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HOUSE BILL 10-1260

BY REPRESENTATIVE(S) Riesberg and Acree, Gerou, Kefalas, Roberts, Tyler, Court, Fischer, Kerr J., Labuda, Massey, McFadyen, Nikkel, Schafer S., Stephens, Todd, Vigil, Bradford;  
also SENATOR(S) Boyd and Newell, Tochtrop, Williams.

CONCERNING THE SUNSET REVIEW OF THE COLORADO STATE BOARD OF MEDICAL EXAMINERS, AND, IN CONNECTION THEREWITH, CONTINUING THE BOARD AND THE REGULATION OF PHYSICIANS AND PHYSICIAN ASSISTANTS UNTIL JULY 1, 2019, AND IMPLEMENTING THE RECOMMENDATIONS CONTAINED IN THE SUNSET REVIEW AND REPORT OF THE BOARD, AND MAKING AN APPROPRIATION THEREFOR.

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

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

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 Colorado medical board - immunity - subject to termination - repeal of article.** (6) (b) This article is repealed, effective July 1, ~~2010~~ 2019.

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 Repeal.** 24-34-104 (41) (b) (I), Colorado Revised Statutes, is repealed as follows:

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*Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.*

**24-34-104. General assembly review of regulatory agencies and functions for termination, continuation, or reestablishment.** (41) The following agencies, functions, or both, shall terminate on July 1, 2010:

(b) The following boards in the division of registrations in the department of regulatory agencies:

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

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

**24-34-104. General assembly review of regulatory agencies and functions for termination, continuation, or reestablishment.** (50) The following agencies, functions, or both, shall terminate on July 1, 2019:

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

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

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 Repeal of article.** THIS ARTICLE IS REPEALED, EFFECTIVE JULY 1, 2012.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

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

**24-34-104. General assembly review of regulatory agencies and functions for termination, continuation, or reestablishment.** (43) The following agencies, functions, or both, shall terminate on July 1, 2012:

(g) THE FUNCTIONS OF PROFESSIONAL REVIEW COMMITTEES PURSUANT TO ARTICLE 36.5 OF TITLE 12, C.R.S.;

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

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

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

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

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

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

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

**25-3.5-203. Emergency medical technicians - certification - renewal of certificate - duties of department - rules - criminal history record checks - repeal.** (1) (a) (I) PRIOR TO JANUARY 1, 2011, the duties and functions of emergency medical technicians, including the acts that they are authorized to perform subject to the medical direction of a licensed physician, shall be regulated by rules adopted by the Colorado state MEDICAL board. ~~of medical examiners.~~ The council shall advise and make recommendations to said board concerning such rules before final adoption.

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

(a.5) ON AND AFTER JANUARY 1, 2011, THE EXECUTIVE DIRECTOR OR CHIEF MEDICAL OFFICER SHALL REGULATE THE ACTS EMERGENCY MEDICAL

TECHNICIANS ARE AUTHORIZED TO PERFORM SUBJECT TO THE MEDICAL DIRECTION OF A LICENSED PHYSICIAN. THE EXECUTIVE DIRECTOR OR CHIEF MEDICAL OFFICER, AFTER CONSIDERING THE ADVICE AND RECOMMENDATIONS OF THE ADVISORY COUNCIL, SHALL ADOPT AND REVISE RULES, AS NECESSARY, REGARDING THE REGULATION OF EMERGENCY MEDICAL TECHNICIANS AND THEIR DUTIES AND FUNCTIONS. THE EXECUTIVE DIRECTOR OR CHIEF MEDICAL OFFICER MAY ADOPT THE RULES PRIOR TO JANUARY 1, 2011, BUT THE RULES SHALL NOT TAKE EFFECT UNTIL JANUARY 1, 2011, OR LATER.

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

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

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

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

**25-3.5-206. Emergency medical practice advisory council - creation - powers and duties - emergency medical technician scope of practice rules.** (1) THERE IS HEREBY CREATED WITHIN THE DEPARTMENT, AS A TYPE 2 ENTITY UNDER THE DIRECTION OF THE EXECUTIVE DIRECTOR OF THE DEPARTMENT, THE EMERGENCY MEDICAL PRACTICE ADVISORY COUNCIL, REFERRED TO IN THIS PART 2 AS THE "ADVISORY COUNCIL". THE ADVISORY COUNCIL IS RESPONSIBLE FOR ADVISING THE DEPARTMENT REGARDING THE APPROPRIATE SCOPE OF PRACTICE FOR EMERGENCY MEDICAL TECHNICIANS CERTIFIED PURSUANT TO SECTION 25-3.5-203.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(4) (a) THE EXECUTIVE DIRECTOR OR, IF THE EXECUTIVE DIRECTOR IS NOT A PHYSICIAN, THE CHIEF MEDICAL OFFICER SHALL ADOPT RULES IN

ACCORDANCE WITH ARTICLE 4 OF TITLE 24, C.R.S., CONCERNING THE SCOPE OF PRACTICE OF EMERGENCY MEDICAL TECHNICIANS FOR PREHOSPITAL CARE. THE RULES SHALL INCLUDE, BUT NOT BE LIMITED TO, THE FOLLOWING:

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

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

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

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

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

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

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

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

(I) Providing technical assistance and support to local governments, local emergency medical and trauma service providers, and RETACs operating a statewide data collection system, coordinating local and state programs, providing assistance in selection and purchasing of medical and communication equipment, and administering the EMTS grant program, AND ESTABLISHING AND MAINTAINING SCOPE OF PRACTICE FOR CERTIFIED MEDICAL TECHNICIANS; and

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

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

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

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

(y) THE RENDERING OF SERVICES BY AN EMERGENCY MEDICAL TECHNICIAN CERTIFIED PURSUANT TO SECTION 25-3.5-203, C.R.S., AS LONG AS THE SERVICES RENDERED ARE CONSISTENT WITH RULES ADOPTED BY THE EXECUTIVE DIRECTOR OR CHIEF MEDICAL OFFICER, AS APPLICABLE, PURSUANT TO SECTION 25-3.5-206, C.R.S., DEFINING THE DUTIES AND FUNCTIONS OF EMERGENCY MEDICAL TECHNICIANS.

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

**12-36-103. Colorado medical board - immunity - subject to termination - repeal of article.** (1) (a) (I) There is hereby created the Colorado state MEDICAL board, ~~of medical examiners~~, referred to in this article as the "board". ~~which~~ THE BOARD shall consist of ~~nine~~ SIXTEEN MEMBERS APPOINTED BY THE GOVERNOR AND POSSESSING THE



QUALIFICATIONS SPECIFIED IN THIS ARTICLE AND AS FOLLOWS:

(A) ELEVEN physician members;

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

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

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

(2) The board shall be comprised at all times of ~~seven~~ EIGHT members having the degree of doctor of medicine, ~~and two~~ THREE members having the degree of doctor of osteopathy, AND ONE PHYSICIAN ASSISTANT, all of whom shall have been licensed IN GOOD STANDING and actively engaged in the practice of their professions in this state for at least three years next preceding their appointments, ~~and shall have been residents of this state for at least five years next preceding their appointments,~~ and four members of the public at large. ~~In making appointments to the board, the governor shall give due consideration to recommendations submitted by the Colorado state medical society with respect to appointments to each office, if any, to be filled by a physician holding the degree of doctor of medicine and to recommendations submitted by the Colorado osteopathic association with respect to appointments to each office, if any, to be filled by a physician holding the degree of doctor of osteopathy.~~

(3) ~~In the event~~ IF a vacancy in the membership of the board occurs

for any cause other than expiration of a term, the governor shall appoint a successor to fill the unexpired portion of the term of ~~such~~ THE member whose office has been so vacated and shall appoint ~~such~~ THE new member in the same manner as members for a full term. Members of the board shall remain in office until their successors have been appointed. A member of the board ~~upon notice and hearing~~, may be removed by the governor for continued neglect of duty, incompetence, or unprofessional or dishonorable conduct.

