12 FACTS ALLEGED TO HAVE CONSTITUTED THE VIOLATION, AND THE
13 REQUIREMENT THAT ALL UNLICENSED PRACTICES IMMEDIATELY CEASE.
14 THE RESPONDENT MAY REQUEST A HEARING ON A CEASE-AND-DESIST
15 ORDER IN ACCORDANCE WITH SECTION 12-36-118 (14) (b). THE
16 PROVISIONS OF SECTION 12-36-118 (10), EXEMPTING BOARD DISCIPLINARY
17 PROCEEDINGS AND RECORDS FROM OPEN MEETINGS AND PUBLIC RECORDS
18 REQUIREMENTS, SHALL NOT APPLY TO A HEARING OR ANY OTHER
19 PROCEEDING HELD BY THE LICENSING PANEL PURSUANT TO THIS
20 SUBSECTION (3) REGARDING THE UNLICENSED PRACTICE OF MEDICINE.
21 THE PROCEDURES SPECIFIED IN SECTION 12-36-118 (15), (16), (17), AND
22 (18) SHALL APPLY TO ALLEGATIONS AND ORDERS REGARDING THE
23 UNLICENSED PRACTICE OF MEDICINE BEFORE THE LICENSING PANEL.

24 **SECTION 16.** 12-36-104 (1) (c), (1) (e), and (3), Colorado
25 Revised Statutes, are amended to read:

26 **12-36-104. Powers and duties of board.** (1) In addition to all
27 other powers and duties conferred and imposed upon the board by this

1 article, the board has the following powers and duties to:

2 (c) ~~Adopt a seal which shall be affixed to all licenses issued by the~~
3 ~~board;~~

4 (e) ~~Aid the several district attorneys of this state~~ LAW
5 ENFORCEMENT in the enforcement of this article and in the prosecution of
6 all persons, firms, associations, or corporations charged with the violation
7 of any of its provisions.

8 (3) To facilitate the licensure of qualified applicants AND ADDRESS
9 THE UNLICENSED PRACTICE OF MEDICINE AND THE UNLICENSED PRACTICE
10 AS A PHYSICIAN ASSISTANT, the PRESIDENT OF THE board ~~may, in its~~
11 ~~discretion,~~ SHALL establish a ~~subcommittee of at least three board~~
12 ~~members~~ LICENSING PANEL IN ACCORDANCE WITH SECTION 12-36-111.3
13 to perform licensing functions in accordance with this article ~~Three~~
14 ~~subcommittee~~ AND REVIEW AND RESOLVE MATTERS RELATING TO THE
15 UNLICENSED PRACTICE OF MEDICINE AND UNLICENSED PRACTICE AS A
16 PHYSICIAN ASSISTANT. TWO PANEL members shall constitute a quorum of
17 the ~~subcommittee~~ PANEL. Any action taken by a quorum of the
18 ~~subcommittee~~ PANEL shall constitute action by the board.

19 **SECTION 17.** 12-36-118 (5) (f), (7), (10), (13), and (14) (a),
20 Colorado Revised Statutes, are amended to read:

21 **12-36-118. Disciplinary action by board - immunity.**

22 (5) (f) Except as provided in subsection (1) of this section, an
23 administrative law judge shall preside at the hearing and ~~he~~ shall advise
24 the hearings panel, AS REQUESTED, on ~~all such~~ legal matters in connection
25 with the hearing. ~~as the panel may request. He~~ THE ADMINISTRATIVE LAW
26 JUDGE shall provide ~~such~~ advice or assistance as REQUESTED BY the
27 hearings panel ~~may request~~ in connection with its preparations of its

1 findings and recommendations or conclusions to be made. ~~Such~~ THE
2 administrative law judge ~~shall have the authority to~~ MAY administer oaths
3 and affirmations, sign and issue subpoenas, and perform ~~such~~ other duties
4 as AUTHORIZED BY the hearings panel. ~~may authorize him to perform.~~
5 ~~Such administrative law judge shall have the qualifications provided in~~
6 ~~section 24-30-1003 (2), C.R.S., with five years' experience as a licensed~~
7 ~~attorney.~~

8 (7) ~~Upon the expiration of the term of suspension, the license shall~~
9 ~~be reinstated by the board if the holder thereof furnishes the board with~~
10 ~~evidence that he has complied with all terms of the suspension. If such~~
11 ~~evidence shows he has not complied with all terms of the suspension, the~~
12 ~~board shall revoke the license at a hearing, notice of which and the~~
13 ~~procedure at which shall be as provided in this section.~~

14 (10) (a) Investigations, examinations, hearings, meetings, or any
15 other proceedings of the board conducted pursuant to ~~the provisions of~~
16 this section shall be exempt from ~~the provisions of~~ any law requiring that
17 proceedings of the board be conducted publicly or that the minutes or
18 records of the board with respect to action of the board taken pursuant to
19 ~~the provisions of~~ this section be open to public inspection. THIS
20 SUBSECTION (10) SHALL NOT APPLY TO INVESTIGATIONS, EXAMINATIONS,
21 HEARINGS, MEETINGS, OR ANY OTHER PROCEEDINGS OR RECORDS OF THE
22 LICENSING PANEL CREATED PURSUANT TO SECTION 12-36-111.3 RELATED
23 TO THE UNLICENSED PRACTICE OF MEDICINE.

24 (b) FOR PURPOSES OF THE RECORDS RELATED TO A COMPLAINT
25 FILED PURSUANT TO THIS SECTION AGAINST A LICENSEE, THE BOARD SHALL
26 BE CONSIDERED A PROFESSIONAL REVIEW COMMITTEE, THE RECORDS
27 RELATED TO THE COMPLAINT SHALL INCLUDE ALL RECORDS DESCRIBED IN

1 SECTION 12-36.5-102 (4), AND SECTION 12-36.5-104 (10) SHALL APPLY TO
2 THOSE RECORDS.

3 (13) Within thirty days after the board takes final action, which is
4 of public record, to revoke or suspend a license or to place a licensee on
5 probation based on competence or professional conduct, the board shall
6 send notice ~~thereof~~ OF THE FINAL ACTION to any hospital in which the
7 licensee has clinical privileges, as indicated by the licensee. ~~The board~~
8 ~~shall post electronically, within thirty days after the entry of a final~~
9 ~~judgment by a court of competent jurisdiction, notice of final judgment~~
10 ~~in which it is alleged that malpractice or professional negligence has been~~
11 ~~committed by a licensed physician or physician assistant and the licensed~~
12 ~~physician or physician assistant is found to have committed malpractice~~
13 ~~or be professionally negligent. The board shall also post electronically a~~
14 ~~notice of final judgment entered by a court of competent jurisdiction in~~
15 ~~another state at such time as the notice is submitted to the board by the~~
16 ~~licensee or applicant. The board shall also make available to the public~~
17 ~~malpractice judgment information by telephone within the same time~~
18 ~~periods as the information is made available to the public electronically.~~

19 (14) (a) If it appears to the board, based upon credible evidence
20 as presented in a written complaint by any person OR IN ITS OWN MOTION,
21 that a licensee is acting in a manner that is an imminent threat to the
22 health and safety of the public, ~~or a person is acting or has acted without~~
23 ~~the required license~~, the board may issue an order to cease and desist such
24 activity. The order shall set forth the statutes and rules alleged to have
25 been violated, the facts alleged to have constituted the violation, and the
26 requirement that all unlawful acts or unlicensed practices immediately
27 cease.

1 **SECTION 18.** 12-36-106.4 (4) (b), Colorado Revised Statutes,
2 is amended to read:

3 **12-36-106.4. Collaboration with advanced practice nurses**
4 **with prescriptive authority - preceptorships - mentorships - board**
5 **rules.** (4) (b) (I) The director of the division of registrations in the
6 department of regulatory agencies shall review the rules adopted by the
7 board pursuant to this subsection (4) to determine if the rules complement
8 the rules of the state board of nursing. If the director determines that the
9 rules of the two boards are not complementary, the director shall adopt
10 rules that ~~supercede~~ SUPERSEDE and replace the rules of the two boards
11 regarding prescriptive authority of advanced practice nurses and
12 collaboration between advanced practice nurses and physicians, and such
13 rules shall take effect on July 2, 2010.

14 (II) IF THE DIRECTOR DETERMINES THAT THE TWO BOARDS HAVE
15 ADOPTED COMPLEMENTARY RULES REGARDING THE PRESCRIPTIVE
16 AUTHORITY OF ADVANCED PRACTICE NURSES AND COLLABORATION
17 BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS, THE DIRECTOR
18 SHALL NOT ADOPT RULES THAT SUPERSEDE AND REPLACE THE RULES OF
19 THE TWO BOARDS, BUT THE DIRECTOR SHALL REVIEW ANY AMENDMENTS
20 TO THOSE RULES BY EITHER BOARD TO ENSURE THAT THE RULES REMAIN
21 COMPLEMENTARY. IF THE DIRECTOR DETERMINES THAT AN AMENDMENT
22 TO THE RULES BY THE COLORADO MEDICAL BOARD OR THE STATE BOARD
23 OF NURSING RESULTS IN RULES ON PRESCRIPTIVE AUTHORITY AND
24 COLLABORATION THAT ARE NO LONGER COMPLEMENTARY, THE
25 AMENDMENT SHALL NOT TAKE EFFECT. [REDACTED] [REDACTED]

26 **SECTION 19.** 12-38-111.6 (4.5) (f), Colorado Revised Statutes,
27 is amended to read:

1 **12-38-111.6. Prescriptive authority - advanced practice nurses**

2 **- rules - repeal.** (4.5) (f) (I) Except as provided in subparagraph (II) of
3 this paragraph (f), the board shall adopt rules to implement this subsection
4 (4.5), which rules shall take effect on July 1, 2010. The board shall
5 consider the recommendations of the nurse-physician advisory task force
6 for Colorado health care submitted in accordance with section 24-34-109,
7 C.R.S., concerning prescriptive authority of advanced practice nurses.
8 The rules shall be complementary to rules adopted by the ~~state~~ COLORADO
9 MEDICAL board of ~~medical examiners~~ pursuant to section 12-36-106.4.

10 (II) (A) The director of the division of registrations in the
11 department of regulatory agencies shall review the rules adopted by the
12 board pursuant to this paragraph (f) prior to the effective date of the rules
13 to determine if the rules complement the rules of the ~~state~~ COLORADO
14 MEDICAL board. ~~of medical examiners~~. If the director determines that the
15 rules of the two boards are not complementary, the director shall adopt
16 rules that ~~supersede~~ SUPERSEDE and replace the rules of the two boards
17 regarding prescriptive authority of advanced practice nurses and
18 collaboration between advanced practice nurses and physicians, and such
19 rules shall take effect on July 2, 2010.

20 (B) IF THE DIRECTOR DETERMINES THAT THE TWO BOARDS HAVE
21 ADOPTED COMPLEMENTARY RULES REGARDING THE PRESCRIPTIVE
22 AUTHORITY OF ADVANCED PRACTICE NURSES AND COLLABORATION
23 BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS, THE DIRECTOR
24 SHALL NOT ADOPT RULES THAT SUPERSEDE AND REPLACE THE RULES OF
25 THE TWO BOARDS, BUT THE DIRECTOR SHALL REVIEW ANY AMENDMENTS
26 TO THOSE RULES BY EITHER BOARD TO ENSURE THAT THE RULES REMAIN
27 COMPLEMENTARY. IF THE DIRECTOR DETERMINES THAT AN AMENDMENT

1 TO THE RULES BY THE STATE BOARD OF NURSING OR THE COLORADO
2 MEDICAL BOARD RESULTS IN RULES ON PRESCRIPTIVE AUTHORITY AND
3 COLLABORATION THAT ARE NO LONGER COMPLEMENTARY, THE
4 AMENDMENT SHALL NOT TAKE EFFECT.

5 **SECTION 20.** Part 1 of article 36 of title 12, Colorado Revised
6 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
7 read:

8 **12-36-114.3. Pro bono license - qualifications - reduced fee -**
9 **rules.** (1) NOTWITHSTANDING ANY OTHER PROVISION OF THIS ARTICLE,
10 THE BOARD MAY ISSUE A PRO BONO LICENSE TO A PHYSICIAN TO PRACTICE
11 MEDICINE IN THIS STATE FOR NOT MORE THAN SIXTY DAYS IN A CALENDAR
12 YEAR IF THE PHYSICIAN:

13 (a) (I) HOLDS AN ACTIVE AND UNRESTRICTED LICENSE TO
14 PRACTICE MEDICINE IN COLORADO AND IS IN ACTIVE PRACTICE IN THIS
15 STATE;

16 (II) HAS BEEN ON INACTIVE STATUS PURSUANT TO SECTION
17 12-36-137 FOR NOT MORE THAN TWO YEARS; OR

18 (III) HOLDS AN ACTIVE AND UNRESTRICTED LICENSE TO PRACTICE
19 MEDICINE IN ANOTHER STATE OR TERRITORY OF THE UNITED STATES;

20 (b) ATTESTS TO THE BOARD THAT HE OR SHE:

21 (I) DOES NOT CHARGE FOR HIS OR HER SERVICES; EXCEPT THAT THE
22 FACILITY AT WHICH THE SERVICES ARE PROVIDED MAY CHARGE ON A
23 NOT-FOR-PROFIT BASIS FOR THE PROVISION OF SERVICES; OR

24 (II) WORKS FOR AND MAY BE COMPENSATED BY AN ORGANIZATION
25 THAT DOES NOT CHARGE COLORADO PATIENTS FOR ITS SERVICES;

26 (c) HAS NEVER HAD A LICENSE TO PRACTICE MEDICINE IN THIS
27 STATE OR IN ANOTHER STATE OR TERRITORY REVOKED OR SUSPENDED, AS

1 VERIFIED BY THE APPLICANT IN THE MANNER PRESCRIBED BY THE BOARD;

2 (d) IS NOT THE SUBJECT OF AN UNRESOLVED COMPLAINT;

3 (e) MAINTAINS COMMERCIAL PROFESSIONAL LIABILITY INSURANCE
4 COVERAGE IN ACCORDANCE WITH SECTION 13-64-301, C.R.S.; AND

5 (f) PAYS THE FEE ESTABLISHED BY THE BOARD.

6 (2) THE BOARD SHALL ESTABLISH AND CHARGE AN APPLICATION
7 FEE FOR AN INITIAL AND RENEWAL PRO BONO LICENSE, NOT TO EXCEED
8 ONE-HALF THE AMOUNT OF THE FEE FOR A RENEWAL OF A PHYSICIAN'S
9 LICENSE AND NOT TO EXCEED THE COST OF ADMINISTERING THE LICENSE.

10 (3) A PRO BONO LICENSE IS SUBJECT TO THE RENEWAL
11 REQUIREMENTS SET FORTH IN SECTION 12-36-123.

12 (4) A PHYSICIAN GRANTED A PRO BONO LICENSE UNDER THIS
13 SECTION SHALL NOT SIMULTANEOUSLY HOLD A FULL LICENSE TO PRACTICE
14 MEDICINE ISSUED UNDER THIS ARTICLE.

15 (5) A PHYSICIAN GRANTED A PRO BONO LICENSE UNDER THIS
16 SECTION IS SUBJECT TO DISCIPLINE BY THE BOARD FOR COMMITTING
17 UNPROFESSIONAL CONDUCT, AS DEFINED IN SECTION 12-36-117, OR ANY
18 OTHER ACT PROHIBITED BY THIS ARTICLE.

19 (6) THE BOARD MAY REFRAIN FROM ISSUING A PRO BONO LICENSE
20 IN ACCORDANCE WITH SECTION 12-36-116.

21 (7) THE BOARD MAY ADOPT RULES AS NECESSARY TO IMPLEMENT
22 THIS SECTION.

23 **SECTION 21. Repeal.** 12-36-107 (5), Colorado Revised
24 Statutes, is repealed.

25 **SECTION 22.** Part 1 of article 36 of title 12, Colorado Revised
26 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
27 read:

1 **12-36-114.5. Reentry license.** (1) NOTWITHSTANDING ANY
2 OTHER PROVISION OF THIS ARTICLE, THE BOARD MAY ISSUE A REENTRY
3 LICENSE TO A PHYSICIAN OR PHYSICIAN ASSISTANT WHO HAS NOT
4 ACTIVELY PRACTICED MEDICINE OR PRACTICED AS A PHYSICIAN
5 ASSISTANT, AS APPLICABLE, FOR THE TWO-YEAR PERIOD IMMEDIATELY
6 PRECEDING THE FILING OF AN APPLICATION FOR A REENTRY LICENSE, OR
7 WHO HAS NOT OTHERWISE MAINTAINED CONTINUED COMPETENCY DURING
8 SUCH PERIOD, AS DETERMINED BY THE BOARD. THE BOARD MAY CHARGE
9 A FEE FOR A REENTRY LICENSE.