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

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

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

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

**12-36-111.3. Licensing panel.** (1) (a) THE PRESIDENT OF THE BOARD SHALL ESTABLISH A LICENSING PANEL CONSISTING OF THREE

MEMBERS OF THE BOARD AS FOLLOWS:

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

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

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

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

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

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

(3) THE LICENSING PANEL SHALL REVIEW AND RESOLVE MATTERS RELATING TO THE UNLICENSED PRACTICE OF MEDICINE. IF IT APPEARS TO THE LICENSING PANEL, BASED UPON CREDIBLE EVIDENCE IN A WRITTEN COMPLAINT BY ANY PERSON OR UPON CREDIBLE EVIDENCE IN A MOTION OF THE LICENSING PANEL, THAT A PERSON IS PRACTICING OR HAS PRACTICED MEDICINE OR AS A PHYSICIAN ASSISTANT WITHOUT A LICENSE AS REQUIRED BY THIS ARTICLE, THE LICENSING PANEL MAY ISSUE AN ORDER TO CEASE AND DESIST THE UNLICENSED PRACTICE. THE ORDER SHALL SET FORTH THE PARTICULAR STATUTES AND RULES THAT HAVE BEEN VIOLATED, THE FACTS ALLEGED TO HAVE CONSTITUTED THE VIOLATION, AND THE REQUIREMENT THAT ALL UNLICENSED PRACTICES IMMEDIATELY CEASE. THE RESPONDENT MAY REQUEST A HEARING ON A CEASE-AND-DESIST ORDER IN ACCORDANCE WITH SECTION 12-36-118 (14) (b). THE PROVISIONS OF SECTION 12-36-118 (10), EXEMPTING BOARD DISCIPLINARY PROCEEDINGS AND RECORDS FROM OPEN MEETINGS AND PUBLIC RECORDS REQUIREMENTS, SHALL NOT APPLY TO

A HEARING OR ANY OTHER PROCEEDING HELD BY THE LICENSING PANEL PURSUANT TO THIS SUBSECTION (3) REGARDING THE UNLICENSED PRACTICE OF MEDICINE. THE PROCEDURES SPECIFIED IN SECTION 12-36-118 (15), (16), (17), AND (18) SHALL APPLY TO ALLEGATIONS AND ORDERS REGARDING THE UNLICENSED PRACTICE OF MEDICINE BEFORE THE LICENSING PANEL.

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

**12-36-104. Powers and duties of board.** (1) In addition to all other powers and duties conferred and imposed upon the board by this article, the board has the following powers and duties to:

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

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

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

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

**12-36-118. Disciplinary action by board - immunity.** (5) (f) Except as provided in subsection (1) of this section, an administrative law judge shall preside at the hearing and ~~he~~ shall advise the hearings panel, AS REQUESTED, on ~~all such~~ legal matters in connection with

~~the hearing, as the panel may request. He~~ THE ADMINISTRATIVE LAW JUDGE shall provide ~~such~~ advice or assistance as REQUESTED BY the hearings panel ~~may request~~ in connection with its preparations of its findings and recommendations or conclusions to be made. ~~Such~~ THE administrative law judge ~~shall have the authority to~~ MAY administer oaths and affirmations, sign and issue subpoenas, and perform ~~such~~ other duties as AUTHORIZED BY the hearings panel. ~~may authorize him to perform.~~ Such administrative law judge ~~shall have the qualifications provided in section 24-30-1003 (2), C.R.S., with five years' experience as a licensed attorney.~~

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

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

(b) FOR PURPOSES OF THE RECORDS RELATED TO A COMPLAINT FILED PURSUANT TO THIS SECTION AGAINST A LICENSEE, THE BOARD SHALL BE CONSIDERED A PROFESSIONAL REVIEW COMMITTEE, THE RECORDS RELATED TO THE COMPLAINT SHALL INCLUDE ALL RECORDS DESCRIBED IN SECTION 12-36.5-102 (4), AND SECTION 12-36.5-104 (10) SHALL APPLY TO THOSE RECORDS.

(13) Within thirty days after the board takes final action, which is of public record, to revoke or suspend a license or to place a licensee on probation based on competence or professional conduct, the board shall send notice ~~thereof~~ OF THE FINAL ACTION to any hospital in which the licensee has clinical privileges, as indicated by the licensee. ~~The board shall~~

~~post electronically, within thirty days after the entry of a final judgment by a court of competent jurisdiction, notice of final judgment in which it is alleged that malpractice or professional negligence has been committed by a licensed physician or physician assistant and the licensed physician or physician assistant is found to have committed malpractice or be professionally negligent. The board shall also post electronically a notice of final judgment entered by a court of competent jurisdiction in another state at such time as the notice is submitted to the board by the licensee or applicant. The board shall also make available to the public malpractice judgment information by telephone within the same time periods as the information is made available to the public electronically.~~

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

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

**12-36-106.4. Collaboration with advanced practice nurses with prescriptive authority - preceptorships - mentorships - board rules.**

(4) (b) (I) The director of the division of registrations in the department of regulatory agencies shall review the rules adopted by the board pursuant to this subsection (4) to determine if the rules complement the rules of the state board of nursing. If the director determines that the rules of the two boards are not complementary, the director shall adopt rules that ~~supersede~~ SUPERSEDE and replace the rules of the two boards regarding prescriptive authority of advanced practice nurses and collaboration between advanced practice nurses and physicians, and such rules shall take effect on July 2, 2010.

(II) IF THE DIRECTOR DETERMINES THAT THE TWO BOARDS HAVE ADOPTED COMPLEMENTARY RULES REGARDING THE PRESCRIPTIVE AUTHORITY OF ADVANCED PRACTICE NURSES AND COLLABORATION BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS, THE DIRECTOR

SHALL NOT ADOPT RULES THAT SUPERSEDE AND REPLACE THE RULES OF THE TWO BOARDS, BUT THE DIRECTOR SHALL REVIEW ANY AMENDMENTS TO THOSE RULES BY EITHER BOARD TO ENSURE THAT THE RULES REMAIN COMPLEMENTARY. IF THE DIRECTOR DETERMINES THAT AN AMENDMENT TO THE RULES BY THE COLORADO MEDICAL BOARD OR THE STATE BOARD OF NURSING RESULTS IN RULES ON PRESCRIPTIVE AUTHORITY AND COLLABORATION THAT ARE NO LONGER COMPLEMENTARY, THE AMENDMENT SHALL NOT TAKE EFFECT.

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

**12-38-111.6. Prescriptive authority - advanced practice nurses - rules - repeal.** (4.5) (f) (I) Except as provided in subparagraph (II) of this paragraph (f), the board shall adopt rules to implement this subsection (4.5), which rules shall take effect on July 1, 2010. The board shall consider the recommendations of the nurse-physician advisory task force for Colorado health care submitted in accordance with section 24-34-109, C.R.S., concerning prescriptive authority of advanced practice nurses. The rules shall be complementary to rules adopted by the ~~state~~ COLORADO MEDICAL board ~~of medical examiners~~ pursuant to section 12-36-106.4.

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

(B) IF THE DIRECTOR DETERMINES THAT THE TWO BOARDS HAVE ADOPTED COMPLEMENTARY RULES REGARDING THE PRESCRIPTIVE AUTHORITY OF ADVANCED PRACTICE NURSES AND COLLABORATION BETWEEN ADVANCED PRACTICE NURSES AND PHYSICIANS, THE DIRECTOR SHALL NOT ADOPT RULES THAT SUPERSEDE AND REPLACE THE RULES OF THE TWO BOARDS, BUT THE DIRECTOR SHALL REVIEW ANY AMENDMENTS TO THOSE RULES BY EITHER BOARD TO ENSURE THAT THE RULES REMAIN

COMPLEMENTARY. IF THE DIRECTOR DETERMINES THAT AN AMENDMENT TO THE RULES BY THE STATE BOARD OF NURSING OR THE COLORADO MEDICAL BOARD RESULTS IN RULES ON PRESCRIPTIVE AUTHORITY AND COLLABORATION THAT ARE NO LONGER COMPLEMENTARY, THE AMENDMENT SHALL NOT TAKE EFFECT.

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

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

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

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

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

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

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

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

(c) HAS NEVER HAD A LICENSE TO PRACTICE MEDICINE IN THIS STATE OR IN ANOTHER STATE OR TERRITORY REVOKED OR SUSPENDED, AS VERIFIED BY THE APPLICANT IN THE MANNER PRESCRIBED BY THE BOARD;

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

(e) MAINTAINS COMMERCIAL PROFESSIONAL LIABILITY INSURANCE



COVERAGE IN ACCORDANCE WITH SECTION 13-64-301, C.R.S.; AND

(f) PAYS THE FEE ESTABLISHED BY THE BOARD.