10 (2) (a) IN ORDER TO QUALIFY FOR A REENTRY LICENSE, THE
11 PHYSICIAN OR PHYSICIAN ASSISTANT SHALL SUBMIT TO EVALUATIONS,
12 ASSESSMENTS, AND AN EDUCATIONAL PROGRAM AS REQUIRED BY THE
13 BOARD. THE BOARD MAY WORK WITH A PRIVATE ENTITY THAT
14 SPECIALIZES IN PHYSICIAN AND PHYSICIAN ASSISTANT ASSESSMENT TO:

15 (I) DETERMINE THE APPLICANT'S COMPETENCY AND AREAS IN
16 WHICH IMPROVEMENT IS NEEDED, IF ANY;

17 (II) DEVELOP AN EDUCATIONAL PROGRAM SPECIFIC TO THE
18 APPLICANT; AND

19 (III) UPON COMPLETION OF THE EDUCATIONAL PROGRAM,
20 CONDUCT AN EVALUATION TO DETERMINE THE APPLICANT'S COMPETENCY.

21 (b) (I) IF, BASED ON THE ASSESSMENT, THE BOARD DETERMINES
22 THAT THE APPLICANT REQUIRES A PERIOD OF SUPERVISED PRACTICE, THE
23 BOARD MAY ISSUE A REENTRY LICENSE, ALLOWING THE APPLICANT TO
24 PRACTICE MEDICINE OR AS A PHYSICIAN ASSISTANT, AS APPLICABLE,
25 UNDER SUPERVISION AS SPECIFIED BY THE BOARD.

26 (II) AFTER SATISFACTORY COMPLETION OF THE PERIOD OF
27 SUPERVISED PRACTICE, AS DETERMINED BY THE BOARD, THE REENTRY

1 LICENSEE MAY APPLY TO THE BOARD FOR CONVERSION OF THE REENTRY
2 LICENSE TO A FULL LICENSE TO PRACTICE MEDICINE OR TO PRACTICE AS A
3 PHYSICIAN ASSISTANT, AS APPLICABLE, UNDER THIS ARTICLE.

4 (c) IF, BASED ON THE ASSESSMENT AND AFTER COMPLETION OF AN
5 EDUCATIONAL PROGRAM, IF PRESCRIBED, THE BOARD DETERMINES THAT
6 THE APPLICANT IS COMPETENT AND QUALIFIED TO PRACTICE MEDICINE OR
7 TO PRACTICE AS A PHYSICIAN ASSISTANT, AS SPECIFIED IN THIS ARTICLE,
8 WITHOUT SUPERVISION, THE BOARD MAY CONVERT THE REENTRY LICENSE
9 TO A FULL LICENSE TO PRACTICE MEDICINE OR TO PRACTICE AS A
10 PHYSICIAN ASSISTANT, AS APPLICABLE, UNDER THIS ARTICLE.

11 (3) A REENTRY LICENSE SHALL BE VALID FOR NO MORE THAN
12 THREE YEARS AND SHALL NOT BE RENEWABLE.

13 **SECTION 23.** 12-36-123.5 (3.5) (b) and (3.5) (e) (I), Colorado
14 Revised Statutes, are amended, and the said 12-36-123.5 (3.5) is further
15 amended BY THE ADDITION OF A NEW PARAGRAPH, to read:

16 **12-36-123.5. Physicians' and physician assistants' peer health**
17 **assistance program.** (3.5) (b) (I) ~~Effective January 1, 1999,~~ As a
18 condition of PHYSICIAN AND PHYSICIAN ASSISTANT licensure AND
19 RENEWAL in this state, ~~and effective January 1, 1999,~~ as a condition of
20 ~~physician assistant certification~~ every renewal applicant shall pay, to the
21 ~~administering entity that has been selected by the board pursuant to the~~
22 ~~provisions of paragraphs (d) and (e) of this subsection (3.5),~~ an amount
23 set by the board not to exceed ~~fifty~~ SIXTY-ONE dollars per year, which
24 maximum amount may be adjusted on January 1, ~~2000~~ 2011, and annually
25 thereafter by the board to reflect:

26 (A) Changes in the United States bureau of labor statistics
27 consumer price index for the Denver-Boulder consolidated metropolitan

1 statistical area for all urban consumers, all goods, or its successor index;

2 **Such**

3 (B) OVERALL UTILIZATION OF THE PROGRAM; AND

4 (C) DIFFERENCES IN PROGRAM UTILIZATION BY PHYSICIANS AND
5 PHYSICIAN ASSISTANTS.

6 (II) BASED ON DIFFERENCES IN UTILIZATION RATES BETWEEN
7 PHYSICIANS AND PHYSICIAN ASSISTANTS, THE BOARD MAY ESTABLISH A
8 DIFFERENT FEE AMOUNT FOR PHYSICIANS THAN THE AMOUNT CHARGED
9 PHYSICIAN ASSISTANTS.

10 (III) THE fee IMPOSED PURSUANT TO THIS PARAGRAPH (b) shall be
11 used to support designated providers that have been selected by the board
12 to provide assistance to physicians and physician assistants needing help
13 in dealing with physical, emotional, or psychological problems that may
14 be detrimental to their ability to practice medicine.

15 (e) The responsibilities of the administering entity shall be:

16 (I) To collect the required annual payments, EITHER DIRECTLY OR
17 THROUGH THE BOARD;

18 (g) THE BOARD MAY COLLECT THE REQUIRED ANNUAL PAYMENTS
19 FOR THE BENEFIT OF THE ADMINISTERING ENTITY AND SHALL TRANSFER
20 SUCH PAYMENTS TO THE ADMINISTERING ENTITY. ALL PAYMENTS
21 COLLECTED BY THE BOARD ARE CUSTODIAL FUNDS THAT ARE NOT SUBJECT
22 TO APPROPRIATION BY THE GENERAL ASSEMBLY, AND THE DISTRIBUTION
23 OF PAYMENTS TO THE ADMINISTERING ENTITY DOES NOT CONSTITUTE
24 STATE FISCAL YEAR SPENDING FOR PURPOSES OF SECTION 20 OF ARTICLE
25 X OF THE STATE CONSTITUTION.

26 **SECTION 24.** 12-36-106 (1) (b), (1) (g), and (2), the introductory
27 portion to 12-36-106 (3), and 12-36-106 (3) (b), (5) (b) (I), and (5) (b) (II)

1 (B), Colorado Revised Statutes, are amended to read:

2 **12-36-106. Practice of medicine defined - exemptions from**
3 **licensing requirements - unauthorized practice by physician**
4 **assistants - penalties - rules - repeal.** (1) For the purpose of this article,
5 "practice of medicine" means:

6 (b) Suggesting, recommending, prescribing, or administering any
7 form of treatment, operation, or healing for the intended palliation, relief,
8 or cure of any physical or mental disease, ailment, injury, condition, or
9 defect of any person; ~~with the intention of receiving therefor, either~~
10 ~~directly or indirectly, any fee, gift, or compensation whatsoever;~~

11 (g) The delivery of telemedicine. ~~which means the delivery of~~
12 ~~medical services and any diagnosis, consultation, or treatment using~~
13 ~~interactive audio, interactive video, or interactive data communication.~~

14 Nothing in this paragraph (g) ~~shall be construed to authorize~~ AUTHORIZES
15 physicians to deliver services outside their scope of practice ~~nor to limit~~
16 OR LIMITS the delivery of health services by other licensed professionals,
17 within the professional's scope of practice, using advanced technology,
18 including, but not limited to, interactive audio, interactive video, or
19 interactive data communication.

20 (2) If ~~any~~ A person who does not possess and has not filed a
21 license to practice medicine ~~within~~ OR PRACTICE AS A PHYSICIAN
22 ASSISTANT IN this state, as provided in this article, and who is not
23 exempted from the licensing requirements under this ~~section, shall do~~
24 ARTICLE, PERFORMS any of the acts ~~mentioned in this section as~~
25 ~~constituting~~ THAT CONSTITUTE the practice of medicine ~~he~~ AS DEFINED IN
26 THIS SECTION, THE PERSON shall be deemed to be practicing medicine
27 ~~without complying with the provisions of this article and~~ OR PRACTICING

1 AS A PHYSICIAN ASSISTANT in violation thereof OF THIS ARTICLE.

2 (3) ~~Nothing in this section shall be construed to prohibit, or to~~
3 ~~require~~ A PERSON MAY ENGAGE IN, AND SHALL NOT BE REQUIRED TO
4 OBTAIN a license or a physician training license under this article with
5 respect to, any of the following acts:

6 (b) The OCCASIONAL rendering of services in this state by a
7 physician IF THE PHYSICIAN:

8 (I) IS LICENSED AND lawfully practicing medicine in another state
9 or territory ~~whether or not such physician is in Colorado, but if any such~~
10 ~~physician does not limit such services to an occasional consultation or~~
11 ~~case or if such physician has~~ OF THE UNITED STATES WITHOUT
12 RESTRICTIONS OR CONDITIONS ON THE PHYSICIAN'S LICENSE;

13 (II) DOES NOT HAVE any established or regularly used ~~hospital~~
14 ~~connections~~ MEDICAL STAFF MEMBERSHIP OR CLINICAL PRIVILEGES in this
15 state; ~~or if such physician~~

16 (III) Is NOT party to any contract, agreement, or understanding to
17 provide ~~the services described in paragraph (a) of subsection (1) of this~~
18 ~~section or if such physician maintains or is provided with for his or her~~
19 ~~regular use any~~ IN THIS STATE ON A REGULAR OR ROUTINE BASIS;

20 (IV) DOES NOT MAINTAIN AN office or other place for the
21 rendering of such services; ~~such physician shall possess a license to~~
22 ~~practice medicine in this state~~

23 (V) HAS MEDICAL LIABILITY INSURANCE COVERAGE IN THE
24 AMOUNTS REQUIRED PURSUANT TO SECTION 13-64-302, C.R.S., FOR THE
25 SERVICES RENDERED IN THIS STATE; AND

26 (VI) LIMITS THE SERVICES PROVIDED IN THIS STATE TO AN
27 OCCASIONAL CASE OR CONSULTATION.

1 (5) (b) (I) If the authority to perform an act is delegated pursuant
2 to paragraph (a) of this subsection (5), the act shall not be performed
3 except under the personal and responsible direction and supervision of a
4 person licensed under the laws of this state to practice medicine. ~~and said~~
5 ~~person shall not~~ A LICENSED PHYSICIAN MAY be responsible for the
6 direction and supervision of ~~more than two~~ UP TO FOUR physician
7 assistants at any one time, ~~without specific approval of the board~~ AND
8 MAY BE RESPONSIBLE FOR THE DIRECTION AND SUPERVISION OF MORE
9 THAN FOUR PHYSICIAN ASSISTANTS UPON RECEIVING SPECIFIC APPROVAL
10 FROM THE BOARD. The board, BY RULE, may define WHAT CONSTITUTES
11 appropriate direction and supervision ~~pursuant to rules and regulations~~ OF
12 A PHYSICIAN ASSISTANT.

13 (II) For purposes of this subsection (5), "personal and responsible
14 direction and supervision" means that the direction and supervision of a
15 physician assistant ~~must be~~ IS personally rendered by a licensed physician
16 practicing in the state of Colorado and IS not RENDERED through
17 intermediaries. The extent of direction and supervision shall be
18 determined by rules ~~and regulations~~ promulgated by the board and as
19 otherwise provided in this paragraph (b); except that, when a physician
20 assistant is performing a delegated medical function in an acute care
21 hospital, the board shall allow supervision and direction to be performed
22 without the physical presence of the physician during the time the
23 delegated medical functions are being implemented if:

24 (B) The licensed supervising physician reviews the quality of
25 medical services rendered by the physician assistant ~~every two working~~
26 ~~days~~ by reviewing the medical records to assure compliance with the
27 physicians' directions; and

1 **SECTION 25.** The introductory portion to 12-36-107 (1) and
2 12-36-107 (1) (b), (1) (d), (2) (b), and (2) (c), Colorado Revised Statutes,
3 are amended, and the said 12-36-107 (1) is further amended BY THE
4 ADDITION OF A NEW PARAGRAPH, to read:

5 **12-36-107. Qualifications for licensure.** (1) Subject to the other
6 conditions and provisions of this article, a license to practice medicine
7 shall be granted by the board to an applicant ~~therefor~~ only upon the basis
8 of:

9 ~~(b) A certification of record or other certificate of examination~~
10 ~~issued to or for the applicant~~ THE APPLICANT'S PASSAGE OF
11 EXAMINATIONS CONDUCTED by the national board of medical examiners,
12 the national board of examiners for osteopathic physicians and surgeons,
13 ~~or the federation of state medical boards, OR ANY SUCCESSOR TO SAID~~
14 ~~ORGANIZATIONS, AS APPROVED BY THE BOARD; certifying that the~~
15 ~~applicant has passed examinations, including but not limited to~~
16 ~~examinations in the basic sciences, given by the respective boards;~~

17 ~~(d) A valid, unsuspended, and unrevoked license or certificate~~
18 ~~issued to the applicant on the basis of an examination, by a duly~~
19 ~~constituted examining board, under the laws of any other state or of any~~
20 ~~territory of the United States or of the District of Columbia whose~~
21 ~~licensing standards at the time such license or certificate was issued were~~
22 ~~not substantially lower than those of the state of Colorado at that time for~~
23 ~~the granting of a license to practice medicine if:~~

24 ~~(I) Under the scope of such license or certificate the applicant was~~
25 ~~authorized to practice medicine in all its branches, as defined in this~~
26 ~~article;~~

27 ~~(II) Such examining board grants licenses, without further~~

1 ~~examination and otherwise on a substantially equal reciprocal basis, to~~
2 ~~applicants who possess a license to practice medicine granted by the~~
3 ~~board or heretofore granted by the state board of medical examiners as~~
4 ~~constituted under any prior law of this state;~~

5 ~~(H) The medical school from which the applicant graduated was~~
6 ~~approved by this or such prior board at the time of the issuance of such~~
7 ~~license or certificate.~~

8 (e) (I) ENDORSEMENT, IF THE APPLICANT FOR LICENSURE BY
9 ENDORSEMENT:

10 (A) FILES AN APPLICATION AND PAYS A FEE AS PRESCRIBED BY THE
11 BOARD;

12 (B) HOLDS A CURRENT, VALID LICENSE IN A JURISDICTION THAT
13 REQUIRES QUALIFICATIONS SUBSTANTIALLY EQUIVALENT TO THE
14 QUALIFICATIONS FOR LICENSURE IN THIS STATE AS SPECIFIED IN THIS
15 SECTION;

16 (C) SUBMITS WRITTEN VERIFICATION THAT HE OR SHE HAS
17 ACTIVELY PRACTICED MEDICINE IN ANOTHER JURISDICTION FOR AT LEAST
18 FIVE OF THE IMMEDIATELY PRECEDING SEVEN YEARS OR HAS OTHERWISE
19 MAINTAINED CONTINUED COMPETENCY AS DETERMINED BY THE BOARD;
20 AND

21 (D) SUBMITS PROOF SATISFACTORY TO THE BOARD THAT HE OR
22 SHE HAS NOT BEEN AND IS NOT SUBJECT TO FINAL OR PENDING
23 DISCIPLINARY OR OTHER ACTION BY ANY STATE OR JURISDICTION IN WHICH
24 THE APPLICANT IS OR HAS BEEN PREVIOUSLY LICENSED; EXCEPT THAT, IF
25 THE APPLICANT IS OR HAS BEEN SUBJECT TO SUCH ACTION, THE BOARD
26 MAY REVIEW THE ACTION TO DETERMINE WHETHER THE UNDERLYING
27 CONDUCT WARRANTS REFUSAL OF A LICENSE PURSUANT TO SECTION

1 12-36-116.

2 (II) UPON RECEIPT OF ALL DOCUMENTS REQUIRED BY THIS
3 PARAGRAPH (e), THE BOARD SHALL REVIEW THE APPLICATION AND MAKE
4 A DETERMINATION OF THE APPLICANT'S QUALIFICATION TO BE LICENSED BY
5 ENDORSEMENT.

6 (2) No person shall be granted a license to practice medicine as
7 provided by subsection (1) of this section unless such person:

8 (b) Is a graduate of an approved medical college; ~~as defined in~~
9 ~~section 12-36-108~~; and

10 (c) Has completed either an approved internship of at least one
11 year ~~as defined in section 12-36-109~~, or at least one year of postgraduate
12 training approved by the board.

13 **SECTION 26.** 12-36-118 (5), Colorado Revised Statutes, is
14 amended BY THE ADDITION OF A NEW PARAGRAPH to read:

15 **12-36-118. Disciplinary action by board - immunity.**

16 (5) (i) ANY PERSON WHOSE LICENSE TO PRACTICE MEDICINE OR TO
17 PRACTICE AS A PHYSICIAN ASSISTANT IS REVOKED OR WHO SURRENDERS
18 HIS OR HER LICENSE TO AVOID DISCIPLINE SHALL NOT BE ELIGIBLE TO
19 APPLY FOR ANY LICENSE FOR TWO YEARS AFTER THE DATE THE LICENSE IS
20 REVOKED OR SURRENDERED. THE TWO-YEAR WAITING PERIOD APPLIES TO
21 ANY PERSON WHOSE LICENSE TO PRACTICE MEDICINE, TO PRACTICE AS A
22 PHYSICIAN ASSISTANT, OR TO PRACTICE ANY OTHER HEALTH CARE
23 OCCUPATION IS REVOKED BY ANY OTHER LEGALLY QUALIFIED BOARD.

24 **SECTION 27.** 12-36-117 (1) (o), Colorado Revised Statutes, is
25 amended to read:

26 **12-36-117. Unprofessional conduct - repeal.**

27 (1) "Unprofessional conduct" as used in this article means:

1 (o) ~~Such~~ FAILING TO NOTIFY THE BOARD, AS REQUIRED BY SECTION
2 12-36-118.5 (1), OF A PHYSICAL OR MENTAL ILLNESS OR CONDITION THAT
3 IMPACTS THE LICENSEE'S ABILITY TO PERFORM A MEDICAL SERVICE WITH
4 REASONABLE SKILL AND WITH SAFETY TO PATIENTS, FAILING TO ACT
5 WITHIN THE LIMITATIONS CREATED BY A physical or mental ~~disability as~~
6 ~~to render~~ ILLNESS OR CONDITION THAT RENDERS the licensee unable to
7 perform A medical ~~services~~ SERVICE with reasonable skill and with safety
8 to the patient, OR FAILING TO COMPLY WITH THE LIMITATIONS AGREED TO
9 UNDER A CONFIDENTIAL AGREEMENT ENTERED PURSUANT TO SECTION
10 12-36-118.5;

11 **SECTION 28.** Part 1 of article 36 of title 12, Colorado Revised
12 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
13 read:

14 **12-36-118.5. Confidential agreements to limit practice -**
15 **violation grounds for discipline.** (1) IF A PHYSICIAN OR PHYSICIAN
16 ASSISTANT SUFFERS FROM A PHYSICAL OR MENTAL ILLNESS OR CONDITION
17 THAT RENDERS THE LICENSEE UNABLE TO PRACTICE MEDICINE OR
18 PRACTICE AS A PHYSICIAN ASSISTANT WITH REASONABLE SKILL AND WITH
19 SAFETY TO PATIENTS, THE PHYSICIAN OR PHYSICIAN ASSISTANT SHALL
20 NOTIFY THE BOARD OF THE ILLNESS OR CONDITION IN A MANNER AND
21 WITHIN A PERIOD DETERMINED BY THE BOARD. THE BOARD MAY REQUIRE
22 THE LICENSEE TO SUBMIT TO AN EXAMINATION OR REFER THE LICENSEE TO
23 A PEER HEALTH ASSISTANCE PROGRAM PURSUANT TO SECTION 12-36-123.5
24 TO EVALUATE [REDACTED] THE EXTENT OF THE ILLNESS OR CONDITION AND ITS
25 IMPACT ON THE LICENSEE'S ABILITY TO PRACTICE WITH REASONABLE SKILL
26 AND WITH SAFETY TO PATIENTS.

27 (2) (a) UPON DETERMINING THAT A PHYSICIAN OR PHYSICIAN

1 ASSISTANT WITH A PHYSICAL OR MENTAL ILLNESS OR CONDITION IS ABLE
2 TO RENDER LIMITED MEDICAL SERVICES WITH REASONABLE SKILL AND
3 WITH SAFETY TO PATIENTS, THE BOARD MAY ENTER INTO A CONFIDENTIAL
4 AGREEMENT WITH THE PHYSICIAN OR PHYSICIAN ASSISTANT IN WHICH THE
5 PHYSICIAN OR PHYSICIAN ASSISTANT AGREES TO LIMIT HIS OR HER
6 PRACTICE BASED ON THE RESTRICTIONS IMPOSED BY THE ILLNESS OR
7 CONDITION, AS DETERMINED BY THE BOARD. [REDACTED]

8 (b) AS PART OF THE AGREEMENT, THE LICENSEE SHALL BE SUBJECT
9 TO PERIODIC REEVALUATIONS OR MONITORING AS DETERMINED
10 APPROPRIATE BY THE BOARD. THE BOARD MAY REFER THE LICENSEE TO
11 THE PEER ASSISTANCE HEALTH PROGRAM FOR REEVALUATION OR
12 MONITORING.

13 (c) THE PARTIES MAY MODIFY OR DISSOLVE THE AGREEMENT AS
14 NECESSARY BASED ON THE RESULTS OF A REEVALUATION OR OF
15 MONITORING. [REDACTED]

16 (3) BY ENTERING INTO AN AGREEMENT WITH THE BOARD
17 PURSUANT TO THIS SECTION TO LIMIT HIS OR HER PRACTICE, THE LICENSEE
18 SHALL NOT BE DEEMED TO BE ENGAGING IN UNPROFESSIONAL CONDUCT,
19 AND THE AGREEMENT SHALL BE CONSIDERED AN ADMINISTRATIVE ACTION
20 AND SHALL NOT CONSTITUTE A RESTRICTION OR DISCIPLINE BY THE BOARD.
21 HOWEVER, IF THE LICENSEE FAILS TO COMPLY WITH THE TERMS OF AN
22 AGREEMENT ENTERED INTO PURSUANT TO THIS SECTION, SUCH FAILURE
23 CONSTITUTES UNPROFESSIONAL CONDUCT PURSUANT TO SECTION
24 12-36-117 (1) (o), AND THE LICENSEE SHALL BE SUBJECT TO DISCIPLINE IN
25 ACCORDANCE WITH SECTION 12-36-118.

26 (4) THIS SECTION SHALL NOT APPLY TO A LICENSEE ENGAGING IN
27 UNPROFESSIONAL CONDUCT AS DESCRIBED IN SECTION 12-36-117 (1) (i).

1 **SECTION 29.** 12-36-117 (1) (i), (1) (y), (1) (z), and (1) (bb) (II),
2 Colorado Revised Statutes, are amended to read:

3 **12-36-117. Unprofessional conduct - repeal.**

4 (1) "Unprofessional conduct" as used in this article means:

5 (i) Habitual ~~intemperance~~ or excessive use of ~~any~~ OR ABUSE OF
6 ALCOHOL, A habit-forming drug, or ~~any~~ A controlled substance as defined
7 in section 12-22-303 (7);

8 (y) Failing to report to the board, ~~any~~ WITHIN THIRTY DAYS AFTER
9 AN ADVERSE ACTION, THAT AN adverse action HAS BEEN taken against the
10 licensee by another licensing agency in another state or country, ~~any~~ A
11 peer review body, ~~any~~ A health care institution, ~~any~~ A professional or
12 medical society or association, ~~any~~ A governmental agency, ~~any~~ A law
13 enforcement agency, or ~~any~~ A court for acts or conduct that would
14 constitute grounds for DISCIPLINARY OR ADVERSE action as described in
15 this article;

16 (z) Failing to report to the board, WITHIN THIRTY DAYS, the
17 surrender of a license or other authorization to practice medicine in
18 another state or jurisdiction or the surrender of membership on any
19 medical staff or in any medical or professional association or society
20 while under investigation by any of those authorities or bodies for acts or
21 conduct similar to acts or conduct that would constitute grounds for
22 action as ~~defined~~ DESCRIBED in this article;

23 (bb) (II) In determining which activities and practices are not
24 consistent with the standard of care or are contrary to recognized
25 standards of the practice of medicine, the board of ~~medical examiners~~
26 shall utilize, in addition to its own expertise, the standards developed by
27 recognized and established accreditation or review organizations ~~which~~

1 ~~organizations~~ THAT meet requirements established by the board by rule.
2 ~~and regulation.~~ Such determinations shall include but not be limited to
3 appropriate ordering of laboratory tests and studies, appropriate ordering
4 of diagnostic tests and studies, appropriate treatment of the medical
5 condition under review, appropriate use of consultations or referrals in
6 patient care, and appropriate creation and maintenance of patient records.

7 **SECTION 30.** The introductory portion to 12-36-118 (5) (g) (III),
8 Colorado Revised Statutes, is amended to read:

9 **12-36-118. Disciplinary action by board - immunity.**

10 (5) (g) (III) If the hearings panel finds the charges proven and orders that
11 discipline be imposed, it shall also determine the extent of such
12 discipline, which shall be in the form of a letter of admonition,
13 suspension for a definite or indefinite period, or revocation of license to
14 practice. ~~In lieu of a suspension,~~ The hearings panel ALSO may impose
15 a fine ~~not to exceed ten~~ OF UP TO FIVE thousand dollars PER VIOLATION.
16 In determining appropriate disciplinary action, the hearings panel shall
17 first consider sanctions that are necessary to protect the public. Only after
18 the panel has considered such sanctions may it consider and order
19 requirements designed to rehabilitate the licensee or applicant. If
20 discipline other than revocation of a license to practice is imposed, the
21 hearings panel may also order that the licensee be granted probation and
22 allowed to continue to practice during the period of such probation. The
23 hearings panel may also include in any disciplinary order that allows the
24 licensee to continue to practice such conditions as the panel may deem
25 appropriate to assure that the licensee is physically, mentally, morally,
26 and otherwise qualified to practice medicine or practice as a physician
27 assistant in accordance with generally accepted professional standards of

1 practice, including any or all of the following:

2 **SECTION 31.** The introductory portion to 13-64-301 (1) and
3 13-64-301 (1) (a), (1) (c), (3), and (4), Colorado Revised Statutes, are
4 amended, and the said 13-64-301 (1) is further amended BY THE
5 ADDITION OF A NEW PARAGRAPH, to read:

6 **13-64-301. Financial responsibility.** (1) AS A CONDITION OF
7 ACTIVE LICENSURE OR AUTHORITY TO PRACTICE IN THIS STATE, every
8 physician or dentist, and every health care institution as defined in section
9 13-64-202, except as provided in section 13-64-303.5, ~~which provide~~
10 THAT PROVIDES health care services shall establish financial
11 responsibility, as follows:

12 (a) (I) If a ~~physician or~~ dentist, by maintaining ~~no later than~~
13 ~~January 1, 1990, as a condition of active licensure or authority to practice~~
14 ~~in this state,~~ commercial professional liability insurance coverage with an
15 insurance company authorized to do business in this state in a minimum
16 indemnity amount of five hundred thousand dollars per incident and one
17 million five hundred thousand dollars annual aggregate per year; except
18 that this requirement is not applicable to a ~~health care professional~~
19 DENTIST who is a public employee under the "Colorado Governmental
20 Immunity Act", ARTICLE 10 OF TITLE 24, C.R.S.

21 (II) The ~~board of medical examiners and the~~ board of dental
22 examiners may, by rule, exempt from or establish lesser financial
23 responsibility standards than those prescribed in this section for classes
24 of ~~license holders~~ DENTISTS who:

25 (A) Perform ~~medical or~~ dental services as employees of the United
26 States government; ~~who~~

27 (B) Render limited or occasional ~~medical or~~ dental services; ~~who~~

1 (C) Perform less than full-time active ~~medical or~~ dental services
2 because of administrative or other nonclinical duties or partial or
3 complete retirement; or ~~who~~

4 (D) Provide uncompensated ~~health~~ DENTAL care to patients but do
5 not otherwise provide any compensated ~~health~~ DENTAL care to patients.
6 ~~or~~

7 (III) THE BOARD OF DENTAL EXAMINERS MAY EXEMPT FROM OR
8 ESTABLISH LESSER FINANCIAL RESPONSIBILITY STANDARDS FOR A DENTIST
9 for ~~other~~ reasons OTHER THAN THOSE DESCRIBED IN SUBPARAGRAPH (II)
10 OF THIS PARAGRAPH (a) that render the limits provided in SUBPARAGRAPH
11 (I) OF this paragraph (a) unreasonable or unattainable. ~~but~~

12 (IV) Nothing in this paragraph (a) shall preclude or otherwise
13 prohibit a licensed ~~physician or~~ dentist from rendering appropriate patient
14 care on an occasional basis when the circumstances surrounding the need
15 for care so warrant.

16 (a.5) (I) IF A PHYSICIAN, BY MAINTAINING COMMERCIAL
17 PROFESSIONAL LIABILITY INSURANCE COVERAGE WITH AN INSURANCE
18 COMPANY AUTHORIZED TO DO BUSINESS IN THIS STATE IN A MINIMUM
19 INDEMNITY AMOUNT OF ONE MILLION DOLLARS PER INCIDENT AND THREE
20 MILLION DOLLARS ANNUAL AGGREGATE PER YEAR; EXCEPT THAT THIS
21 REQUIREMENT IS NOT APPLICABLE TO A PHYSICIAN WHO IS A PUBLIC
22 EMPLOYEE UNDER THE "COLORADO GOVERNMENTAL IMMUNITY ACT",
23 ARTICLE 10 OF TITLE 24, C.R.S.

24 (II) THE COLORADO MEDICAL BOARD MAY, BY RULE, EXEMPT
25 FROM OR ESTABLISH LESSER FINANCIAL RESPONSIBILITY STANDARDS THAN
26 THOSE PRESCRIBED IN THIS PARAGRAPH (a.5) FOR CLASSES OF PHYSICIANS
27 WHO:

1 (A) PERFORM MEDICAL SERVICES AS EMPLOYEES OF THE UNITED
2 STATES GOVERNMENT;

3 (B) RENDER LIMITED OR OCCASIONAL MEDICAL SERVICES;

4 (C) PERFORM LESS THAN FULL-TIME ACTIVE MEDICAL SERVICES
5 BECAUSE OF ADMINISTRATIVE OR OTHER NONCLINICAL DUTIES OR PARTIAL
6 OR COMPLETE RETIREMENT; OR

7 (D) PROVIDE UNCOMPENSATED HEALTH CARE TO PATIENTS BUT DO
8 NOT OTHERWISE PROVIDE ANY COMPENSATED HEALTH CARE TO PATIENTS.

9 (III) THE COLORADO MEDICAL BOARD MAY EXEMPT FROM OR
10 ESTABLISH LESSER FINANCIAL RESPONSIBILITY STANDARDS FOR A
11 PHYSICIAN FOR REASONS OTHER THAN THOSE DESCRIBED IN
12 SUBPARAGRAPH (II) OF THIS PARAGRAPH (a.5) THAT RENDER THE LIMITS
13 PROVIDED IN SUBPARAGRAPH (I) OF THIS PARAGRAPH (a.5)
14 UNREASONABLE OR UNATTAINABLE.

15 (IV) NOTHING IN THIS PARAGRAPH (a.5) SHALL PRECLUDE OR
16 OTHERWISE PROHIBIT A LICENSED PHYSICIAN FROM RENDERING
17 APPROPRIATE PATIENT CARE ON AN OCCASIONAL BASIS WHEN THE
18 CIRCUMSTANCES SURROUNDING THE NEED FOR CARE SO WARRANT.