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

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

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

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

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

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

**SECTION 21. Repeal.** 12-36-107 (4) and (5), Colorado Revised Statutes, are repealed.

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

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

DETERMINED BY THE BOARD. THE BOARD MAY CHARGE A FEE FOR A REENTRY LICENSE.

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

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

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

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

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

(II) AFTER SATISFACTORY COMPLETION OF THE PERIOD OF SUPERVISED PRACTICE, AS DETERMINED BY THE BOARD, THE REENTRY LICENSEE MAY APPLY TO THE BOARD FOR CONVERSION OF THE REENTRY LICENSE TO A FULL LICENSE TO PRACTICE MEDICINE OR TO PRACTICE AS A PHYSICIAN ASSISTANT, AS APPLICABLE, UNDER THIS ARTICLE.

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

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

**SECTION 23.** 12-36-123.5 (3.5) (b) and (3.5) (e) (I), Colorado Revised Statutes, are amended to read:

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

(A) Changes in the United States bureau of labor statistics consumer price index for the Denver-Boulder consolidated metropolitan statistical area for all urban consumers, all goods, or its successor index; ~~Such~~

(B) OVERALL UTILIZATION OF THE PROGRAM; AND

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

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

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

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

(I) To collect the required annual payments, EITHER DIRECTLY OR THROUGH THE BOARD PURSUANT TO PARAGRAPH (e.5) OF THIS SUBSECTION (3.5);

**SECTION 24.** 12-36-123.5 (3.5) (e.5), Colorado Revised Statutes, as enacted by House Bill 10-1128, is amended to read:

**12-36-123.5. Physicians' and physician assistants' peer health assistance fund.** (3.5) (e.5) The board ~~at its discretion~~, may collect the required annual payments payable to the administering entity for the benefit of the administering entity and shall transfer all such payments to the administering entity. All required annual payments collected BY or due to the board for each fiscal year ~~shall be deemed~~ ARE custodial funds that are not subject to appropriation by the general assembly, and ~~such funds shall~~ THE DISTRIBUTION OF THE PAYMENTS TO THE ADMINISTERING ENTITY OR EXPENDITURE OF THE PAYMENTS BY THE ADMINISTERING ENTITY DOES not constitute state fiscal year spending for purposes of section 20 of article X of the state constitution.

**SECTION 25.** 12-36-106 (1) (b), (1) (g), and (2), the introductory portion to 12-36-106 (3), 12-36-106 (3) (b) and (5) (b) (I), the introductory portion to 12-36-106 (5) (b) (II), and 12-36-106 (5) (b) (II) (B), Colorado Revised Statutes, are amended, and the said 12-36-106 (3) is further amendment BY THE ADDITION A NEW PARAGRAPH, to read:

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

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

(g) The delivery of telemedicine. ~~which means the delivery of medical services and any diagnosis, consultation, or treatment using interactive audio, interactive video, or interactive data communication.~~ Nothing in this paragraph (g) ~~shall be construed to authorize~~ AUTHORIZES physicians to deliver services outside their scope of practice ~~nor to limit~~ OR LIMITS the delivery of health services by other licensed professionals, within the professional's scope of practice, using advanced technology, including, but not limited to, interactive audio, interactive video, or interactive data

communication.

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

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

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

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

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

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

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

(V) HAS MEDICAL LIABILITY INSURANCE COVERAGE IN THE AMOUNTS

REQUIRED PURSUANT TO SECTION 13-64-302, C.R.S., FOR THE SERVICES RENDERED IN THIS STATE; AND

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

(z) A PHYSICIAN LAWFULLY PRACTICING MEDICINE IN ANOTHER STATE OR TERRITORY PROVIDING MEDICAL SERVICES TO ATHLETES OR TEAM PERSONNEL REGISTERED TO TRAIN AT THE UNITED STATES OLYMPIC TRAINING CENTER AT COLORADO SPRINGS OR PROVIDING MEDICAL SERVICES AT AN EVENT IN THIS STATE SANCTIONED BY THE UNITED STATES OLYMPIC COMMITTEE. THE PHYSICIAN'S MEDICAL PRACTICE SHALL BE CONTINGENT UPON THE REQUIREMENTS AND APPROVALS OF THE UNITED STATES OLYMPIC COMMITTEE AND SHALL NOT EXCEED NINETY DAYS PER CALENDAR YEAR.

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

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

(B) The licensed supervising physician reviews the quality of

medical services rendered by the physician assistant ~~every two working days~~ by reviewing the medical records to assure compliance with the physicians' directions; and

**SECTION 26. Repeal.** 12-36-106 (3) (x), Colorado Revised Statutes, as enacted by House Bill 10-1128, is repealed as follows:

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

(x) ~~A physician lawfully practicing medicine in another state or territory providing medical services relative to the evaluation and treatment of children in this state as potential patients, patients, or outpatients of Shriners hospitals for children. The physician must have been invited by the administrator of a Colorado hospital to provide such services on behalf of Shriners hospitals for children, and the physician shall be licensed without disciplinary sanction in any other state or territory. Such medical services shall not exceed ninety days per calendar year.~~

**SECTION 27.** The introductory portion to 12-36-107 (1) and 12-36-107 (1) (b), (1) (d), (2) (b), and (2) (c), Colorado Revised Statutes, are amended, and the said 12-36-107 (1) is further amended BY THE ADDITION OF A NEW PARAGRAPH, to read:

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

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

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

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

~~(H) Such examining board grants licenses, without further examination and otherwise on a substantially equal reciprocal basis, to applicants who possess a license to practice medicine granted by the board or heretofore granted by the state board of medical examiners as constituted under any prior law of this state;~~

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

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

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

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

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

(D) SUBMITS PROOF SATISFACTORY TO THE BOARD THAT HE OR SHE HAS NOT BEEN AND IS NOT SUBJECT TO FINAL OR PENDING DISCIPLINARY OR OTHER ACTION BY ANY STATE OR JURISDICTION IN WHICH THE APPLICANT IS



OR HAS BEEN PREVIOUSLY LICENSED; EXCEPT THAT, IF THE APPLICANT IS OR HAS BEEN SUBJECT TO SUCH ACTION, THE BOARD MAY REVIEW THE ACTION TO DETERMINE WHETHER THE UNDERLYING CONDUCT WARRANTS REFUSAL OF A LICENSE PURSUANT TO SECTION 12-36-116.

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

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

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

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

**SECTION 28.** 12-36-118 (5), Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW PARAGRAPH to read:

**12-36-118. Disciplinary action by board - immunity.** (5) (i) ANY PERSON WHOSE LICENSE TO PRACTICE MEDICINE OR TO PRACTICE AS A PHYSICIAN ASSISTANT IS REVOKED OR WHO SURRENDERS HIS OR HER LICENSE TO AVOID DISCIPLINE SHALL NOT BE ELIGIBLE TO APPLY FOR ANY LICENSE FOR TWO YEARS AFTER THE DATE THE LICENSE IS REVOKED OR SURRENDERED. THE TWO-YEAR WAITING PERIOD APPLIES TO ANY PERSON WHOSE LICENSE TO PRACTICE MEDICINE, TO PRACTICE AS A PHYSICIAN ASSISTANT, OR TO PRACTICE ANY OTHER HEALTH CARE OCCUPATION IS REVOKED BY ANY OTHER LEGALLY QUALIFIED BOARD OR REGULATORY ENTITY.

**SECTION 29.** 12-36-117 (1) (o), Colorado Revised Statutes, is amended to read:

**12-36-117. Unprofessional conduct - repeal.** (1) "Unprofessional conduct" as used in this article means:

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

**SECTION 30.** Part 1 of article 36 of title 12, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SECTION to read:

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

(2) (a) UPON DETERMINING THAT A PHYSICIAN OR PHYSICIAN ASSISTANT WITH A PHYSICAL OR MENTAL ILLNESS OR CONDITION IS ABLE TO RENDER LIMITED MEDICAL SERVICES WITH REASONABLE SKILL AND WITH SAFETY TO PATIENTS, THE BOARD MAY ENTER INTO A CONFIDENTIAL AGREEMENT WITH THE PHYSICIAN OR PHYSICIAN ASSISTANT IN WHICH THE PHYSICIAN OR PHYSICIAN ASSISTANT AGREES TO LIMIT HIS OR HER PRACTICE BASED ON THE RESTRICTIONS IMPOSED BY THE ILLNESS OR CONDITION, AS DETERMINED BY THE BOARD.