19 (c) In the alternative, by maintaining a surety bond in a form
20 acceptable to the commissioner of insurance in the amounts set forth in
21 ~~paragraph (a)~~ PARAGRAPH (a), (a.5), or (b) of this subsection (1);

22 (3) Notwithstanding the minimum amount specified in paragraph
23 ~~(a)~~ (a.5) of subsection (1) of this section, if THE COLORADO MEDICAL
24 BOARD RECEIVES two or more reports ~~are received by the board of~~
25 ~~medical examiners~~ pursuant to section 13-64-303 during any ~~one-year~~
26 TWELVE-MONTH period ~~as to any~~ REGARDING A physician, the minimum
27 amount of financial responsibility FOR THAT PHYSICIAN shall be ~~two times~~

1 ~~that so~~ TWICE THE AMOUNT specified ~~however~~ IN PARAGRAPH (a.5) OF
2 SUBSECTION (1) OF THIS SECTION. THE COLORADO MEDICAL BOARD MAY
3 REDUCE THE ADDITIONAL AMOUNT IF THE PHYSICIAN, upon motion, ~~filed~~
4 ~~by the physician and~~ PRESENTS sufficient evidence ~~presented~~ to the
5 COLORADO MEDICAL board that one or more of ~~such~~ THE reports involved
6 an action or claim ~~which~~ THAT did not represent any substantial failure to
7 adhere to accepted professional standards of care. The board may reduce
8 ~~such~~ THE additional amount to ~~that which~~ AN AMOUNT THAT would be fair
9 and conscionable.

10 (4) ~~Each physician, dentist, or health care institution, subject to~~
11 ~~the provisions of this section, shall pay, in addition to any license fee,~~
12 ~~certification fee, or fee for such other authority, an additional fee in an~~
13 ~~amount to be determined by the appropriate authority which issues or~~
14 ~~administers such license, certification, or other authority, not to exceed~~
15 ~~fifteen dollars. Such fee shall be transmitted to the state treasurer, who~~
16 ~~shall credit the same to the division of registrations cash fund, which~~
17 ~~moneys shall be used exclusively for the purposes of this article as~~
18 ~~annually appropriated by the general assembly.~~

19 **SECTION 32.** Part 1 of article 36 of title 12, Colorado Revised
20 Statutes, is amended BY THE ADDITION OF A NEW SECTION to
21 read:

22 **12-36-140. Protection of medical records - licensee's**
23 **obligations - verification of compliance - noncompliance grounds for**
24 **discipline - rules.** (1) EACH LICENSED PHYSICIAN AND PHYSICIAN
25 ASSISTANT SHALL DEVELOP A WRITTEN PLAN TO ENSURE THE SECURITY OF
26 PATIENT MEDICAL RECORDS. THE PLAN SHALL ADDRESS AT LEAST THE
27 FOLLOWING:

1 (a) THE STORAGE AND PROPER DISPOSAL, IF APPROPRIATE, OF
2 PATIENT MEDICAL RECORDS;

3 (b) THE DISPOSITION OF PATIENT MEDICAL RECORDS IN THE EVENT
4 THE LICENSEE DIES, RETIRES, OR OTHERWISE CEASES TO PRACTICE OR
5 PROVIDE MEDICAL CARE TO PATIENTS; AND

6 (c) THE METHOD BY WHICH PATIENTS MAY ACCESS OR OBTAIN
7 THEIR MEDICAL RECORDS PROMPTLY IF ANY OF THE EVENTS DESCRIBED IN
8 PARAGRAPH (b) OF THIS SUBSECTION (1) OCCURS.

9 (2) UPON INITIAL LICENSURE UNDER THIS ARTICLE AND UPON
10 RENEWAL OF A LICENSE, THE APPLICANT OR LICENSEE, AS APPLICABLE,
11 SHALL ATTEST TO THE BOARD THAT HE OR SHE HAS DEVELOPED A PLAN IN
12 COMPLIANCE WITH THIS SECTION.

13 (3) A LICENSEE SHALL INFORM EACH PATIENT, IN WRITING, OF THE
14 METHOD BY WHICH THE PATIENT MAY ACCESS OR OBTAIN HIS OR HER
15 MEDICAL RECORDS IF AN EVENT DESCRIBED IN PARAGRAPH (b) OF
16 SUBSECTION (1) OF THIS SECTION OCCURS.

17 (4) A LICENSEE WHO FAILS TO COMPLY WITH THIS SECTION SHALL
18 BE SUBJECT TO DISCIPLINE IN ACCORDANCE WITH SECTION 12-36-118.

19 (5) THE BOARD MAY ADOPT RULES AS NECESSARY TO IMPLEMENT
20 THIS SECTION.

21 **SECTION 33.** 12-36-106 (5) (a), (5) (c), (5) (d), (5) (e), (5) (f),
22 (5) (g), (5) (i), (5) (j), and (5) (k), Colorado Revised Statutes, are
23 amended to read:

24 **12-36-106. Practice of medicine defined - exemptions from**
25 **licensing requirements - unauthorized practice by physician**
26 **assistants - penalties - repeal.** (5) (a) A person licensed under the laws
27 of this state to practice medicine may delegate to a physician assistant

1 licensed by the board PURSUANT TO SECTION 12-36-107.3 the authority to
2 perform acts that constitute the practice of medicine to the extent and in
3 the manner authorized by rules ~~and regulations~~ promulgated by the board,
4 including the authority to prescribe medication, including controlled
5 substances, and dispense only such drugs as designated by the board.
6 Such acts shall be consistent with sound medical practice. Each
7 prescription issued by a physician assistant licensed by the board shall
8 ~~have~~ BE imprinted ~~thereon~~ WITH the name of his or her supervising
9 physician. Nothing in this subsection (5) shall limit the ability of
10 otherwise licensed health personnel to perform delegated acts. The
11 dispensing of prescription medication by a physician assistant shall be
12 subject to the provisions of section 12-22-121 (6).

13 (c) ~~To become licensed, a physician assistant shall have:~~

14 ~~(I) Successfully completed an education program for physician~~
15 ~~assistants which conforms to standards approved by the board, which~~
16 ~~standards may be established by utilizing the assistance of any responsible~~
17 ~~accrediting organization; and~~

18 ~~(II) Successfully completed the national certifying examination~~
19 ~~for assistants to the primary care physician which is administered by the~~
20 ~~national commission on certification of physician assistants or~~
21 ~~successfully completed any other examination approved by the board; and~~

22 ~~(III) Applied to the board on the forms and in the manner~~
23 ~~designated by the board and paid the appropriate fee established by the~~
24 ~~board pursuant to section 24-34-105, C.R.S.; and~~

25 ~~(IV) Attained the age of twenty-one years.~~

26 (d) ~~The board may determine whether any applicant for licensure~~
27 ~~as a physician assistant possesses education, experience, or training in~~

1 health care that is sufficient to be accepted in lieu of the qualifications
2 required for licensure under subparagraph (I) of paragraph (c) of this
3 subsection (5). Every person who desires to qualify for practice as a
4 physician assistant within this state shall file with the secretary of the
5 board his or her written application for licensure, on which application he
6 or she shall list any act the commission of which would be grounds for
7 disciplinary action against a licensed physician assistant under section
8 12-36-117, along with an explanation of the circumstances of such act.
9 The board may deny licensure to any applicant who has performed any act
10 that constitutes unprofessional conduct, as defined in section 12-36-117.

11 (e) No person licensed as a physician assistant may perform any
12 act that constitutes the practice of medicine within a hospital or nursing
13 care facility that is licensed pursuant to part 1 of article 3 of title 25,
14 C.R.S., or that is required to obtain a certificate of compliance pursuant
15 to section 25-1.5-103 (1) (a) (II), C.R.S., without authorization from the
16 governing board of the hospital or nursing care facility. Such governing
17 board shall have the authority to grant, deny, or limit such authority to its
18 own established procedures.

19 (f) The board may take any disciplinary action with respect to a
20 physician assistant license as it may with respect to the license of a
21 physician, in accordance with procedures established pursuant to this
22 article.

23 (g) Pursuant to the provisions of section 12-36-132 12-36-129 (6),
24 the board may apply for an injunction to enjoin any person from
25 performing delegated medical acts which THAT are in violation of this
26 section or of any rules and regulations promulgated by the board.

27 (i) The board shall license and keep a record of physician

1 ~~assistants who have been licensed pursuant to paragraph (c) of this~~
2 ~~subsection (5) and shall establish renewal fees and schedules subject to~~
3 ~~the provisions of section 24-34-102 (8), C.R.S. Every licensed physician~~
4 ~~assistant shall pay to the secretary of the board a registration fee to be~~
5 ~~determined and collected pursuant to section 24-34-105, C.R.S., and shall~~
6 ~~obtain a registration certificate for the current calendar year.~~

7 (j) ~~This subsection (5) is repealed, effective July 1, 2010.~~

8 (k) ~~Any person who practices or offers or attempts to practice as~~
9 ~~a physician assistant without an active license issued under this article~~
10 ~~commits a class 2 misdemeanor and shall be punished as provided in~~
11 ~~section 18-1.3-501, C.R.S., for the first offense, and, for the second or~~
12 ~~any subsequent offense, the person commits a class 6 felony and shall be~~
13 ~~punished as provided in section 18-1.3-401, C.R.S.~~

14 **SECTION 34. Repeal of provisions being relocated in this act.**

15 12-36-107 (3) and (4), Colorado Revised Statutes, are repealed.

16 **SECTION 35.** Part 1 of article 36 of title 12, Colorado Revised
17 Statutes, is amended BY THE ADDITION OF THE FOLLOWING NEW
18 SECTIONS CONTAINING RELOCATED PROVISIONS, WITH
19 AMENDMENTS, to read:

20 **12-36-107.2. [Formerly 12-36-107 (3)] Distinguished foreign**
21 **teaching physician license - qualifications.**

22 ~~(3)~~-(a)-(1) (1) Notwithstanding any other provision of this article, an
23 applicant of noteworthy and recognized professional attainment who is
24 a graduate of a foreign medical school and who is licensed in a foreign
25 jurisdiction, if that jurisdiction has a licensing procedure, may be granted
26 a distinguished foreign teaching physician license to practice medicine in
27 this state, upon application to the board in the manner determined by the

1 board, if the following conditions are met:

2 ~~(A)~~ (a) The applicant has been invited by a medical school in this
3 state to serve as a full-time member of its academic faculty for the period
4 of his OR HER appointment, at a rank equal to an associate professor or
5 ~~above~~ HIGHER;

6 ~~(B)~~ (b) The applicant's medical practice is limited to that required
7 by his OR HER academic position, ~~and~~ the limitation is so designated on
8 the license in accordance with board procedure, and THE MEDICAL
9 PRACTICE is also limited to the core teaching hospitals affiliated with the
10 medical school, as identified by the board, on which ~~he~~ THE APPLICANT
11 is serving as a faculty member.

12 ~~(H)~~ (2) An applicant who meets the qualifications and conditions
13 set forth in ~~subparagraph (F)~~ SUBSECTION (1) of this ~~paragraph (a)~~
14 SECTION but is not offered the rank of associate professor or ~~above~~
15 HIGHER may be granted a temporary license, for one year only, to practice
16 medicine in this state, as a member of the academic faculty, at the
17 discretion of the board and in the manner determined by the board. ~~but~~
18 ~~if such person~~ IF THE APPLICANT is granted a temporary license, he OR SHE
19 shall practice only under the direct supervision of a person who has the
20 rank of associate professor or ~~above~~ HIGHER.

21 ~~(b)~~ (3) ~~Such~~ A distinguished foreign teaching physician license
22 ~~shall remain~~ IS EFFECTIVE AND in force only while the holder is serving
23 on the academic staff of a medical school. ~~Such~~ THE license ~~shall expire~~
24 EXPIRES one year after ~~its~~ THE date of issuance and may be renewed
25 annually only after ~~it~~ THE BOARD has specifically determined that the
26 conditions specified in ~~paragraph (a)~~ of this subsection ~~(3)~~ (1) OF THIS
27 SECTION will continue during the ensuing period of licensure. The board

1 may require an applicant for licensure under this subsection ~~(3)~~ SECTION
2 to present himself or herself to the board for an interview. The board may
3 withdraw licensure granted by these provisions UNDER THIS SECTION prior
4 to the expiration of ~~such~~ THE license for unprofessional conduct as
5 defined in section 12-36-117.

6 (4) The board may establish and charge a fee for ~~such~~ A
7 distinguished foreign teaching physician license pursuant to section
8 24-34-105, C.R.S., not to exceed the amount of the fee for a two-year
9 renewal of a physician's license.

10 ~~(e)~~ (5) The board shall promulgate rules specifying standards
11 related to the qualification and supervision of distinguished foreign
12 teaching physicians.

13 **12-36-107.3. [Formerly 12-36-107 (4)] Temporary license -**
14 **rules.** ~~(4)(a)~~ (1) Notwithstanding any other provision of this article, an
15 applicant lawfully practicing medicine in another state or territory may be
16 granted a temporary license to practice medicine in this state, upon
17 application to the board in the manner determined by the board, if:

18 ~~(H)~~ (a) The applicant has been invited by the United States olympic
19 committee to provide medical services at the olympic training center at
20 Colorado Springs or to provide medical services at an event in this state
21 sanctioned by ~~such~~ THE OLYMPIC committee; and

22 ~~(H)~~ (b) The United States olympic committee certifies to the board
23 the name of the applicant, the state or territory of the applicant's licensure,
24 and the dates ~~within~~ ON which the applicant has been invited to provide
25 medical services; and

26 ~~(H)~~ (c) The applicant's practice is limited to that required by the
27 United States olympic committee. ~~Such~~ THE APPLICANT SHALL PROVIDE

1 medical services shall only be provided to athletes or team personnel
2 registered to train at the olympic training center or registered to compete
3 in an event conducted under the sanction of the United States olympic
4 committee.

5 ~~(b)~~ (2) ~~Such~~ A temporary license shall remain IS EFFECTIVE AND
6 in force while the holder is providing medical services at the invitation of
7 the United States olympic committee and only during the time certified
8 to the board, but not longer than TO EXCEED ninety days without UNLESS
9 THE BOARD GRANTS AN extension. ~~by the board.~~

10 (3) The board may establish and charge such A fee for a temporary
11 license pursuant to section 24-34-105, C.R.S., not to exceed one-half the
12 amount of the fee for a two-year renewal of a physician's license. ~~No~~ A
13 physician shall NOT be required to pay more than one temporary license
14 fee in each calendar year.

15 (4) Physicians temporarily licensed under this ~~subsection~~ (4)
16 SECTION are subject to discipline by the board for unprofessional conduct
17 as defined in section 12-36-117.

18 (5) THE BOARD MAY ADOPT RULES AS NECESSARY TO IMPLEMENT
19 THIS SECTION.

20 **12-36-107.4. [Formerly 12-36-106 (5) (c), (5) (d), (5) (e), (5) (f),**
21 **and (5) (i)] Physician assistant license - qualifications.** ~~(5)(e)~~ (1) To
22 ~~become~~ BE licensed AS a physician assistant UNDER THIS ARTICLE, AN
23 APPLICANT SHALL BE AT LEAST TWENTY-ONE YEARS OF AGE AND shall
24 have:

25 ~~(f)~~ (a) Successfully completed an education program for physician
26 assistants ~~which~~ THAT conforms to standards approved by the board,
27 which standards may be established by utilizing the assistance of any

1 responsible accrediting organization; ~~and~~

2 ~~(H)~~ (b) Successfully completed the national certifying examination
3 for PHYSICIAN assistants ~~to the primary care physician which~~ THAT is
4 administered by the national commission on certification of physician
5 assistants OR A SUCCESSOR ORGANIZATION or successfully completed any
6 other examination approved by the board; and

7 ~~(H)~~ (c) ~~Applied~~ SUBMITTED AN APPLICATION to the board ~~on the~~
8 ~~forms and~~ in the manner designated by the board and paid the appropriate
9 fee established by the board pursuant to section 24-34-105, C.R.S. ~~and~~

10 ~~(IV)~~ ~~Attained the age of twenty-one years.~~

11 ~~(d)~~ (2) The board may determine whether any applicant for
12 licensure as a physician assistant possesses education, experience, or
13 training in health care that is sufficient to be accepted in lieu of the
14 qualifications required for licensure under ~~subparagraph (f) of paragraph~~
15 ~~(e) of this subsection (5).~~ Every person who desires to qualify for (1) OF
16 THIS SECTION.

17 (3) A PERSON APPLYING FOR A LICENSE TO practice as a physician
18 assistant ~~within~~ IN this state shall ~~file with the secretary of~~ NOTIFY the
19 board, IN CONNECTION WITH his or her ~~written~~ application for licensure,
20 ~~on which application he or she shall list any act~~ OF the commission of
21 ~~which~~ ANY ACT THAT would be grounds for disciplinary action against a
22 licensed physician assistant under section 12-36-117, along with an
23 explanation of the circumstances of ~~such~~ THE act. The board may deny
24 licensure to any applicant ~~who has performed any act that constitutes~~
25 ~~unprofessional conduct, as defined~~ AS SET FORTH in section ~~12-36-117~~
26 12-36-116.