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

(c) THE PARTIES MAY MODIFY OR DISSOLVE THE AGREEMENT AS NECESSARY BASED ON THE RESULTS OF A REEVALUATION OR OF MONITORING.

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

(4) THIS SECTION SHALL NOT APPLY TO A LICENSEE SUBJECT TO DISCIPLINE FOR UNPROFESSIONAL CONDUCT AS DESCRIBED IN SECTION 12-36-117 (1) (i).

**SECTION 31.** 12-36-117 (1) (i), (1) (y), (1) (z), and (1) (bb) (II), Colorado Revised Statutes, are amended to read:

**12-36-117. Unprofessional conduct - repeal.** (1) "Unprofessional conduct" as used in this article means:

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

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

(z) Failing to report to the board, WITHIN THIRTY DAYS, the surrender of a license or other authorization to practice medicine in another state or jurisdiction or the surrender of membership on any medical staff or in any

medical or professional association or society while under investigation by any of those authorities or bodies for acts or conduct similar to acts or conduct that would constitute grounds for action as ~~defined~~ DESCRIBED in this article;

(bb) (II) In determining which activities and practices are not consistent with the standard of care or are contrary to recognized standards of the practice of medicine, the board of ~~medical examiners~~ shall utilize, in addition to its own expertise, the standards developed by recognized and established accreditation or review organizations ~~which organizations~~ THAT meet requirements established by the board by rule. ~~and regulation~~. Such determinations shall include but not be limited to appropriate ordering of laboratory tests and studies, appropriate ordering of diagnostic tests and studies, appropriate treatment of the medical condition under review, appropriate use of consultations or referrals in patient care, and appropriate creation and maintenance of patient records.

**SECTION 32.** The introductory portion to 12-36-118 (5) (g) (III), Colorado Revised Statutes, is amended to read:

**12-36-118. Disciplinary action by board - immunity.**  
(5) (g) (III) If the hearings panel finds the charges proven and orders that discipline be imposed, it shall also determine the extent of such discipline, which shall be in the form of a letter of admonition, suspension for a definite or indefinite period, or revocation of license to practice. ~~In lieu of a suspension,~~ The hearings panel ALSO may impose a fine ~~not to exceed ten~~ OF UP TO FIVE thousand dollars PER VIOLATION. In determining appropriate disciplinary action, the hearings panel shall first consider sanctions that are necessary to protect the public. Only after the panel has considered such sanctions may it consider and order requirements designed to rehabilitate the licensee or applicant. If discipline other than revocation of a license to practice is imposed, the hearings panel may also order that the licensee be granted probation and allowed to continue to practice during the period of such probation. The hearings panel may also include in any disciplinary order that allows the licensee to continue to practice such conditions as the panel may deem appropriate to assure that the licensee is physically, mentally, morally, and otherwise qualified to practice medicine or practice as a physician assistant in accordance with generally accepted professional standards of practice, including any or all of the following:

**SECTION 33.** The introductory portion to 13-64-301 (1) and 13-64-301 (1) (a), (1) (c), (3), and (4), Colorado Revised Statutes, are amended, and the said 13-64-301 (1) is further amended BY THE ADDITION OF A NEW PARAGRAPH, to read:

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

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

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

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

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

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

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

(III) THE BOARD OF DENTAL EXAMINERS MAY EXEMPT FROM OR

ESTABLISH LESSER FINANCIAL RESPONSIBILITY STANDARDS FOR A DENTIST for ~~other~~ reasons OTHER THAN THOSE DESCRIBED IN SUBPARAGRAPH (II) OF THIS PARAGRAPH (a) that render the limits provided in SUBPARAGRAPH (I) OF this paragraph (a) unreasonable or unattainable. ~~but~~

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

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

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

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

(B) RENDER LIMITED OR OCCASIONAL MEDICAL SERVICES;

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

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

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

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

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

(3) Notwithstanding the minimum amount specified in paragraph ~~(a)~~ (a.5) of subsection (1) of this section, if THE COLORADO MEDICAL BOARD RECEIVES two or more reports ~~are received by the board of medical examiners~~ pursuant to section 13-64-303 during any ~~one-year~~ TWELVE-MONTH period ~~as to any~~ REGARDING A physician, the minimum amount of financial responsibility FOR THAT PHYSICIAN shall be ~~two times that so~~ TWICE THE AMOUNT specified ~~however~~ IN PARAGRAPH (a.5) OF SUBSECTION (1) OF THIS SECTION. THE COLORADO MEDICAL BOARD MAY REDUCE THE ADDITIONAL AMOUNT IF THE PHYSICIAN, upon motion, ~~filed by the physician and~~ PRESENTS sufficient evidence ~~presented~~ to the COLORADO MEDICAL board that one or more of ~~such~~ THE reports involved an action or claim ~~which~~ THAT did not represent any substantial failure to adhere to accepted professional standards of care. The board may reduce ~~such~~ THE additional amount to ~~that which~~ AN AMOUNT THAT would be fair and conscionable.

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

**SECTION 34.** Part 1 of article 36 of title 12, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SECTION to read:

**12-36-140. Protection of medical records - licensee's obligations - verification of compliance - noncompliance grounds for discipline -**

**rules.** (1) EACH LICENSED PHYSICIAN AND PHYSICIAN ASSISTANT SHALL DEVELOP A WRITTEN PLAN TO ENSURE THE SECURITY OF PATIENT MEDICAL RECORDS. THE PLAN SHALL ADDRESS AT LEAST THE FOLLOWING:

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

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

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

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

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

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

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

**SECTION 35.** 12-36-106 (5) (a), (5) (c), (5) (d), (5) (e), (5) (f), (5) (g), (5) (i), (5) (j), and (5) (k), Colorado Revised Statutes, are amended to read:

**12-36-106. Practice of medicine defined - exemptions from licensing requirements - unauthorized practice by physician assistants - penalties - repeal.** (5) (a) A person licensed under the laws of this state to practice medicine may delegate to a physician assistant licensed by the board PURSUANT TO SECTION 12-36-107.3 the authority to perform acts that



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

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

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

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

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

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

(d) ~~The board may determine whether any applicant for licensure as a physician assistant possesses education, experience, or training in health care that is sufficient to be accepted in lieu of the qualifications required for licensure under subparagraph (I) of paragraph (c) of this subsection (5). Every person who desires to qualify for practice as a physician assistant within this state shall file with the secretary of the board his or her written application for licensure, on which application he or she shall list any act the commission of which would be grounds for disciplinary action against a licensed physician assistant under section 12-36-117, along with an explanation of the circumstances of such act. The board may deny licensure~~

~~to any applicant who has performed any act that constitutes unprofessional conduct, as defined in section 12-36-117.~~

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

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

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

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

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

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

**SECTION 36. Repeal of provision being relocated in this act.**

12-36-107 (3), Colorado Revised Statutes, is repealed.

**SECTION 37.** Part 1 of article 36 of title 12, Colorado Revised Statutes, is amended BY THE ADDITION OF THE FOLLOWING NEW SECTIONS CONTAINING RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

**12-36-107.2. [Formerly 12-36-107 (3)] Distinguished foreign teaching physician license - qualifications.** ~~(3)(a)(1)~~ (1) Notwithstanding any other provision of this article, an applicant of noteworthy and recognized professional attainment who is a graduate of a foreign medical school and who is licensed in a foreign jurisdiction, if that jurisdiction has a licensing procedure, may be granted a distinguished foreign teaching physician license to practice medicine in this state, upon application to the board in the manner determined by the board, if the following conditions are met:

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

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

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

~~(b)~~ (3) ~~Such~~ A distinguished foreign teaching physician license shall

~~remain~~ IS EFFECTIVE AND in force only while the holder is serving on the academic staff of a medical school. ~~Such~~ THE license ~~shall expire~~ EXPIRES one year after ~~its~~ THE date of issuance and may be renewed annually only after ~~it~~ THE BOARD has specifically determined that the conditions specified in ~~paragraph (a) of this subsection (3)~~ (1) OF THIS SECTION will continue during the ensuing period of licensure. The board may require an applicant for licensure under this ~~subsection (3)~~ SECTION to present himself or herself to the board for an interview. The board may withdraw licensure granted ~~by these provisions~~ UNDER THIS SECTION prior to the expiration of ~~such~~ THE license for unprofessional conduct as defined in section 12-36-117.