27 ~~(e)~~ (4) ~~No~~ A person licensed as a physician assistant ~~may~~ SHALL

1 NOT perform any act that constitutes the practice of medicine within a
2 hospital or nursing care facility that is licensed pursuant to part 1 of
3 article 3 of title 25, C.R.S., or that is required to obtain a certificate of
4 compliance pursuant to section 25-1.5-103 (1) (a) (II), C.R.S., without
5 authorization from the governing board of the hospital or nursing care
6 facility. ~~Such~~ THE governing board ~~shall have the authority to~~ MAY grant,
7 deny, or limit ~~such authority to~~ A PHYSICIAN ASSISTANT'S AUTHORIZATION
8 BASED ON its own established procedures.

9 (f) (5) The board may take any disciplinary action with respect to
10 a physician assistant license as it may with respect to the license of a
11 physician, in accordance with ~~procedures established pursuant to this~~
12 ~~article~~ SECTION 12-36-118.

13 (i) (6) The board shall license and keep a record of physician
14 assistants who have been licensed pursuant to ~~paragraph (c) of this~~
15 ~~subsection (5) and shall establish renewal fees and schedules subject to~~
16 ~~the provisions of section 24-34-102 (8), C.R.S.~~ Every THIS SECTION. A
17 licensed physician assistant shall ~~pay to the secretary of the board a~~
18 ~~registration fee to be determined and collected pursuant to section~~
19 ~~24-34-105, C.R.S., and shall obtain a registration certificate for the~~
20 ~~current calendar year~~ RENEW HIS OR HER LICENSE IN ACCORDANCE WITH
21 SECTION 12-36-123.

22 **SECTION 36.** 12-36-129 (1), Colorado Revised Statutes, is
23 amended to read:

24 **12-36-129. Unauthorized practice - penalties.** (1) Any
25 person who practices or offers or attempts to practice medicine OR
26 PRACTICE AS A PHYSICIAN ASSISTANT within this state without an active
27 license issued under this article commits a class 2 misdemeanor and shall

1 be punished as provided in section 18-1.3-501, C.R.S., for the first
2 offense, and, any person committing a second or subsequent offense
3 commits a class 6 felony and shall be punished as provided in section
4 18-1.3-401, C.R.S.

5 [REDACTED] [REDACTED]
6 **SECTION 37.** 12-36-129 (2), (3), and (4), Colorado Revised
7 Statutes, are amended, and the said 12-36-129 is further amended BY
8 THE ADDITION OF A NEW SUBSECTION, CONTAINING
9 RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

10 **12-36-129. Unauthorized practice - penalties.** (2) Any person
11 who ENGAGES IN ANY OF THE FOLLOWING ACTIVITIES COMMITS A CLASS
12 6 FELONY AND SHALL BE PUNISHED AS PROVIDED IN SECTION 18-1.3-401,
13 C.R.S.:

14 (a) Presents as his or her own the diploma, license, certificate, or
15 credentials of another; ~~or who~~

16 (b) Gives either false or forged evidence of any kind to the board
17 or any BOARD member ~~thereof~~, in connection with an application for a
18 license to practice medicine or ~~who~~ PRACTICE AS A PHYSICIAN ASSISTANT;

19 (c) Practices medicine OR PRACTICES AS A PHYSICIAN ASSISTANT
20 under a false or assumed name; or ~~who~~

21 (d) Falsely impersonates another licensee of a like or different
22 name. ~~commits a class 6 felony and shall be punished as provided in~~
23 ~~section 18-1.3-401, C.R.S.~~

24 (3) No action may be maintained against an individual who has
25 been the recipient of services constituting the unlawful practice of
26 medicine OR THE UNLAWFUL PRACTICE OF A PHYSICIAN ASSISTANT for the
27 breach of a contract involving the unlawful practice of medicine OR THE

1 UNLAWFUL PRACTICE OF A PHYSICIAN ASSISTANT or the recovery of
2 compensation for services rendered under such a contract.

3 (4) When an individual has been the recipient of services
4 constituting the unlawful practice of medicine OR THE UNLAWFUL
5 PRACTICE OF A PHYSICIAN ASSISTANT, whether or not ~~he~~ THE INDIVIDUAL
6 knew that the rendition of the services was unlawful:

7 (a) ~~He or his~~ THE INDIVIDUAL OR THE INDIVIDUAL'S personal
8 representative is entitled to recover the amount of any fee paid for the
9 services; and

10 (b) ~~He or his~~ THE INDIVIDUAL OR THE INDIVIDUAL'S personal
11 representative may also recover a reasonable attorney fee as fixed by the
12 court, to be ~~taxed~~ ASSESSED as part of the costs of the action.

13 (6) (a) [**Formerly 12-36-132**] (~~†~~) The board may, in the name of
14 the people of the state of Colorado AND through the attorney general of
15 the state of Colorado, apply for an injunction in any court of competent
16 jurisdiction to enjoin any person from committing any act prohibited by
17 ~~the provisions of THIS article. 13, 30, 34, 36, 39, or 41 of this title.~~

18 (~~2~~) (b) If ~~it is established~~ THE BOARD ESTABLISHES that the
19 defendant has been or is committing an act prohibited by ~~said articles~~
20 THIS ARTICLE, the court shall enter a decree perpetually enjoining ~~said~~ THE
21 defendant from further committing ~~said~~ THE act.

22 (~~3~~) (c) ~~Such AN injunctive proceedings shall be~~ PROCEEDING MAY
23 BE BROUGHT PURSUANT TO THIS SECTION in addition to, and not in lieu of,
24 all penalties and other remedies provided in this article.

25 **SECTION 38.** 12-36-111.5 (2) (b), (3) (a), and (5), Colorado
26 Revised Statutes, are amended to read:

27 **12-36-111.5. Michael Skolnik medical transparency act -**

1 **disclosure of information about licensees - rules.** (2) (b) The general
2 assembly further finds and declares that it is important to make
3 information about persons engaged in the practice of medicine available
4 to the public in a manner that is efficient, cost-effective, and maintains
5 the integrity of the information, and to that end, the general assembly
6 encourages persons to file the required information with the ~~state~~
7 COLORADO MEDICAL board of ~~medical examiners~~ electronically, to the
8 extent possible.

9 (3) On and after January 1, 2008, any person applying for a new
10 license or to renew, reinstate, or reactivate a license to practice medicine
11 in this state shall provide the following information to the board, in a
12 form and manner determined by the board that is consistent with the
13 requirements of section 12-36-111 (1) or 12-36-123 (1):

14 (a) The applicant's full name, including any known aliases; current
15 address of record and telephone number; information pertaining to any
16 license to practice medicine held by the applicant ~~at any time~~ DURING THE
17 IMMEDIATELY PRECEDING TEN YEARS, including the license number, type,
18 status, original issue date, last renewal date, and expiration date; any
19 board certifications and specialties, if applicable; any affiliations with
20 hospitals or health care facilities; any health care-related business
21 ownership interests; and information pertaining to any health care-related
22 employment contracts or contracts establishing an independent contractor
23 relationship with any entities if the annual aggregate value of the
24 contracts exceeds five thousand dollars, as adjusted by the board during
25 each license renewal cycle to reflect changes in the United States
26 department of labor, bureau of labor statistics, consumer price index for
27 Denver-Boulder-Greeley, all items, all urban consumers, or its successor

1 index;

2 (5) When disclosing information regarding a licensee or applicant
3 to the public, the board shall include the following statement or a similar
4 statement that communicates the same meaning:

5 Some studies have shown that there is no significant correlation
6 between malpractice history and a doctor's competence. At the
7 same time, the ~~state~~ COLORADO MEDICAL board of ~~medical~~
8 ~~examiners~~ believes that consumers should have access to
9 malpractice information. To make the best health care decisions,
10 you should view this information in perspective. You could miss
11 an opportunity for high quality care by selecting a doctor based
12 solely on malpractice history. When considering malpractice data,
13 please keep in mind:

14 Malpractice histories tend to vary by specialty. Some specialties
15 are more likely than others to be the subject of litigation.

16 You should take into account how long the doctor has been in
17 practice when considering malpractice averages.

18 The incident causing the malpractice claim may have happened
19 years before a payment is finally made. Sometimes, it takes a long
20 time for a malpractice lawsuit to move through the legal system.

21 Some doctors work primarily with high-risk patients. These
22 doctors may have malpractice histories that are higher than
23 average because they specialize in cases or patients who are at
24 very high risk for problems.

25 Settlement of a claim may occur for a variety of reasons that do
26 not necessarily reflect negatively on the professional competence
27 or conduct of the physician. A payment in settlement of a medical

1 malpractice action or claim should not be construed as creating a
2 presumption that medical malpractice has occurred.

3 You may wish to discuss information provided by the board, and
4 malpractice generally, with your doctor.

5 The information posted on the ~~state board of medical examiner's~~
6 COLORADO MEDICAL BOARD'S web site was provided by applicants
7 for a medical license and applicants for renewal, reinstatement, or
8 reactivation of a medical license.

9 **SECTION 39.** Part 1 of article 36 of title 12, Colorado Revised
10 Statutes, is amended BY THE ADDITION OF A NEW SECTION,
11 WITH RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

12 **12-36-102.5. Definitions.** AS USED IN THIS ARTICLE, UNLESS THE
13 CONTEXT OTHERWISE REQUIRES:

14 (1) (a) **[Formerly 12-36-110.5]** An "Approved fellowship" is
15 MEANS a program that meets the following criteria:

- 16 (a) (I) Is specialized, clearly defined, and delineated;
- 17 (b) (II) Follows the completion of an approved residency;
- 18 (c) (III) Provides additional training in a medical specialty or
19 subspecialty; and

- 20 (d) (IV) Is either:
 - 21 (A) Performed in a hospital conforming to the minimum
22 standards for fellowship training established by the accreditation council
23 for graduate medical education or the American osteopathic association,
24 or by a successor to OF either of said organizations ORGANIZATION; or

- 25 (B) Any other program that is approved by the accreditation
26 council for graduate medical education or the American osteopathic
27 association or a successor to OF either of said organizations

1 ORGANIZATION.

2 ~~(2)~~ (b) "APPROVED FELLOWSHIP" INCLUDES ANY OTHER
3 FELLOWSHIP THAT the board, ~~has the authority~~, upon its own investigation,
4 ~~to approve any other fellowship~~ APPROVES for purposes of issuing a
5 physician training license PURSUANT TO SECTION 12-36-122.

6 (2) (a) [**Formerly 12-36-109**] ~~(1)~~ An "Approved internship" is
7 MEANS an internship:

8 (a) (I) Of at least one year in a hospital conforming to the
9 minimum standards for intern training established by the accreditation
10 council for graduate medical education or ~~any~~ THE AMERICAN
11 OSTEOPATHIC ASSOCIATION OR A SUCCESSOR OF EITHER organization; ~~or by~~
12 ~~the American osteopathic association~~ or

13 ~~(b)~~ (II) Approved by either of ~~such~~ THE organizations SPECIFIED
14 IN SUBPARAGRAPH (I) OF THIS PARAGRAPH (a).

15 ~~(2)~~ (b) "APPROVED INTERNSHIP" INCLUDES ANY OTHER INTERNSHIP
16 APPROVED BY the board ~~has the authority~~, upon its own investigation. ~~to~~
17 ~~approve any other internship.~~

18 (3) (a) [**Formerly 12-36-108**] An "Approved medical college" is
19 MEANS a college ~~which~~ THAT:

20 (I) Conforms to the minimum educational standards for medical
21 colleges as established by the liaison committee on medical education or
22 any successor organization that is the official accrediting body of
23 educational programs leading to the degree of doctor of medicine and
24 recognized for such purpose by the federal department of education and
25 the council on postsecondary accreditation; ~~or~~

26 (II) CONFORMS TO THE MINIMUM EDUCATION STANDARDS for
27 osteopathic colleges as established by the American osteopathic

1 association or a college which ANY SUCCESSOR ORGANIZATION THAT IS
2 THE OFFICIAL ACCREDITING BODY OF EDUCATION PROGRAMS LEADING TO
3 THE DEGREE OF DOCTOR OF OSTEOPATHY; OR

4 (III) Is approved by either of such organizations OF THE
5 ORGANIZATIONS SPECIFIED IN SUBPARAGRAPHS (I) AND (II) OF THIS
6 PARAGRAPH (a).

7 (b) "APPROVED MEDICAL COLLEGE" INCLUDES ANY OTHER
8 MEDICAL COLLEGE APPROVED BY the board shall have the authority, upon
9 its own investigation of the educational standards and facilities thereof,
10 to approve any other OF THE medical college.

11 (4) (a) **[Formerly 12-36-110]** ~~(1)~~ An "Approved residency" is
12 MEANS a residency:

13 ~~(a)~~ (I) Performed in a hospital conforming to the minimum
14 standards for residency training established by the accreditation council
15 for graduate medical education OR THE AMERICAN OSTEOPATHIC
16 ASSOCIATION or any successor OF EITHER organization; ~~or by the~~
17 ~~American osteopathic association;~~ or

18 ~~(b)~~ (II) Approved by either of such THE organizations SPECIFIED
19 IN SUBPARAGRAPH (I) OF THIS PARAGRAPH (a).

20 ~~(2)~~ (b) "APPROVED RESIDENCY" MEANS ANY OTHER RESIDENCY
21 APPROVED BY the board has the authority, upon its own investigation. to
22 approve any other residency.

23 (5) "BOARD" MEANS THE COLORADO MEDICAL BOARD CREATED IN
24 SECTION 12-36-103 (1).

25 (6) "LICENSE" MEANS THE AUTHORITY TO PRACTICE MEDICINE OR
26 PRACTICE AS A PHYSICIAN ASSISTANT UNDER THIS ARTICLE.

27 (7) **[Formerly 12-36-106 (6)]** "Licensee" as used in this part 1,

1 means any physician or physician assistant who is licensed pursuant to
2 this ~~section~~ ARTICLE.

3 (8) "TELEMEDICINE" MEANS THE DELIVERY OF MEDICAL SERVICES
4 AND ANY DIAGNOSIS, CONSULTATION, OR TREATMENT USING INTERACTIVE
5 AUDIO, INTERACTIVE VIDEO, OR INTERACTIVE DATA COMMUNICATION.

6 **SECTION 40.** The introductory portion to 12-36-107.6 (1),
7 Colorado Revised Statutes, is amended to read:

8 **12-36-107.6. Foreign medical school graduates - degree**
9 **equivalence.** (1) For graduates of schools other than those approved by
10 the liaison committee for medical education or the American osteopathic
11 association, ~~OR THE SUCCESSOR OF EITHER ENTITY,~~ the board may require
12 three years of postgraduate clinical training approved by the board. An
13 applicant whose foreign medical school is ~~other than as defined in section~~
14 ~~12-36-108 shall be~~ NOT AN APPROVED MEDICAL COLLEGE IS eligible for
15 licensure at the discretion of the board if the applicant meets all other
16 requirements for licensure and holds specialty board certification, current
17 at the time of application for licensure, conferred by a regular member
18 board of the American board of medical specialties or the American
19 osteopathic association. The factors to be considered by the board in the
20 exercise of its discretion in determining the qualifications of such
21 applicants shall include the following:

22 **SECTION 41.** 12-36-122.5, Colorado Revised Statutes, is
23 amended BY THE ADDITION OF A NEW SUBSECTION, WITH
24 RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

25 **12-36-122.5. Intern, resident, or fellow reporting.**
26 (3) **[Formerly 12-36-122 (9)]** Licensed physicians responsible for the
27 supervision of interns, residents, or fellows in graduate training programs

1 shall promptly report to the board anything concerning a ~~physician~~
2 ~~training~~ licensee in ~~such programs~~ THE GRADUATE TRAINING PROGRAM
3 that would constitute a violation of this article. ~~Such~~ THE physicians shall
4 also report to the board any ~~physician training~~ licensee who has not
5 progressed satisfactorily in the program ~~The phrase "not progressed~~
6 ~~satisfactorily in the program"~~ refers to those ~~physician training~~ licensees
7 ~~who have~~ BECAUSE THE LICENSEE HAS been dismissed, suspended, or
8 placed on probation for reasons that constitute unprofessional conduct as
9 defined in section 12-36-117, unless ~~such~~ THE conduct has been reported
10 to the peer health assistance program ~~set forth in~~ PURSUANT TO section
11 12-36-123.5.