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

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

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

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

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

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

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

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

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

~~(e) (4) No~~ A person licensed as a physician assistant ~~may~~ SHALL NOT perform any act that constitutes the practice of medicine within a hospital or nursing care facility that is licensed pursuant to part 1 of article 3 of title 25, C.R.S., or that is required to obtain a certificate of compliance pursuant to section 25-1.5-103 (1) (a) (II), C.R.S., without authorization from the governing board of the hospital or nursing care facility. ~~Such~~ THE governing board ~~shall have the authority to~~ MAY grant, deny, or limit ~~such authority to~~ A PHYSICIAN ASSISTANT'S AUTHORIZATION BASED ON its own established procedures.

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

~~(g) (6) The board shall license and keep a record of physician assistants who have been licensed pursuant to paragraph (c) of this subsection (5) and shall establish renewal fees and schedules subject to the provisions of section 24-34-102 (8), C.R.S. Every~~ THIS SECTION. A licensed physician assistant shall ~~pay to the secretary of the board a registration fee to be determined and collected pursuant to section~~

~~24-34-105, C.R.S., and shall obtain a registration certificate for the current calendar year~~ RENEW HIS OR HER LICENSE IN ACCORDANCE WITH SECTION 12-36-123.

**SECTION 38.** 12-36-129 (1), Colorado Revised Statutes, is amended to read:

**12-36-129. Unauthorized practice - penalties.** (1) Any person who practices or offers or attempts to practice medicine OR PRACTICE AS A PHYSICIAN ASSISTANT within this state without an active license issued under this article commits a class 2 misdemeanor and shall be punished as provided in section 18-1.3-501, C.R.S., for the first offense, and, any person committing a second or subsequent offense commits a class 6 felony and shall be punished as provided in section 18-1.3-401, C.R.S.

**SECTION 39.** 12-36-129 (2), (3), and (4), Colorado Revised Statutes, are amended, and the said 12-36-129 is further amended BY THE ADDITION OF A NEW SUBSECTION CONTAINING RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

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

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

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

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

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

(3) No action may be maintained against an individual who has been

the recipient of services constituting the unlawful practice of medicine OR THE UNLAWFUL PRACTICE OF A PHYSICIAN ASSISTANT for the breach of a contract involving the unlawful practice of medicine OR THE UNLAWFUL PRACTICE OF A PHYSICIAN ASSISTANT or the recovery of compensation for services rendered under such a contract.

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

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

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

(6) (a) [**Formerly 12-36-132**] ~~(1)~~ The board may, in the name of the people of the state of Colorado AND through the attorney general of the state of Colorado, apply for an injunction in any court of competent jurisdiction to enjoin any person from committing any act prohibited by ~~the provisions of THIS article. 13, 30, 34, 36, 39, or 41 of this title.~~

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

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

**SECTION 40.** 12-36-111.5 (2) (b), (3) (a), and (5), Colorado Revised Statutes, are amended to read:

**12-36-111.5. Michael Skolnik medical transparency act - disclosure of information about licensees - rules.** (2) (b) The general assembly further finds and declares that it is important to make information

about persons engaged in the practice of medicine available to the public in a manner that is efficient, cost-effective, and maintains the integrity of the information, and to that end, the general assembly encourages persons to file the required information with the ~~state~~ COLORADO MEDICAL board of ~~medical examiners~~ electronically, to the extent possible.

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

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

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

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



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

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

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

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

Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the physician. A payment in settlement of a medical malpractice action or claim should not be construed as creating a presumption that medical malpractice has occurred.

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

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

**SECTION 41.** Part 1 of article 36 of title 12, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SECTION CONTAINING RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

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

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

(a) (I) Is specialized, clearly defined, and delineated;

(b) (II) Follows the completion of an approved residency;

(c) (III) Provides additional training in a medical specialty or subspecialty; and

(d) (IV) Is either:

(A) Performed in a hospital conforming to the minimum standards for fellowship training established by the accreditation council for graduate medical education or the American osteopathic association, or by a successor to OF either of said organizations ORGANIZATION; or

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

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

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

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

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

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

(3) (a) **[Formerly 12-36-108]** An "Approved medical college" is

MEANS a college ~~which~~ THAT:

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

(II) CONFORMS TO THE MINIMUM EDUCATION STANDARDS for osteopathic colleges as established by the American osteopathic association or ~~a college which~~ ANY SUCCESSOR ORGANIZATION THAT IS THE OFFICIAL ACCREDITING BODY OF EDUCATION PROGRAMS LEADING TO THE DEGREE OF DOCTOR OF OSTEOPATHY; OR

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

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

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

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

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

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

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

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

(7) **[Formerly 12-36-106 (6)]** "Licensee" ~~as used in this part 1,~~ means any physician or physician assistant who is licensed pursuant to this ~~section~~ ARTICLE.

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

**SECTION 42.** The introductory portion to 12-36-107.6 (1), Colorado Revised Statutes, is amended to read:

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

**SECTION 43.** 12-36-122.5, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW SUBSECTION CONTAINING RELOCATED PROVISIONS, WITH AMENDMENTS, to read:

**12-36-122.5. Intern, resident, or fellow reporting.** (3) **[Formerly 12-36-122 (9)]** Licensed physicians responsible for the supervision of interns, residents, or fellows in graduate training programs shall promptly report to the board anything concerning a ~~physician training~~ licensee in such

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

**SECTION 44. Repeal of provisions being relocated in this act.** 12-36-106 (5) (k) and (6), 12-36-108, 12-36-109, 12-36-110, 12-36-110.5, 12-36-122 (9), and 12-36-132, Colorado Revised Statutes, are repealed.

**SECTION 45. Repeal.** 12-36-111 (2), Colorado Revised Statutes, is repealed as follows:

**12-36-111. Applications for license.** (2) (a) ~~An applicant for a license on the basis of an examination by the board shall file an application at least ninety days prior to the announced date of the examination.~~

(b) ~~If an applicant is not a graduate of an approved medical college at the time of filing an application, such applicant shall submit to the board, in lieu of required evidence of graduation, a written statement from the dean or other authorized representative of the approved medical college in which such applicant is in attendance stating that the applicant will receive a diploma at the end of the then current school term; except that the applicant shall not be permitted to take the examination until acceptable evidence of graduation has been filed with the board and the applicant has complied with the requirements of subsection (1) of this section. No license shall be issued to an applicant until the board is satisfied that such applicant has completed at least one year of approved internship or approved postgraduate training and has otherwise met the requirements for the issuance of a license under this article.~~

**SECTION 46. Repeal.** 12-36-113, Colorado Revised Statutes, is repealed as follows:

**12-36-113. Examinations.** (1) ~~Examinations for a license to practice medicine shall be held not less than twice in each year at such times~~

~~and places as may be specified by the board, if there are applicants desiring to be examined. The examination shall be conducted in the English language and shall cover the basic and clinical sciences and such other subjects as the board may prescribe. The examinations shall be fair and impartial and practical in character. The examination papers shall not disclose the name of any applicant but shall be identified by a number to be assigned.~~

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

~~(3) Repealed.~~

**SECTION 47. Repeal.** 12-36-121, Colorado Revised Statutes, is repealed as follows:

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

**SECTION 48.** 12-36-134 (1) (b), (1) (d), and (1) (f), the introductory portion to 12-36-134 (1) (g), and 12-36-134 (1) (g) (I), (1) (g) (II), (1) (g) (III), (3), (4), and (5), Colorado Revised Statutes, are amended to read:

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

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

(d) All shareholders of the corporation ~~shall be~~ ARE persons licensed by the board to practice medicine in the state of Colorado ~~and~~ who at all times own their shares in their own right; ~~They~~ EXCEPT THAT ONE OR MORE PERSONS LICENSED BY THE BOARD AS A PHYSICIAN ASSISTANT MAY BE A SHAREHOLDER OF THE CORPORATION AS LONG AS THE PHYSICIAN SHAREHOLDERS MAINTAIN MAJORITY OWNERSHIP OF THE CORPORATION. THE SHAREHOLDERS shall be individuals who, except for illness, accident, time spent in the armed services, on vacations, and on leaves of absence not to exceed one year, are actively engaged in the practice of medicine OR AS A PHYSICIAN ASSISTANT in the offices of the corporation.