12 **SECTION 42. Repeal of provisions being relocated in this act.**

13 12-36-106 (5) (k) and (6), 12-36-108, 12-36-109, 12-36-110,
14 12-36-110.5, 12-36-122 (9), and 12-36-132, Colorado Revised Statutes,
15 are repealed.

16 **SECTION 43. Repeal.** 12-36-111 (2), Colorado Revised

17 Statutes, is repealed as follows:

18 **12-36-111. Applications for license.** (2) ~~(a) An applicant for a~~

19 ~~license on the basis of an examination by the board shall file an~~
20 ~~application at least ninety days prior to the announced date of the~~
21 ~~examination.~~

22 ~~(b) If an applicant is not a graduate of an approved medical~~
23 ~~college at the time of filing an application, such applicant shall submit to~~
24 ~~the board, in lieu of required evidence of graduation, a written statement~~
25 ~~from the dean or other authorized representative of the approved medical~~
26 ~~college in which such applicant is in attendance stating that the applicant~~
27 ~~will receive a diploma at the end of the then current school term; except~~

1 that the applicant shall not be permitted to take the examination until
2 acceptable evidence of graduation has been filed with the board and the
3 applicant has complied with the requirements of subsection (1) of this
4 section. No license shall be issued to an applicant until the board is
5 satisfied that such applicant has completed at least one year of approved
6 internship or approved postgraduate training and has otherwise met the
7 requirements for the issuance of a license under this article.

8 **SECTION 44. Repeal.** 12-36-113, Colorado Revised Statutes,
9 is repealed as follows:

10 **12-36-113. Examinations.** (1) Examinations for a license to
11 practice medicine shall be held not less than twice in each year at such
12 times and places as may be specified by the board, if there are applicants
13 desiring to be examined. The examination shall be conducted in the
14 English language and shall cover the basic and clinical sciences and such
15 other subjects as the board may prescribe. The examinations shall be fair
16 and impartial and practical in character. The examination papers shall not
17 disclose the name of any applicant but shall be identified by a number to
18 be assigned.

19 (2) The board shall be responsible for determining the passing
20 score to reflect a standard of minimum competency for the practice of
21 medicine. If an applicant fails to meet such minimum passing score, such
22 applicant may be reexamined at any subsequent scheduled examination
23 upon paying a fee to be determined and collected pursuant to section
24 24-34-105, C.R.S.

25 (3) Repealed.

26 **SECTION 45. Repeal.** 12-36-121, Colorado Revised Statutes,
27 is repealed as follows:

1 **12-36-121. Duplicates of license.** ~~The board is authorized to~~
2 ~~issue a duplicate license to any licensee, upon application, properly~~
3 ~~verified by oath, establishing to the satisfaction of the board that the~~
4 ~~original license has been lost or destroyed and upon payment to the board~~
5 ~~of a fee to be determined by regulation adopted by the board. No person~~
6 ~~shall be entitled to a duplicate license unless he or she is a licensee in~~
7 ~~good standing.~~

8 **SECTION 46.** 12-36-134 (1) (b) and (1) (d), the introductory
9 portion to 12-36-134 (1) (g), and 12-36-134 (1) (g) (I), (1) (g) (II), (1) (g)
10 (III), (3), (4), and (5), Colorado Revised Statutes, are amended to read:

11 **12-36-134. Professional service corporations, limited liability**
12 **companies, and registered limited liability partnerships for the**
13 **practice of medicine - definitions.** (1) Persons licensed to practice
14 medicine by the board may form professional service corporations for
15 such persons' practice of medicine under the "Colorado Business
16 Corporation Act", articles 101 to 117 of title 7, C.R.S., if such
17 corporations are organized and operated in accordance with the
18 provisions of this section. The articles of incorporation of such
19 corporations shall contain provisions complying with the following
20 requirements:

21 (b) The corporation ~~shall be~~ IS organized solely for the purpose of
22 permitting individuals to conduct the practice of medicine through a
23 corporate entity, so long as all the individuals are actively licensed ~~by the~~
24 ~~board to practice medicine~~ PHYSICIANS OR PHYSICIAN ASSISTANTS in the
25 state of Colorado.

26 (d) All shareholders of the corporation ~~shall be~~ ARE persons
27 licensed by the board to practice medicine in the state of Colorado ~~and~~

1 who at all times own their shares in their own right; ~~They~~ EXCEPT THAT
2 ONE OR MORE PERSONS LICENSED BY THE BOARD AS A PHYSICIAN
3 ASSISTANT MAY BE A SHAREHOLDER OF THE CORPORATION AS LONG AS
4 THE PHYSICIAN SHAREHOLDERS MAINTAIN MAJORITY OWNERSHIP OF THE
5 CORPORATION. THE SHAREHOLDERS shall be individuals who, except for
6 illness, accident, time spent in the armed services, on vacations, and on
7 leaves of absence not to exceed one year, are actively engaged in the
8 practice of medicine OR AS A PHYSICIAN ASSISTANT in the offices of the
9 corporation.

10 (g) The articles of incorporation ~~shall provide~~ PROVIDES and all
11 shareholders of the corporation ~~shall~~ agree that all shareholders of the
12 corporation ~~shall be~~ ARE jointly and severally liable for all acts, errors,
13 and omissions of the employees of the corporation or that all shareholders
14 of the corporation ~~shall be~~ ARE jointly and severally liable for all acts,
15 errors, and omissions of the employees of the corporation, except during
16 periods of time when each ~~person licensed by the board to practice~~
17 ~~medicine in Colorado~~ LICENSEE who is a shareholder or any employee of
18 the corporation has a professional liability policy insuring himself or
19 herself and all employees who are not licensed to ~~practice medicine~~
20 PURSUANT TO THIS ARTICLE who act at his or her direction, in the amount
21 of fifty thousand dollars for each claim and an aggregate top limit of
22 liability per year for all claims of one hundred fifty thousand dollars, or
23 the corporation maintains in good standing professional liability insurance
24 ~~which shall meet~~ THAT MEETS the following minimum standards:

25 (I) The insurance ~~shall insure~~ INSURES the corporation against
26 liability imposed upon the corporation by law for damages resulting from
27 any claim made against the corporation arising out of the performance of

1 professional services for others by those officers and employees of the
2 corporation who are licensed by the board to practice medicine
3 LICENSEES.

4 (II) ~~Such~~ THE policies shall insure the corporation against liability
5 imposed upon it by law for damages arising out of the acts, errors, and
6 omissions of all nonprofessional employees.

7 (III) The insurance shall be IS in an amount for each claim of at
8 least fifty thousand dollars multiplied by the number of persons licensed
9 to practice medicine LICENSEES employed by the corporation. The policy
10 may provide for an aggregate top limit of liability per year for all claims
11 of one hundred fifty thousand dollars also multiplied by the number of
12 persons licensed to practice medicine LICENSEES employed by the
13 corporation, but no firm shall be required to carry insurance in excess of
14 three hundred thousand dollars for each claim with an aggregate top limit
15 of liability for all claims during the year of nine hundred thousand dollars.

16 (3) The corporation shall do nothing which THAT, if done by a
17 person licensed to practice medicine in the state of Colorado, LICENSEE
18 employed by it THE CORPORATION, would violate the standards of
19 professional conduct as provided for in section 12-36-117. Any violation
20 OF THIS SECTION by the corporation of this section shall be IS grounds for
21 the board to terminate REVOKE or suspend the LICENSE OF THE person or
22 persons responsible for the violation. from the practice of medicine.

23 (4) Nothing in this section shall be deemed to diminish or change
24 DIMINISHES OR CHANGES the obligation of each person licensed to practice
25 medicine LICENSEE employed by the corporation to conduct his OR HER
26 practice in accordance with the standards of professional conduct
27 provided for in section 12-36-117. Any person licensed by the board to

1 ~~practice medicine~~ LICENSEE who, by act or omission, causes the
2 corporation to act or fail to act in a way ~~which~~ THAT violates ~~such~~ THE
3 standards of professional conduct, including any provision of this section,
4 ~~shall be deemed~~ IS personally responsible for such act or omission and
5 ~~shall be~~ IS subject to discipline ~~therefor~~ FOR THE ACT OR OMISSION.

6 (5) Nothing in this section ~~shall be deemed to modify~~ MODIFIES
7 the physician-patient privilege specified in section 13-90-107 (1) (d),
8 C.R.S.

9 **SECTION 47.** 10-1-120, Colorado Revised Statutes, is amended
10 to read:

11 **10-1-120. Reporting of medical malpractice claims.** (1) Each
12 insurance company licensed to do business in this state and engaged in
13 the writing of medical malpractice insurance for licensed practitioners
14 shall send to the Colorado ~~state~~ MEDICAL board, ~~of medical examiners~~, in
15 the form prescribed by the commissioner of insurance, information
16 relating to each medical malpractice claim against a licensed practitioner
17 that is settled or in which judgment is rendered against the insured.

18 (2) The insurance company shall provide such information as is
19 deemed necessary by the Colorado ~~state~~ MEDICAL board ~~of medical~~
20 ~~examiners~~ to conduct a further investigation and hearing.

21 **SECTION 48.** 10-16-104 (1.4) (a) (II) (A), (1.4) (a) (VIII), and
22 (1.4) (a) (IX), Colorado Revised Statutes, are amended to read:

23 **10-16-104. Mandatory coverage provisions - definitions.**
24 (1.4) **Autism spectrum disorders.** (a) As used in this subsection (1.4),
25 unless the context otherwise requires:

26 (II) "Autism services provider" means any person who provides
27 direct services to a person with autism spectrum disorder, is licensed,

1 certified, or registered by the applicable state licensing board or by a
2 nationally recognized organization, and who meets one of the following:

3 (A) Has a doctoral degree with a specialty in psychiatry, medicine,
4 or clinical psychology, is actively licensed by the ~~state~~ COLORADO
5 MEDICAL board, ~~of medical examiners~~, and has AT LEAST one year of
6 direct experience in behavioral therapies that are consistent with best
7 practice and research on effectiveness for people with autism spectrum
8 disorders;

9 (VIII) "Pharmacy care" means medications prescribed by a
10 physician licensed by the ~~state~~ COLORADO MEDICAL board ~~of medical~~
11 ~~examiners~~ under the "Colorado Medical Practice Act", article 36 of title
12 12, C.R.S.

13 (IX) "Psychiatric care" means direct or consultative services
14 provided by a psychiatrist licensed by the ~~state~~ COLORADO MEDICAL
15 board ~~of medical examiners~~ under the "Colorado Medical Practice Act",
16 article 36 of title 12, C.R.S.

17 **SECTION 49.** 11-70-102, Colorado Revised Statutes, is amended
18 to read:

19 **11-70-102. Title to property of trusts - liability of trust and**
20 **trustees.** The trustees of trusts established pursuant to this article shall
21 hold the legal title to all property at any time belonging to the trusts.
22 They shall have control over such property, as well as the control and
23 management of the business and affairs of the trust. Liability to third
24 persons for any act, omission, or obligation of a trustee of a trust, when
25 acting in such capacity, shall extend to the whole of the trust estate, or so
26 much thereof as may be necessary to discharge such obligation, but no
27 trustee shall be personally liable for any such act, omission, or obligation.

1 The trustees shall have such powers as to the investment of the trust estate
2 as may be set out in the declaration of trust, without regard to the type of
3 investments to which trustees generally are restricted by the provisions of
4 part 8 of article 1 of title 15, C.R.S., nor shall such trustees be subject to
5 the provisions of title 10, C.R.S., concerning the regulation of insurance;
6 except that the trustees shall report any malpractice claim against a
7 licensed practitioner ~~which~~ THAT is settled or in which judgment is
8 rendered against the insured to the Colorado ~~state~~ MEDICAL board, ~~of~~
9 ~~medical examiners~~, which board shall provide statistical data concerning
10 such claims to the commissioner of insurance. Without limiting the
11 generality of the foregoing, the trustees shall have any powers, whether
12 conferred upon them by the agreement of trust or otherwise, to perform
13 all acts necessary or desirable to the conduct of the business of a public
14 liability insurer.

15 **SECTION 50.** 12-22-703 (1) (c), Colorado Revised Statutes, is
16 amended to read:

17 **12-22-703. Advisory committee - duties - repeal.** (1) There is
18 hereby created within the division, the prescription controlled substance
19 abuse monitoring advisory committee. The committee shall consist of the
20 following eleven members:

21 (c) Three physicians appointed by the ~~state~~ COLORADO MEDICAL
22 board, ~~of medical examiners~~, one of which is a pain specialist or addiction
23 specialist;

24 **SECTION 51.** 12-30-101 (5), Colorado Revised Statutes, is
25 amended to read:

26 **12-30-101. Definitions.** As used in this article, unless the context
27 otherwise requires:

1 (5) "Licensed physician or osteopath" means a person licensed to
2 practice medicine under ~~the provisions of~~ article 36 of this title, by the
3 Colorado ~~state~~ MEDICAL board of ~~medical examiners~~ or its successor.

4 **SECTION 52.** 12-32-102 (1), Colorado Revised Statutes, is
5 amended to read:

6 **12-32-102. Podiatry license required - professional liability**
7 **insurance required - exceptions.** (1) It is unlawful for any person to
8 practice podiatry within the state of Colorado who does not hold a license
9 to practice medicine issued by the Colorado ~~state~~ MEDICAL board of
10 ~~medical examiners~~ or a license to practice podiatry issued by the
11 Colorado podiatry board as provided by this article. A podiatry license
12 is not required for a person serving a one-year or two-year approved
13 residency program. Such persons must register with the Colorado
14 podiatry board in such manner and form as ~~such~~ THE board shall
15 prescribe. As used in this section, an "approved residency" is a residency
16 in a hospital conforming to the minimum standards for residency training
17 established or approved by the Colorado podiatry board, which has the
18 authority, upon its own investigation, to approve any residency.

19 **SECTION 53.** 12-32-109.3 (1) and (3), Colorado Revised
20 Statutes, are amended to read:

21 **12-32-109.3. Use of physician assistants.** (1) A person licensed
22 under the laws of this state to practice podiatry may delegate to a
23 physician assistant licensed by the Colorado ~~state~~ MEDICAL board of
24 ~~medical examiners~~ pursuant to ~~section 12-36-106 (5)~~ SECTION
25 12-36-107.3 the authority to perform acts ~~which~~ THAT constitute the
26 practice of podiatry to the extent and in the manner authorized by rules
27 ~~and regulations~~ promulgated by the Colorado podiatry board, including

1 the authority to prescribe, on a case-by-case basis and per-patient-visit
2 basis as approved by the supervising podiatrist, and dispense only such
3 drugs as designated by the Colorado podiatry board. Such acts shall be
4 consistent with sound practices of podiatry. Each prescription issued by
5 a physician assistant shall have imprinted thereon the name of his OR HER
6 supervising podiatrist, and under no circumstances shall a physician
7 assistant write prescriptions unless countersigned by the supervising
8 podiatrist. Nothing in this section shall limit the ability of otherwise
9 licensed health personnel to perform delegated acts. The dispensing of
10 prescription medication by a physician assistant shall be subject to ~~the~~
11 ~~provisions of~~ section 12-22-121 (6).

12 (3) The provisions ~~set forth in section~~ OF SECTIONS 12-36-106 (5)
13 ~~which govern~~ AND 12-36-107.3 GOVERNING physician assistants under the
14 "Colorado Medical Practice Act" shall apply to physician assistants under
15 this section.

16 **SECTION 54.** 12-32-119, Colorado Revised Statutes, is amended
17 to read:

18 **12-32-119. Existing licenses and proceedings.** (1) Nothing in
19 the act contained in chapter 105, Session Laws of Colorado 1979, shall
20 be construed to invalidate the license of any person holding a valid,
21 unrevoked, and unsuspended license on June 30, 1979, to practice
22 podiatry in this state or to affect any disciplinary proceeding or appeal
23 pending on June 30, 1979, or any appointment to the Colorado ~~state~~
24 ~~MEDICAL board of medical examiners~~ or the Colorado podiatry board or
25 an inquiry panel or hearings panel thereof made on or before June 30,
26 1979.