(f) The president shall be a shareholder and a director and, to the extent possible, all other directors and officers shall be persons having the qualifications described in paragraph (d) of this subsection (1). Lay directors and officers shall not exercise any authority whatsoever over the independent medical judgment of persons licensed by the board to practice medicine in this state. Notwithstanding sections 7-108-103 to 7-108-106, C.R.S., relating to the terms of office and classification of directors, a professional service corporation for the practice of medicine may provide in the articles of incorporation or the bylaws that the directors may have terms of office of up to six years and that the directors may be divided into ~~either two or three~~ classes, ~~each class to be as nearly equal in number as possible,~~ with the terms of each class staggered to provide for the periodic ~~but not less than annual,~~ election of less than all the directors. Nothing in this article shall be construed to cause a professional service corporation to be vicariously liable to a patient or third person for the professional negligence or other tortious conduct of a physician who is a shareholder or employee of a professional service corporation.

(g) The articles of incorporation ~~shall~~ provide and all shareholders of the corporation ~~shall~~ agree that all shareholders of the corporation ~~shall be~~ ARE jointly and severally liable for all acts, errors, and omissions of the employees of the corporation or that all shareholders of the corporation ~~shall be~~ ARE jointly and severally liable for all acts, errors, and omissions

of the employees of the corporation, except during periods of time when each ~~person licensed by the board to practice medicine in Colorado~~ LICENSEE who is a shareholder or any employee of the corporation has a professional liability policy insuring himself or herself and all employees who are not licensed to practice medicine PURSUANT TO THIS ARTICLE who act at his or her direction, in the amount of fifty thousand dollars for each claim and an aggregate top limit of liability per year for all claims of one hundred fifty thousand dollars, or the corporation maintains in good standing professional liability insurance ~~which shall meet~~ THAT MEETS the following minimum standards:

(I) The insurance ~~shall insure~~ INSURES the corporation against liability imposed upon the corporation by law for damages resulting from any claim made against the corporation arising out of the performance of professional services for others by those officers and employees of the corporation who are ~~licensed by the board to practice medicine~~ LICENSEES.

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

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

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

(4) Nothing in this section ~~shall be deemed to diminish or change~~



DIMINISHES OR CHANGES the obligation of each ~~person licensed to practice medicine~~ LICENSEE employed by the corporation to conduct his OR HER practice in accordance with the standards of professional conduct provided for in section 12-36-117. Any ~~person licensed by the board to practice medicine~~ LICENSEE who, by act or omission, causes the corporation to act or fail to act in a way ~~which~~ THAT violates ~~such~~ THE standards of professional conduct, including any provision of this section, ~~shall be deemed~~ IS personally responsible for such act or omission and ~~shall be~~ IS subject to discipline ~~therefor~~ FOR THE ACT OR OMISSION.

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

**SECTION 49.** 10-1-120, Colorado Revised Statutes, is amended to read:

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

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

**SECTION 50.** 10-16-104 (1.4) (a) (II) (A), (1.4) (a) (VIII), and (1.4) (a) (IX), Colorado Revised Statutes, are amended to read:

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

(II) "Autism services provider" means any person who provides direct services to a person with autism spectrum disorder, is licensed, certified, or registered by the applicable state licensing board or by a nationally recognized organization, and who meets one of the following:

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

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

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

**SECTION 51.** 11-70-102, Colorado Revised Statutes, is amended to read:

**11-70-102. Title to property of trusts - liability of trust and trustees.** The trustees of trusts established pursuant to this article shall hold the legal title to all property at any time belonging to the trusts. They shall have control over such property, as well as the control and management of the business and affairs of the trust. Liability to third persons for any act, omission, or obligation of a trustee of a trust, when acting in such capacity, shall extend to the whole of the trust estate, or so much thereof as may be necessary to discharge such obligation, but no trustee shall be personally liable for any such act, omission, or obligation. The trustees shall have such powers as to the investment of the trust estate as may be set out in the declaration of trust, without regard to the type of investments to which trustees generally are restricted by the provisions of part 8 of article 1 of title 15, C.R.S., nor shall such trustees be subject to the provisions of title 10, C.R.S., concerning the regulation of insurance; except that the trustees shall report any malpractice claim against a licensed practitioner ~~which~~ THAT is settled or in which judgment is rendered against the insured to the Colorado ~~state~~ MEDICAL board, ~~of medical examiners~~, which board shall provide statistical data concerning such claims to the commissioner of insurance. Without limiting the generality of the foregoing, the trustees shall have any powers, whether conferred upon them by the agreement of trust or otherwise, to perform all acts necessary or desirable to the conduct

of the business of a public liability insurer.

**SECTION 52.** 12-22-703 (1) (c), Colorado Revised Statutes, is amended to read:

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

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

**SECTION 53.** 12-30-101 (5), Colorado Revised Statutes, is amended to read:

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

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

**SECTION 54.** 12-32-102 (1), Colorado Revised Statutes, is amended to read:

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

**SECTION 55.** 12-32-109.3 (1) and (3), Colorado Revised Statutes, are amended to read:

**12-32-109.3. Use of physician assistants.** (1) A person licensed under the laws of this state to practice podiatry may delegate to a physician assistant licensed by the Colorado state MEDICAL board of ~~medical examiners~~ pursuant to ~~section 12-36-106 (5)~~ SECTION 12-36-107.4 the authority to perform acts ~~which~~ THAT constitute the practice of podiatry to the extent and in the manner authorized by rules ~~and regulations~~ promulgated by the Colorado podiatry board, including the authority to prescribe, on a case-by-case basis and per-patient-visit basis as approved by the supervising podiatrist, and dispense only such drugs as designated by the Colorado podiatry board. Such acts shall be consistent with sound practices of podiatry. Each prescription issued by a physician assistant shall have imprinted thereon the name of his OR HER supervising podiatrist, and under no circumstances shall a physician assistant write prescriptions unless countersigned by the supervising podiatrist. Nothing in this section shall limit the ability of otherwise licensed health personnel to perform delegated acts. The dispensing of prescription medication by a physician assistant shall be subject to ~~the provisions of~~ section 12-22-121 (6).

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

**SECTION 56.** 12-32-119, Colorado Revised Statutes, is amended to read:

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

(2) Nothing in the act contained in chapter 107, Session Laws of Colorado 1985, shall be construed to invalidate the license of any person

holding a valid, unrevoked, and unsuspended license on June 30, 1985, to practice podiatry in this state or to affect any disciplinary proceeding or appeal pending on June 30, 1985, or any appointment to the Colorado state MEDICAL board of medical examiners or the Colorado podiatry board or any inquiry panel or hearings panel thereof made on or before June 30, 1985.

**SECTION 57.** 12-36-106.5, Colorado Revised Statutes, is amended to read:

**12-36-106.5. Child health associates - scope of practice.** On and after July 1, 1990, any person who, on June 30, 1990, was certified only as a child health associate under the laws of this state shall, upon application to the board, be granted licensure as a physician assistant. The practice of any such person shall be subject to ~~the provisions of~~ section 12-36-106 (5) AND 12-36-107.4; except that such practice shall be limited to patients under the age of twenty-one.

**SECTION 58.** 12-36-114 (1), Colorado Revised Statutes, is amended to read:

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

**SECTION 59. Repeal.** 12-36-124, Colorado Revised Statutes, is repealed as follows:

**12-36-124. Certification of licensing.** ~~Upon request therefor and the payment of a fee determined pursuant to section 24-34-105, C.R.S., the secretary of the board shall issue its certificate or endorsement with respect to the licensing of, and the official record of the board relating to, any licensee to whom a license has been issued by this or any prior board; and, upon request therefor and the payment of a fee determined pursuant to section 24-34-105, C.R.S., the secretary shall issue a certificate evidencing that any such licensee is duly licensed.~~

**SECTION 60.** 12-36-201 (2), Colorado Revised Statutes, is

amended to read:

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

**SECTION 61.** 12-36-202 (1) (a), Colorado Revised Statutes, is amended to read:

**12-36-202. Board authorized to issue rules.** (1) (a) The Colorado ~~state~~ MEDICAL board of ~~medical examiners~~ shall adopt rules ~~and regulations~~ prescribing minimum standards for the qualifications, education, and training of unlicensed persons operating machine sources of ionizing radiation and administering such radiation to patients for diagnostic medical use. No licensed physician shall allow any unlicensed person to operate any machine source of ionizing radiation or to administer any such radiation to any patient unless such person has met the standards then in effect under rules ~~and regulations~~ adopted pursuant to this section. The board may adopt rules ~~and regulations~~ allowing a grace period in which newly hired operators of machine sources of ionizing radiation shall receive the training required pursuant to this section.