27 (2) Nothing in the act contained in chapter 107, Session Laws of

1 Colorado 1985, shall be construed to invalidate the license of any person
2 holding a valid, unrevoked, and unsuspended license on June 30, 1985,
3 to practice podiatry in this state or to affect any disciplinary proceeding
4 or appeal pending on June 30, 1985, or any appointment to the Colorado
5 state MEDICAL board of medical examiners or the Colorado podiatry board
6 or any inquiry panel or hearings panel thereof made on or before June 30,
7 1985.

8 **SECTION 55.** 12-36-106.5, Colorado Revised Statutes, is
9 amended to read:

10 **12-36-106.5. Child health associates - scope of practice.** On
11 and after July 1, 1990, any person who, on June 30, 1990, was certified
12 only as a child health associate under the laws of this state shall, upon
13 application to the board, be granted licensure as a physician assistant.
14 The practice of any such person shall be subject to ~~the provisions of~~
15 section 12-36-106 (5) AND 12-36-107.3; except that such practice shall be
16 limited to patients under the age of twenty-one.

17 **SECTION 56.** 12-36-114 (1), Colorado Revised Statutes, is
18 amended to read:

19 **12-36-114. Issuance of licenses - prior practice prohibited.**
20 (1) If the board determines that an applicant possesses the qualifications
21 required by this article, ~~and is entitled thereto~~ the board shall issue TO THE
22 APPLICANT a license to practice medicine. ~~which shall be signed by the~~
23 ~~president or vice-president, attested by the secretary, and sealed with the~~
24 ~~seal of the board.~~

25 **SECTION 57. Repeal.** 12-36-124, Colorado Revised Statutes,
26 is repealed as follows:

27 **12-36-124. Certification of licensing.** ~~Upon request therefor and~~

1 ~~the payment of a fee determined pursuant to section 24-34-105, C.R.S.,~~
2 ~~the secretary of the board shall issue its certificate or endorsement with~~
3 ~~respect to the licensing of, and the official record of the board relating to,~~
4 ~~any licensee to whom a license has been issued by this or any prior board;~~
5 ~~and, upon request therefor and the payment of a fee determined pursuant~~
6 ~~to section 24-34-105, C.R.S., the secretary shall issue a certificate~~
7 ~~evidencing that any such licensee is duly licensed.~~

8 **SECTION 58.** 12-36-201 (2), Colorado Revised Statutes, is
9 amended to read:

10 **12-36-201. Legislative declaration.** (2) It is the intent of the
11 general assembly that physicians licensed to practice medicine utilizing
12 unlicensed persons in their practices provide those persons with a
13 minimum level of education and training before allowing them to operate
14 machine sources of ionizing radiation; however, it is not the general
15 assembly's intent to discourage education and training beyond this
16 minimum. It is further the intent of the general assembly that established
17 minimum training and education requirements correspond as closely as
18 possible to the requirements of each particular work setting as determined
19 by the Colorado state MEDICAL board of medical examiners pursuant to
20 this part 2.

21 **SECTION 59.** 12-36-202 (1) (a), Colorado Revised Statutes, is
22 amended to read:

23 **12-36-202. Board authorized to issue rules.** (1) (a) The
24 Colorado state MEDICAL board of medical examiners shall adopt rules and
25 regulations prescribing minimum standards for the qualifications,
26 education, and training of unlicensed persons operating machine sources
27 of ionizing radiation and administering such radiation to patients for

1 diagnostic medical use. No licensed physician shall allow any unlicensed
2 person to operate any machine source of ionizing radiation or to
3 administer any such radiation to any patient unless such person has met
4 the standards then in effect under rules ~~and regulations~~ adopted pursuant
5 to this section. The board may adopt rules ~~and regulations~~ allowing a
6 grace period in which newly hired operators of machine sources of
7 ionizing radiation shall receive the training required pursuant to this
8 section.

9 **SECTION 60.** 12-36.5-101, Colorado Revised Statutes, is
10 amended to read:

11 **12-36.5-101. Legislative declaration.** (1) The general assembly
12 hereby finds, determines, and declares that the Colorado ~~state~~ MEDICAL
13 board ~~of medical examiners~~ created pursuant to article 36 of this title acts
14 for the state in its sovereign capacity to govern licensure, discipline, and
15 professional review of persons licensed to practice medicine in this state.
16 The general assembly further finds, determines, and declares that the
17 authority to practice medicine in this state is a privilege granted by the
18 legislative authority of the state and that it is necessary for the health,
19 safety, and welfare of the people of this state that the COLORADO
20 MEDICAL board ~~of medical examiners~~ exercise its authority to protect the
21 people of this state from the unauthorized practice of medicine and from
22 unprofessional conduct by persons licensed to practice medicine under
23 article 36 of this title.

24 (2) The general assembly recognizes that: Many patients of
25 persons licensed to practice medicine in this state have restricted choices
26 of physicians under a variety of circumstances and conditions; many
27 patients lack the knowledge, experience, or education to properly evaluate

1 the quality of medical practice or the professional conduct of those
2 licensed to practice medicine; and it is necessary and proper that the
3 COLORADO MEDICAL board of ~~medical examiners~~ exercise its regulatory
4 authority to protect the health, safety, and welfare of the people of this
5 state.

6 (3) The general assembly recognizes that, in the proper exercise
7 of its authority and responsibilities under this article, the COLORADO
8 MEDICAL board of ~~medical examiners~~ must, to some extent, replace
9 competition with regulation and that such replacement of competition by
10 regulation particularly with regard to physicians, is related to a legitimate
11 state interest in the protection of the health, safety, and welfare of the
12 people of this state.

13 **SECTION 61.** 12-36.5-102 (1), Colorado Revised Statutes, is
14 amended to read:

15 **12-36.5-102. Definitions.** As used in this article, unless the
16 context otherwise requires:

17 (1) "~~Board of medical examiners~~" "MEDICAL BOARD" means the
18 Colorado state MEDICAL board of ~~medical examiners~~ created pursuant to
19 section 12-36-103.

20 **SECTION 62.** 12-36.5-103 (1) and (3) (a), Colorado Revised
21 Statutes, are amended to read:

22 **12-36.5-103. Use of professional review committees.** (1) The
23 general assembly recognizes that the MEDICAL board, of ~~medical~~
24 ~~examiners~~, while assuming and retaining ultimate authority for licensure
25 and discipline in accordance with article 36 of this title and in accordance
26 with this article, cannot practically and economically assume
27 responsibility over every single allegation or instance of purported

1 deviation from the standards of quality for the practice of medicine, from
2 the standards of professional conduct, or from the standards of
3 appropriate care and that an attempt to exercise such oversight would
4 result in extraordinary delays in the determination of the legitimacy of
5 such allegations and would result in the inappropriate and unequal
6 exercise of its authority to license and discipline physicians. It is
7 therefore the intent of the general assembly that the MEDICAL board of
8 ~~medical examiners~~ utilize and allow professional review committees and
9 governing boards to assist it in meeting its responsibilities under article
10 36 of this title and under this article.

11 (3) (a) The use of professional review committees is declared to
12 be an extension of the authority of the MEDICAL board. ~~of medical~~
13 ~~examiners~~. However, except as otherwise provided in this article, nothing
14 in this article shall limit the authority of professional review committees
15 properly constituted under this article.

16 **SECTION 63.** The introductory portion to 12-36.5-104 (4) and
17 12-36.5-104 (4) (d), (4) (f), (5), (6) (a) (I), (7) (f), (9), and (11), Colorado
18 Revised Statutes, are amended to read:

19 **12-36.5-104. Establishment of professional review committees**
20 **- function - rules.** (4) Any professional review committee established
21 by any of the following organizations, entities, or professional societies
22 shall be an approved professional review committee under this article if
23 it operates pursuant to written bylaws, policies, or procedures ~~which~~ THAT
24 are in compliance with this article and ~~which~~ THAT have been approved
25 by its governing board:

26 (d) A society or association of physicians licensed to practice and
27 residing in this state and specializing in a specific discipline of medicine,

1 whose society or association has been designated by the MEDICAL board
2 of ~~medical examiners~~ as the specialty society or association representative
3 of physicians practicing such specific discipline of medicine, if the
4 physician whose services are the subject of the review is a member of
5 such specialty society or association;

6 (f) A corporation authorized to insure physicians pursuant to
7 article 3 of title 10, C.R.S., or any other corporation authorized to insure
8 such physicians in this state when designated by the MEDICAL board of
9 ~~medical examiners~~ under subsection (5) of this section;

10 (5) The MEDICAL board of ~~medical examiners~~ may establish by
11 rule or ~~regulation~~ procedures necessary to authorize other health care or
12 physician organizations or professional societies to establish professional
13 review committees.

14 (6) (a) A professional review committee acting pursuant to this
15 part 1 may investigate or cause to be investigated:

16 (I) The qualifications of any physician licensed under article 36
17 of this title who seeks to subject himself OR HERSELF to the authority of
18 any organization, entity, or professional society listed in subsection (4) of
19 this section or any organization or professional society ~~which~~ THAT has
20 been authorized by the MEDICAL board of ~~medical examiners~~ to establish
21 a professional review committee pursuant to subsection (5) of this
22 section; or

23 (7) The written bylaws, policies, or procedures of any professional
24 review committee shall provide for at least the following:

25 (f) A copy of any recommendations made pursuant to paragraph
26 (d) of this subsection (7) shall be promptly forwarded to the MEDICAL
27 board. of ~~medical examiners~~.

1 (9) All governing boards ~~which~~ THAT are required to report their
2 final actions to the MEDICAL board ~~of medical examiners~~ are not
3 otherwise relieved of such obligations by virtue of any provision of this
4 article.

5 (11) At the request of the MEDICAL board, ~~of medical examiners,~~
6 a governing board shall provide the MEDICAL board ~~of medical examiners~~
7 with the complete record of all professional review proceedings,
8 including, but not limited to, the findings, recommendations, and actions
9 taken.

10 **SECTION 64.** 12-36.5-104.4 (3), Colorado Revised Statutes, is
11 amended to read:

12 **12-36.5-104.4. Hospital professional review committees.**

13 (3) Nothing in this section shall be deemed to extend the authority or
14 jurisdiction of the MEDICAL board ~~of medical examiners~~ to any individual
15 not otherwise subject to the jurisdiction of the board.

16 **SECTION 65.** 12-36.5-106 (1), (2), (9) (n), and (10) (b),
17 Colorado Revised Statutes, are amended to read:

18 **12-36.5-106. Committee on anticompetitive conduct.** (1) There
19 ~~shall be~~ IS HEREBY established a permanent, independent committee of the
20 MEDICAL board, ~~of medical examiners~~ to be known as the committee on
21 anticompetitive conduct, ALSO referred to in this section as "the
22 committee".

23 (2) The committee shall be composed of five persons, none of
24 whom shall be a member of the MEDICAL board. ~~of medical examiners.~~
25 Four members of the committee shall be licensed to practice medicine and
26 actively engaged in the practice of medicine in this state and shall be
27 appointed by the MEDICAL board. ~~of medical examiners.~~ No member

1 shall practice in the same medical subspecialty as any other member nor
2 conduct his OR HER primary practice in the same county as any other
3 member. One member shall be appointed by the governor and shall be an
4 attorney licensed to practice in this state who has particular expertise and
5 experience in the area of antitrust law.

6 (9) Review by the committee shall be in accordance with the
7 following procedures and, to the extent practicable, in accordance with
8 the procedures used in the district courts of this state:

9 (n) In any case presented to the committee where the medical
10 practice of the complainant constitutes a clear and present danger to
11 patients, the committee shall refer the case to the MEDICAL board of
12 ~~medical examiners~~ for such action as the board deems appropriate.

13 (10) (b) Following final administrative action by the committee,
14 any party aggrieved by the final action of a governing board who wishes
15 to challenge the action of such governing board, rather than the
16 committee's review of such action, shall have the right to seek de novo
17 review on the merits in a district court in Colorado. In no event shall the
18 MEDICAL board of ~~medical examiners~~ or the committee be made parties
19 to such a district court action.

20 **SECTION 66.** 12-36.5-202, Colorado Revised Statutes, is
21 amended to read:

22 **12-36.5-202. Rules - compliance with reporting requirements**
23 **of federal act.** Upon implementation of the federal "Health Care Quality
24 Improvement Act of 1986", as amended, 42 U.S.C. secs. 11101 through
25 11152, and upon implementation of the federal data bank, the MEDICAL
26 board of ~~medical examiners~~ shall promulgate rules and regulations to
27 comply with such act, which rules and regulations are consistent with the

1 standards and the reporting requirements of such act.

2 **SECTION 67.** 12-38-111.6 (4) (d) (III) and (7), Colorado
3 Revised Statutes, are amended to read:

4 **12-38-111.6. Prescriptive authority - advanced practice nurses**
5 **- rules - repeal.** (4) An advanced practice nurse applying for
6 prescriptive authority before July 1, 2010, shall provide evidence to the
7 board of the following:

8 (d) (III) The nurse shall provide to the board the name and
9 appropriate identifier of the physician and shall keep such information
10 current with the board. This information shall also be available to the
11 COLORADO MEDICAL board, ~~of medical examiners~~, the board of pharmacy,
12 and, except for identification numbers granted by the drug enforcement
13 administration, to the general public. The nurse and collaborating
14 physician shall advise each other of collaborative agreements signed with
15 other parties.

16 (7) An advanced practice nurse who obtains prescriptive authority
17 pursuant to this section shall be assigned a specific identifier by the
18 board. This identifier shall be available to the COLORADO MEDICAL board
19 ~~of medical examiners~~ and the board of pharmacy. The board shall
20 establish a mechanism to assure that the prescriptive authority of an
21 advanced practice nurse may be readily verified.

22 **SECTION 68.** 13-4-102 (2) (f), Colorado Revised Statutes, is
23 amended to read:

24 **13-4-102. Jurisdiction.** (2) The court of appeals shall have
25 initial jurisdiction to:

26 (f) Review actions of the ~~state~~ COLORADO MEDICAL board ~~of~~
27 ~~medical examiners~~ in refusing to grant or in revoking or suspending a

1 license or in placing the holder thereof on probation, as provided in
2 section 12-36-119, C.R.S.;

3 **SECTION 69.** 13-64-302.5 (1), Colorado Revised Statutes, is
4 amended to read:

5 **13-64-302.5. Exemplary damages - legislative declaration -**
6 **limitations - distribution of damages collected.** (1) The general
7 assembly hereby finds, determines, and declares that it is in the public
8 interest to establish a consistent and uniformly applicable standard for the
9 determination, amount, imposition, and distribution of exemplary
10 monetary damages arising from civil actions and arbitration proceedings
11 alleging professional negligence in the practice of medicine. It is the
12 intent of the general assembly that any such exemplary damages serve the
13 public purposes of deterring negligent acts and where appropriate provide
14 a form of punishment that is in addition to the disciplinary and licensing
15 sanctions available to the ~~state~~ COLORADO MEDICAL board. ~~of medical~~
16 ~~examiners.~~

17 **SECTION 70.** The introductory portion to 13-90-107 (1) (d) and
18 13-90-107 (1) (d) (III) (C), and (2), Colorado Revised Statutes, are
19 amended to read:

20 **13-90-107. Who may not testify without consent.** (1) There are
21 particular relations in which it is the policy of the law to encourage
22 confidence and to preserve it inviolate; therefore, a person shall not be
23 examined as a witness in the following cases:

24 (d) A physician, surgeon, or registered professional nurse duly
25 authorized to practice his OR HER profession pursuant to the laws of this
26 state or any other state shall not be examined without the consent of his
27 OR HER patient as to any information acquired in attending the patient

1 ~~which~~ THAT was necessary to enable him OR HER to prescribe or act for
2 the patient, but this paragraph (d) shall not apply to:

3 (III) A review of a physician's or registered professional nurse's
4 services by any of the following:

5 (C) The ~~state~~ COLORADO MEDICAL board, ~~of medical examiners,~~
6 the state board of nursing, or a person or group authorized by such board
7 to make an investigation in its behalf;

8 (2) The medical records produced for use in the review provided
9 for in subparagraphs (III), (IV), and (V) of paragraph (d) of subsection (1)
10 of this section shall not become public records by virtue of such use. The
11 identity of any patient whose records are so reviewed shall not be
12 disclosed to any person not directly involved in such review process, and
13 procedures shall be adopted by the ~~state~~ COLORADO MEDICAL board ~~of~~
14 ~~medical examiners~~ or state board of nursing to ensure that the identity of
15 the patient shall be concealed during the review process itself.