**SECTION 62.** 12-36.5-101, Colorado Revised Statutes, is amended to read:

**12-36.5-101. Legislative declaration.** (1) The general assembly hereby finds, determines, and declares that the Colorado ~~state~~ MEDICAL board of ~~medical examiners~~ created pursuant to article 36 of this title acts for the state in its sovereign capacity to govern licensure, discipline, and professional review of persons licensed to practice medicine in this state. The general assembly further finds, determines, and declares that the authority to practice medicine in this state is a privilege granted by the legislative authority of the state and that it is necessary for the health, safety,

and welfare of the people of this state that the COLORADO MEDICAL board of ~~medical examiners~~ exercise its authority to protect the people of this state from the unauthorized practice of medicine and from unprofessional conduct by persons licensed to practice medicine under article 36 of this title.

(2) The general assembly recognizes that: Many patients of persons licensed to practice medicine in this state have restricted choices of physicians under a variety of circumstances and conditions; many patients lack the knowledge, experience, or education to properly evaluate the quality of medical practice or the professional conduct of those licensed to practice medicine; and it is necessary and proper that the COLORADO MEDICAL board of ~~medical examiners~~ exercise its regulatory authority to protect the health, safety, and welfare of the people of this state.

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

**SECTION 63.** 12-36.5-102 (1), Colorado Revised Statutes, is amended to read:

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

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

**SECTION 64.** 12-36.5-103 (1) and (3) (a), Colorado Revised Statutes, are amended to read:

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

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

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

**SECTION 65.** The introductory portion to 12-36.5-104 (4) and 12-36.5-104 (4) (d), (4) (f), (5), (6) (a) (I), (7) (f), (9), and (11), Colorado Revised Statutes, are amended to read:

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

(d) A society or association of physicians licensed to practice and residing in this state and specializing in a specific discipline of medicine, whose society or association has been designated by the MEDICAL board of ~~medical examiners~~ as the specialty society or association representative of physicians practicing such specific discipline of medicine, if the physician whose services are the subject of the review is a member of such specialty society or association;

(f) A corporation authorized to insure physicians pursuant to article 3 of title 10, C.R.S., or any other corporation authorized to insure such physicians in this state when designated by the MEDICAL board ~~of medical~~



~~examiners~~ under subsection (5) of this section;

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

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

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

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

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

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

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

**SECTION 66.** 12-36.5-104.4 (3), Colorado Revised Statutes, is amended to read:

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

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

**SECTION 67.** 12-36.5-106 (1), (2), (9) (n), and (10) (b), Colorado Revised Statutes, are amended to read:

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

(2) The committee shall be composed of five persons, none of whom shall be a member of the MEDICAL board. ~~of medical examiners.~~ Four members of the committee shall be licensed to practice medicine and actively engaged in the practice of medicine in this state and shall be appointed by the MEDICAL board. ~~of medical examiners.~~ No member shall practice in the same medical subspecialty as any other member nor conduct his OR HER primary practice in the same county as any other member. One member shall be appointed by the governor and shall be an attorney licensed to practice in this state who has particular expertise and experience in the area of antitrust law.

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

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

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

**SECTION 68.** 12-36.5-202, Colorado Revised Statutes, is amended to read:

**12-36.5-202. Rules - compliance with reporting requirements of**

**federal act.** Upon implementation of the federal "Health Care Quality Improvement Act of 1986", as amended, 42 U.S.C. secs. 11101 through 11152, and upon implementation of the federal data bank, the MEDICAL board of ~~medical examiners~~ shall promulgate rules and ~~regulations~~ to comply with such act, which rules and ~~regulations~~ are consistent with the standards and the reporting requirements of such act.

**SECTION 69.** 12-38-111.6 (4) (d) (III) and (7), Colorado Revised Statutes, are amended to read:

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

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

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

**SECTION 70.** 13-4-102 (2) (f), Colorado Revised Statutes, is amended to read:

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

(f) Review actions of the ~~state~~ COLORADO MEDICAL board ~~of medical examiners~~ in refusing to grant or in revoking or suspending a license or in placing the holder thereof on probation, as provided in section

12-36-119, C.R.S.;

**SECTION 71.** 13-64-302.5 (1), Colorado Revised Statutes, is amended to read:

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

**SECTION 72.** The introductory portion to 13-90-107 (1) (d) and 13-90-107 (1) (d) (III) (C) and (2), Colorado Revised Statutes, are amended to read:

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

(d) A physician, surgeon, or registered professional nurse duly authorized to practice his OR HER profession pursuant to the laws of this state or any other state shall not be examined without the consent of his OR HER patient as to any information acquired in attending the patient ~~which~~ THAT was necessary to enable him OR HER to prescribe or act for the patient, but this paragraph (d) shall not apply to:

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

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

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

**SECTION 73.** 17-1-101 (3) (b), Colorado Revised Statutes, is amended to read:

**17-1-101. Executive director - creation - division heads - medical personnel.** (3) (b) All such personnel as cannot satisfy all of the requirements set forth in paragraph (a) of this subsection (3) shall be exempt from ~~the provisions of the "Colorado Medical Practice Act", article 36 of title 12, C.R.S., with respect to services rendered to bona fide patients or inmates at said institutions, if such personnel are of good moral character, are graduates of an approved medical college as defined in section ~~12-36-108~~ 12-36-102.5, C.R.S., have completed an approved internship of at least one year as defined in section ~~12-36-109~~ 12-36-102.5, C.R.S., and, within a period of nine months of their employment~~ AFTER FIRST BEING EMPLOYED, pass the examinations approved by the Colorado state MEDICAL board of ~~medical examiners~~ under the provisions of the "Colorado Medical Practice Act" and the national board of medical examiners, the national board of examiners for osteopathic physicians and surgeons, or the federation of state medical boards, OR THEIR SUCCESSOR ORGANIZATIONS, on subjects relating to the basic sciences, are able to read, write, speak, and understand the English language, and, in the case of personnel who are not citizens of the United States, become ~~such~~ citizens within the minimum period of time within which the particular individual can become a citizen according to the laws of the United States and the regulations of the immigration and naturalization service of the United States department of justice or within such additional time as may be granted by said boards.

**SECTION 74.** 17-1-103 (3) (a) (III), Colorado Revised Statutes, is amended to read:

**17-1-103. Duties of the executive director.** (3) (a) (III) The

executive director shall determine the qualifications for appointment to the panel of medical consultants; except that all members of the panel shall be licensed by the ~~state~~ COLORADO MEDICAL board ~~of medical examiners~~ pursuant to ~~the provisions of~~ article 36 of title 12, C.R.S., or the state board of dental examiners pursuant to ~~the provisions of~~ article 35 of title 12, C.R.S.

**SECTION 75.** 17-2-201 (5.7) (d), Colorado Revised Statutes, is amended to read:

**17-2-201. State board of parole.** (5.7) If, as a condition of parole, an offender is required to undergo counseling or treatment, unless the parole board determines that treatment at another facility or with another person is warranted, such treatment or counseling shall be at a facility or with a person:

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

**SECTION 76.** 17-27.1-101 (5) (a) (IV), Colorado Revised Statutes, is amended to read:

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

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

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

**SECTION 77.** 18-1.3-204 (2) (c) (IV), Colorado Revised Statutes, is amended to read:

**18-1.3-204. Conditions of probation.** (2) (c) If the court orders counseling or treatment as a condition of probation, unless the court makes a specific finding that treatment in another facility or with another person is warranted, the court shall order that such treatment or counseling be at a facility or with a person:

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

**SECTION 78.** 18-18-103, Colorado Revised Statutes, is amended to read:

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

**SECTION 79.** 18-18-302 (1), Colorado Revised Statutes, is amended to read:

**18-18-302. Registration requirements.** (1) Every person who manufactures, distributes, or dispenses any controlled substance within this state, or who proposes to engage in the manufacture, distribution, or dispensing of any controlled substance within this state, shall obtain

annually or biannually, if applicable, a registration, issued by the respective licensing board or the department in accordance with rules adopted by such board or by the department. For purposes of this section and this article, "registration" or "registered" means the licensing of manufacturers, pharmacists, pharmacies, and humane societies located in this state, and distributors located in or doing business in this state, by the state board of pharmacy as set forth in parts 1 and 3 of article 22 of title 12, C.R.S., the licensing of physicians by the ~~state~~ COLORADO MEDICAL board, ~~of medical examiners~~, as set forth in article 36 of title 12, C.R.S., the licensing of podiatrists by the Colorado podiatry board, as set forth in article 32 of title 12, C.R.S., the licensing of dentists by the state board of dental examiners, as set forth in article 35 of title 12, C.R.S., the licensing of optometrists by the state board of optometric examiners, as set forth in article 40 of title 12, C.R.S., the licensing of veterinarians by the state board of veterinary medicine, as set forth in article 64 of title 12, C.R.S., and the licensing of researchers and addiction programs by the department of human services, as set forth in part 3 of article 22 of title 12, C.R.S.