16 **SECTION 71.** 17-1-101 (3) (b), Colorado Revised Statutes, is
17 amended to read:

18 **17-1-101. Executive director - creation - division heads -**
19 **medical personnel.** (3) (b) All such personnel as cannot satisfy all of
20 the requirements set forth in paragraph (a) of this subsection (3) shall be
21 exempt from ~~the provisions of~~ the "Colorado Medical Practice Act",
22 article 36 of title 12, C.R.S., with respect to services rendered to bona fide
23 patients or inmates at said institutions, if such personnel are of good
24 moral character, are graduates of an approved medical college as defined
25 in section ~~12-36-108~~ 12-36-102.5, C.R.S., have completed an approved
26 internship of at least one year as defined in section ~~12-36-109~~
27 12-36-102.5, C.R.S., and, within ~~a period of~~ nine months ~~of their~~

1 ~~employment~~ AFTER FIRST BEING EMPLOYED, pass the examinations
2 approved by the Colorado ~~state~~ MEDICAL board ~~of medical examiners~~
3 under the provisions of the "Colorado Medical Practice Act" and the
4 national board of medical examiners, the national board of examiners for
5 osteopathic physicians and surgeons, or the federation of state medical
6 boards, OR THEIR SUCCESSOR ORGANIZATIONS, on subjects relating to the
7 basic sciences, are able to read, write, speak, and understand the English
8 language, and, in the case of personnel who are not citizens of the United
9 States, become ~~such~~ citizens within the minimum period of time within
10 which the particular individual can become a citizen according to the laws
11 of the United States and the regulations of the immigration and
12 naturalization service of the United States department of justice or within
13 such additional time as may be granted by said boards.

14 **SECTION 72.** 17-1-103 (3) (a) (III), Colorado Revised Statutes,
15 is amended to read:

16 **17-1-103. Duties of the executive director.** (3) (a) (III) The
17 executive director shall determine the qualifications for appointment to
18 the panel of medical consultants; except that all members of the panel
19 shall be licensed by the ~~state~~ COLORADO MEDICAL board ~~of medical~~
20 ~~examiners~~ pursuant to ~~the provisions of~~ article 36 of title 12, C.R.S., or
21 the state board of dental examiners pursuant to ~~the provisions of~~ article
22 35 of title 12, C.R.S.

23 **SECTION 73.** 17-2-201 (5.7) (d), Colorado Revised Statutes, is
24 amended to read:

25 **17-2-201. State board of parole.** (5.7) If, as a condition of
26 parole, an offender is required to undergo counseling or treatment, unless
27 the parole board determines that treatment at another facility or with

1 another person is warranted, such treatment or counseling shall be at a
2 facility or with a person:

3 (d) Licensed or certified by the division of adult services in the
4 department of corrections, the department of regulatory agencies, the
5 division of mental health in the department of human services, the state
6 board of nursing, or the ~~state~~ COLORADO MEDICAL board, ~~of medical~~
7 ~~examiners~~, whichever is appropriate for the required treatment or
8 counseling.

9 **SECTION 74.** 17-27.1-101 (5) (a) (IV), Colorado Revised
10 Statutes, is amended to read:

11 **17-27.1-101. Nongovernmental facilities for offenders -**
12 **registration - notifications - penalties.** (5) No private treatment
13 program in Colorado shall admit or accept a supervised or unsupervised
14 person into the program unless that program:

15 (a) Is registered with the administrator of the interstate compact,
16 and, if the person is a supervised person, the private treatment program
17 is:

18 (IV) Licensed or certified by the division of adult services in the
19 department of corrections, the department of regulatory agencies, the
20 division of mental health in the department of human services, the state
21 board of nursing, or the ~~state~~ COLORADO MEDICAL board ~~of medical~~
22 ~~examiners~~ if the program provides treatment that requires such
23 certification or licensure;

24 **SECTION 75.** 18-1.3-204 (2) (c) (IV), Colorado Revised
25 Statutes, is amended to read:

26 **18-1.3-204. Conditions of probation.** (2) (c) If the court orders
27 counseling or treatment as a condition of probation, unless the court

1 makes a specific finding that treatment in another facility or with another
2 person is warranted, the court shall order that such treatment or
3 counseling be at a facility or with a person:

4 (IV) Licensed or certified by the division of adult services in the
5 department of corrections, the department of regulatory agencies, the
6 division of mental health in the department of human services, the state
7 board of nursing, or the ~~state~~ COLORADO MEDICAL board, ~~of medical~~
8 ~~examiners~~, whichever is appropriate for the required treatment or
9 counseling.

10 **SECTION 76.** 18-18-103, Colorado Revised Statutes, is amended
11 to read:

12 **18-18-103. Special definition - board.** As used in parts 1 and 2
13 of this article, "board" means the state board of pharmacy. As used in
14 parts 3, 4, 5, and 6 of this article, "board" means the respective licensing
15 board responsible for licensing and registering practitioners or other
16 persons who are subject to registration pursuant to part 3 of this article.
17 For physicians the respective board is the Colorado ~~state~~ MEDICAL board,
18 ~~of medical examiners~~, for podiatrists the respective board is the Colorado
19 podiatry board, for dentists the respective board is the state board of
20 dental examiners, for optometrists the respective board is the state board
21 of optometric examiners, for pharmacists and pharmacies the respective
22 board is the state board of pharmacy, for veterinarians the respective
23 board is the state board of veterinary medicine, and for manufacturers,
24 distributors, and humane societies the respective board is the state board
25 of pharmacy.

26 **SECTION 77.** 18-18-302 (1), Colorado Revised Statutes, is
27 amended to read:

1 **18-18-302. Registration requirements.** (1) Every person who
2 manufactures, distributes, or dispenses any controlled substance within
3 this state, or who proposes to engage in the manufacture, distribution, or
4 dispensing of any controlled substance within this state, shall obtain
5 annually or biannually, if applicable, a registration, issued by the
6 respective licensing board or the department in accordance with rules
7 adopted by such board or by the department. For purposes of this section
8 and this article, "registration" or "registered" means the licensing of
9 manufacturers, pharmacists, pharmacies, and humane societies located in
10 this state, and distributors located in or doing business in this state, by the
11 state board of pharmacy as set forth in parts 1 and 3 of article 22 of title
12 12, C.R.S., the licensing of physicians by the ~~state~~ COLORADO MEDICAL
13 board, ~~of medical examiners~~, as set forth in article 36 of title 12, C.R.S.,
14 the licensing of podiatrists by the Colorado podiatry board, as set forth in
15 article 32 of title 12, C.R.S., the licensing of dentists by the state board of
16 dental examiners, as set forth in article 35 of title 12, C.R.S., the licensing
17 of optometrists by the state board of optometric examiners, as set forth in
18 article 40 of title 12, C.R.S., the licensing of veterinarians by the state
19 board of veterinary medicine, as set forth in article 64 of title 12, C.R.S.,
20 and the licensing of researchers and addiction programs by the
21 department of human services, as set forth in part 3 of article 22 of title
22 12, C.R.S.

23 **SECTION 78.** 23-20-114 (1), Colorado Revised Statutes, is
24 amended to read:

25 **23-20-114. Employment of medical personnel.** (1) The board
26 of regents of the university of Colorado has authority to employ medical
27 personnel WHO ARE not citizens of the United States at the university of

1 Colorado health sciences center, the university of Colorado psychiatric
2 hospital, and the medical division of the graduate school of the university
3 of Colorado. Medical personnel who are not citizens of the United States
4 are exempt from the licensure requirements of the "Colorado Medical
5 Practice Act", article 36 of title 12, C.R.S., with respect to services
6 performed in the course of such employment, but such personnel shall
7 first comply with all other requirements of said act, which includes the
8 taking and passing of examinations approved by the ~~state~~ COLORADO
9 MEDICAL board ~~of medical examiners~~ and by the national board of
10 medical examiners, the national board of examiners for osteopathic
11 physicians and surgeons, or the federation of state medical boards, OR
12 THEIR SUCCESSOR ORGANIZATIONS, on subjects relating to the basic
13 sciences as provided by law within three months ~~of~~ AFTER the date of
14 employment unless such examinations are not required by ~~the provisions~~
15 ~~of~~ section 12-36-107 (1) (b), ~~or (1) (d)~~, C.R.S. Such exemptions from
16 licensure or provisions in this section provided for such personnel who
17 are not citizens of the United States shall continue only during the
18 minimum period of time within which the particular individual can
19 become a citizen according to the laws of the United States and the
20 regulations of the immigration and naturalization service of the United
21 States department of justice or such additional time ~~thereto~~ as may be
22 granted by such boards. The exemptions in this section are limited to
23 services performed in the course of employment with the university of
24 Colorado as limited in this section and shall terminate when such
25 employment terminates.

26 **SECTION 79.** 24-1-122 (3) (m) (I), Colorado Revised Statutes,
27 is amended to read:

1 **24-1-122. Department of regulatory agencies - creation.**

2 (3) The following boards and agencies are transferred by a **type 1**
3 transfer to the department of regulatory agencies and allocated to the
4 division of registrations:

5 (m) (I) Colorado ~~state~~ MEDICAL board, ~~of medical examiners~~,
6 created by article 36 of title 12, C.R.S.;

7 **SECTION 80.** 24-34-109 (1) (d) (I), (2) (a) (II), and (6) (a),
8 Colorado Revised Statutes, are amended to read:

9 **24-34-109. Nurse-physician advisory task force for Colorado**
10 **health care - creation - duties - definition - repeal.** (1) There is hereby
11 created, within the division of registrations in the department of
12 regulatory agencies, the nurse-physician advisory task force for Colorado
13 health care, referred to in this section as "NPATCH". The purpose of
14 NPATCH is to promote public safety and improve health care in
15 Colorado by supporting collaboration and communication between the
16 practices of nursing and medicine. The NPATCH shall:

17 (d) Make consensus recommendations to policy-making and
18 rule-making entities, including:

19 (I) Recommendations to the state board of nursing created in
20 section 12-38-104, C.R.S., and the Colorado ~~state~~ MEDICAL board ~~of~~
21 ~~medical examiners~~ created in section 12-36-103, C.R.S., regarding the
22 transition to the articulated plan model and harmonizing language for
23 articulated plans; and

24 (2) (a) The NPATCH shall consist of twelve members appointed
25 as follows:

26 (II) One member of the ~~state~~ COLORADO MEDICAL board, ~~of~~
27 ~~medical examiners~~, appointed by the president of the board;

1 (6) (a) The NPATCH shall make recommendations to the state
2 board of nursing and the ~~state~~ COLORADO MEDICAL board of ~~medical~~
3 ~~examiners~~ to assist the boards in the development of independent rules,
4 consistent with sections 12-38-111.6 (4.5) and 12-36-106.4, C.R.S.,
5 regarding prescriptive authority of advanced practice nurses, articulated
6 plans, and the consultation or collaboration between advanced practice
7 nurses and physicians.

8 **SECTION 81.** 24-60-3101, Colorado Revised Statutes, is
9 amended to read:

10 **24-60-3101. Legislative declaration.** The general assembly
11 hereby finds that a lack of access to quality, affordable health care
12 services is an increasing problem, both in Colorado and nationwide, and
13 contributes to the spiraling costs of health care for individuals and
14 businesses. This problem could be alleviated by greater interstate
15 cooperation among, and mobility of, medical professionals through the
16 use of telemedicine and other means. Therefore, it is desirable to
17 authorize the executive director of the department of regulatory agencies,
18 together with the ~~state~~ COLORADO MEDICAL board of ~~medical~~ ~~examiners~~
19 created in section 12-36-103, C.R.S., and the state board of nursing
20 created in section 12-38-104, C.R.S., and in consultation with
21 representatives of other relevant state agencies, to negotiate one or more
22 interstate compacts endorsing model legislation to facilitate the efficient
23 distribution of health care services across state lines.

24 **SECTION 82.** The introductory portion to 24-60-3103 (1),
25 Colorado Revised Statutes, is amended to read:

26 **24-60-3103. Model legislation - compacts authorized.** (1) The
27 executive director, together with the ~~state~~ COLORADO MEDICAL board of

1 ~~medical examiners~~ created in section 12-36-103, C.R.S., and the state
2 board of nursing created in section 12-38-104, C.R.S., and in consultation
3 with the executive director of the department of health care policy and
4 financing or his or her designee, the executive director of the department
5 of public health and environment or his or her designee, and
6 representatives of other state agencies whose participation the executive
7 director deems beneficial, is hereby authorized to develop, participate in
8 the development of, and negotiate for one or more interstate compacts on
9 behalf of the state of Colorado with other states and to recommend model
10 legislation that, if adopted in the respective signatory states, would
11 advance the following policy goals:

12 **SECTION 83.** 25-1-108.7 (6) (c), Colorado Revised Statutes, is
13 amended to read:

14 **25-1-108.7. Health care credentials uniform application act -**
15 **legislative declaration - definitions - state board of health rules.**

16 (6) (c) The review committee shall be staffed by an entity approved by
17 the COLORADO MEDICAL board of ~~medical examiners~~ to collect medical
18 license registration fees pursuant to section 12-36-123.5, C.R.S.

19 **SECTION 84.** 25-3-107, Colorado Revised Statutes, is amended
20 to read:

21 **25-3-107. Disciplinary actions reported to Colorado medical**
22 **board or podiatry board.** (1) Any disciplinary action to suspend,
23 revoke, or otherwise limit the privileges of a licensed physician or
24 podiatrist ~~which~~ THAT is taken by the governing board of a hospital
25 required to be licensed or certified pursuant to this part 1 or required to
26 obtain a certificate of compliance pursuant to section 25-1.5-103 (1) (a)
27 (I) or (1) (a) (II) shall be reported to the Colorado ~~state~~ MEDICAL board of

1 ~~medical examiners~~ or the Colorado podiatry board, whichever board is
2 appropriate, in the form prescribed by said board.

3 (2) Said hospital shall provide such additional information as is
4 deemed necessary by the Colorado ~~state~~ MEDICAL board ~~of medical~~
5 ~~examiners~~ or the Colorado podiatry board to conduct a further
6 investigation and hearing.

7 **SECTION 85.** 27-1-102 (2) (c), Colorado Revised Statutes, is
8 amended to read:

9 **27-1-102. Executive director - division heads - interagency**
10 **council - advisory boards.** (2) (c) All such personnel as cannot satisfy
11 all of the requirements set forth in paragraph (b) of this subsection (2)
12 shall be exempt from ~~the provisions of the "Colorado Medical Practice~~
13 ~~Act"~~, article 36 of title 12, C.R.S., with respect to services rendered to
14 bona fide patients or inmates at said institutions, if such personnel are of
15 good moral character, are graduates of an approved medical college as
16 defined in section ~~12-36-108~~ 12-36-102.5, C.R.S., have completed an
17 approved internship of at least one year as defined in section ~~12-36-109~~
18 12-36-102.5, C.R.S., and, within ~~a period of~~ nine months ~~of their~~
19 ~~employment~~ AFTER FIRST BEING EMPLOYED, pass the examinations
20 approved by the Colorado ~~state~~ MEDICAL board ~~of medical examiners~~
21 under ~~the provisions of the "Colorado Medical Practice Act"~~ and the
22 national board of medical examiners, the national board of examiners for
23 osteopathic physicians and surgeons, or the federation of state medical
24 boards, OR THEIR SUCCESSOR ORGANIZATIONS, on subjects relating to the
25 basic sciences, are able to read, write, speak, and understand the English
26 language, and, in the case of personnel who are not citizens of the United
27 States, become ~~such~~ citizens within the minimum period of time within

1 which the particular individual can become a citizen according to the laws
2 of the United States and the regulations of the immigration and
3 naturalization service of the United States department of justice or within
4 such additional time as may be granted by said boards.

5 **SECTION 86.** 27-1-103 (3) (a) (III), Colorado Revised Statutes,
6 is amended to read:

7 **27-1-103. Duties of executive director - governor acquire**
8 **water rights - rules.** (3) (a) (III) The executive director shall determine
9 the qualifications for appointment to the board of medical consultants;
10 except that all members of the board shall be licensed by the state
11 COLORADO MEDICAL board of ~~medical examiners~~ pursuant to the
12 ~~provisions of~~ article 36 of title 12, C.R.S.

13 **SECTION 87. Specified effective date.** This act shall take effect
14 July 1, 2010.

15 **SECTION 88. Safety clause.** The general assembly hereby finds,
16 determines, and declares that this act is necessary for the immediate
17 preservation of the public peace, health, and safety.