**SECTION 80.** 23-20-114 (1), Colorado Revised Statutes, is amended to read:

**23-20-114. Employment of medical personnel.** (1) The board of regents of the university of Colorado has authority to employ medical personnel WHO ARE not citizens of the United States at the university of Colorado health sciences center, the university of Colorado psychiatric hospital, and the medical division of the graduate school of the university of Colorado. Medical personnel who are not citizens of the United States are exempt from the licensure requirements of the "Colorado Medical Practice Act", article 36 of title 12, C.R.S., with respect to services performed in the course of such employment, but such personnel shall first comply with all other requirements of said act, which includes the taking and passing of examinations approved by the ~~state~~ COLORADO MEDICAL board ~~of medical examiners~~ and by the national board of medical examiners, the national board of examiners for osteopathic physicians and surgeons, or the federation of state medical boards, OR THEIR SUCCESSOR ORGANIZATIONS, on subjects relating to the basic sciences as provided by law within three months ~~of~~ AFTER the date of employment unless such examinations are not required by ~~the provisions of~~ section 12-36-107 (1) (b), ~~or (1)(d)~~, C.R.S. Such exemptions from licensure or provisions in this section provided for such personnel who are not citizens of the United



States shall continue only during the minimum period of time within which the particular individual can become a citizen according to the laws of the United States and the regulations of the immigration and naturalization service of the United States department of justice or such additional time ~~hereto~~ as may be granted by such boards. The exemptions in this section are limited to services performed in the course of employment with the university of Colorado as limited in this section and shall terminate when such employment terminates.

**SECTION 81.** 24-1-122 (3) (m) (I), Colorado Revised Statutes, is amended to read:

**24-1-122. Department of regulatory agencies - creation.** (3) The following boards and agencies are transferred by a **type 1** transfer to the department of regulatory agencies and allocated to the division of registrations:

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

**SECTION 82.** 24-34-109 (1) (d) (I), (2) (a) (II), and (6) (a), Colorado Revised Statutes, are amended to read:

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

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

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

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

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

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

**SECTION 83.** 24-60-3101, Colorado Revised Statutes, is amended to read:

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

**SECTION 84.** The introductory portion to 24-60-3103 (1), Colorado Revised Statutes, is amended to read:

**24-60-3103. Model legislation - compacts authorized.** (1) The executive director, together with the ~~state~~ COLORADO MEDICAL board ~~of medical examiners~~ created in section 12-36-103, C.R.S., and the state board of nursing created in section 12-38-104, C.R.S., and in consultation with the executive director of the department of health care policy and financing or his or her designee, the executive director of the department of public health

and environment or his or her designee, and representatives of other state agencies whose participation the executive director deems beneficial, is hereby authorized to develop, participate in the development of, and negotiate for one or more interstate compacts on behalf of the state of Colorado with other states and to recommend model legislation that, if adopted in the respective signatory states, would advance the following policy goals:

**SECTION 85.** 25-1-108.7 (6) (c), Colorado Revised Statutes, is amended to read:

**25-1-108.7. Health care credentials uniform application act - legislative declaration - definitions - state board of health rules.** (6) (c) The review committee shall be staffed by an entity approved by the COLORADO MEDICAL board of ~~medical examiners~~ to collect medical license registration fees pursuant to section 12-36-123.5, C.R.S.

**SECTION 86.** 25-3-107, Colorado Revised Statutes, is amended to read:

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

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

**SECTION 87.** 27-1-102 (2) (c), Colorado Revised Statutes, is amended to read:

**27-1-102. Executive director - division heads - interagency council - advisory boards.** (2) (c) All such personnel as cannot satisfy all

of the requirements set forth in paragraph (b) of this subsection (2) shall be exempt from ~~the provisions of the "Colorado Medical Practice Act", article 36 of title 12, C.R.S., with respect to services rendered to bona fide patients or inmates at said institutions, if such personnel are of good moral character, are graduates of an approved medical college as defined in section ~~12-36-108~~ 12-36-102.5, C.R.S., have completed an approved internship of at least one year as defined in section ~~12-36-109~~ 12-36-102.5, C.R.S., and, within a period of nine months of their employment~~ AFTER FIRST BEING EMPLOYED, pass the examinations approved by the Colorado state MEDICAL board of ~~medical examiners~~ under ~~the provisions of the "Colorado Medical Practice Act" and the national board of medical examiners, the national board of examiners for osteopathic physicians and surgeons, or the federation of state medical boards, OR THEIR SUCCESSOR ORGANIZATIONS,~~ on subjects relating to the basic sciences, are able to read, write, speak, and understand the English language, and, in the case of personnel who are not citizens of the United States, become ~~such~~ citizens within the minimum period of time within which the particular individual can become a citizen according to the laws of the United States and the regulations of the immigration and naturalization service of the United States department of justice or within such additional time as may be granted by said boards.

**SECTION 88.** 27-1-103 (3) (a) (III), Colorado Revised Statutes, is amended to read:

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

**SECTION 89. Appropriation.** (1) In addition to any other appropriation, there is hereby appropriated, out of any moneys in the division of registrations cash fund created in section 24-34-105 (2) (b) (I), Colorado Revised Statutes, not otherwise appropriated, to the department of regulatory agencies, for allocation to the division of registrations, for the fiscal year beginning July 1, 2010, the sum of twenty-nine thousand six hundred eighty-six dollars (\$29,686) cash funds, or so much thereof as may be necessary, for the implementation of this act.

(2) In addition to any other appropriation, there is hereby appropriated to the department of law, for the fiscal year beginning July 1, 2010, the sum of sixteen thousand five hundred eighty-four dollars (\$16,584) and 0.1 FTE, or so much thereof as may be necessary, for the provision of legal services to the department of regulatory agencies related to the implementation of this act. Said sum shall be from reappropriated funds received from the department of regulatory agencies out of the appropriation made in subsection (1) of this section.

(3) In addition to any other appropriation, there is hereby appropriated, out of any moneys in the emergency medical services account within the highway users tax fund created in section 25-3.5-603 (1) (a), Colorado Revised Statutes, not otherwise appropriated, to the department of public health and environment, for allocation to the health facilities and emergency medical services division, for the fiscal year beginning July 1, 2010, the sum of sixty-eight thousand six hundred fifty-seven dollars (\$68,657) cash funds and 0.9 FTE, or so much thereof as may be necessary, for the implementation of this act.

(4) In addition to any other appropriation, there is hereby appropriated to the department of law, for the fiscal year beginning July 1, 2010, the sum of six hundred seventy-eight dollars (\$678), or so much thereof as may be necessary, for the provision of legal services to the department of public health and environment related to the implementation of this act. Said sum shall be from reappropriated funds received from the department of public health and environment out of the appropriation made in subsection (3) of this section.

**SECTION 90. Effective date.** (1) Except as otherwise provided in subsections (2), (3), (4), and (5) of this section, this act shall take effect July 1, 2010.

(2) Section 40 of this act shall not take effect if Senate Bill 10-124 is enacted and becomes law.

(3) Section 56 of this act shall not take effect if House Bill 10-1224 is enacted and becomes law.

(4) Sections 60 and 61 of this act shall not take effect if House Bill 10-1128 is enacted and becomes law.

(5) Sections 24 and 26 of this act shall take effect only if House Bill 10-1128 is enacted and becomes law.

**SECTION 91. Safety clause.** The general assembly hereby finds, determines, and declares that this act is necessary for the immediate preservation of the public peace, health, and safety.

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Terrance D. Carroll  
SPEAKER OF THE HOUSE  
OF REPRESENTATIVES

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Brandon C. Shaffer  
PRESIDENT OF  
THE SENATE

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Marilyn Eddins  
CHIEF CLERK OF THE HOUSE  
OF REPRESENTATIVES

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Karen Goldman  
SECRETARY OF  
THE SENATE

APPROVED \_\_\_\_\_

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Bill Ritter, Jr.  
GOVERNOR OF THE STATE OF COLORADO